

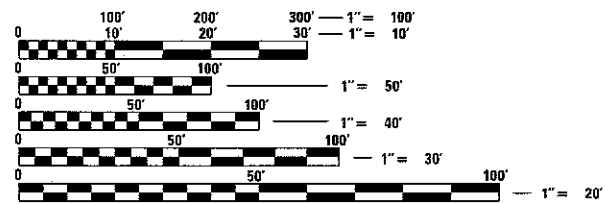
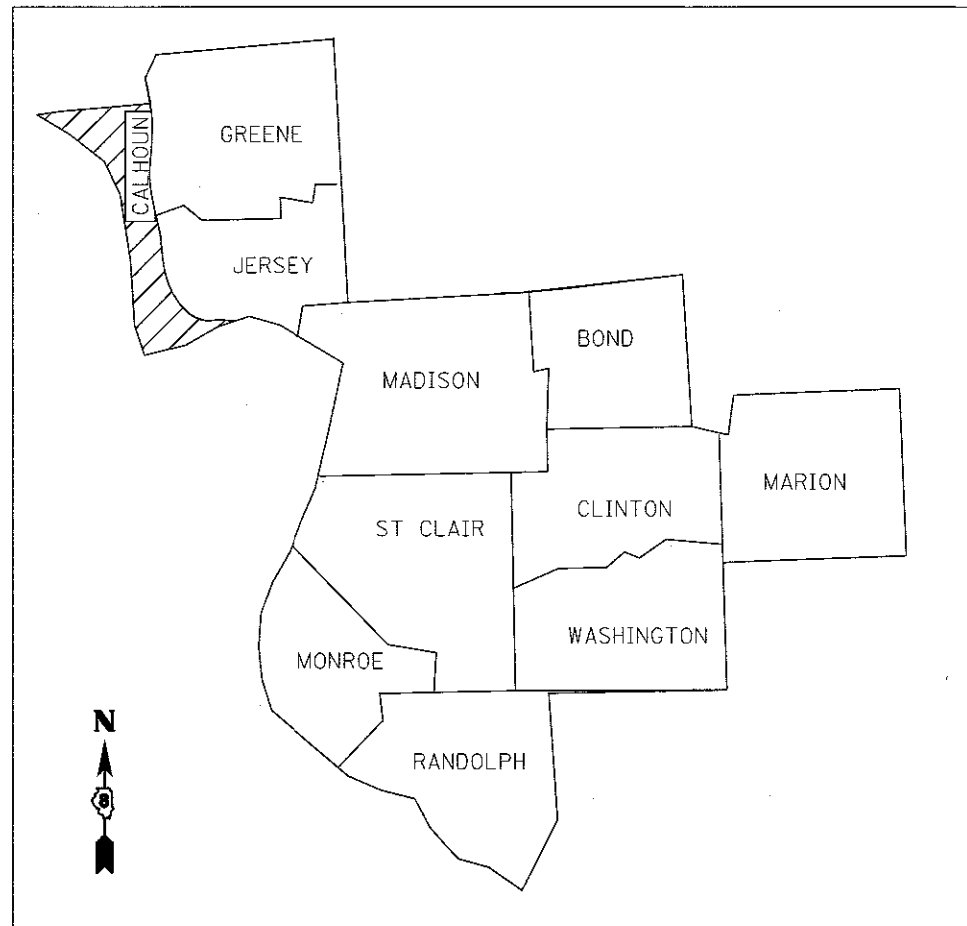
**STATE OF ILLINOIS**  
**DEPARTMENT OF TRANSPORTATION**  
**DIVISION OF HIGHWAYS**  
**PROPOSED**  
**HIGHWAY PLANS**

F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.
304	266BR-1-1-2	CALHOUN	3	1
ILLINOIS CONTRACT NO. 76K59				

- INDEX OF SHEETS**
- 1 COVER SHEET
  - 2 GENERAL NOTES AND TYPICAL WORK ORDER FORMS
  - 3 SUMMARY OF QUANTITIES

**FAP 304 (IL 161L 100)**  
**SECTION 266BR-1-1-2**  
**REPAIR & MAINTENANCE OF**  
**ELECTRICAL EQUIPMENT ON**  
**THE JOE PAGE BRIDGE**  
**CALHOUN COUNTY**

C-98-052-17



FULL SIZE PLANS HAVE BEEN PREPARED USING STANDARD ENGINEERING SCALES. REDUCED SIZED PLANS WILL NOT CONFORM TO STANDARD SCALES. IN MAKING MEASUREMENTS ON REDUCED PLANS, THE ABOVE SCALES MAY BE USED.

J.U.L.I.E.  
 JOINT UTILITY LOCATION INFORMATION FOR EXCAVATION  
 1-800-892-0123  
 OR 811

**PROJECT ENGINEER: HERVE GELIN (618) 346-3179**  
**PROJECT MANAGER: TIM KRUMM (618) 346-3258**  
**SQUAD LEADER: MICHAEL PRESTON (618) 346-3143**  
**CONTRACT NO. 76K59**

NOTE: WORK WILL BE LOCATED WITHIN HIGHLIGHTED AREA NOTED ABOVE WITHIN DISTRICT & REGION 5.

STATE OF ILLINOIS  
 DEPARTMENT OF TRANSPORTATION

SUBMITTED *June 21, 2017*

*Jeffrey L. K...*  
 REGIONAL ENGINEER

*August 18, 2017*  
*Harleen M. Addis*  
 ENGINEER OF DESIGN AND ENVIRONMENT

*August 18, 2017*  
 DIRECTOR OF PROGRAM DEVELOPMENT

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 OF THE STATE OF ILLINOIS**

GENERAL NOTES

1. THE LOCATIONS OF THE REPAIR AREAS SHALL BE DETERMINED BY THE ENGINEER/DEPARTMENT.
2. NO MATERIAL SHALL BE LEFT ON OR NEAR THE ROADWAY DURING NON-WORKING HOURS.
3. ILLINOIS STATE LAW REQUIRES A 48-HOUR NOTICE TO BE GIVEN TO UTILITIES BEFORE DIGGING. FIELD MARKING OF FACILITIES MAY BE OBTAINED BY CONTACTING J.U.L.I.E. (1-800 892-0123 OR 811) OR FOR NON-MEMBERS, THE UTILITY COMPANY DIRECTLY.
4. ANY WORK ORDER MAY BE CANCELLED AT THE ENGINEER'S/DEPARTMENT'S DISCRETION.



**Electrical Maintenance Work Order**

				Work Order Number			
Contractor		Date Issued					
City/County		Date Completed					
Location		Date Submitted for Payment					
<b>Work to be Performed:</b>							
<b>Special Instructions:</b>							
Is work to be performed as a result of an accident? <input type="checkbox"/> Yes <input type="checkbox"/> No							
<b>Accident reference number:</b>							
<b>Work Authorized By</b>		<b>Date</b>	<b>Work Inspected By</b>		<b>Date</b>	<b>Payment Authorized By</b>	<b>Date</b>
<b>Labor</b>							
Worker Classification	Number of Workers	Hours Worked	Quantity				
<b>Equipment Used</b>			<b>Material Used</b>				
Description (Model, Year, Capacity, etc.)	Number of Hours	Description	Quantity				

Contractor's Field Supervisor \_\_\_\_\_

76K59 Electrical Maintenance Work Order

FILE NAME =	USER NAME = prestonm	DESIGNED -	REVISED -	<b>STATE OF ILLINOIS DEPARTMENT OF TRANSPORTATION</b>	<b>GENERAL NOTES TYPICAL WORK ORDER FORM</b>	F.A.P. RTE.	SECTION	COUNTY	TOTAL SHEETS	SHEET NO.	
						304	266BR-1-1-2	CALHOUN	3	2	
						CONTRACT NO. 76K59					
						ILLINOIS FED. AID PROJECT					
				SCALE:	SHEET	OF	SHEETS	STA.	TO	STA.	

