

Exhibit 7-B: Field Review Form

Local Agency		Field Review Date	
Project Number		Locator (Dist/Co/Rte/PM)	
Project Name		Bridge No.(s)	
1. PROJECT LIMITS (see attached list for various locations)			
Net Length (miles)		On NHS?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. WORK DESCRIPTION			
ITS project or ITS element (Signal, electronics, communication and information processing projects will be ITS projects)		Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, choose: High-Risk (formerly "Major") ITS <input type="checkbox"/> Low-Risk (formerly "Minor") ITS <input type="checkbox"/> Exempt ITS <input type="checkbox"/>			
3. FUNCTIONAL CLASSIFICATION			
<u>On the Federal-aid System</u>		<u>Off the Federal-aid System</u>	
<input type="checkbox"/> Principal Arterial – Freeway or Expressway		<input type="checkbox"/> Rural Minor Collector	
<input type="checkbox"/> Other Principal Arterial		<input type="checkbox"/> Local	
<input type="checkbox"/> Minor Arterial		<input type="checkbox"/> Bike/ Ped paths not on existing road	
<input type="checkbox"/> Major Collector			
<input type="checkbox"/> Urban Minor Collector			
4. CALTRANS ENCROACHMENT PERMIT		Is it required? Yes <input type="checkbox"/> No <input type="checkbox"/>	
5. STATE ONLY FUNDS		Is State-Only Funded? Yes <input type="checkbox"/> No <input type="checkbox"/>	

6. 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				
6a. 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 and off the NHS)					
7. PROJECT ADMINISTRATION					
		Agency	Consultant	State	
PE	Environmental Process				
	Design				
	System Manager/Integrator				
R/W	All Work				
CONST ENGR	Contract				
CONSTRUCTION	Contract				
MAINTENANCE					
8. SCHEDULES		Proposed Advertisement Date			
Other Critical Dates					

9. PROJECT MANAGER'S CONCURRENCE			
Local Entity Representative		Date	
Signature		Phone	
Title			
Date of Field Review		If not performed please attach justification to this form	

Caltrans (District) Representative (Attendance required if project is on NHS)		Date	
Signature		Phone	
Title			
FHWA Representative		Date	
Signature		Phone	
Title			

10. 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”) ITS projects	

11. PROJECT REVIEW NOTES

- A. MINUTES OF FIELD REVIEWS (See Attachment)
- B. ISSUES OR UNUSUAL ASPECTS OF PROJECT (See Attachment)

Distribution: Original with attachments – Local Agency
Copy with attachments (2 copies if HBP) – DLAE