## **INDOT**

## Roadway Functional Classification System Application

\* You may type your information directly on this form before printing. Press "Tab" after each entry.

I have read and understood the FHWA Functional Classification Guidelines

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Name:	Title:	Agency	:
Street Address (City, State, ZIP):	•	•	
E-Mail, Phone, Fax			
ROADWAY INFORMATION			
NOTE THE PROPERTY OF THE PROPE			
Roadway name:			
Revision extent (start point/end point):			
Current classification (if not applicable, le			
Current classification (if not applicable, ic	ave bialiky.		
Ci. (Ci. )			
Classification requested:			
Current lane width (if not applicable, leav	ve blank):		
Current traffic count (if not applicable, le	ave blank):		
In the box below, please provide	detailed justification for th	ne change in functional	class:
(Examples: Change in demand on		_	

If new development/construction, please enter the following information:
Provide a short narrative describing how roadway is changing and how it fits with federal guidelines:
Anticipated date proposed roadway will be open to traffic:
Additional information:

## TO SUBMIT APPLICATION:

The following documentation is required to submit a reclassification request for an existing roadway or to classify a planned roadway:

- This completed application form, which must include justification of the change along with documentation to back up the justification.
- Letters of concurrence signed by approving authorities representing any entity which holds jurisdiction over the roadway; typically, this will include the city/county, along with the local Metropolitan Planning Organization (MPO) when applicable.
- Map of the requested change, clearly identifying begin and end points, with details drawn to provide locations of traffic generators.
- Aerial photographs of location when justification includes new development/construction.
- Inclusion of GIS shapefiles and data is encouraged; however, based on current FHWA GIS data requirements, all roads involved in the request must be labeled.

Email application to: elarson@indot.in.gov

or

Mail application to: Erik Larson, 100 N Senate Ave. IGCN-955, Indianapolis, IN 46204

Please call (317) 233-5498 or email elarson@indot.in.gov with any questions.