

Design Modification Request

Per Roadway Standards: Section 170

Internal	use	only

Case#

Todays date:		
PROJECT INFORMATION		
Project name:		
Nearest address or intersection:		
Functional classification of road:		
Posted speed:		
Applicable roadway standard:		
Description of modification & reason for request:		
Supporting documentation:		
Mitigation for modification: Public Benefit:		
APPLICANT		
Name:		
Day phone: ()		
Email:		
PROPERTY OWNER		
Name:		
Address:		
City: State:	ZIP Code:	
Phone: ()		
Email:		
COUNTY ENGINEERING STAFF USE ONLY		
Effects on modified standards:		
Land use decision issued? ☐ YES ☐ NO	Related to condition of approval? ☐ YES ☐ NO	
Traffic impact and speed study? ☐ YES ☐ NO	Submitted?	
Average Daily Traffic:	Calculated at (N S E W) of cross steet:	
Crash history:		
Staff discussion:		
Decision:	Reviewed by:	
Conditions:		
☐ Type I	☐ Type II	
Geometric design (horizontal, vertical curve design)	Sight distance, clear zone, acccess spacing, number of access	
Alteration of roadway cross section element	points, intersection angle	