**FOUNDATION REVIEW, LRFD**

Spread Footing

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TO:

Director, Geotechnical Engineering Division

FROM:

Route:

Structure No.:

Des. No.:

Construction Project No.:

Over:

It is recommended that the following foundations be used for the structure identified above.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Support | No. 1 | No. 2 | No. 3 | No. 4 |
| Minimum Width of Foundations (ft) |  |  |  |  |
| Factored Design Load, *QF* (kip) |  |  |  |  |
| Factored Bearing Resistance, qR (ksf) |  |  |  |  |
| Nominal Bearing Resistance, *qn*(ksf) |  |  |  |  |
| Permanent Net Axial Force, Pp (kip) |  |  |  |  |
| Calculated Settlement (inches) |  |  |  |  |
| Bottom of Footing Elevation |  |  |  |  |
| Top of Footing Elevation |  |  |  |  |

Permanent Net Axial Force shall be determined using the Service I load combination without transient loads.

Other:

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

(Signed) Geotechnical Engineer

Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

(Signed) Reviewer,  INDOT Consultant,

Reviewed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

(Signed) INDOT Geotechnical Division