

# **City of Concord**

## **Technical Standards Manual**

### **Article VIII**

### **Traffic Impact Analysis (TIA)**

### **Appendix H**

### **TIA Submittal Checklist**



## TIA SUBMITTAL CHECKLIST

Submittal:	Please Select.	Document Date:	Enter Date.
Project Name:		Previous Name: If Applicable	
TIA Consultant:		Submitted By:	
Phone #:		Email:	
TIA Scoping Document Approval Date:	Enter Date.	Unadjusted Daily Site Trips:	
<input type="checkbox"/>	The approved TIA Scoping Document(s) is(are) included in this submittal.		
<input type="checkbox"/>	LOS D or better is expected at all study locations after proposed mitigations.		
<input type="checkbox"/>	The study report has been prepared by and/or under the supervision of a NC Professional Engineer (PE) with expertise in traffic engineering and is sealed by said PE		
<input type="checkbox"/>	This study has identified all known deficiencies with and without the proposed development.		
<input type="checkbox"/>	This study has identified mitigation measures to adequately accommodate the site trips.		
<input type="checkbox"/>	Draft Transportation Mitigation Agreement is included in this submittal.		

Explain here if any of the boxes above are unchecked:

<input type="checkbox"/>	Concurrent submittal to NCDOT required.
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The undersigned affirms that, except for the deviations noted below, the TIA submittal conforms to the current City of Concord Technical Standards Manual, Article VIII, and the approved TIA Scoping Document. The undersigned also acknowledges that the TIA will be rejected if the deviations and justifications are not properly documented and approved by the City and/or NCDOT.

**Deviations and Justifications** (e.g., changes in site plan, development schedule, site trip and off-site trip estimates, study area, data collection, analysis period and method, etc., *Attach separate sheets if needed.*)


TIA Consultant's Signature (Professional Engineer of TIA Record)	Print Name	Date