

Program Instructions

- For “Single Site” projects, only complete Page 1 of 3, Page 2 of 3, and Page 3 of 3.
- Select the specification year used
- The following new fields have been added:
 - Location
 - Mississippi House Legislative District
 - Mississippi Senate Legislative District
- Shoulder Width
 - Accumulative feet from both sides
- Should type
 - Circle “Paved” or “Unpaved”

- For “Mutli-Site Projects”, an additional sheet shall be completed for each site.
 - The design critieria and project scope can be added on the additional blank sheets provided.
 - An additional sheet with blank fields for the page number is provided. See the bottom of the sheet.

**ORDER OF BOARD OF SUPERVISORS _____ COUNTY,
SETTING FORTH PROPOSED STATE AID PROJECTS FOR
PERIOD _____, _____ THROUGH _____, _____**

Pursuant to the provisions of Senate Bill No. 1 of the Extraordinary Session of 1949 and as subsequently amended, herein after referred to as said Act, We, the undersigned members of the Board of Supervisors of _____ County, hereby order that the proposed project(s) listed herein constitute the State Aid Program for _____ County for the period _____, _____ through _____, _____.

In support of this order, the Board certifies and agrees that:

1. The State Aid System in said County has been designated by the Board and approved by the State Aid Engineer, as required by said Act.
2. The Board has employed a Registered Professional Engineer as County Engineer, who will employ such other competent technical assistant(s), as required, to properly supervise and inspect the work in compliance with the Rules and Regulations of the State Aid Engineer, all as required in said Act.
3. This program, which has been prepared by the County Engineer and approved by this Board, is herewith submitted to the State Aid Engineer for approval.
4. The Board will comply with all applicable Laws, Rules and Regulations in the acquisition of rights-of-way and will maintain the acquired rights-of-way for said project(s) to keep the same free of encroachments such as buildings, fences or any other obstructions. The Board designates _____ as its right-of-way acquisition agent for the project(s) herein. The agent's address and phone number is _____.
5. Counties receiving \$500,000 or more in Federal funds from all projects constructed or being constructed in a Federal Fiscal Year (October 1 - September 30), must have a single audit conducted in accordance with OMB circular A-133.
6. The Board herein affirms its acceptance of the Office of State Aid Road Construction's policy for the accommodation of utilities as stated in S.O.P. No. SA II-2-8 and agrees to coordinate utility facility installation and/or adjustment in a timely manner so as not to impede project development.
7. The Board will maintain the project(s), after completion, in a regular and satisfactory manner subject to the approval of the State Aid Engineer, all as required in said Act.
8. The State Aid Engineer is authorized to effect such transfer of funds as are necessary to pay engineering costs on the project(s), as authorized by Mississippi Code 1972, Section 65-9-15, and in accordance with the Rules and Regulations promulgated by the State Aid Engineer, dated July 1, 2005.
9. The State Aid Engineer is authorized to effect such transfer of funds as are necessary to pay testing expenses incurred PRIOR to the award of Contract on any project(s) included in this program. In the event the Board cancels or withdraws any project(s) included in this program, the Board hereby agrees to reimburse its State Aid Fund for testing charges incurred.

_____ Program for _____ County _____ Districts

PROJECT PRIORITY NO. _____

1. **Project No** _____
 2. **Road Name** _____
 3. **Design Classification** Rural _____ Urban _____ Collector _____ Local _____
 - Federal Route No** _____
 4. **Project Termini** _____
-
5. **Project Length** _____ miles
 6. **Character of Work** _____

7. Design Data

- a. **Traffic Count (How Determined)**

Current ADT _____	VPD _____	Design Year ADT _____	VPD _____	Truck % _____
Traffic Count Required _____	Yes _____	No _____		
Terrain Level _____	Level _____	Rolling _____	Design Speed _____	MPH _____
ROW _____	Existing _____	Ft _____	Proposed _____	Ft _____
Proposed Roadway Crown Width _____				Ft _____
Surface Type & Width _____	Existing _____			Ft _____
	Proposed _____			Ft _____
- Shoulder Width (Both sides) _____ ft
- Shoulder Type (circle one) Paved or Unpaved

8. Bridges

- a. Structure No(s) _____ **Remain in Place**

9. Location

- a. Mississippi House Legislative District _____
- b. Mississippi Senate Legislative District _____

10. Project Estimated Construction Cost

including Contingencies

- | | | | |
|---------------|---------------------------|---------|----------|
| | a. SAP Funds Requested | _____ % | \$ _____ |
| | b. SABP Funds Requested | _____ % | \$ _____ |
| | c. LSBP Funds Requested | _____ % | \$ _____ |
| Type Funds | d. County Funds Requested | _____ % | \$ _____ |
| Contributed → | e. _____ | _____ % | \$ _____ |

Engineering Cost

% Construction Cost Less Contingencies \$ _____

- | | | | |
|---------------------------------------|---------------------------|---------|----------|
| | a. SAP Funds Requested | _____ % | \$ _____ |
| | b. SABP Funds Requested | _____ % | \$ _____ |
| | c. LSBP Funds Requested | _____ % | \$ _____ |
| Type Funds | d. County Funds Requested | _____ % | \$ _____ |
| Contributed → | e. _____ | _____ % | \$ _____ |
| Total Estimate Cost of Project | | | \$ _____ |

Construction will be by: _____ Contract _____ County Forces _____

Use Supplemental Sheet and/or maps if needed to provide complete data.

Is there an existing Railroad Grade Crossing Yes _____ No _____

FOR STATE AID USE

Review Type

Date

ONLY:

- | | | | |
|----------------------|-------|--------------------|-------|
| Preliminary Review | _____ | | _____ |
| Recommended Approval | _____ | District Engineer | _____ |
| Approved | _____ | State Aid Engineer | _____ |
| Funds Record | _____ | Auditor | _____ |
| Letter to Board | _____ | District Engineer | _____ |
| Programmed | _____ | | _____ |

_____ Program for _____ County _____ Districts

PROJECT PRIORITY NO. _____

1. **Site Name** _____
 2. **Site Road Name** _____
 3. **Design Classification** Rural Urban Collector Local
Federal Route No _____
 4. **Site Termini** _____
-
5. **Site Length** _____ miles
 6. **Site Character of Work** _____

7. Site Design Data

- a. **Traffic Count (How Determined)**

Current ADT _____	VPD _____	Design Year ADT _____	VPD _____	Truck % _____
Traffic Count Required _____	Yes	No		
Terrain Level _____	Level	Rolling	Design Speed _____	MPH
ROW Existing _____	Ft	Proposed _____	Ft	
Proposed Roadway Crown Width _____			Ft	Shoulder Width (Both sides) _____ ft
Surface Type & Width Existing _____			Ft	
Proposed _____			Ft	Shoulder Type (circle one) Paved or Unpaved

8. Bridges

- a. Structure No _____ **Remain in Place**
- b. Structure No _____ **Remain in Place**
- c. Structure No _____ **Remain in Place**
- d. Structure No _____ **Remain in Place**
- e. Structure No _____ **Remain in Place**

9. Location

- a. Mississippi House Legislative District _____
- b. Mississippi Senate Legislative District _____

Use Supplemental Sheet and/or maps if needed to provide complete data.

Is there an existing Railroad Grade Crossing? Yes No

Program for

County

BOARD OF SUPERVISORS

_____, County
_____, Supervisor, District I
_____, Supervisor, District II
_____, Supervisor, District III
_____, Supervisor, District IV
_____, Supervisor, District V

Prepared by _____, County Engineer
and Signed: _____

STATE OF MISSISSIPPI

COUNTY OF _____

This is to certify that the foregoing is a true and correct copy of an order passed by the Board of Supervisors of _____ County, Mississippi, entered into the minutes of the said Board of Supervisors, Minute Book No. _____, Page No. _____, same having been adopted at a meeting of said Board of Supervisors on the ____ day of _____, _____.

Clerk of Board of Supervisors of
_____ County, Mississippi

Program for _____

County _____

BOARD OF SUPERVISORS

_____, County
_____, Supervisor, District I
_____, Supervisor, District II
_____, Supervisor, District III
_____, Supervisor, District IV
_____, Supervisor, District V

Prepared by _____, County Engineer
and Signed: _____

STATE OF MISSISSIPPI

COUNTY OF _____

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Clerk of Board of Supervisors of
_____ County, Mississippi