

**NOTIFICATION OF PROPER OFFICIALS IN CASES OF BRIDGES IN DANGER OF COLLAPSE**

**PURPOSE:** To establish a formal policy and procedure for the prompt notification of DOTD Officials, Off-System Bridge Owners, and other appropriate individuals in cases of bridges in imminent danger of collapse.

**SCOPE:** This Directive applies to all bridges on all public highways, roads, and streets in the State of Louisiana.

**POLICY:** When an On-System bridge is found to be in danger of collapse, the District ADA of Operations, Structures and Facilities Maintenance Engineer, and Bridge Maintenance & Inspection Supervisor shall be notified immediately by phone AND e-mail. Email notification shall be copied to the “\_DOTD-BridgeIncidentContacts” group contact in DOTD’s Outlook list.

When an Off-System bridge is found to be in danger of collapse, the Owner of the bridge, the transportation department of the school board for the parish in which the bridge is located, the District ADA of Operations, the Structures and Facilities Maintenance Administrator, and the Bridge Maintenance & Inspection Supervisor shall be notified immediately by phone AND e-mail.

**PROCEDURE:** A written procedure shall be developed by each District using the accompanying forms to list appropriate officials, telephone numbers, e-mail addresses, and the names of individuals to be notified when bridges are found to be in imminent danger of collapse. The plan shall be updated at any time there is a change of local government officials or a change in the DOTD organizational structure. The plan shall be submitted annually (in December) to the Structures & Facilities Maintenance Administrator. A copy of the plan shall be provided to each District Bridge Inspector, and a copy of the plan shall be attached to this Directive in the Bridge Maintenance Directives Manual in the District Bridge Inspection office.

When a DOTD Bridge Inspector finds a bridge that he/she determines is in imminent danger of collapse, he/she shall immediately notify the appropriate officials as outlined above and further defined in the Districts’ procedure.

In the case of Off-System bridges, a follow-up letter confirming the initial notification and reiterating the situation shall be sent to the bridge owner by certified mail. In addition, a copy of the letter to the owner and map showing the location of the bridge shall be sent to the transportation department of the local school board.

LA DOTD BRIDGE MAINTENANCE

DIRECTIVE #2

MAY 1, 1989

Rev. NOVEMBER 30, 2011

**RESPONSIBILITY:** The DOTD District ADA of Operations shall be responsible for the implementation of this policy.

**EFFECTIVE DATE:** This policy shall become effective immediately upon receipt.

SCS

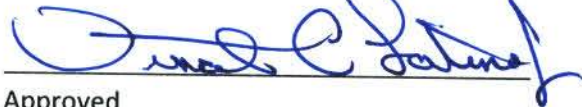
Recommend Approval

Bridge Inspection Engineer (SEC. 51)

DKM

Recommend Approval

Structures and Facilities Administrator (SEC. 51)



Approved

Vincent C. Latino Jr., P.E.

Chief Maintenance Engineer

BRIDGE MAINTENANCE DIRECTIVE #2  
CONTACT LIST OF OFFICIALS TO BE NOTIFIED FOR BRIDGES IN DANGER OF COLLAPSE

DISTRICT \_\_\_\_\_

**DOTD Contacts**

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL

BRIDGE MAINTENANCE DIRECTIVE #2  
CONTACT LIST OF OFFICIALS TO BE NOTIFIED FOR BRIDGES IN DANGER OF COLLAPSE

**Off-System Bridge Owners**

DISTRICT \_\_\_\_\_

PARISH \_\_\_\_\_

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL

PARISH \_\_\_\_\_

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL ADDRESS

PARISH \_\_\_\_\_

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL ADDRESS

PARISH \_\_\_\_\_

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL ADDRESS

PARISH \_\_\_\_\_

AGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL ADDRESS

BRIDGE MAINTENANCE DIRECTIVE #2  
CONTACT LIST OF OFFICIALS TO BE NOTIFIED FOR BRIDGES IN DANGER OF COLLAPSE

DISTRICT \_\_\_\_\_

**School Boards**

ADDRESS \_\_\_\_\_

PARISH \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL

ADDRESS \_\_\_\_\_

PARISH \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL

ADDRESS \_\_\_\_\_

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PARISH \_\_\_\_\_

NAME	TITLE	PRIMARY NUMBER	SECONDARY NUMBER	EMAIL