## **DESIGN VARIANCE REQUEST - LOCAL AGENCY**

I. PROJECT DESCRIPTION (FILL IN PROJECT INFORMATION AND PROVIDE A BRIEF WRITE-UP OF PROJECT AND LIMITS)									
CONTROL SECTIO	N(S)		JOB NUMB	ER(S)	LOC	AL AGENCY NAME			
				HIGHWAY SYSTEM	ESTI	IMATED LETTING DATE			
3R	4R	3R & 4R	YES	NO					
LOCATION OF PRO	JECI								
PROJECT DESCRI	PTION (as pro	ogrammed)							
		<b>,</b>							
II. LEGAL SPEED A		G AND FUTURE T	RAFFIC VOI	UMES					
POSTED SPEED	DESIGN SF			PROJECTED ADT	Ex % CON	MM. PROJECTED % COMM.	FIX LIFE		
mph	mpl						Years		
III. DESIGN VARIA	NCE FOR TH		EMENT (IDE	NTIFY LOCATION	BELOW)				
ELEMENT:			, , , , , , , , , , , , , , , , , , ,		,				
Describe existing r	oadway/bridg	ge geometric feat	ures includir	ng element values to	or each varia	ance location (Identify locations	by station).		
Design criteria for t	hese feature	s (Provide the ap	propriate refe	erences, including t	he chapter,	page and design values):			
MDOT CRITERIA			AASHTO CRITERIA						
Proposed design y	alues for the	varianco olomont	(Idoptify what	at design speed and	appropriato	dimensions this treatment mee	ts if applicable)		
Froposed design v		variance element		at design speed and	i appi opi late		is il applicable).		
						e analyzed for the requested ge			
utilizing the most recent 4 years of crash data available on RoadSoft. Fatalities (K) and Serious Injuries (A) must be reviewed and commented on in the review and analysis. A crash analysis may be POB-POE if the geometric element in question is also POB-POE (e.g., shoulder width).									
Alternatively, a pre	dictive Highv	way Safety Manua	al (HSM) Cra	sh Analysis for the	requested	geometric element may be utiliz			
HSM model exists.	See section 3	3.08.01F of the MD	OT Road De	sign Manual for the	analyses rec	quired.			

List the proposed and/or existing mitigation measures to address design variance feature if applicable (advisory signs, lighting of curves, future work to address design variance, incremental improvements, (recessed) pavement markings, delineation, corrugations).							
ADDITIONAL COMMENTS (Such as other extenuating circumstances to be considered, future programmed project details, etc.).							
LOCAL AGENCY APPROVAL							
REQUESTED BY (Local Agency Responsible Charge)	RECOMMENDED BY (Licensed PE Representing Local Agency)						
E-SIGNATURE	E-SIGNATURE						
	LOCAL AGENCY OR CONSULTANT COMPANY NAME						
AFFIX SEAL OF LICENSED PE REPRESENTING LOCAL AGENCY							
MDOT ACKNOWLEDGES RECEIP	T OF THIS DESIGN VARIANCE						
LAP ENGINEER OR SPECIALIST STAMP	LAP TEAM LEADER STAMP						