

ORDER OF BOARD OF SUPERVISORS MADISON **COUNTY,**
SETTING FORTH PROPOSED STATE AID PROJECTS FOR
PERIOD JANUARY , 2016 **THROUGH** DECEMBER , 2019

Pursuant to the provisions of Senate Bill No. 1 of the Extraordinary Session of 1949 and as subsequently amended, herein after referred to as said Act, We, the undersigned members of the Board of Supervisors of MADISON County, hereby order that the proposed project(s) listed herein constitute the State Aid Program for MADISON County for the period JANUARY , 2016 through DECEMBER , 2019 .

In support of this order, the Board certifies and agrees that:

1. The State Aid System in said County has been designated by the Board and approved by the State Aid Engineer, as required by said Act.
2. The Board has employed a Registered Professional Engineer as County Engineer, who will employ such other competent technical assistant(s), as required, to properly supervise and inspect the work in compliance with the Rules and Regulations of the State Aid Engineer, all as required in said Act.
3. This program, which has been prepared by the County Engineer and approved by this Board, is herewith submitted to the State Aid Engineer for approval.
4. The Board will comply with all applicable Laws, Rules and Regulations in the acquisition of rights-of-way and will maintain the acquired rights-of-way for said project(s) to keep the same free of encroachments such as buildings, fences or any other obstructions. The Board designates KATIE BRYANT SNELL as its right-of-way acquisition agent for the project(s) herein. The agent's address and phone number is PO BOX 3007
 MADISON, MS 39130 (601)460-9800 .
5. Counties receiving \$500,000 or more in Federal funds from all projects constructed or being constructed in a Federal Fiscal Year (October 1 - September 30), must have a single audit conducted in accordance with OMB circular A-133.
6. The Board herein affirms its acceptance of the Office of State Aid Road Construction's policy for the accommodation of utilities as stated in S.O.P. No. SA II-2-8 and agrees to coordinate utility facility installation and/or adjustment in a timely manner so as not to impede project development.
7. The Board will maintain the project(s), after completion, in a regular and satisfactory manner subject to the approval of the State Aid Engineer, all as required in said Act.
8. The State Aid Engineer is authorized to effect such transfer of funds as are necessary to pay engineering costs on the project(s), as authorized by Mississippi Code 1972, Section 65-9-15, and in accordance with the Rules and Regulations promulgated by the State Aid Engineer, dated July 1, 2005.
9. The State Aid Engineer is authorized to effect such transfer of funds as are necessary to pay testing expenses incurred PRIOR to the award of Contract on any project(s) included in this program. In the event the Board cancels or withdraws any project(s) included in this program, the Board hereby agrees to reimburse its State Aid Fund for testing charges incurred.

PROJECT PRIORITY NO. _____

1. Project No. LSBP-45 (22)
2. Name of Road: Simpson Road
3. Design Classification: (check one) Rural Urban _____ (check one) Collector _____ Local
4. Federal Route Number _____
4. Termini of Project: 12' FROM SOUTH ABUTMENT TO 12' FROM NORTH ABUTMENT ON SIMPSON ROAD LOCATED IN SECTION 36, T12N, R3E on Structure #144

5. Length of Project: 0.015 Miles
6. Character of Work (Show Alternates if Applicable) BRIDGE REPLACEMENT

7. Design Data:
 - a. Traffic Count: How Determined 2019 BRIDGE INSPECTION REPORT
 Current ADT 020 VPD; Design Year ADT _____ VPD; %Trucks _____
 Traffic Count Required: Yes _____ No (Attach Supplemental Sheet)
 - b. Terrain Level Rolling _____ Design Speed 35 MPH
 - c. ROW: Existing VARIES Ft.; Proposed VARIES Ft.
 - d. Proposed Roadway Crown Width 18 AVG Ft.
 - e. Surface Type & Width: Existing GRAVEL _____ 18 AVG Ft.
 Proposed GRAVEL _____ 18 AVG Ft.

8. Bridges:
 - a. Str. No. SA450000000144 Suff. Rtg. 41.0 Capacity POSTED 13
 Remain in Place: Yes _____ No Existing/Proposed Width 23.5 Ft.
 - b. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.
 - c. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.
 - d. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.
 - e. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.

9. Estimated Construction Cost of Project (Including Contingencies) \$	303,220.00
a. STP Funds Requested (%)	\$ _____
b. BR Funds Requested (%)	\$ _____
c. SA Funds Requested (%)	\$ _____
d. LSBP Funds (%)	\$ <u>75,300.00</u>
e. _____ Funds	\$ <u>227,920.00</u>

Engineering Cost (12 %) (Constr. Cost Less Contingencies) \$	34,700.00
a. State Aid Funds Requested	\$ _____
b. County Funds Contributed	\$ _____
c. LSBP Funds Contributed	\$ <u>34,700.00</u>
d. _____ Funds Contributed	\$ _____
Total Estimated Cost of Project	\$ <u>337,920.00</u>

Construction will be by: Contract County Forces _____

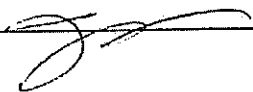
Use Supplemental Sheet and/or maps if needed to provide complete data.

<u>FOR STATE AID USE ONLY:</u>	Preliminary Review _____	_____	Date
	Recommend Approval _____	Dist. Engr. _____	Date
	Approved _____	State Aid Engr. _____	Date
	Letter To Bd. _____	Dist. Engr. _____	Date
	Funds Record _____	Auditor _____	Date
	Programmed _____	_____	Date

BRIDGE REPLACEMENT Program for MADISON County

BOARD OF SUPERVISORS

_____, County
_____, Supervisor, District I
_____, Supervisor, District II
_____, Supervisor, District III
_____, Supervisor, District IV
_____, Supervisor, District V

Prepared by: _____, County Engineer


STATE OF MISSISSIPPI
COUNTY OF MADISON

This is to certify that the foregoing is a true and correct copy of an order passed by the Board of Supervisors of MADISON County, Mississippi, entered into the minutes of the said Board of Supervisors, Minute Book No. _____, Page No. _____, same having been adopted at a meeting of said Board of Supervisors on the _____ day of _____, _____.

Clerk of Board of Supervisors of
MADISON County, Mississippi

**OFFICE OF STATE AID ROAD CONSTRUCTION
MISSISSIPPI DEPARTMENT OF TRANSPORTATION
JACKSON, MISSISSIPPI**

DATA TO BE SUBMITTED WITH ALL PROJECT PROGRAMS

Project Number LSBP-45(22) County MADISON Date 04/26/2019

Road Connections at each End of Project
 NORTH End, Surf. Type GRAVEL Surf. Width 18' AVG Rdwy. Width 18' AVG
 (South or West) SOUTH End, Surf. Type GRAVEL Surf. Width 18' AVG Rdwy. Width 18' AVG
 (North or East)

Railroad Grade Crossing Data
 Is there an existing Railroad Grade Crossing? Yes No

Name of Railroad _____

Existing Protection _____

Proposed Protection _____

Existing and/or Proposed Facilities Effecting Route:

SCHOOLS: YES NO ON ROUTE OFF ROUTE
 INDUSTRY: YES NO ON ROUTE OFF ROUTE

TYPE OF INDUSTRY: _____

OTHER DESIGN CONSIDERATIONS: _____

UTILITY COMPANIES TO BE AFFECTED BY PROJECT:

NAME	STREET OR P.O. BOX ADDRESS	CITY

Signed _____
 County Engineer

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SETTING FORTH PROPOSED STATE AID PROJECTS FOR
PERIOD JANUARY, 2016 **THROUGH** DECEMBER, 2019

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8. The State Aid Engineer is authorized to effect such transfer of funds as are necessary to pay engineering costs on the project(s), as authorized by Mississippi Code 1972, Section 65-9-15, and in accordance with the Rules and Regulations promulgated by the State Aid Engineer, dated July 1, 2005.
9. The State Aid Engineer is authorized to effect such transfer of funds as are necessary to pay testing expenses incurred PRIOR to the award of Contract on any project(s) included in this program. In the event the Board cancels or withdraws any project(s) included in this program, the Board hereby agrees to reimburse its State Aid Fund for testing charges incurred.

PROJECT PRIORITY NO. _____

1. Project No. LSBP-45 (21)
2. Name of Road: Hart Road
3. Design Classification: (check one) Rural Urban _____ (check one) Collector _____ Local
4. Federal Route Number _____
4. Termini of Project: 12' FROM SOUTH ABUTMENT TO 12' FROM NORTH ABUTMENT ON HART ROAD LOCATED IN SECTION 34, T9N, R3E on Structure #81

5. Length of Project: 0.015 Miles
6. Character of Work (Show Alternates if Applicable) BRIDGE REPLACEMENT

7. Design Data:
 - a. Traffic Count: How Determined 2019 BRIDGE INSPECTION REPORT
 Current ADT 110 VPD; Design Year ADT _____ VPD; %Trucks _____
 Traffic Count Required: Yes _____ No (Attach Supplemental Sheet)
 - b. Terrain Level Rolling _____ Design Speed 45 MPH
 - c. ROW: Existing VARIES Ft.; Proposed VARIES Ft.
 - d. Proposed Roadway Crown Width 21 AVG Ft.
 - e. Surface Type & Width: Existing ASPHALT _____ 21 AVG Ft.
 Proposed TEMP GRAVEL _____ 21 AVG Ft.

8. Bridges:
 - a. Str. No. SA4500000000081 Suff. Rtg. 39.8 Capacity POSTED 7.9
 Remain in Place: Yes _____ No Existing/Proposed Width 27.0 Ft.
 - b. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.
 - c. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.
 - d. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.
 - e. Str. No. _____ Suff. Rtg. _____ Capacity _____
 Remain in Place: Yes _____ No _____ Existing/Proposed Width _____ Ft.

9. Estimated Construction Cost of Project (Including Contingencies) \$ 310,700.00

a.	STP Funds Requested	(%)	\$ _____	
b.	BR Funds Requested	(%)	\$ _____	
c.	SA Funds Requested	(%)	\$ _____	
d.	LSBP Funds	(%)	\$ <u>74,500.00</u>	
e.	_____ Funds		\$ <u>236,200.00</u>	

Engineering Cost (12 %) (Constr. Cost Less Contingencies) \$			<u>35,500.00</u>
a.	State Aid Funds Requested	\$ _____	
b.	County Funds Contributed	\$ _____	
c.	LSBP Funds Contributed	\$ <u>35,500.00</u>	
d.	_____ Funds Contributed	\$ _____	

Total Estimated Cost of Project \$ 346,400.00

Construction will be by: Contract County Forces _____

Use Supplemental Sheet and/or maps if needed to provide complete data.

FOR STATE AID USE ONLY:	Preliminary Review _____	Date _____
	Recommend Approval _____	Dist. Engr. _____
	Approved _____	State Aid Engr. _____
	Letter To Bd. _____	Dist. Engr. _____
	Funds Record _____	Auditor _____
	Programmed _____	Date _____

BRIDGE REPLACEMENT _____ Program for _____ MADISON _____ County

BOARD OF SUPERVISORS

_____, County
_____, Supervisor, District I
_____, Supervisor, District II
_____, Supervisor, District III
_____, Supervisor, District IV
_____, Supervisor, District V

Prepared by: _____, County Engineer

STATE OF MISSISSIPPI
COUNTY OF _____ MADISON _____

This is to certify that the foregoing is a true and correct copy of an order passed by the Board of Supervisors of _____ MADISON _____ County, Mississippi, entered into the minutes of the said Board of Supervisors, Minute Book No. _____, Page No. _____, same having been adopted at a meeting of said Board of Supervisors on the _____ day of _____, _____.

Clerk of Board of Supervisors of
_____ MADISON _____ County, Mississippi

**OFFICE OF STATE AID ROAD CONSTRUCTION
MISSISSIPPI DEPARTMENT OF TRANSPORTATION
JACKSON, MISSISSIPPI**

DATA TO BE SUBMITTED WITH ALL PROJECT PROGRAMS

Project Number LSBP-45(21) County MADISON Date 04/26/2019

Road Connections at each End of Project
 SOUTH End, Surf. Type ASPHALT Surf. Width 20' AVG Rdwy. Width 20' AVG
 (South or West)
 NORTH End, Surf. Type ASPHALT Surf. Width 20' AVG Rdwy. Width 20' AVG
 (North or East)

Railroad Grade Crossing Data
 Is there an existing Railroad Grade Crossing? Yes No

Name of Railroad _____

Existing Protection _____

Proposed Protection _____

Existing and/or Proposed Facilities Effecting Route:


SCHOOLS: YES NO ON ROUTE OFF ROUTE
 INDUSTRY: YES NO ON ROUTE OFF ROUTE

TYPE OF INDUSTRY: _____

OTHER DESIGN CONSIDERATIONS: _____

UTILITY COMPANIES TO BE AFFECTED BY PROJECT:

NAME	STREET OR P.O. BOX ADDRESS	CITY

Signed  County Engineer