

Kerr-Tar RPO Project Submittal Form
Ranking for Prioritization 5.0 - FY 2019-2029
Highway Projects Only for FY 19-29

Project Route /Name/Title: _____

Project Sponsor: _____

Project Type:

Highway (Mobility)

Highway (Safety)

Highway (Modernization)

Highway (Infrastructure Health)

Project Description and Purpose:

(Please describe the project improvement and summarize the need for the project.)

Project From / To Cross Street: _____

Project Length: _____ miles **Speed Limit:** _____ mph

Existing # of Lanes _____ **Recommended # of Lanes** _____

Existing Lane Width _____ ft. **Recommended Lane Width** _____ ft.

(only for Lane Modernization projects)

Existing Shoulder Width _____ ft **Recommended Shoulder Width** _____ ft.

(only for Shoulder Modernization projects)

Pedestrian Improvements: Yes No If Yes, what type: _____

Transit Improvements: Yes No If Yes, what type: _____

Estimated Project Cost: _____ **Expected Construction Year** _____

Is local funding available if needed to complete the project? Yes No

Project Detailed Description and Purpose:

Safety:

Will a safety issue be addressed? Yes No If yes, please describe the safety issue and provide any crash data if available.

Project Plans, Evaluations or Studies:

(Please list any Plans, Evaluations or Studies that include the project or were specifically completed for the project. Please also note if the Plan, Evaluation or Study is available online or must be obtained through the project sponsor.)

Project Priority:

(If submitted more than one project in each category, please note if the project is priority 1, 2, 3, etc.)

Priority _____

Additional Project Information:

(Please provide any additional project information not provided above. For example please list if shapefiles, jpegs., project analysis files, project design files, etc., are available.)

Please provide all information to Ann Stroobant by June 23rd electronically at astroobant@kerrtarco.org or by mail to:

Attn: Ann Stroobant
Kerr-Tar Regional Council of Governments
PO Box 709
Henderson, NC 27536

Submittal Requirements Checklist:

(To be filled out by RPO Staff Only)

<input type="checkbox"/> Included in an adopted CTP	<input type="checkbox"/> Functionally Classified
<input type="checkbox"/> Preliminary Evaluation/ Study Completed	<input type="checkbox"/> Project Sponsorship
<input type="checkbox"/> Local Support	
