

FOUNDATION REVIEW, LFD

Date:

TO:

Geotechnical Services Office Manager

FROM:

, Designer

[INDOT location]

[consultant]

Route:

Des. No.:

Structure No.:

Over:

Construction Project No.:

It is recommended that the following foundation(s) be used for the structure identified above.

Support	No. 1	No. 2	No. 3	No. 4
Type				
Size				
Design Load (kip)				
Ultimate Load (kip)				
Min. Pile Tip Elev. for Scour				
Pile Tips	Yes <input type="checkbox"/> No <input type="checkbox"/>			
Bottom of Footing Elevation				
Top of Footing Elevation				

The structure is on piles, so the Summary of Pile Loading for Geotechnical Testing is completed, as shown below. Yes No n/a

SUMMARY OF PILE LOADING FOR GEOTECHNICAL TESTING

Support	No. 1	No. 2	No. 3	No. 4
Allowable Design Load (kip)				
Load Factor				
Factored Design Load (kip)				
Scour Zone Friction				
Down Drag Friction				
Ultimate Load, Bearing (kip)				
Testing Method	Standard Specifications Section 701.05()			

The MSE-wall applied pressure shown on the wall envelope is less than the allowable bearing pressure. Yes No n/a

Other:

Approved by: _____
(signed) Geotechnical Engineer

Date:

Reviewed by: _____
(signed) Reviewer, INDOT Consultant,

Date:

Reviewed by: _____
(signed) Director, Bridge

Date: