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| County: |  | | Item No.: |  |
| Federal Project No.: | |  | | |
| Project Description: | | | | |
|  | | | | |
| Roadway Classification:  Urban  Rural | | | | |
| Local  Collector  Arterial  Interstate | | | | |
| ADT (current)       AM Peak Current       PM Peak Current       % Trucks | | | | |
| Project Designation:  Significant  Other: | | | | |
| **Traffic Control Plan Design:** | | | | |
| Taper and Diversion Design Speeds | | | | |
| Minimum Lane Width       Minimum Shoulder Width | | | | |
| Minimum Bridge Width | | | | |
| Minimum Radius       Maximum Grade | | | | |
| Minimum Taper Length       Minimum Intersection Level of Service | | | | |
| Existing Traffic Queue Lengths       Projected Traffic Queue Lengths | | | | |
| Comments: | | | | |
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Item No.

**Discussion:**

|  |  |
| --- | --- |
| **1) Public Information Plan** | |
| a) Prepare with assistance from  KYTC or | |
| b) Identify Trip Generators | f) Railroad Involvement |
| c) Identify Types of Road Users | g) Address Pedestrians, Bikes  Mass Transit |
| d) Public Information Message | h) Address Timing, Frequency, Updates, Effectiveness of Plan |
| e) Public Information Strategies  to be used | 1. Police & Other   Emergency Services |

Item No.

|  |  |
| --- | --- |
| **2) Temporary Traffic Control Plan (For Each Phase of Construction)**  **Phase I** | |
| **Exposure Control Measures** | **Positive Protection Measures** |
| a) Is Road Closure Allowed  Type: | a) Address Drop Off  Protection Criteria |
| b) Detour Conditions | b) Temporary Barrier Requirements |
| c) Working Hour Restrictions | c) Evaluation of Existing Guardrail  Conditions |
| d) Holiday or Special Event  Work Restrictions | d) Address Temporary Drainage |
| e) Evaluation of  Intersection LOS | **Uniformed Law Enforcement**  **Officers** |
| f) Evaluation of Queue Lengths | **Payment for Traffic Control\*** |
| g) Evaluation of User Costs and Incentives/Disincentives | a) Method of Project Bidding |
| h) Address Pedestrians, Bikes,  Mass Transit | b) Special Notes |
| **Work Vehicles and**  **Equipment** | \*Payment for traffic control items shall be in accordance with the Kentucky Department of Highways Standard Specifications for Road and Bridge Construction |
| Comments: | |
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Item No.

|  |  |
| --- | --- |
| **2) Temporary Traffic Control Plan (For Each Phase of Construction)**  **Phase** | |
| **Exposure Control Measures** | **Positive Protection Measures** |
| a) Is Road Closure Allowed  Type: | a) Address Drop Off  Protection Criteria |
| b) Detour Conditions | b) Temporary Barrier Requirements |
| c) Working Hour Restrictions | c) Evaluation of Existing Guardrail  Conditions |
| d) Holiday or Special Event  Work Restrictions | d) Address Temporary Drainage |
| e) Evaluation of  Intersection LOS | **Uniformed Law Enforcement**  **Officers** |
| f) Evaluation of Queue Lengths | **Payment for Traffic Control\*** |
| g) Evaluation of User Costs and Incentives/Disincentives | a) Method of Project Bidding |
| h) Address Pedestrians, Bikes,  Mass Transit | b) Special Notes |
| **Work Vehicles and**  **Equipment** | \*Payment for traffic control items shall be in accordance with the Kentucky Department of Highways Standard Specifications for Road and Bridge Construction |
| Comments: | |
|  | |

Item No.

|  |  |
| --- | --- |
| **2) Temporary Traffic Control Plan (For Each Phase of Construction)**  **Phase** | |
| **Exposure Control Measures** | **Positive Protection Measures** |
| a) Is Road Closure Allowed  Type: | a) Address Drop Off  Protection Criteria |
| b) Detour Conditions | b) Temporary Barrier Requirements |
| c) Working Hour Restrictions | c) Evaluation of Existing Guardrail  Conditions |
| d) Holiday or Special Event  Work Restrictions | d) Address Temporary Drainage |
| e) Evaluation of  Intersection LOS | **Uniformed Law Enforcement**  **Officers** |
| f) Evaluation of Queue Lengths | **Payment for Traffic Control\*** |
| g) Evaluation of User Costs and Incentives/Disincentives | a) Method of Project Bidding |
| h) Address Pedestrians, Bikes,  Mass Transit | b) Special Notes |
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| Comments: | |
|  | |

Item No.

**APPROVAL:**

Project Manager Date

Project Delivery and Preservation Manager Date

Engineering Support Manager Date

FHWA Representative Date

**Revisions to the TMP require review/approval by the signatories.**