|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **STIP #-#### \_\_\_\_\_\_\_ County**  COMMUNITY CHARACTERISTICS REPORT | | | | | | |
| **Executive Summary** | | | | | | | |
| Planner, firm: | |  | | Division: | Existing No. of Lanes: | | Existing Median: Yes/No |
| ncdot/local PROJECT MANAGER: | |  | | WBS: | Proposed No. of Lanes: | | Addition of Median(s): Yes/No |
| Document TYPE:  nepa  Sepa | | | PROJECT TYPE:  dIVISION  Central  LOCALLY-ADMIN. Program PROJECT (LAPp) | Existing control of access:  No Control  Partial Control  Limited Control  Full Control | | Proposed control of access:  No Control  Partial Control  Limited Control  Full Control | |
| CS PROJECT reviewer : | |  | |
| project description from stip: | | | | | | | |
| *Community Context* | | | | | | | |
|  | | | | | | | |
| Vicinity Map | | | | | | | |
| Insert a more detailed project description here, including: (1) specifics of each alternative or concept, if known; (2) pedestrian and bicycle facilities that are proposed to be part of the project  Insert a community context narrative here, usually one to two paragraphs | | | | | | | |
| **Notable Characteristics**   * Bulleted item * Bulleted item * etc.   **Potential Project Impacts**   * Bulleted item * Bulleted item * etc.   **Recommendations**   * Bulleted item * Bulleted item * etc.   **Indirect and Cumulative Effects Statement**   * Bulleted item | | | | | | | |

|  |
| --- |
| **Community Context Map** |
| Insert Community Context Map |

|  |
| --- |
| **Demographic Study Area** |
| Insert DSA Map |

|  |  |  |
| --- | --- | --- |
| **Community Characteristics, Impacts & Recommendations** | | |
| *Community Resource* | *Presence* | |
| **recreational resource(s) or activity**  Presence  *Are there any recreational resources, areas, or observed activities in the Direct Community Impact Area? If Federally-funded, are these potential 4(f) resources?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | **YES, SEPA Parks & Recreation**  **YES, NEPA potential 4(f)**; adjacent to/accessed from the project corridor  **YES, NEPA potential 4(f)**; present in DCIA but not adjacent to or accessed from the project corridor  **NO** | |
| Impacts  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | **YES, SEPA Impact**  **YES, potential NEPA impact**  **NO** |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Section 6(f) land & water conservation fund resources**  Presence  *Are there any areas protected under Section 6(f) in the Direct Community Impact Area?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to impact identified Section 6(f) Land & Water Conservation Fund Resources?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Voluntary & enhanced voluntary Agricultural Districts [VAD/EVAD]**  Presence  *Is there a Voluntary Agricultural District or Enhanced Voluntary Agricultural District in the project footprint?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to impact designated Voluntary Agricultural Districts or Enhanced Voluntary Agricultural Districts?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Agricultural resources and activity**  Presence  *Are there any active agricultural operations located in the Direct Community Impact Area? Is there any documented activity related to goods movement in the Direct Community Impact Area (e.g. farm or logging trucks, tractors, or other agricultural equipment)?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to impact identified agricultural operations?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **BICYCLE, Pedestrian, and/or greenway FACILITIES AND ACTIVE Transportation**  Presence  *Are there existing bicycle, pedestrian, greenway or other active transport facilities located in the Direct Community Impact Area? Are there future plans for bicycle, pedestrian, greenway or active transport facilities to be located in the Direct Community Impact Area?*  If "Yes," provide summary inventory of existing facilities and summary inventory of planned future facilities (including timeline and funding status). If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to result in impacts to bicycle, pedestrian, and/or greenway facilities?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **­­­Bicycle/pedestrian Activity**  Presence  *Were bicyclists, pedestrians or worn paths observed in the Direct Community Impact Area?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to result in impacts to bicycle or pedestrian activity?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Transit routes, facilities, and/or Activity**  Presence  *Are transit routes present in the Direct Community Impact Area? Were buses, transit stops or route signs observed on the site visit? Were any riders observed using or known to use these facilities? Were any of these riders special users?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to result in impacts to transit routes, facilities, and/or activity?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Community safety for bicyclists, pedestrians, and transit users**  Presence  *Are there any existing or perceived security or safety issues in the Direct Community Impact Area, including unsafe bicycle or pedestrian facilities, inadequate lighting, and/or isolated or poorly connected areas?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to change any existing or perceived security or safety issues?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Local Area Plans, goals, and development activity**  Presence  *Are there any local area plans, goals, or zoning initiatives specifically affecting the Direct Community Impact Area (e.g. comprehensive plan; corridor or thoroughfare plan; small area plan; long-range growth plan; health impact assessment; etc.)? Has recent development activity occurred in the Direct Community Impact Area and/or are there known plans for public or private development activity in the Direct Community Impact Area?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project consistent or not consistent with existing plans, regulations, and policies at the local, regional, or state level?*  If "Not consistent," or "Parlty consistent," provide narrative description. If "Consistent," delete this gray text form field. | | CONSISTENT  PARTLY CONSISTENT, PARTLY INCONSISTENT  NOT CONSISTENT |
| Recommendation  If "Not consistent," provide narrative description. If "Consistent," delete this gray text form field. | | YES  NO |
| **Driveways and cross streets**  Presence  *Are there any driveways or intersections located along the project corridor?*  If “Yes”, provide summary inventory organized by property access and community connectivity relative to development patterns and land uses. If “No”, delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to result in access or accessibility impacts to driveways and cross streets?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Business and economic resources AND TRANSPORTATION ACTIVITY**  Presence  *Are any specific business and/or economic resources present in the Direct Community Impact Area (e.g. business parks or districts, distribution centers, manufacturing facilities, etc.)? Is there any documented activity related to goods movement in the Direct Community Impact Area (e.g. tractor- trailers, or industrial traffic)?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to result in impacts to business and economic resources?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Emergency management services (EMS) operations**  Presence  *Did the EMS local official note any emergency services operations within the Direct Community Impact Area that may be affected by the project, such as stations or corridors that are primary response routes?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO  NO RESPONSE |
| Impacts  *As checked on Local EMS Input Form*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO  NO RESPONSE |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **School bus routeS**  Presence  *Did the local school transportation official note any school bus routes within the Direct Community Impact Area that may be affected by the project?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO  NO RESPONSE |
| Impacts  *As checked on Local Schools Input Form*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO  NO RESPONSE |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **COMMUNITY resources**  Presence  *Are there any notable community resources located in the Direct Community Impact Area, including places of worship; private and/or public schools; adult education and/or training facilities; daycares; cemeteries; private or public social service agencies; government facilities; other important destinations or resources for local residents?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to impact identified community resources, either directly or by affecting user access?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Community Cohesion**  Presence  *Were any specific signs or indicators of community cohesion observed / found within the Direct Community Impact Area?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to alter the overall functioning of an identifiable district (e.g. interactions between, or isolation of, persons and groups; or change in the physical makeup of the community)? Is the project likely to disrupt connections between neighborhoods and commercial, recreational, institutional and employment facilities and/or areas?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Community HEALTH**  Presence  *Are there any* *notable community health indicators (high numbers or rates of pedestrian and bicyclist crashes, high levels of physical inactivity, or low access to exercise opportunities?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to change any community health indicators?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Area/Community Concerns**  Presence  *Are there any known community concerns or controversy relative to the project? If concerns were voiced during Public Involvement activities, please attach the relevant comment sheets or meeting comment summary in the Appendix.*  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| Impacts  *Is the project likely to be incompatible with or not address community concerns?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **Other impacts**  *Are there any other potential impacts associated with the project?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **recurring effects**  Impacts  *Is the project likely to result in recurring effects on any populations and communities within the Direct Community Impact Area?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |  |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **ENVIRONMENTAL JUSTICE (ej) AND TITLE vi POPULATIONS**  Presence  *Are there any populations living in the Demographic Study Area that meet the criteria for Environmental Justice and/or Title VI? If so, note which groups are present (check all that apply):* *Minority* *Low-Income*  *Title VI (non-EJ)*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No," delete this gray text form field. | **Not present** according to Census data and observation/local input  **Present**; Census data indicates presence but there is no observation/local input to confirm  **Present**; Census data does not indicate presence but communities were observed  **Present** according to Census and communities were observed | |
| Impacts  *Is the project likely to have a disproportionately high and adverse impact, including denial of benefits, on identified Environmental Justice and/or Title VI populations in the Direct Community Impact Area?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No impacts," delete this gray text form field. | **No impacts;** no EJ or Title VI population present  **No impacts;** EJ and/or Title VI population present  **Community Impacts;** no EJ or Title VI population present  **Impacts;** EJ and/or Title VI population present; “No” finding  **Impacts;** EJ and/or Title VI population present; “Yes” finding | |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |
| **LIMITED ENGLISH PROFICIEncy [LEP] or Language Assistance [LA] populations**  Presence  *Are there any populations living in the Demographic Study Area that meet the criteria for Limited English Proficiency? Are there any populations within the Demographic Study Area that do not meet the LEP threshold but do meet the criteria for Language Assistance?*  Check the appropriate condition, provide the associated standard language, and include a narrative description as appropriate. If "No LEP or LA," delete this gray text form field. | **No LEP or LA**  **No LEP, but LA population is present**  **LEP population present**  **[and LA population present]** | |
| Recommendation  If "Yes," provide narrative description. If "No," delete this gray text form field. | | YES  NO |

|  |  |
| --- | --- |
| **Additional Community Characteristics** | |
| **NOTABLE POPULATION GROWTH OR DECLINE**  Presence  *Has the DSA experienced notable population growth or decline in recent years? If the average annualized DSA population growth is higher than 1.5%, note the growth in the county and how it compares.*  *Decline  Greater than 1.5% annual growth (in DSA)*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **stip projects**  Presence  *Are there any reasonably foreseeable STIP projects within 3 miles of this project and/or that have the potential to affect or be affected by this project?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **traffic generating facility or node**  Presence  *Is there a node or facility that generates a notable level of vehicular or pedestrian traffic in the Direct Community Impact Area?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |

|  |  |
| --- | --- |
| **Additional Recommendations** | |
| **evaluate alternative(S) THAT UTILIZE a TEMPORARY on-site detour**  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **evaluate alternative CONSTRUCTION work ScHedULEs**  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **Other Recommendations**  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |

|  |  |
| --- | --- |
| *Indirect and Cumulative Effects [Transportation Impact-Causing Activities (TICAs)]* | |
| **Travel Times**  *Will the project result in travel time savings of more than one minute?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **New Network Connections**  *Will the project permanently add to the existing road network (e.g., new location or new service roads)?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **Property Access**  *Will the project provide new or expanded access to properties?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **Creation of activity centers**  *Will the project open areas for concentrated, moderate to high intensity land development or redevelopment?*  If "Yes," provide narrative description. If "No," delete this gray text form field. | YES  NO |
| **TICA Summary / Indirect and cumulative effects statement**  *Will the project result in one or more transportation impact-causing activities? Will the project require completion of the Indirect Effects Matrix?*  Check the appropriate condition and provide the associated standard language. | **Absence of TICAs**  **Presence of TICAs**  Completion of Matrix:  YES  NO |

Sources

Source 1

Source 2

etc.

Appendix Items

A. Summary of Demographics Used in Tabular Form

B. Site Photographs

C. Local Official Input Forms

D. Health Indicators Table

E. Other Information

**Appendix A: Summary of Demographics Used in Tabular Form**

**PLEASE NOTE:** Please use the tables within the latest Demographic Snapshot Tool (available on Connect), which contain preset formulas, and copy and paste the tables (as Word tables, not as images) into this appendix. Please delete this text and the placeholder tables, and remove red shading from cells, before submitting to Community Studies.

Minority

Copy and paste Minority table from Demographic Snapshot Tool

Race

Copy and paste Race table from Demographic Snapshot Tool

Hispanic or Latino Population

Copy and paste Hispanic or Latino Population table from Demographic Snapshot Tool

Poverty

Copy and paste Poverty table from Demographic Snapshot Tool

Zero-Car Households

Copy and paste Zero-Car Households table from Demographic Snapshot Tool

Limited English Proficiency

Copy and paste Limited English Proficiency table from Demographic Snapshot Tool

Population Change, 2000 to 2010

Copy and paste Population Change table from Demographic Snapshot Tool

**Appendix B: Site Photographs**

|  |  |
| --- | --- |
|  |  |
| **Figure 1**: | **Figure 2**: |
|  |  |
| **Figure 3**: | **Figure 4**: |
|  |  |
| **Figure 5:** | **Figure 6:** |

**Appendix C: Local Official Input Forms**

Complete the tables below to document the results of local official contacts – EMS, planner, schools. If more than one EMS official, planner, or school official is contacted (for example, multiple jurisdictions), then include a table for each.

First Contact Date: Enter the date of the first contact attempt.

Method(s): Check the applicable box(es).

Form returned on: Check this box if the form is returned via email, fax, or snail mail. Include the date.

Interview on: Check this box if you interviewed the contact person by phone or in-person. Include the date.

No response: Check this box if you do not receive a response or are unable to reach the person by the time that you submit the report to Community Studies.

Comments: Examples of comments include date of last contact attempt (only if no response), returned blank or incomplete form.

Attach completed Local Official Input Forms on the Local EMS Input Form, Local Planner Input Form, and Local Schools Input Form pages. If there is no response, insert the text “No response received.”

LOCAL EMS

|  |  |  |
| --- | --- | --- |
| Name:  Title:  Agency:  Phone:  Email: | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | |
| FIRST CONTACT DATE | METHOD(S) | RESULT |
| Click here to enter date. | Email  Phone  In-person | Form returned on (date)  Interview on (date)  No response  Comments: |

LOCAL PLANNER

|  |  |  |
| --- | --- | --- |
| Name:  Title:  Agency:  Phone:  Email: | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | |
| FIRST CONTACT DATE | METHOD(S) | RESULT |
| Click here to enter date. | Email  Phone  In-person | Form returned on (date)  Interview on (date)  No response  Comments: |

LOCAL SCHOOLS

|  |  |  |
| --- | --- | --- |
| Name:  Title:  Agency:  Phone:  Email: | Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text.  Click here to enter text. | |
| FIRST CONTACT DATE | METHOD | RESULT |
| Click here to enter date. | Email  Phone  In-person | Form returned on (date)  Interview on (date)  No response  Comments: |

**Local EMS Input Form**

Insert completed form here

**Local Planner Input Form**

Insert completed form here

**Local Schools Input Form**

Insert completed form here

**Appendix D: Health Indicators Table**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Characteristic** | **Smallest Data Level** | **X-XXXX DSA** | **XXXX County** | **North Carolina** | **Data Source** | **Notes** |
| **Number of Pedestrian or Bicyclist Crashes in DCIA (Ped/Bike)** | *DCIA* | (XX/XX) |  |  | <https://ncdot.maps.arcgis.com/apps/dashboards/78046d11cabd4658a4d45b88c52ab8af> | Click on Downloadable Shapefile of Bike/Ped Crash Locations in lower right of dashboard.  Click on Download.  In ArcGIS, add NCPedBikeCrashes and DCIA shapefiles.  Count the number of crashes within the DCIA from 2007-2022. |
| **Average Pedestrian Crash Rate** | *City* |  | X.XX | 2.10 | <https://ncdot.maps.arcgis.com/apps/dashboards/78046d11cabd4658a4d45b88c52ab8af> | Crashes per 10,000 residents, avg. of 2018-2022 crash totals, ACS 2018-2022 pop |
| **Average Bicyclist Crash Rate** | *City* |  | X.XX | 0.75 | <https://ncdot.maps.arcgis.com/apps/dashboards/78046d11cabd4658a4d45b88c52ab8af> | Crashes per 10,000 residents, avg. of 2018-2022 crash totals, ACS 2018-2022 pop |
| **Physical Inactivity** | *County* |  | XX.X% | 23% | <http://www.countyhealthrankings.org/app/north-carolina/2021/overview> | Percent of adults reporting no leisure-time physical activity, 2021 |
| **Access to exercise opportunities** | *County* |  | XX.X% | 74% | <http://www.countyhealthrankings.org/app/north-carolina/2021/overview> | Percentage of adults who reside in a census block within a half mile of a park or (urban) one mile of a rec. facility or (rural) three miles of a rec. facility, 2021 |

**Appendix E: Other Information**

Examples include public meeting summaries, comments from local officials, and local plan maps.