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| Exhibit 7-B Field Review Form |
| **Please complete information required in the shaded boxes** |
| Local Agency |  | Field Review Date |  |
| Project Number |  | Locator (Dst/Co/Rte/PM) |  |
| Project Name |  | Bridge No.(s) |  |
|  |
| **1. PROJECT LIMITS (see attached list for various locations)** |
|  |
| Net Length (miles) |  | On NHS? | Yes |  | No |  |
|  |
| **2. WORK DESCRIPTION** |
|  |
| ITS project or ITS element (Signal, electronics, communication and information processing projects will be ITS projects) | Yes |  | No |  |  |
| If yes, choose: High-Risk (formerly “Major”) ITS |  | Low-Risk (formerly “Minor”) ITS |  | Exempt ITS |  |
|  |
|  |
| **3. FUNCTIONAL CLASSIFICATION** |
| On the Federal-aid System |  | Off the Federal-aid System |
|  | Principal Arterial – Freeway or Expressway |  | Rural Minor Collector |
|  | Other Principal Arterial |  | Local |
|  | Minor Arterial |  | Bike/ Ped paths not on existing road |
|  | Major Collector |  |
|  | Urban Minor Collector |
|  |
| **4. STEWARDSHIP CATEGORY** | Is a **Project of Division Interest (PoDI)** project? | Yes |  | No |  |
|  |
| **5. CALTRANS ENCROACHMENT PERMIT** | Is it required? | Yes |  | No |  |
| **6. STATE ONLY FUNDS** | Is State-Only Funded? | Yes |  | No |  |

|  |  |
| --- | --- |
| **7. COST ESTIMATE BREAKDOWN** |  |
|  (Including Structures) | ($1,000’S) | Federal Participation |
| PE | Environmental Process |  | Yes |  | No |  |
|  | Design |  | Yes |  | No |  |
|  | ITS System Manager or Integrator |  | Yes |  | No |  |
| CONST | Const. Contract |  | Yes |  | No |  |
|  | Const. Engineering |  | Yes |  | No |  |
| R/W | Preliminary R/W Work |  | Yes |  | No |  |
|  | Acquisition |  | Yes |  | No |  |
|  |  No. of Parcels |  |  | Yes |  | No |  |
|  |  Easements |  |  | Yes |  | No |  |
|  |  Right of Entry |  |  | Yes |  | No |  |
|  |  RAP (No. Families) |  |  | Yes |  | No |  |
|  |  RAP (No. Bus) |  |  | Yes |  | No |  |
|  | Utilities (Exclude if included in contract items) |  | Yes |  | No |  |
| **TOTAL COST** |  |  |
|  |
| **7a. Value Engineering Analysis Required?** | Yes |  | No |  |
| (Yes, if total project costs are $50M or more on the NHS, or $40M or more for bridges on the NHS) |
|  |
|  |
| **8. PROJECT ADMINISTRATION** |
|  | Agency | Consultant | State |
| PE | Environmental Process |  |  |  |
| Design |  |  |  |
| System Manager/Integrator |  |  |  |
| R/W | All Work |  |  |  |
| CONST ENGR | Contract |  |  |  |
| CONSTRUCTION | Contract |  |  |  |
| MAINTENANCE |  |  |  |  |
|  |
|  |
| **9. SCHEDULES** | Proposed Advertisement Date |  |
| Other Critical Dates |  |

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| **10. PROJECT MANAGER’S CONCURRENCE** |
| Local Entity Representative |  | Date |  |
|  |
| Signature |  | Phone |  |
| Title |  |
|  |
| Date of Field Review(If not performed please attached justification to this form) |  |
|  |
|  |
| Caltrans (District) Representative (Attendance required if project is on NHS) |  | Date |  |
| Signature |  | Phone |  |
| Title |  |  |
|  |  |  |
| FHWA Representative |  | Date |  |
| Signature |  | Phone |  |
| Title |  |
|  |

|  |
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| **11. LIST OF ATTACHMENTS** (Including all appropriate attachments if field review is required. See the “[]” Notation for minimum required attachments for non-NHS projects.) |
|  | Field Review Attendance Roster or Caltrans Roster  |
|  | Vicinity Map (Required for Construction Type Projects |
|  |
| IF APPLICABLE (Complete as required depending on type of work involved) |
|  | Roadway Data Sheets [Req’d for Roadway projects] |
|  | Typical Roadway Geometric Section(s) [Req’d for Roadway projects] |
|  | Major Structure Data Sheet [Req’d for HBP] |  | Signal Diagram |
|  | Railroad Grade Crossing Data Sheet |  | Collision Diagram |
|  | Sketch of Each Proposed Alternate Improvement |  | CMAQ/RSTP State STIP Match |
|  | Existing Federal, State and Local ADA deficiencies not included on other Attachments |
|  | System Engineering Review Form (SERF) Req’d for High-Risk (formerly “Major”) and Low-Risk (formerly “Minor”) ITSprojects |

**12. PROJECT REVIEW NOTES**

1. MINUTES OF FIELD REVIEWS (See Attachment)
2. ISSUES OR UNUSUAL ASPECTS OF PROJECT (See Attachment)

**Distribution**: Original with attachments – Local Agency

 Copy with attachments (2 copies if HBP) – DLAE