

# QUALIFICATIONS RECORD

## Structure Inspection Program

Wisconsin Department of Transportation  
DT2001 2003 s.84.17 Wis. Stats.

Applicant Name <b>Brian K Schroeder</b>	Area Code - Telephone Number - Home <b>715 835 0645</b>	
Address <b>3433 Oakwood Hills Parkway</b>	Area Code - Telephone Number - Work <b>715 831 7689</b>	
City <b>Eau Claire</b>	State <b>WI</b>	ZIP Code <b>54701</b>
E-Mail Address <b>SchroederB@AyresAssociates.com</b>	Employer <b>Ayres Associates</b>	

Refer to the Wisconsin DOT Structure Inspection Manual for required qualifications. Forward two completed copies of this form to the Statewide Structure Inspection Program Manager via the District Program Manager or directly at 4802 Sheboygan Ave., Room 601, PO Box 7916, Madison, WI 53707-7916. One copy will be returned to you with an assigned number if deemed qualified.

### PART I - REGISTRATION/TRAINING - Complete All Information

Wisconsin Registered Professional Engineer - Yes Reg. No.: 36717 - Emphasis: Structural  
NICET Level III or IV - No Reg. No.: If Yes, Attach Copy of Certificate  
NHI Based 80-Hour Training Course - Yes Date: 4/19/2002 If Yes, Attach Copy of Certificate

Pertinent Inspection Related Training Courses Completed

FHWA-NHI-130053 Bridge Inspection Refresher Training  
FHWA-NHI-130078 Fracture Critical Inspection Techniques for Steel Bridges

Additional Specialized Certifications

American Welding Society Certified Weld Inspector

### APPROVAL: FOR WISDOT PROGRAM MANAGER USE ONLY! DO NOT WRITE BELOW THIS LINE.

☐ Visual Acuity Certificate Attached ☐ Experience Reviewed/Verified  
☐ NHI Based 80-Hour Training Course Certificate Attached ☐ Reference Letter Attached

Qualified As ☐ Program Manager  
☐ Team Leader

Reviewed By _____, Program Manager	Date _____
<input type="checkbox"/> Central Office <input type="checkbox"/> District <input type="checkbox"/> County	
Assigned Number _____	Assigned By _____
Assigned Date _____	Date Copy Returned to Applicant _____

## PART II - EXPERIENCE - Attach Additional Sheets If Needed

Persons other than a P.E. or NICET Level III/IV are required to complete Part II in its entirety. A minimum of 5 years of responsible bridge inspection experience for Team Leaders and 10 years for Program Managers must be shown. P.E.'s and NICET individuals are also requested to complete Part II for informational purposes only. List all relevant experience.

### Bridge Safety Inspection Field Experience

Please state your experience in various types of bridges (i.e., steel girders, concrete girders, trusses, slabs, prestressed girders, culverts, movable bridges, other complex structures, etc.).

Date From	Date To	Describe Bridge Type(s) and Inspection Type(s)	Name & Telephone No. for References	Approx. %*
April 2007	May 2017	Routine, Fracture Critical and Movable inspections of 8 <sup>th</sup> Street Bridge (single leaf bascule) in the City of Sheboygan.	David H. Biebel, City of Sheboygan Director of Public Works, (920) 459-3366	25%
May 2010	May 2016	Routine, Fracture Critical and Movable inspections of Main Street (double leaf bascule) and State Street (single leaf bascule) Bridges in City of Racine.	John Rooney, City of Racine Engineer, (262) 636-9191	17%

\* Percent of year devoted to bridge safety inspection field work.

I, the undersigned, affirm that all statements and data in Parts I and II are true and correct. I understand that any misrepresentation may constitute fraud, and may be punishable to the full extent of the law. Furthermore, I understand that it is my responsibility to stay current on bridge inspection issues, and that I will notify the WisDOT Statewide Program Manager of any name or mailing address changes in writing within 30 days.



(Applicant Signature)

5/31/17

(Date)

Signature of Individual Providing Letter Reference: See attachment A for Format

N/A

(Signature)

(Date)