

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

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MEMORANDUM

May 5, 2026

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: Request to Program State Aid Bridge Replacement Project SABP-45(02)
Replacement of Posted Bridge SA 45-140 on Camden Road

The Engineering Department requests the Board authorize the programming of State Aid Project No. SABP-45(02) to replace the load posted bridge SA 45-140 on Camden Road using money from the county's allotment of State Aid Bridge Program (SABP) funds and that each approving member sign the attached OSARC Program Form.

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
 - Surface Type & Width Existing _____ Ft Proposed _____ Ft
- Shoulder Width (Both sides) 2 ft
Shoulder Type (circle one) Paved or Unpaved

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	_____ %	\$	_____
d.	County Funds Requested	_____ %	\$	_____
Type Funds Contributed → e.	_____	_____ %	\$	_____

Engineering Cost % Construction Cost Less Contingencies \$ _____

a.	SAP Funds Requested	_____ %	\$	_____
b.	SABP Funds Requested	_____ %	\$	_____
c.	LSBP Funds Requested	_____ %	\$	_____
d.	County Funds Requested	_____ %	\$	_____
Type Funds 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

ONLY:

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

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