

# REQUEST FOR SPOT SAFETY FUNDS

DIVISION _____ COUNTY _____	DATE _____
I.D. NO. _____ PROJECT # _____	FISCAL YEAR _____
DESCRIPTION OF WORK REQUESTED (including route & termini):	
_____	
_____	
_____	
_____	
_____	

ENGINEERING STAFF'S RECOMMENDED IMPROVEMENTS: \_\_\_\_\_

\_\_\_\_\_

INVESTIGATIVE ENGINEER: \_\_\_\_\_

JUSTIFICATION \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AMOUNT REQUESTED \_\_\_\_\_

TOTAL ESTIMATED COST \_\_\_\_\_

Requested by \_\_\_\_\_ Date \_\_\_\_\_

Recommended by \_\_\_\_\_ (Division Engineer)

Recommended by \_\_\_\_\_ (State Traffic Engineer)

Recommended by \_\_\_\_\_ (Safety Oversight Committee)

Action by \_\_\_\_\_ (Secretary of Transportation)

Conditions, if any \_\_\_\_\_

APPROVED AMOUNT \_\_\_\_\_ DATE \_\_\_\_\_

ATTACHMENT: Engineering Data Sheet (provided by traffic engineering)