

Title 23 Damage Assessment Form

U.S. Department of Transportation Federal Highway Administration Region 9 Title 23 Damage Assessment Form		Fed. Proj. #: Contract Admin.:	Report Number: Disaster Number: Caltrans EA:
Locode: Applicant:		County:	DAF Approval Date:
Location of Damage:		Dist Co Rte KM	Inspection Date:
Bridge Data:	Bridge No Type:	Functional Classification _____	
Traveled Way:	Width: Type:	Fed Aid Hwy <input type="checkbox"/> yes <input type="checkbox"/> no	Federal Aid Route:
Shoulder:	Width: Type:	F-Class Check <input type="checkbox"/> yes <input type="checkbox"/> no	Local Route No.:
		On State Hwy <input type="checkbox"/> yes <input type="checkbox"/> no	
Description:			ADT (existing):
			Photos
			Roll # Picture #
COST ESTIMATE			
	Type of Repair	Description or Work	Cost
E M E R G E N C Y (EO)	Emergency Repair to Date		PE _____
	<input type="checkbox"/> Force Account		RW _____
	<input type="checkbox"/> Contract		CE _____
			Const _____
(PR)	Emergency Repair Remaining		PE _____
	<input type="checkbox"/> Force Account		RW _____
	<input type="checkbox"/> Contract		CE _____
			Const _____
SUBTOTAL EMERGENCY =			
	Restoration Work		PE _____
<input type="checkbox"/> Force Account			RW _____
<input type="checkbox"/> Contract			CE _____
			Const _____
Note: Prior Authorization required to proceed with restoration			SUBTOTAL RESTORATION =
NEPA Compliance		Preliminary Engineering (10%) _____	
<input type="checkbox"/> Signed CE/CE Determination Form (attached)		Right of Way _____	
<input type="checkbox"/> CE/CE Determination Form or other NEPA Document (to be completed)		Construction Engineering 15% _____	
Stewardship		Construction _____	
<input type="checkbox"/> Exempt <input type="checkbox"/> CA <input type="checkbox"/> FHWA Oversight		TOTAL ESTIMATED COST =	
Recommendation	<input type="checkbox"/> Eligible <input type="checkbox"/> Ineligible	FHWA Engineer	Date
Concurrence	<input type="checkbox"/> Yes <input type="checkbox"/> No	State Engineer	Date
Concurrence	<input type="checkbox"/> Yes <input type="checkbox"/> No	Local Agency Engineer	Date

U.S. DEPARTMENT OF TRANSPORTATION FEDERAL HIGHWAY ADMINISTRATION - REGION 9	Report No. _____ Sheet No. _____ of _____
DAMAGE ASSESSMENT FORM (Title 23, Federal Aid System/Federal Domain)	Applicant
Sketches and/or Narrative	

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