

TMP CHECKLIST

Purpose: To make a preliminary determination of whether the following issues are present or should be considered during project development through a more detailed TMP.

Project Name and Number/PIN: 24H002

Initial Project Significance Level (as determined in Table 4): D (Not significant)

Project Manager during Project Definition:

Name: Jason Owen Date: March 2, 2025

Modified or Approved by (Project Manager at Preliminary Design for Significant Projects):

Name: _____ Date: _____

Modified or Approved by (Project Manager at PS&E for Significant Projects):

Name: _____ Date: _____

Project Description (Location, Activity, Anticipated Duration): 50 days

	Yes	No	Poss	N/A	Comments
1. Does the project require a long-term (greater than 3 days) ¹ lane or roadway/bridge closure?	<input type="checkbox"/>	X	<input type="checkbox"/>		
2. Are there any restrictions or considerations regarding construction timeframes due to traffic concerns (e.g., time of day, site specific time of year limits)?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
3. Can typical applications for traffic control be used? Are there any limitations to when typical applications can be used (time of year, times, days)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	On airport
4. Is there a sidewalk, pedestrian/bicycle lane, path, trail, or access that needs to be maintained during construction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	On aiirport
5. Is a speed reduction proposed (consistent with state guidance)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	
6. Will temporary roadways or additional width be needed on culverts, bridges, or shoulders to maintain traffic?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	
7. Will construction impact access to businesses?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Are there other projects (utility, district maintenance, construction, municipal) in the area that should be coordinated or avoided?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	

	Yes	No	Poss	N/A	Comments
9. Will/Can the traffic be reasonably detoured? If no or N/A, proceed to #10. If yes or possibly:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X	
a. Is the detour route roadway type equivalent to closed roadway?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the local alternate detour route in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Will the detour route have a detrimental impact on emergency vehicles, school buses, or other sensitive traffic?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Are there load limit restrictions on the detour?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Are there bridge/culvert width or height restrictions on the detour?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Are modifications needed at intersections on detour/alternate routes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Will traffic signal timing need to be adjusted for the project (with or without a detour)?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
11. Are there truck facilities or routes that would be impacted by the project or by a detour (turning radii, weight restrictions, etc.)?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
12. Are there special events or traffic generators (schools and bus routes, large employers, hospitals) that may be affected by the project and/or detour?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
13. Will the emergency vehicle routing, mail delivery, school bus routes, or trash services be interrupted by the project (with or without a detour)?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
14. Are there specific stakeholders to engage regarding the work zone impacts?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
15. Does the project occur within a high crash location?	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	
16. Are there other maintenance of traffic issues to consider? Specify.	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	

1. MUTCD definition of long-term work is occupying a location more than 3 days.

Additional Narrative for Projects with issues identified above: