



# SHOPP Project Contingency Programming Request Form SHOPPCPR: Ver 3 11/14

Submission Date

Division of Transportation Programming  
State Highway Operation and Protection Program (SHOPP)

Project Manager

Email / Phone  (530) 741-5448

Dist	County	Route	Prefix	PM	Prefix	PM	EA	PPNO	Project ID
03	Glenn	162		76.7		76.7	3F060	2633	03-1200-0052

Performance Measure			Project in PID Work Plan Y/N	PID Approval Date *	K-Phase Expenditures (\$1,000)
Program Code	Num	Unit Type	Yes	06/02/2014	\$346
201.113	2	Bridge(s)			

Must be mm/dd/yyyy

### Task and Milestones MUST be entered on Page 2 under Attachment

MPO:

Project Location/Description (Include the nearest city, town or landmark)

In Glenn County near Butte City at Sacramento River Bridge. Seismic retrofit or remove bridge.

Significant delivery risks and anticipated date of resolution.

None known at this time. See attached risk register.

Need for project and proposed improvements (Elaborate using PID language)

The purpose of this project is to seismically retrofit the Sacramento River Bridge (Br. No. 11-0017) in order to withstand minimal structural damage during a seismic event. The existing bridge on this project does not meet current operational seismic safety design. The original steel truss segment of the bridge is experiencing significant deterioration of the steel H-piles and H-beams at the bridge piers.

Proposed Total Project cost (\$1,000)

Component	14/15	15/16	16/17	Total
PA&ED			1,000	\$1,000
PS&E			3,000	\$3,000
RW			500	\$500
Con			4,000	\$4,000
RW Cap			1,000	\$1,000
Con Cap			18,800	\$18,800
Total			\$28,300	\$28,300

Approved  Denied \* Risk Management Plan must be attached. CAPITAL CONSTRUCTION COST ESCALATION RATE

Project Manager (Print)	<input type="text" value="JOHN HOLDER"/> <i>JH</i>	Project Manager (Sign)	<i>John Holder</i>	Phone	<input type="text" value="(530) 741-5448"/>
District SFP (Print)	<input type="text" value="THOMAS L BRANNON"/> <i>TB</i>	District SFP (Sign)	<i>Paulene Dixon</i>	Phone	<input type="text" value="(530) 740-4846"/>
SHOPP Exec. (Print)	<input type="text"/>	SHOPP Exec. (Sign)		Phone	<input type="text"/>

\* Email a Scanned copy of the signed Contingency Request form, Risk Mgmt Plan and approved PID to: [SHOPP\\_Amendment\\_Requests@dot.ca.gov](mailto:SHOPP_Amendment_Requests@dot.ca.gov)

# SHOPP Contingency Project Request Form Attachment

03 - Glenn - 162
EA: 3F060      PPNO: 2633
EFIS: 03-1200-0052

## Task and Milestones to be Tracked for SHOPP Contingency Projects

Task Name	Task Number	Start Date	Finish Date
Environmental Study Request	160.30	07/01/15	09/15/15
Base Maps and Plan Sheets for PA&ED Development	160.45	09/15/15	12/15/15
Draft Environmental Document	165.25	08/01/15	10/15/15
DED Circulation	175.05	10/15/15	11/01/15
Project Preferred Alternative	175.20	11/01/15	11/15/15
Final Environmental Document	180.10	11/15/15	12/15/15

Task Name	Milestone No.	Date
Begin Environmental	M020	08/01/15
Notice of Preparation (EIR only)	M030	08/15/15
Notice of Intent (EIS only)	M035	09/01/15
Circulate DPR and DED Internally in District	M060	09/15/15
Circulate DPR and DED Externally	M120	10/15/15
Approved FED	M160	12/01/15
PA&ED	M160	12/15/15
PS&E	M380	08/01/16
R/W Cert	M410	09/01/16
RTL	M460	10/01/16
CCA	M600	10/01/17
End Project	M700	10/01/19