



## TRAFFIC SIGNAL TECHNOLOGIES GRANT PRE-APPLICATION SCOPING FORM

**PLEASE TYPE OR PRINT ALL INFORMATION IN BLUE OR BLACK INK**

### A – PROJECT OVERVIEW

DISTRICT	COUNTY	MUNICIPALITY(S)
Attach a map or list of the signalized intersections included in the project.		
PROJECT NAME		
PROJECT CONTACT NAME		PROJECT CONTACT EMAIL
PROJECT TYPE (check one) <input type="checkbox"/> Traffic Signal System <input type="checkbox"/> Adaptive Signal Control Technology <input type="checkbox"/> ATSPM <input type="checkbox"/> Unified Command and Control		
NETWORK CHARACTERISTICS (check one) <input type="checkbox"/> Arterial Corridor <input type="checkbox"/> Collector Corridor <input type="checkbox"/> Other Corridor <input type="checkbox"/> Two-way Grid Network <input type="checkbox"/> One-Way Grid Network <input type="checkbox"/> Isolated Intersection		
TRAFFIC CONGESTION LEVEL (check one) <input type="checkbox"/> Below Capacity <input type="checkbox"/> Near Capacity <input type="checkbox"/> Over Capacity		OPERATIONAL MAINTENANCE FREQUENCY (check one) <input type="checkbox"/> 6 months or less <input type="checkbox"/> More than 6 months <input type="checkbox"/> Complaint Driven Only
PEDESTRIAN DEMAND (check one) <input type="checkbox"/> Ped Recall <input type="checkbox"/> Infrequent Peds (<10 ped calls/day) <input type="checkbox"/> Moderate Peds (>1 to 6 peds/hour) <input type="checkbox"/> High Peds (>6 peds/hour)		
PEDESTRIAN TIMING REQUIREMENTS Does pedestrian crossing require more time than would otherwise be provided to accommodate vehicle demand? <input type="checkbox"/> Yes <input type="checkbox"/> No Does pedestrian demand constrain the range of cycle length which can effectively be used on the corridor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
TRAFFIC SIGNAL OPERATIONAL OBJECTIVES (check those which apply) INTERSECTION CONTEXT: <input type="checkbox"/> Minimize phase failures <input type="checkbox"/> Equitable service <input type="checkbox"/> Maximize throughput NETWORK CONTEXT: <input type="checkbox"/> Smooth flow <input type="checkbox"/> Manage queues		
PROJECT DESCRIPTION (Include narrative to describe the project scope of work)		
WHY IS THE PROJECT NEEDED? (Provide project needs that are tangible and fact-based, and indicate how the project will address the operational objectives identified above. Also indicate why the existing traffic signals are unable to meet the objectives identified above.)		

(07-22)

DESCRIBE HOW THE MUNICIPALITY CURRENTLY OPERATES AND MAINTAINS THE TRAFFIC SIGNALS

## B – COST ESTIMATE

PHASE	ITEM DESCRIPTION		UNIT COST	QUANTITY	COST
Engineering/Design					\$
Construction	Controller Unit		\$		\$
	Controller Assembly		\$		\$
	Communication System		\$		\$
	Managed Network Switch		\$		\$
	Unified Command and Control Integration		\$		\$
	Detection System		\$		\$
	Adaptive Signal System		\$		\$
	Other Construction Items (attach itemization)				\$
	Construction Subtotal				\$
	Traffic Control				\$
	Inspection				\$
Contingency					\$
Cost Escalation					\$
GRANT FUNDING REQUEST	MATCHING FUNDS (Optional)	MATCHING FUNDS %	Total Project Cost \$		

## C – PennDOT REVIEW

TO BE COMPLETED BY PENNDOT BUREAU OF OPERATIONS

REVIEW COMMENTS

REVIEWED BY

DATE