# **CHAPTER 1**

## INTRODUCTION

## **INTERNAL CALTRANS EXHIBITS AND FORMS**

Exhibit No. <u>Title</u>

N/A

### <u>Form No.</u>

RW 01-01

<u>Title</u> Right of Way Security System Change Request (for internal Caltrans use)

(5/2025)

### Formatted for eSignatures

#### STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION RIGHT OF WAY SECURITY SYSTEM CHANGE REQUEST

RW 01-01 (NEW 05/2025)

IMPORTANT MUST COMPLETE ALL SECTIONS * indicates a required field:													
REQUEST FOR*	REQUEST FOR* SCOPE ID		R* USER*								REQUEST DATE		
DISTRICT*	EMAIL ADDR	IAIL ADDRESS							PHON	E			
TRANSFER FROM DISTRICT REGION TRANSFER TO DISTRICT REGION													
PMCS (Project Management Control System):													
		TPRC (	(RW Ma	inagemer	nt Info):				RU (Utiliti	es – RUMS):			
IRWS (Integrated RW System):													
RW Engineering: Appraisal Input:													
Planning/Management: Acquisition:								:					
Acquisition Management:								quisition	1:				
Condemnation:													
District Division Chief:													
RWPM (Property Management):													
PROPERTY								MAINTENANCE					
MONEY (Property)			MONEY (Airspace)					APPROVAL (Maint.)					
INSPECT (Property)			INSPECT (Aii		NSPECT (Maint.) Close Loop								
Every user must have a "completed" security request form on file. All change requests must be submitted on this form. This form supersedes all previous authorizations. User acknowledges and accepts full responsibility for all system entries made with this account.													
I agree that by providing my electronic signature for this form, I agree to conduct business transactions by electronic means and that my electronic signature is the legal binding equivalent to my handwritten signature. I hereby agree that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it.													
I agree to the a	-												
USER'S SIGNATU	1. Aftei	1. After completing the form in Acrobat, click on the Lock Form button Lock Form											
	2 5010	2. Save the newly created Flattened version of the Form, for use in Adobe Sign											
			2. 040	; the new					ine i onn,	ioi use		oign	
SUPERVISOR'S APPROVAL													
DIST. AUTHORIZI	NG SIGNATUR	E											