

**TTF BRIDGE PROGRAM CERTIFICATION CHECKLIST – Bipartisan Infrastructure Law (BIL)**

Project Name: \_\_\_\_\_

Project Number: \_\_\_\_\_

Structure No. (Item 8): \_\_\_\_\_

NTTFI Route Information: \_\_\_\_\_ BIA Region: \_\_\_\_\_

Agency: \_\_\_\_\_

Tribal Nation: \_\_\_\_\_

County: \_\_\_\_\_ State: \_\_\_\_\_

Project Location:

General Description of the Work:

Ownership: BIA (Yes/No): \_\_\_\_\_ If non-BIA owned, provide the following:

Name of Owner: \_\_\_\_\_

Point of Contact: Name and Phone Number \_\_\_\_\_

Bridge Condition (Good/Fair/Poor): \_\_\_\_\_

*Note: Attach NBI Data Information for bridge (<https://infobridge.fhwa.dot.gov/>)*

Type of Construction (Rehabilitation/Replacement/New Construction): \_\_\_\_\_

Do School Buses use this bridge (Yes/No)? \_\_\_\_\_

Safety issues involved with this project?

Does the bridge project have Right-of-Way (Yes/No)? \_\_\_\_\_ If Yes, date obtained: \_\_\_\_\_

NEPA Compliance, Date: \_\_\_\_\_ PS&E Approval, Date: \_\_\_\_\_

Amount of Funding Request: \$ \_\_\_\_\_

Remarks:

*We certify that the bridge project information is accurate and complete.*

Tribal Transportation Director (sign & date): \_\_\_\_\_

Print Name: \_\_\_\_\_