Nebraska Department of Roads

Special Inspection – Bridge Report

Structure No.:	Special Inspection Requested By: *(Print Name)*	Date Report Submitted:	Date of Last Routine Inspection:

General Location of Defect: ☐ Deck ☐ Superstructure ☐ Substructure ☐ Piles ☐ Other _____

Specific Location of Defect or Condition:

Description of the condition or defect to be inspected and the purpose of the inspection: *(Attach photos)*

Requested Date of 1st Special Inspection:	Special Inspection Interval: *(Days)*	☐ 30 ☐ 60 ☐ 90 ☐ 120 ☐ Other _____
	Special Inspection Term: *(Months)*	☐ 3 ☐ 6 ☐ 12 ☐ 24 ☐ Other _____

Date of Inspection	**Inspector ID**	**Inspection Comments** *(Describe any changes observed in the condition or defect and attach photos.)*

Reason for Termination of Special Inspections:

Termination of Special Inspections Approved By: *(Print Name)*	Date of Termination:
	Special Instructions: