

PEDESTRIAN ACCOMMODATION AT INTERSECTIONS CHECKLIST



pennsylvania

DEPARTMENT OF TRANSPORTATION

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PLEASE TYPE OR PRINT ALL INFORMATION IN BLUE OR BLACK INK

As specified in the MUTCD, Section 4E, an engineering study shall be conducted to determine the need for pedestrian accommodation at signalized intersections and the related design and operational features. Based on the engineering study and engineering judgment, proper documentation shall be made at all new signalized intersections and modifications to existing signalized intersections. This documentation shall be provided with guidance from this checklist.

When pedestrian accommodations will not be provided at an intersection, signalized or not, proper justification must be documented. Below is a checklist of information that may be relevant in the determination of pedestrian needs and warranted accommodations at an intersection. Not all of the information below is required to make a determination. This form can be used to summarize the needs and accommodations of a corridor or a single intersection.

| Intersection Background Information | | | |
|---|--------------------------|--|------------------|
| DATE | DISTRICT | COUNTY | |
| MUNICIPALITY | | INTERSECTION | |
| SUBMITTED BY | | STREET ADDRESS | |
| CITY | STATE | ZIP | TELEPHONE NUMBER |
| Project Overview | | | |
| Provide a Project Description and Scope of the Project. _____ | | | |
| Bike/Ped Checklist Completed. <input type="checkbox"/> Yes <input type="checkbox"/> No _____ | | | |
| Existing Facility Description | | | |
| Yes | No | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are pedestrian facilities present (i.e., sidewalks, curb ramps, crosswalks, pedestrian signals, etc.)? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are there descriptions of each quadrant of the existing intersection (photos are strongly recommended)? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are near-by land uses documented? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are pedestrian facilities near the intersection (i.e., sidewalks, bus stops, trails, etc.)? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there current evidence of pedestrians using the intersection (worn paths, observed activity)? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Were special accommodations made in the past for pedestrians at the intersection? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are restrictions for pedestrians present? (No Ped signs, limited crossings) | |
| <input type="checkbox"/> | <input type="checkbox"/> | Is this a defined walking route or safe route to school route? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are physical restrictions or right-of-way restrictions present? | |
| <input type="checkbox"/> | <input type="checkbox"/> | If pedestrian signals are present, is proper traffic signal timing designated for pedestrians at the intersection? | |
| Proposed Facility Description | | | |
| Yes | No | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Will the proposed improvements generate new or additional pedestrian traffic? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Does the proposed facility introduce possible additional restrictions for pedestrians? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are new or existing pedestrian signals proposed at the intersection? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are sidewalks proposed as part of the project? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are detailed descriptions of changes to each quadrant documented? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Do near-by land uses change as part of the project? | |
| <input type="checkbox"/> | <input type="checkbox"/> | Are additional pedestrian facilities proposed for the intersection? | |
| Outreach Efforts | | | |
| Has contact and discussion concerning pedestrian accommodations at the intersection been made with the following? | | | |
| Yes | No | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Municipality (s) | |
| <input type="checkbox"/> | <input type="checkbox"/> | Transit Organization (s) | |
| <input type="checkbox"/> | <input type="checkbox"/> | School District (s) | |
| <input type="checkbox"/> | <input type="checkbox"/> | Public Meeting (s) | |
| <input type="checkbox"/> | <input type="checkbox"/> | Emergency Services | |
| <input type="checkbox"/> | <input type="checkbox"/> | Advocacy Groups | |
| <input type="checkbox"/> | <input type="checkbox"/> | Other (s) _____ | |

Intersection Details

(The information below may be useful in the determination of pedestrian needs and warranted accommodations at uncontrolled intersections. Not all of the information is required to make a determination. The minor roadway information may also be needed in some situations.)

Roadway classification: _____

Roadway Typology: _____

Speed Limit (MPH): _____

Design Speed: _____

ADT: _____

Percentage of Trucks: _____

Travel lanes: _____

Is there a sight distance deficiency? Yes No

If yes, explain. _____

Sidewalk: Yes No Shoulders: Yes No Curb: Yes No

Is parking permitted on the roadway? Yes No

Municipal recommendation: _____

Pedestrian generators? _____

Distance to next available crossing: _____

Was a crash analysis completed? Yes No

Are there pedestrian crashes? Yes No

Has a pedestrian gap analysis been performed at the location? Yes No

[ftp://ftp.dot.state.pa.us/transfer/Traffic Signals/Unsignalized Intersection Ped Calcs from HCS.xlsx](ftp://ftp.dot.state.pa.us/transfer/Traffic%20Signals/Unsignalized%20Intersection%20Ped%20Calcs%20from%20HCS.xlsx)

Are there other geometric concerns? If yes, explain: _____

Pedestrian Traffic Signals (if applicable)

| Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Is there proper pedestrian timing established at the intersection? |
| <input type="checkbox"/> | <input type="checkbox"/> | Is an all-pedestrian phase recommended in the study? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are the crosswalks in alignment with curb ramps? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are pedestrian signals visible from the proposed crosswalk/curb ramp locations? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are countdown pedestrian signals present? |
| <input type="checkbox"/> | <input type="checkbox"/> | Has the need for Accessible Pedestrian Signals (APS) been determined from the study? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are pushbuttons proposed to be within the current ADA criteria? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are all pushbutton locations accessible to all pedestrians? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do all features satisfy applicable state and federal requirements? |

