

SIGHT DISTANCE WORKSHEET FORM

NO. _____

INSTRUCTIONS ON REVERSE

Applicant - Property Owner	
Address	
Post Office	Zip Code
Phone	

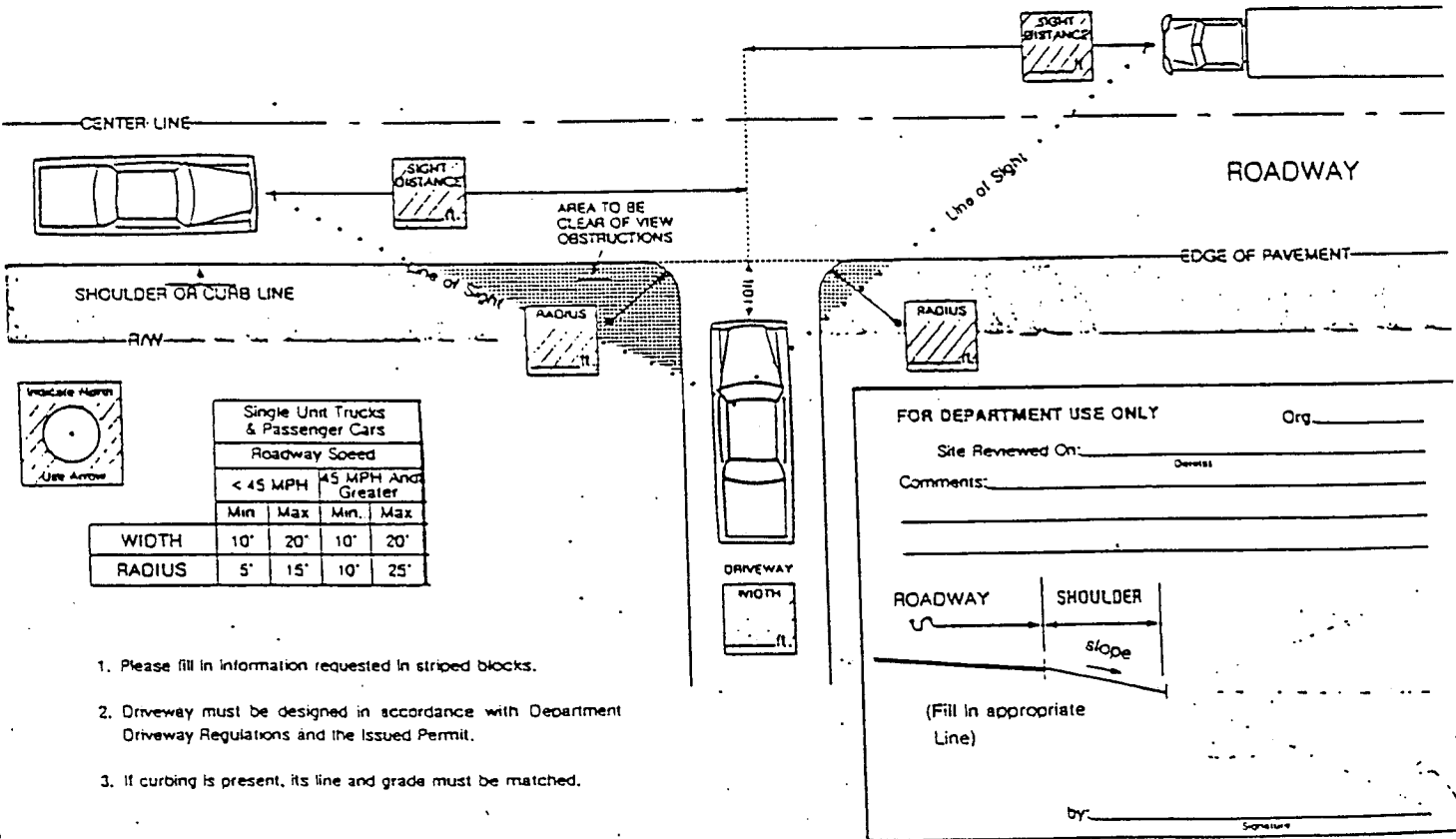
LOCATION OF PROPOSED DRIVEWAY
 County _____
 Route No. _____
 Name of Nearest Intersection _____
 Distance to Nearest Intersection in Feet _____

SHOULDER OR CURB LINE

POSTED SPEED LIMIT MPH

AVAILABLE SIGHT DISTANCE SHALL BE MEASURED AT 3.50 FEET ABOVE THE ROAD SURFACE FROM BOTH THE DRIVER'S EYE AND THE APPROACHING VEHICLE

EDGE OF PAYMENT



1. Please fill in information requested in striped blocks.
2. Driveway must be designed in accordance with Department Driveway Regulations and the Issued Permit.
3. If curbing is present, its line and grade must be matched.

By _____
 (Name of Applicant - Property Owner)

Have you read instructions on reverse?
 Have you completed all seven boxes?

SIGHT DISTANCE FORMULA TABLE

AVERAGE GRADE IN [%]

SPEED / MPH USE PLUS GRADES WHEN APPROACHING VEHICLE IS TRAVELLING UP GRADE

	+0.0	+1.0	+2.0	+3.0	+4.0	+5.0	+6.0	+7.0	+8.0	+9.0	+10.0
25	147	145	144	143	142	140	139	138	137	136	135
30	196	194	191	189	187	185	183	182	180	178	177
35	249	245	242	239	236	233	231	228	226	224	221
40	314	309	304	299	295	291	287	284	280	277	274
45	383	376	370	364	358	353	348	343	339	334	330
50	462	453	444	436	429	422	415	409	403	397	392
55	538	527	517	508	499	490	482	475	468	461	454

USE NEGATIVE GRADES WHEN APPROACHING VEHICLE TRAVELLING DOWNGRADE

	-0.0	-1.0	-2.0	-3.0	-4.0	-5.0	-6.0	-7.0	-8.0	-9.0	-10.0
25	147	148	150	151	153	155	157	159	161	164	166
30	196	199	201	204	207	210	214	217	221	226	230
35	249	252	256	260	265	269	275	280	286	292	299
40	314	319	325	331	338	345	352	360	369	379	389
45	383	390	398	406	415	425	435	447	459	472	487
50	462	471	481	492	504	517	531	546	563	581	600
55	538	550	562	576	590	606	622	641	661	682	706