

Nebraska Department of Roads

Fracture Critical Inspection Report

Identification of All Fracture Critical Members/Details

Span _____ of _____

Structure No.: _____

Name of Individual Preparing this Form:	Feature Intersected (<i>Stream/Highway/Railroad</i>):
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Facility Carried:	Traffic Safety Control Requirements:
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Site Conditions - Potential Dangers, Protected Wildlife, and Any Other Special Considerations:

Current Posting: Type 3 _____ Type 3S2 _____ Type 3-3 _____ Not Posted: _____

LOCATION OF FRACTURE CRITICAL ELEMENT(S)
(T = TENSION, C = COMPRESSION)

[SKETCH / PHOTO / PLAN SHEET] - Figure No. _____