103 Standard Forms

103.1 General

This chapter contains fillable portable document format (PDF) of the standard forms found in the FDOT Design Manual (***FDM***). The form number assigned to each form corresponds to the ***FDM*** chapter in which it is discussed. Refer to the related chapter for instruction on the use of each form.

Form 121-A

BRIDGE DEVELOPMENT REPORT SUBMITTAL CHECKLIST

Project Name _____

Financial Project ID_____

FA No. _____ Projects of Division Interest yes ☐ no ☐
NHS yes ☐ no ☐

Date _____ FDOT Project Manager _____

	ITEMS	STATUS[b]
1.	Typical Sections for Roadway and Bridge [a]	
2.	Roadway Plans in Vicinity of Bridge [a]	Select Status
3.	Maintenance of Traffic Requirements [a]	Select Status
4.	Bridge Hydraulics Report [c]	Select Status
5.	Geotechnical Report [c]	Select Status
6.	Bridge Corrosion Environmental Report [c]	Select Status
7.	Existing Bridge Plans	Select Status
8.	Existing Bridge Inspection Report	Select Status
9.	Existing Bridge Load Rating	Select Status
10.	Utility Requirements	Select Status
11.	Railroad Requirements	Select Status
12.	Retaining Wall and Bulkhead Requirements	Select Status
13.	Lighting Requirements	Select Status
14.	ADA Access Requirements	Select Status
15.	Other	Select Status

(a) Must be approved by District before BDR submittal.
(b) Select appropriate status: Provided, Not Applicable, Comments Attached
(c) See approval requirements for these documents in ***FDM 121***.

Form 121-B

Standard Peer Review Certification Letter

Florida Department of Transportation
District ___

Attn:

Reference: **Independent Peer Review Category 2 Structures**
Financial Project ID:
Federal Aid Number:
Contract Number:

Submittal: **90% Bridge Plans Submittal**
Bridge Number(s):

Dear ,

Pursuant to the requirements of the Contract Documents, hereby certifies that an independent peer review of the above-referenced submittal has been conducted in accordance with ***FDM 121*** and all other governing regulations. Component plans that were included in the peer review are as follows:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Outstanding / Unresolved Comments and Issues:

Form 121-B

Certification Statement:

I certify that the component plans listed in this letter have been verified by independent review and are in compliance with all requirements presented in the Contract Documents. Independent Peer Review comments and comment resolutions have been included in this submittal under separate cover.

Please do not hesitate to contact me if you have any questions.

Name of Independent Peer Review Firm _____

Name of Independent Peer Reviewer _____

Title _____

Signature _____

Florida Professional Engineer Lic. No. _____

Form 121-C

Certification Letter

Florida Department of Transportation
District ___

Attn:

Reference: **Independent Peer Review Category 2 Structures**
Financial Project ID:
Federal Aid Number:
Contract Number:

Submittal: **100% Bridge Plans Submittal**
Bridge Number(s):

Dear ,

Pursuant to the requirements of the Contract Documents, hereby certifies that an independent peer review of the above-referenced submittal has been conducted in accordance with ***FDM 121*** and all other governing regulations. Component plans that were included in the peer review are as follows:

_____
_____
_____
_____
_____
_____
_____
_____

Certification Statement:

I certify that the component plans listed in this letter have been verified by independent review, that all review comments have been adequately resolved, and that the plans are in compliance with all Department and FHWA requirements presented in the Contract Documents.

Please do not hesitate to contact me if you have any questions.

Name of Independent Peer Review Firm

Name of Independent Peer Reviewer

Title

Florida Professional Engineer Lic. No.

[Insert Signature, Date and Seal here.]

Form 122-A

SUBMITTAL/APPROVAL LETTER

To: _____ Date: _____
District or Turnpike Design Engineer

Financial Project ID: _____ New Const. ☐ RRR ☐
Federal Aid Number: _____
Project Name: _____
State Road Number: _____ Co./Sec./Sub. _____
Begin Project MP: _____ End Project MP: _____
FHWA Project of Division Interest: Yes ☐ No ☐
Request for: Design Exception ☐ Design Variation ☐
Community Aesthetic Feature: Conceptual ☐ Final ☐
Re-submittal: Yes ☐ No ☐ Original Ref# _____ - ____ - _____
Requested for the following element(s):

☐ Design Speed	☐ Lane Width	☐ Shoulder Width	☐ Cross Slope
☐ Design Loading Structural Capacity	☐ Vertical Clearance	☐ Maximum Grade	☐ Stopping Sight Distance
☐ Superelevation	☐ Horizontal Curve Radius	☐ Other _____	

Recommended by:

_____ Date _____
Responsible Professional Engineer or Landscape Architect (Lanscape-Only Projects)

Approvals:

_____Date _____
District or Turnpike Design Engineer

_____Date _____
District Structures Design Engineer

_____Date _____
State Roadway Design Engineer

_____Date _____
State Structures Design Engineer

_____Date _____
Chief Engineer

_____Date _____
FHWA Division Administrator

INITIAL MEETING CHECKLIST

Basic information about the project

- ☐ Project Location
- ☐ Project Limits
- ☐ Project Length
- ☐ Project Purpose
- ☐ Jurisdiction(s) in which the Project is Located
- ☐ Proposed Change in Lane Configuration
- ☐ Project Schedule
- ☐ Context Classification

This is a list of items that the Applicant should be prepared to discuss at the Initial Meeting:

- ☐ Conceptual plan (including transitions to and from the lane elimination section)
- ☐ Existing and long-range future AADT (the latter based on historical growth and the regional travel demand model, if applicable)
- ☐ Consistency of the proposed project with the applicable Long-Range Transportation Plan (LRTP), Transportation Improvement Program (TIP), Transit Development Plan (TDP), comprehensive plan, master plans, visions, and Complete Streets initiatives
- ☐ Status of the roadway as an Evacuation Route, freight route, and part of the Strategic Intermodal System (SIS)
- ☐ Status of the roadway as a major transit corridor per the LRTP or TDP
- ☐ Proposed use(s) for the right-of-way after lanes are eliminated (e.g., widened sidewalks, bicycle lanes, landscaping, on-street parking, transit lanes)
- ☐ Existing right-of-way width and any proposed changes to the right-of-way width
- ☐ Anticipated changes (if any) in jurisdictional responsibility for ownership or maintenance of the roadway
- ☐ Anticipated changes (if any) in functional classification and access management classification
- ☐ Anticipated changes (if any) in posted speed limits
- ☐ Need for design variations or design exceptions to support the lane elimination project
- ☐ Plan for obtaining input and review from businesses, residents, and other stakeholders
- ☐ Plan for receiving endorsement from elected officials
- ☐ Funding source
- ☐ Potential implementation strategy and partner commitments

Methodology Checklist

This is an illustrative list of items that the District Review Team may require the Applicant to address in a Concept Report, as needed:

- ☐ Conceptual design plans (including proposed typical sections) that meet FDOT design standards for all transportation modes
- ☐ Need for any design variations or exceptions
- ☐ Size of impact area
- ☐ Near- and long-range traffic forecasts with and without the proposed (with changes in travel patterns clearly shown)
- ☐ Near- and long-range level of service (LOS) and queuing analysis for intersections and segments in the impact area under the build and no-build scenarios
    - LOS analyses may be daily or peak hour analyses at the District Review Team's discretion.
    - The District Review Team and the Applicant should agree on an analysis methodology.
- ☐ Mitigation to address significant and adverse LOS impacts on State roads and the regional transportation system resulting from the lane elimination
- ☐ Impact on pedestrian and bicycle infrastructure (e.g., sidewalks, bicycle lanes, and multi-use paths) and connectivity
- ☐ Impact on transit routes and transit stops locations (including appropriateness of turn radii and lane widths)
- ☐ Impact on parking supply
- ☐ Crash data summary and analysis, which may include identification of high-crash locations (by crash type) and locations on FDOT's 5% lists (i.e., the lists of the 5% of segments and intersections with the highest number of crashes) and estimation of the potential increase or decrease in crashes using Crash Modification Factors (CMFs) from the Highway Safety Manual, CMFs from the FHWA CMF Clearinghouse website, or other appropriate methodologies
- ☐ Impact on trucks and designated truck routes (including appropriateness of turn radii and lane widths and possible relocation of designated truck routes)
- ☐ Impact on evacuations routes and emergency response
- ☐ Conceptual funding plan (includes cost estimates and funding sources)
- ☐ Conceptual implementation plan (including an implementation schedule and a list of the commitments that the applicant will make in support of the lane elimination project)
- ☐ Existing posted speed and desired posted speed after the lane elimination
- ☐ The need to add, remove, or modify traffic signals
- ☐ Impacts on school crossing locations and/or midblock pedestrian crossing locations
- ☐ Case-specific special considerations to be determined (e.g., railroad crossing improvements)

Form 126-C

Lane Elimination
Initial Notice to Central Office

To: _____ From: _____ Date: _____
Systems Management Administrator *District Lane Elimination Coordinator*

The intent of this message is to inform Central Office that District _____ has received a request for lane elimination on a State Highway.

PROJECT INFORMATION

State Road: _____

Project Location: _____

Roadway ID: _____

Context Classification: _____

Project Limits (MP): From _____ to _____

Applicant: _____

Project Description: _____

_____

Proposed Change in Cross Section: From _____lanes to _____lanes

☐ SIS ☐ NHS

ACTIONS AND OUTCOMES TO DATE

District staff participated in a meeting with _____ on _____ to formally commence the lane elimination review process. At that meeting, District staff provided an overview of the lane elimination review process and the Applicant shared initial information about the lane elimination project. The District determined the specific review process and analysis methodology for the lane elimination request.

NEXT STEPS

The Applicant will submit a Draft Concept Report (containing a proposed typical section) as the lane elimination review process proceeds. If the District reviewers find the Draft Concept Report acceptable, the District will recommend that the Applicant submit a formal Application Package (including the Final Concept Report). If the Application Package is complete and acceptable, the District will approve the lane elimination request with the concurrence of Central Office.

Concurrences:

_____ Date: _____
District Planning and Environmental Administrator

_____ Date: _____
District Design Engineer

_____ Date: _____
District Traffic Operations Engineer

Form 126-D

Lane Elimination
Final Review and Approval
Notice to Central Office

The intent of this message is to inform Central Office that District _____ has received a request for lane elimination on a State Highway.

PROJECT INFORMATION

State Road: _____

Project Location: _____

Roadway ID: _____

Context Classification: _____

Project Limits (MP): From _____ to _____

Applicant: _____

Project Description: _____

_____

Proposed Change in Cross Section: From _____ lanes to _____lanes

☐ SIS ☐ NHS

District Concurrences:

_____ Date: _____
District Planning and Environmental Administrator

_____ Date: _____
District Design Engineer

_____ Date: _____
District Traffic Operations Engineer

Central Office Concurrence:

_____ Date: _____
Chief Planner

Final Approval:

_____ Date: _____
Chief Engineer

Form 128-A

Design Plans Phase Review

DATE: _____

TO: _____

FROM: _____

COPIES: _____

SUBJECT: Response to _____ Phase Review

REF: Financial Project ID _____
FA Project Number _____
County _____

APPROVED:

_____
Responsible Professional Eng.
(Name of Consultant Firm)

CONCURRENCE:

_____
* District Design Engineer
* District Structures Design Engineer
* District Project Management Engineer

* As appropriate

Form 128-B

Design Plans Component Review

DATE: _____

TO: _____

FROM: _____

COPIES: _____

SUBJECT: Response to _____Component Review

REF: Financial Project ID _____
FA Project Number _____
County _____

APPROVED:

_____
Responsible Professional Eng.
(Name of Consultant Firm)

CONCURRENCE:

_____
* District Design Engineer
* District Structures Design Engineer
* District Project Management Engineer

* As appropriate

Form 128-C

Special Provisions

DATE:

TO:

FROM:

COPIES:

SUBJECT:

REF: Financial Project ID
FA Project Number
County

APPROVED:

Responsible Professional Eng.

(Name of Consultant Firm)

* As appropriate

CONCURRENCE:

* District Design Engineer
* District Structures Design Engineer
* District Project Management Engineer

Form 130-A

18 KIP Equivalent Single Axle Loads (ESAL)

Financial Project ID _____

State Road No. _____

County _____

I have reviewed the 18 KIP Equivalent Single Axle Loads to be used for pavement design on this project. I hereby attest that these have been developed in accordance with the FDOT ***Project Traffic Forecasting Procedure*** using historical traffic data and other available information.

_____
Name

_____
Signature

_____
Title

_____
Organizational Unit

_____
Date

Form 130-B

Project Traffic

Financial Project ID _____

State Road No. _____

County _____

I have reviewed the Project Traffic to be used for design on this project. I hereby attest that it has been developed in accordance with the FDOT ***Project Traffic Forecasting Procedure*** using historical traffic data and other available information.

_____
Name

_____
Signature

_____
Title

_____
Organizational Unit

_____
Date

Form 131-A

TRANSMITTAL OF PLANS, SPECIFICATIONS AND ESTIMATES PACKAGE

Date:_____ **30 Day AD** ☐ **60 Day AD** ☐
Proposal/Contract ID: _____ **Letting Date:** _____ **Re-Let:** ☐**No** ☐**Yes**
Financial Project ID(s): _____
County: _____ **State Road No.:** _____
Federal Funds: ☐**No** ☐**Yes** **Federal Aid No.:** _____
Total Roadway Length: _____ **Total Bridge Length:** _____
Total Project Length: _____ **Total Project Length Verified by:** _____
Project Manager Name and Phone Number: _____
E.O.R. Name, Firm and Phone Number: _____
Work Mix No. ____ **Work Mix Description:**_____

On _____, the District Director of Transportation Development (Production) certified that the Plans, Specifications and Estimates (PS&E) Package is complete, has no known errors or omissions, has been reviewed for constructability and biddability, and is ready to be advertised for construction.

The following items transmitted as noted:

SEALED PLANS SET (____ SHEETS), SPECIFICATIONS PACKAGE (____ PAGES): The Electronic Bid Set was reviewed by_____ and posted to the server on _____).

ESTIMATES OFFICE INFORMATION:
The Authorization Estimate, will be reviewed by District Estimates and posted to the server by the PS&E submittal due date. At the time of posting, transfer control of the project files to Central Office.

FEDERAL AID OFFICE INFORMATION:
If Project of Division Interest (PoDI):
Authorized by _____ Date: _____
Print Name of FHWA Engineer

CONTRACTS OFFICE INFORMATION:
Contract Time: _____ Calendar Days
Select One:
☐ **Standard Acquisition Time:** 15 Days
☐ **Other Acquisition Time:** _____Days (Approval required if more than 120 Days)
☐ **Flexible Start Time:** _____Days (Approval required if more than 120 Days)
☐ **Special Start Date:** _____(Approval required for SP0080303B and SP0080303C)
Wage Rate(s)_____
Business Development Initiative Project: ☐No ☐Yes
Alternative Contracting: ☐No ☐Yes
(If yes, Type: _____
_____
Pre-Bid Conference Mandatory? ☐ No ☐ Yes (Date:_____ Time: _____ A.M./P.M.)
(Contact Person and Phone: _____)
(Location of Conference: _____
_____)

SPECIAL NOTES and REQUIREMENTS (List/Explain): _____
_____
_____
_____

If any items are missing please contact _____
Contact Name and Phone Number

Transmittal of Plans, Specifications and Estimates Package Sheet 2 of 2

REMINDER

1. Check that all components of the Contract Plans are included as listed on the lead key sheet.
2. Check that all sheets are included according to key sheet indices.
3. Check that all sheets have the correct Financial Project ID.
4. Check that all sheets are legible and reproducible.
5. On strung projects, check that all Summary of Pay Item sheets from the Proposal/Contract ID go in the lead project and the Financial Project ID of the strung project is shown on the lead key sheet.
6. Check that bridge pay item sheets show bridge numbers and the quantity breakdowns.
7. E-mail the Transmittal Memo, Contract File Index and attachments to the group "CO-CPKG" and copy the FDOT Project Manager.
8. Verify the accuracy, in the FM system, of the Description, Project Limits, Mileage and Structures. Initial Total Project Length Verification.

Special Notes and Requirements:

A. Provide the Roadway, Bridge, and Project Lengths in miles, rounded to three decimal places as follows:

- Total Roadway Length = End Project - Begin Project - Exceptions - Bridges (not including bridge culverts) adjusted for Equations
- Total Bridge Length = Sum of all End Bridge – Begin Bridge (not including bridge culverts)
- Total Project Length = Total Roadway Length + Total Bridge Length

B. Include the Work Mix Number and Work Mix Description corresponding to the information as shown in the Financial Management System on the WP01 Screen

C. Anything that affects the advertisement, bidding and award that is not listed above such as:

a. Railroad Insurance
b. Developmental Specifications
c. Alternative Contracting items such as Scope Alternates
d. Budgetary Ceilings
e. Additional Insured Endorsement parties
f. For A+B projects, include the User Cost Per Day $____ and Maximum Days ____.
g. FGT if both special provisions are needed
h. "Push Button"
i. Pending permits

Form 131-B

CONTRACT FILE INDEX

Financial Project ID _____ Proposal/Contract ID _____

ATTACHMENTS (check if included or list expected date of transmittal to Central Office)

_____ Calendar Days Recommendation
_____ Preliminary Engineering Certification*
_____ Utility Certification
_____ Status of Environmental Certification
_____ Permit Transmittal Memo**
_____ Railroad Clear Letter
_____ Certificate for Construction (***Form 575-095-05***)
_____ Executed copy of MMOA for Projects with Patterned Pavement
_____ Approval if SP0080701B Computation of Contract Time is used.
_____ Approval for Roundabout Design
_____ Landscape Exception Approval per Engineering and Operations Memorandum 13-1

☐ No ☐ Yes Project of Division Interest under agreement dated August 20, 2015*

☐ No ☐ Yes Right of Way Certification mailed to State R/W Administrator

☐ No ☐ Yes ☐ N/A Local Funds Agreement sent to Office of Comptroller

☐ No ☐ Yes ☐ N/A Local Funds Sent to Office of Comptroller

☐ No ☐ Yes ☐ N/A Project requires a Maintenance Agreement.

If yes, a Maintenance Agreement (Number _____) was executed on _____.

---

* Include if federally funded.

** Must have District Secretary Approval if Permits are not received by Authorization to Advertise (*Federally Funded Projects Only*).

Note: If project is federally funded and has a state funded “Goes With”, please provide the same documentation as required for a federally funded project.

Name:_____ Date:_____

Print Name of Project Manager/Other Title

REMINDER

PROCESS:

1. Organize attachments in the order listed.
2. Show the number of Maintenance Agreements.
3. Show anticipated date of arrival on any item not included in package.
4. The ***Status of Environmental Certification*** must be completed on all federally and state funded projects. For federally funded projects, use the Status of Environmental Certification for Federal Project, Form #650-050-13. For state funded only, non-federal eligible (NFE) projects, use the Status of Environmental Certification for State Funded Project, Form #650-050-14. The District Environmental Office must use the StateWide Environmental Project Tracker (SWEPT) to complete the Status of Environmental Certification Form.

   When a federally funded project is strung with a NFE project, the entire project contract becomes federalized; i.e., both the state funded project and the federally funded project must comply with all applicable federal laws, rules, and regulations related to the federalized contract. In addition, the federally funded project is to be the lead project.

   Regarding federal environmental compliance under NEPA, the project limits of the approved final environmental document will control the scope of compliance with NEPA requirements. NEPA requirements (including staging areas and Contractors' off-site activities) must only be met for that portion of the project included within the "logical termini" as described in the NEPA document associated with the federally funded portion of the federalized contract.

NOTE: The Contract File Index is an integral part of the Transmittal of Plans, Specifications and Estimates Package.

Form 131-C

REVISION MEMO

DATE:_____
TO: Final Plans (CO-FINALPLANS)

FROM: _____, Project Manager

COPIES: DDE, DCPME

SUBJECT: **Revision Number** _____ - Letting (mo./yr.) _____

Financial Project ID _____ (Lead number only)

Proposal/Contract ID _____

Federal Funds: ☐No ☐Yes Federal Aid No. _____

County _____ State Road No._____

Mandatory Only: ☐No ☐Yes (*If Yes, Signatures Not Required.)

*Concurred by: _____ Date: _____
Signature of Director of Transportation Development or Designee

I have reviewed for effects on the Specifications Package and a package revision **is** ☐ **is not** ☐ required. *Approved By: _____ Date:_____
Signature of District Specifications Engineer

If Projects of Division Interest ,

*Authorized By: _____ Date: _____
Print Name of FHWA Engineer

REVISIONS RECEIVED IN THE FINAL PLANS OFFICE WITHIN 15 WORK DAYS OF THE LETTING MUST BE APPROVED BY THE DISTRICT SECRETARY.

NO REVISIONS ALLOWED WITHIN 5 WORK DAYS OF THE LETTING WITHOUT APPROVAL.

*Approved By: _____ Date:_____
Signature of District Secretary

☐ SUPPLEMENTAL SPECIFICATIONS PACKAGE NUMBER _____(_____Pages).

☐ REISSUED SPECIFICATIONS PACKAGE _____ (_____Pages).

☐ PLANS REVISION NUMBER _____ (_____Sheets).

CONTRACT TIME REVISED: ☐No ☐Yes(If yes, _____ Total Calendar Days)

Form 131-C

DATE: _____

Financial Project ID _____ (Lead number only)

Proposal/Contract ID _____

PLANS REVISION NUMBER _____

Sheet No(s).	Rev. Date	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____

SUPPLEMENTAL SPECIFICATIONS PACKAGE NUMBER _____

Sheet No(s).	Rev. Date	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____

Summary of Quantities

Pay Item	Sheet No.	Add. / Del. / Rev.	Old Quantity	New Quantity

Form 131-C

REMINDER

PROCESS:

1. Fill out headings.
2. Mandatory Only revisions must not have other revisions included to remain exempt from signature requirement.
3. On Projects of Division Interest, get FHWA concurrence as applicable. Print name of FHWA Engineer and date. *(Not required for Mandatory Only Revisions)*
4. Get concurrence signature from the District Director of Transportation Development or designee. *(Not required for Mandatory Only Revisions)*
5. Get signature of the District Specifications Engineer. *(Not required for Mandatory Only Revisions)*
6. Revisions received in the Final Plans Office within 15 work days of the letting must be approved by the District Secretary. *(Not required for Mandatory Only Revisions.)* Notify Final Plans. Revisions within five working days of the letting are not allowed without final approval from the Director of the Office of Design. Since there is no assurance that all prospective contractors will get these documents on time to be considered in their bids, approvals for a revision within five working days of the letting will be rare. If the revision is not approved, the project will either be let as is, or be withdrawn from letting. Withdrawing or moving the project to a later letting after advertisement requires approval by the District Secretary and the Chief Engineer.
7. For Supplemental Specification Packages, fill in the Rev. Date, number of pages and a brief description.
8. Enter the sheet number and:
   Describe new pay item number, Rev. Date with old quantity and new quantity, deleted pay item number only, or revised quantities; by entering pay item number with old and new quantities.
9. On bridges indicate “each bridge number” with corrected changes.
10. If a revision will impact the utility plans, adjustments or schedules, provide a copy of the revision memo and affected plan sheets to the District Utilities Engineer.
11. Any change to any pay item, requires replacement of the entire Proposal Summary of Pay Items.
12. Email the Revision approval to Final Plans Section (CO-FINALPLANS) to unlock the summary of pay items.
13. Email Revision Memo to Final Plans.

REVISED DOCUMENTS:

1. Revised sealed plans sheets including Summary of Pay Items and Summary of Quantities sheets.
2. Revised District Cost Estimate if federally funded.
3. Revised sealed Supplemental Specifications Package.

Sample Local Agency Maintenance Agreement
For Work Performed by the Department
Sheet 1 of 3

Financial Project ID: _____

Federal Aid No. _____

Local Agency: _____

Project Description: _____

_____

Bridge No.: _____

MAINTENANCE AGREEMENT

THIS AGREEMENT, made and entered into on this _____ day of _____, 20____, by and between the STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION (hereinafter called "DEPARTMENT"), and _____, Florida (hereinafter called "LOCAL AGENCY");

WITNESSETH:

WHEREAS, the DEPARTMENT is preparing to undertake a project within the LOCAL AGENCY and LOCAL AGENCY identified and known to the parties by Financial Project I.D. _____ which will be of benefit to the LOCAL AGENCY; and

WHEREAS, approval of federal aid necessary to the project requires agreement by the LOCAL AGENCY to maintain the project;

NOW, THEREFORE, in consideration of the premises, the parties hereby agree as follows:

1. The DEPARTMENT will undertake the project and obtain approval of the Federal Highway Administration for federal participation.

2. Upon completion and acceptance, the LOCAL AGENCY will assume responsibility for maintenance of the project and will conduct such maintenance in accordance with approved state standards.

3. To the extent permitted by law, LOCAL AGENCY must indemnify, defend, and hold harmless the DEPARTMENT and all of its officers, agents, and employees from any claim, loss, damage, cost, charge, or expense arising out of any act, error, omission or negligent act by LOCAL AGENCY, its agents, or employees, during the performance of the Agreement, except that neither LOCAL AGENCY, its agents, or its employees will be liable under this paragraph for any claim, loss, damage, cost, charge, or expense arising out of any act, error, omission, or negligent act by the DEPARTMENT or any of its officers, agents, or employees during the performance of the Agreement**.** Nothing herein must waive the rights of sovereign immunity of either party.

Sample Local Agency Maintenance Agreement
For Work Performed by the Department
Sheet 2 of 3

4. In the event there are cost overruns, supplemental agreements (specifically incurred in the areas located off the State Highway System), and or liquidated damages not eligible to be paid for by federal funds due to the Federal Highway Administration determining that said costs are non-participating costs, the LOCAL AGENCY must be responsible for one-hundred percent (100%) of the funds required to make up the shortfall not paid by federal funds. The Project is off of the "State Highway System," therefore, in accordance with ***Section 339.08(1), Florida Statutes***, State funding cannot be used for payments of non-participating costs on this Project. (Examples of non-participating items could be fishing piers; premium costs due to design or CEI errors or omissions; material or equipment called in for the plans but not used in the construction, as referenced in the Federal Aid Policy Guide 23, ***CFR Section 635.120***).

    a. Should such shortfalls occur, due to a determination that said costs are non-participating, the LOCAL AGENCY agrees to provide, without delay, a deposit within fourteen (14) calendar days of notification from the Department, to ensure that cash on deposit with the Department is sufficient to fully fund the shortfall. The Department must notify the LOCAL AGENCY as soon as it becomes apparent there is a shortfall; however, failure of the Department to so notify the LOCAL AGENCY must not relieve the LOCAL AGENCY its obligation to pay for its full participation of non-participating costs during the Project and on final accounting, as provided herein below. If the LOCAL AGENCY cannot provide the deposit within fourteen (14) days, a letter must be submitted to and approved by the Department's project manager indicating when the deposit will be made. The LOCAL AGENCY understands the request and approval of the additional time could delay the project, and additional non-participating costs may be incurred due to the delay of the project.

5. The DEPARTMENT intends to have its final and complete accounting of all costs incurred in connection with the work performed hereunder within three hundred sixty days (360) of final payment to the Contractor. The Department considers the Project complete when the final payment has been made to the Contractor, not when the construction work is complete. All non-participating Project cost records and accounts must be subject to audit by a representative of the LOCAL AGENCY for a period of three (3) years after final close out of the Project. The LOCAL AGENCY will be notified of the final non-participating cost of the project. Both parties agree that in the event the final accounting of total non-participating costs pursuant to the terms of this Agreement is less than the total deposits to

date, a refund of the excess will be made by the Department to the LOCAL AGENCY. If the final accounting is not performed within three hundred and sixty (360) days, the LOCAL AGENCY is not relieved from its obligation to pay.

6. In the event the final accounting of total non-participating costs are greater than the total deposits to date, the LOCAL AGENCY will pay the additional amount within forty (40) calendar days from the date of the invoice from the Department. The LOCAL AGENCY agrees to pay interest at a rate as established pursuant to Section 55.03, Florida Statutes, on any invoice not paid within forty (40) calendar days until the invoice is paid.

7. Any payment of funds under this Agreement provision will be made directly to the Department for deposit.

IN WITNESS WHEREOF, the parties hereto have set their hands and seals on the day and year first above written.

_____,	STATE OF FLORIDA
LOCAL AGENCY OFFICIAL	DEPARTMENT OF TRANSPORTATION
By:_____	By:_____
Title:_____	District Secretary
_____	
(Type Name)	
ATTEST:	ATTEST:
_____	_____
Clerk (Seal)	Executive Secretary (Seal)
LEGAL APPROVAL:	LEGAL APPROVAL:
_____	_____
LOCAL AGENCY Attorney	Senior Attorney
_____	
(Type Name)	

MEMORANDUM

DATE: _____

TO: _____, Federal Aid Programs Manager

FROM: _____, Design Project Manager

COPIES: _____

SUBJECT: **PRELIMINARY ENGINEERING CERTIFICATION** (Federal Aid Projects Only)

Financial Project ID _____
Proposal/Contract ID _____
Federal Aid No. _____
County _____
Project Description _____

Preliminary Engineering (design) was funded with:

☐ State Funds under
Financial Project ID _____

☐ Federal Funds authorized under,
Federal Aid No. _____
Financial Project ID _____

The following projects, designed with the same Preliminary Engineering funds, will be strung to (awarded with) the subject project:
Federal Aid No. _____, Financial Project ID _____,
Federal Aid No. _____, Financial Project ID _____.

The Preliminary Engineering for the subject project is ◯ open/ ◯ closed. If open,

☐ it will be closed after PS&E authorization, or

☐ it is a district wide project. Task order number _____ for this project is closed. The financial number will be open for other projects.

☐ it will remain open for additional charges, as follows: _____
_____

The FDOT Project Manager may be contacted at (phone): _____

REMINDER

Under “Preliminary Engineering (design) was funded with:”

The Financial Project ID should always have a 3X phase in it. 3X is for Preliminary Engineering (design). Example: 415211-1-32 01
or 415211-1-31 01

Preliminary Engineering Certification is required if Federal Funds are used for either Design or Construction phases.

Form 140-A

Items of Work Checklist

DATE: _____

TO: _____, District Specifications

FROM: _____, Project Manager

COPIES TO:

SUBJECT: ITEMS OF WORK

Financial Project ID: _____ (GOES WITH _____)

County (Section): _____

* Project Description: _____

The plans package for the above referenced project includes the following items of work to be performed:

- ☐ Milling & Resurfacing
- ☐ Base Work
- ☐ Shoulder Treatment
- ☐ Drainage Improvements
- ☐ Curb & Gutter
- ☐ Traffic Signals
- ☐ Lighting
- ☐ Other (Please Specify)
- ☐ Highway Signing
- ☐ Guardrail
- ☐ Landscaping
- ☐ Box or Three-sided Culverts
- ☐ Bridges
- ☐ MSE Walls
- ☐ Sidewalks/Shared Use Path

Please include the county, project description and all items of work that apply in the *Intent and Scope* so they may be added to the advertisement description.

* The project description should only include the road number and the limits or location of the project.

Form 243-A

PORTABLE CHANGEABLE MESSAGE SIGNS WORKSHEET

Location of board:_____

Used: from _____ at _____

to _____ at _____

Message programmed by: _____

MESSAGE 1

____ ____ ____ ____ ____ ____ ____ ____

____ ____ ____ ____ ____ ____ ____ ____

____ ____ ____ ____ ____ ____ ____ ____

MESSAGE 2

____ ____ ____ ____ ____ ____ ____ ____

____ ____ ____ ____ ____ ____ ____ ____

____ ____ ____ ____ ____ ____ ____ ____

Timing:

Message 1 will run: ____ seconds.

Message 2 will run: ____ seconds.

Form 243-A

STANDARD ABBREVIATIONS FOR USE ON CHANGEABLE MESSAGE SIGNS

Standard abbreviations easily understood are:

WORD	ABBREV.	WORD	ABBREV.
Boulevard	BLVD	Normal	NORM
Center	CNTR	Parking	PKING
Emergency	EMER	Road	RD
Entrance, Enter	ENT	Service	SERV
Expressway	EXPWY	Shoulder	SHLDR
Freeway	FRWY, FWY	Slippery	SLIP
Highway	HWY	Speed	SPD
Information	INFO	Traffic	TRAF
Left	LFT	Travelers	TRVLRS
Maintenance	MAINT	Warning	WARN

Other abbreviations are easily understood whenever they appear in conjunction with a particular word commonly associated with it. These words and abbreviations are as follows:

WORD	ABBREV.	PROMPT
Access	ACCS	Road
Ahead	AHD	Fog*
Blocked	BLKD	Lane*
Bridge	BRDG	[Name]*
Chemical	CHEM	Spill
Construction	CONST	Ahead
Exit	EX, EXT	Next*
Express	EXP	Lane
Hazardous	HAZ	Driving
Interstate	I	[Number]
Major	MAJ	Accident
Mile	MI	[Number]*
Minor	MNR	Accident
Minute(s)	MIN	[Number]*
Oversized	OVRSZ	Load
Prepare	PREP	To Stop
Pavement	PVMT	Wet*
Quality	QLTY	Air*
Route	RT	Best*
Turnpike	TRNPK	[Name]*
Vehicle	VEH	Stalled*
Cardinal Directions	N, E, S, W	[Number]
Upper, Lower	UPR, LWR	Level

*** = Prompt word given first**

The following abbreviations are understood with a **prompt** word by about 75% of the drivers. These abbreviations may require some public education prior to usage.

WORD	**ABBREV.**	**PROMPT**
Condition	COND	Traffic*
Congested	CONG	Traffic
Downtown	DWNTN	Traffic
Frontage	FRNTG	Road
Local	LOC	Traffic
Northbound	N-BND	Traffic
Roadwork	RDWK	Ahead [Distance]
Temporary	TEMP	Route
Township	TWNNSHP	Limits

*** = Prompt word given first**

Certain abbreviations are prone to inviting confusion because another word is abbreviated or could be abbreviated in the same way. **DO NOT USE THESE ABBREVIATIONS:**

ABBREV.	**INTENDED WORD**	**WORD ERRONEOUSLY GIVEN**
WRNG	Warning	Wrong
ACC	Accident	Access (Road)
DLY	Delay	Daily
LT	Light (Traffic)	Left
STAD	Stadium	Standard
L	Left	Lane (Merge)
PARK	Parking	Park
RED	Reduce	Red
POLL	Pollution (Index)	Poll
FDR	Feeder	Federal
LOC	Local	Location
TEMP	Temporary	Temperature
CLRS	Clears	Color

Form 267-A

RECORD SHOP DRAWING TRANSMITTAL

Date _____

TO: _____

FROM: _____

(Final Review Office)

PROJECT NAME _____

FINANCIAL PROJECT ID _____

FEDERAL AID PROJECT NO. _____

CONTRACT ID NUMBER _____

COUNTY (SECTION) _____

STATE ROAD NUMBER _____

BRIDGE NUMBER _____

CONTRACTOR _____

ENGINEER OF RECORD _____

We are transmitting herewith the following Record Shop Drawings for archiving:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

For the Final Review Office: _____ _____

(Signature) (Date)

For the Receiving Office: _____ _____

(Signature) (Date)