

BOARD OF SUPERVISORS

MADISON COUNTY, MISSISSIPPI

Department of Engineering
Tim Bryan, P.E., PTOE, County Engineer

3137 South Liberty Street, Canton, MS 39046
Office (601) 855-5582 FAX (601) 859-5857

MEMORANDUM

April 2, 2025

To: Casey Brannon, Supervisor, District I
Trey Baxter, Supervisor, District II
Gerald Steen, Supervisor, District III
Karl Banks, Supervisor, District IV
Paul Griffin, Supervisor, District V

From: Tim Bryan, P.E., PTOE
County Engineer

Re: State Aid Project Program Request for Mount Pilgrim Road
Bridge Replacement

The Engineering Department requests authorization to program State Aid Bridge Project #45-(01) located on Mount Pilgrim Road and for each Board member to be authorized to sign the attached Board Order.

CASEY BRANNON
District One

TREY BAXTER
District Two

GERALD STEEN
District Three

KARL M. BANKS
District Four

PAUL GRIFFIN
District Five

Program Instructions

- For “Single Site” projects, only complete Page 1 of 3, Page 2 of 3, and Page 3 of 3.
- Select the specification year used
- The following new fields have been added:
 - Location
 - Mississippi House Legislative District
 - Mississippi Senate Legislative District
- Shoulder Width
 - Accumulative feet from both sides
- Should type
 - Circle “Paved” or “Unpaved”

- For “Mutli-Site Projects”, an additional sheet shall be completed for each site.
 - The design critieria and project scope can be added on the additional blank sheets provided.
 - An additional sheet with blank fields for the page number is provided. See the bottom of the sheet.

**ORDER OF BOARD OF SUPERVISORS _____ COUNTY,
SETTING FORTH PROPOSED STATE AID PROJECTS FOR
PERIOD _____, _____ THROUGH _____, _____**

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 _____ County, hereby order that the proposed project(s) listed herein constitute the State Aid Program for _____ County for the period _____, _____ through _____, _____.

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 _____ as its right-of-way acquisition agent for the project(s) herein. The agent's address and phone number is _____.
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.

Program for _____ County _____ Districts _____

PROJECT PRIORITY NO. _____

1. **Project No** _____
2. **Road Name** _____
3. **Design Classification** Rural _____ Urban _____ Collector _____ Local _____
- Federal Route No** _____
4. **Project Termini** _____
5. **Project Length** _____ miles
6. **Character of Work** _____

7. Design Data

- a. Traffic Count (How Determined)

Current ADT _____	VPD _____	Design Year ADT _____	VPD _____	Truck % _____
Traffic Count Required _____	Yes _____	No _____		
Terrain Level _____	Level _____	Rolling _____	Design Speed _____	MPH _____
ROW Existing _____	Ft _____	Proposed _____	Ft _____	
Proposed Roadway Crown Width _____			Ft _____	Shoulder Width (Both sides) <u>5</u> ft
Surface Type & Width Existing _____			Ft _____	Shoulder Type (circle one)
Proposed _____			Ft _____	Paved or <u>Unpaved</u>

8. Bridges

- a. Structure No(s) _____ **Remain in Place**

9. Location

- a. Mississippi House Legislative District _____
- b. Mississippi Senate Legislative District _____

10. Project Estimated Construction Cost

including Contingencies

- | | | | |
|---------------|---------------------------|---------|----------|
| | a. SAP Funds Requested | _____ % | \$ _____ |
| | b. SABP Funds Requested | _____ % | \$ _____ |
| | c. LSBP Funds Requested | _____ % | \$ _____ |
| Type Funds | d. County Funds Requested | _____ % | \$ _____ |
| Contributed → | e. _____ | _____ % | \$ _____ |

Engineering Cost

% Construction Cost Less Contingencies \$ _____

- | | | | |
|---------------|---------------------------|---------|----------|
| | a. SAP Funds Requested | _____ % | \$ _____ |
| | b. SABP Funds Requested | _____ % | \$ _____ |
| | c. LSBP Funds Requested | _____ % | \$ _____ |
| Type Funds | d. County Funds Requested | _____ % | \$ _____ |
| Contributed → | e. _____ | _____ % | \$ _____ |

Total Estimate Cost of Project \$ _____

Construction will be by: _____ Contract _____ County Forces _____

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

Is there an existing Railroad Grade Crossing Yes _____ No _____

FOR STATE AID USE

Review Type

Date

ONLY:

- | | | | |
|----------------------|-------|--------------------|-------|
| Preliminary Review | _____ | | _____ |
| Recommended Approval | _____ | District Engineer | _____ |
| Approved | _____ | State Aid Engineer | _____ |
| Funds Record | _____ | Auditor | _____ |
| Letter to Board | _____ | District Engineer | _____ |
| Programmed | _____ | | _____ |

_____ Program for _____ County _____ Districts

PROJECT PRIORITY NO. _____

1. **Site Name** _____
 2. **Site Road Name** _____
 3. **Design Classification** Rural Urban Collector Local
Federal Route No _____
 4. **Site Termini** _____
-
5. **Site Length** _____ miles
 6. **Site Character of Work** _____

7. Site Design Data

- a. Traffic Count (How Determined)

Current ADT	_____	VPD	_____	Design Year ADT	_____	VPD	_____	Truck %	_____
Traffic Count Required	_____	Yes	_____	No	_____				
Terrain Level	_____	Level	_____	Rolling	_____	Design Speed	_____	MPH	_____
ROW	Existing	_____	Ft	Proposed	_____	Ft	_____	Shoulder Width	_____
Proposed Roadway Crown Width	_____	_____	_____	_____	_____	Ft	_____	(Both sides)	_____ ft
Surface Type & Width	Existing	_____	_____	Proposed	_____	Ft	_____	Shoulder Type (circle one)	_____
								Paved or Unpaved	

8. Bridges

- | | | | |
|----|--------------|-------|------------------------|
| a. | Structure No | _____ | Remain in Place |
| b. | Structure No | _____ | Remain in Place |
| c. | Structure No | _____ | Remain in Place |
| d. | Structure No | _____ | Remain in Place |
| e. | Structure No | _____ | Remain in Place |

9. Location

- a. Mississippi House Legislative District _____
- b. Mississippi Senate Legislative District _____

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

Is there an existing Railroad Grade Crossing? Yes No

Program for

County

BOARD OF SUPERVISORS

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

Prepared by _____, County Engineer
and Signed: _____

STATE OF MISSISSIPPI

COUNTY OF _____

This is to certify that the foregoing is a true and correct copy of an order passed by the Board of Supervisors of _____ 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
_____ County, Mississippi

Program for _____

County _____

BOARD OF SUPERVISORS

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

Prepared by _____, County Engineer
and Signed: _____

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Clerk of Board of Supervisors of
_____ County, Mississippi