

ATTACHMENT A

20-4 SEISMIC RETROFIT GUIDELINES FOR BRIDGES IN CALIFORNIA

Seismic Retrofit Assessment

Br. Name:
Br. No.
County:
Route:
Post Mile:

On _____ (Date) a seismic analysis of this structure was completed. It was determined that:

No retrofit is required.

Strategy Meeting held on:

No Strategy Meeting

Retrofit is required per Strategy Meeting. Provide brief description of retrofit measures required (explain below):

The type of analysis performed (more than 1 may be marked):

As-Built Plan Review

Equivalent Static

Elastic Dynamic

Inelastic Static

Non-Linear Time History

Other (Explain):

Geotechnical Parameters:

Peak Rock Acceleration

Standard ARS Curve (Seismic Design Criteria - Appendix B)

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Site Specific ARS Curve (Attach separate sheet)

Branch Chief or Oversight Engineer

Date

Project Engineer

Date