

SCHOOL ZONE SPEED LIMIT ENGINEERING AND TRAFFIC STUDY

PLEASE TYPE OR PRINT ALL INFORMATION IN BLUE OR BLACK INK

For the purposes of this study, the following definition applies:

School - a facility for education wherein a resident of this Commonwealth can legally fulfill compulsory school requirements, including kindergarten through grade 12.

A - LOCATION INFORMATION

COUNTY		MUNICIPALITY	
SCHOOL NAME		SCHOOL DISTRICT	
DOES THE SCHOOL PROPERTY ABUT THE HIGHWAY? IF YES, INDICATE STREET NAME AND ROUTE NUMBER BELOW. <input type="checkbox"/> YES <input type="checkbox"/> NO			
SR#	SEGMENT	STREET NAME	
SEGMENT/OFFSET	TO SEGMENT/OFFSET	<input type="checkbox"/> ASCENDING <input type="checkbox"/> DESCENDING <input type="checkbox"/> BOTH	

B - REFERENCE INFORMATION

REFERENCE Chapter 212	SECTION(S) 212.501
REFERENCE MUTCD	SECTION(S) 7B.11 and 7B.12
REFERENCE PUB 46	SECTION(S) Chapter 2.4.6.1, 2.4.6.3 and 7.2
REFERENCE Vehicle Code Title 75 Pa. C.S.	SECTION(S) §3365(b) and 6109(a)(10)

C - STUDY ELEMENTS

FROM PUB 212 APPENDIX:

- Arrival and Departure Hours of Students (5) School Route Plan (15)
 Geometric Review (8) Other _____
 Pedestrian Volumes (12) _____

D - ATTACHMENTS LISTING

Check those that apply and attach to this form in the order listed below:

- | | | |
|---|--|---|
| <input type="checkbox"/> 1. 10-Day Response Letter | <input type="checkbox"/> 7. Crash Extract | <input type="checkbox"/> 13. Traffic/Pedestrian Volumes |
| <input type="checkbox"/> 2. Letter or Memo Requesting Study | <input type="checkbox"/> 8. Crash Rate | <input type="checkbox"/> 14. STAMPP Identification Data |
| <input type="checkbox"/> 3. Location Map | <input type="checkbox"/> 9. Collision Diagram Plot | <input type="checkbox"/> 15. Speed Limit |
| <input type="checkbox"/> 4. Straight Line Diagram | <input type="checkbox"/> 10. Speed Study | <input type="checkbox"/> 16. Traffic Signal Permit Plan |
| <input type="checkbox"/> 5. Photographs | <input type="checkbox"/> 11. Warrant Analysis | <input type="checkbox"/> 17. Other _____ |
| <input type="checkbox"/> 6. Field View Drawing or Condition Diagram | <input type="checkbox"/> 12. Multi-Way Stop or Truck Restriction Worksheet | _____ |

Confidential - Traffic Engineering and Safety Study

This document is the property of the Commonwealth of Pennsylvania, Department of Transportation. The data and information contained herein are part of a traffic engineering and safety study. This safety study is only provided to those official agencies or persons who have responsibility in the highway transportation system and may only be used by such agencies or persons for traffic safety related planning or research. The document and information are confidential pursuant to 75 Pa. C.S.3754 and 23 U.S.C. 409 and may not be published, reproduced, released or discussed without the written permission of the Pennsylvania Department of Transportation.

E - SITE OBSERVATION CHECKLIST

Operational Checklist:

1. Do obstructions block a driver's view of pedestrians or approaching vehicles? YES NO N/A
2. Do drivers respond correctly to signals, signs, or other traffic control devices? YES NO N/A
3. Is there evidence of crashes (*skid marks, property damage, tree/bush damage, broken glass/vehicle parts, etc.*)? YES NO N/A
4. Are there violations of parking or other traffic regulations? YES NO N/A
5. Do drivers appear confused about routes, street names, or other guidance information? YES NO N/A
6. Have you observed the location during peak hours for volume, crashes, and traffic operations? YES NO N/A
7. Are there traffic flow deficiencies or traffic conflict patterns associated with turning movements? YES NO N/A
8. Are there significant delays and/or congestion? YES NO N/A
9. Are there vehicle/pedestrians conflicts? YES NO N/A
10. Are there other traffic flow deficiencies or traffic conflict patterns? YES NO N/A

Physical Checklist:

1. Can sight obstructions be removed or lessened? YES NO N/A
2. Do the street alignments or widths adequately accommodate the type of traffic using the roadway? YES NO N/A
3. Are curb radii adequate for turning vehicles? YES NO N/A
4. Are pedestrian crosswalks properly located? YES NO N/A
5. Are signs adequate as to usefulness, message, size, conformity, and placement? YES NO N/A
6. Are traffic signals adequate as to placement, visibility, glare, conformity, number of signal heads, and timing? YES NO N/A
7. Are pavement markings adequate as to their conformance to standards and location? YES NO N/A
8. Is channelization (islands or pavement markings) adequate for reducing conflict areas, separating traffic flows, and defining movements? YES NO N/A
9. Does the existing legal parking layout affect sight distance for through or turning vehicles? YES NO N/A
10. Is the pavement condition free of potholes, washboard, slick surface, etc.? YES NO N/A

F - SITE DATA

DATE DATA COLLECTED	PERSON CONDUCTING STUDY	TITLE
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A. Student Pedestrian Activity:

1. Do students cross the highway? YES NO

If yes, specify times of crossing AM and PM and supply a count of student crossings per 15 minute intervals during crossing periods:

FROM

TO

Morning _____

Noon _____

Afternoon _____

2. Do students walk along the highway on the shoulder? YES NO

If yes, approximately how many? _____

3. Do students walk along the highway on a sidewalk? YES NO

If yes, approximately how many? _____

4. Are there crosswalks on the highway abutting the school property? YES NO

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F - SITE DATA (CONTINUED)

5. Total number of students who ride on school or mini buses _____

6. Total number of students in the above named school _____

_____ Date _____ Signature of Superintendent, Assistant Superintendent, or Principal

G - REMARKS

Blank area for remarks.

H - ENGINEERING JUDGEMENT

Blank area for engineering judgement.

I - APPROVALS

Comments:

Reviewed and Approved by Signature	Name/Title	Date
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