**North Carolina Department of Transportation**

**Division of Highways**

**Transportation Mobility and Safety Division**

**STANDARD PRACTICE [or GUIDELINES]**

**for**

**Name, Title, Subject**

**A. TOPIC OWNER**

Business Unit Name (Unit Head: Name)

**B. PURPOSE**

Provide the purpose of the standard practice/guidelines. What issue is it addressing?

**C. OVERVIEW**

Provide context (background, history, issues, etc.) for the standard practice/guidelines.

***Add, delete, and/or adjust the following Sections and Items as needed. Be sure to re-letter and renumber everything when finished.***

**D. CONSIDERATIONS**

1. Item 1
2. Item 2
3. Item 3
4. Item 4

**E. CRITERIA**

1. Item 1
2. Item 2
3. Item 3
4. Item 4

**F. GUIDELINES**

1. Item 1
2. Item 2
3. Item 3
4. Item 4

**G. REQUIREMENTS**

1. Item 1
2. Item 2
3. Item 3
4. Item 4