

SURPLUS RIGHT OF WAY DISPOSAL AND CONTROL OF ACCESS REVIEW COMMITTEE

CHECKLIST

Committee meets second Tuesday of each month – Agenda deadline: 2 weeks prior to meeting.

1. Name and address of requesting party

2. Is requesting party the adjacent property owner? Yes No

3. Name of adjacent property owner(s) (if other than requesting party)

4. Is requested area on a Strategic Highway Corridor? Yes No
(if yes, what facility type?) Freeway Expressway Boulevard Thoroughfare

5. Types of request: Surplus R/W Disposal New Access Break C/A Revision
 Utility Maintenance Gate Temporary Access Break

6. Intended Land Use: _____

7. County: _____ City/Town: _____

8. Route: _____ At/Near: _____

Project Information

9. Project Phase: Planning Design Construction Completed

10. Has R/W claim for the requested area been settled? Yes No

T.I. P. No. _____ Station(s) _____
State Project No. _____ _____
F. A. Project No. _____ _____

11. Has Property History Worksheet been included? Yes No

12. Posted Speed (mph) _____ Average Daily Traffic _____ Year (If available) _____

13. Do you anticipate problems with/or are the following involved?
 Wetlands Sight Distance Traffic Signals Bridges/Culverts

14. Division's Recommendations (counts as a vote) Approved Denied

15. Is municipality involved? Yes No
(If yes, municipality recommendations)

16. Provide aerial and ground view photos of the requested area.

17. Show station(s) and offset(s) for requested area on plan sheet. (Please do not send a partial copy of plan sheet.)