



Asset ID Request Form

Version 1.0 JAN2026
Page 1 of 1

REQUESTER INORMATION	
Requester Name:	
Email:	
Phone:	
Company (SCDOT if in house):	
Date of Request:	

GENERAL BRIDGE INFORMATION	
SCDOT Project Number (P#):	
District:	County:
Asset ID of Replaced Bridge (B.ID.03):	
**2nd Replaced Bridge (SC.ID.05):	
**If Bridge Replaces Parallel Bridges	

COORDINATES & BRIDGE LOCATION		
LATITUDE:	° (decimal degrees)	BRIDGE LOCATION DESCRIPTION (Municipality, Distance from known Town/Landmark):
LONGITUDE:	° (decimal degrees)	

BRIDGE DETAILS		
Facility (to be) Carried On Bridge:		
Feature(s) Passing Above Bridge:	Feature(s) Passing Below Bridge:	
Bridge Status:	Estimated Date of Bridge Opening to Traffic (MO/YR):	/

ADDITIONAL NOTES / DETAILS

SCDOT RESPONSE (will contact requester for additional info, if needed)

**Upon approval of this request, an asset record will be created and included in the SCDOT inventory. Additional structure details, feature, and highway information will be added by Road Data Services and later verified by the Bridge Inspector and Load Rater during the Initial Inspection of the bridge.