

Hazardous Walking Site Review Checklist

(To assist in determining eligibility for school transportation based on hazardous walking conditions, in accordance with section 1006.23, Florida Statutes)

		Walkways Parallel To The Road			
<u>YES</u>	<u>NO</u>				
		1. Is the location in a residential area with little or no traffic? Is the location in a residential area and on a road or street that is not used as a major artery or cut-through?			
		2. Is the location on a road where the traffic volume is fewer than 180 vehicles per direction per hour at 6 - 9 a.m. and 2 - 4 p.m.?			
		3. Is the area located in a residential area and on a road that has a posted speed limit of 30 miles per hour or less?			
		2 or 3 is "YES," the area does not qualify as a hazardous walking location. 2 and 3 are all "NO," continue to next question.			
If the post	ted speed li	mit is less than 50 mph:			
		4. Is there an area at least four feet wide with a "surface upon which students may walk" that prevents the students from having to walk on the road?			
		Note: The surface does not have to be a sidewalk, but may be simply a surface upon which the students may walk. Weeds, tall grass or flooding may be temporary maintenance problems that do not constitute a hazardous walking area. A walking surface does not include drainage ditches, sluiceways, swales or channels. A paved area contiguous with the paved roadway or extended shoulder (also known as a "breakdown lane"), with no separation from the driving area or raised curb, is <u>not</u> a walkway.			
If the post	ed speed li	mit is 50 mph or greater:			
		5. Is the road uncurbed with a four-foot wide walking surface (as defined in #4) separated from the road by an additional three or more feet?			
		6. Is the road curbed with at least a four-foot wide walking surface (as defined in #4)?			
* If the an	swer to 4,	5 or 6 is "YES," the area does not qualify as a hazardous walking surface.			

Location Code (for local use)



Walkways Crossing Over The Road (When students must cross the road)

A. For an "uncontrolled crossing site" (no crossing guard, traffic enforcement officer, stop sign or other traffic control signal present during student walk times):

<u>YES</u>	<u>NO</u>	
		1. Does the traffic volume exceed 360 vehicles per direction, per hour (either direction, including all lanes in each direction)?
		2. Does the road have a posted speed limit of 50 MPH or greater?
		3. Does the road have six or more lanes (not including turning lanes)?

- * If the answers to all of the above questions are "NO," the area does not qualify as a hazardous walking surface.
- * If the answer to any of the above questions is "YES," the area would qualify as a hazardous walking surface.
- **B.** For an intersection or crossing site controlled by a stop sign or other traffic control signal, <u>without</u> crossing guards or traffic enforcement officers during the times students must walk:

4. Does the total traffic volume (total in both directions) exceed 4,000 vehicles per hour?

- * If the answer is "NO," the area does not qualify as a hazardous walking surface.
- C. Any intersection or other crossing site <u>with</u> a crossing guard or other traffic enforcement officer does not qualify as a hazardous walking location, regardless of the posted speed limit.
- **D.** Comments/Notes/Diagrams:

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Hazardous Walking Site Authorization and Signature Verification

School District:		Site Review Date:						
Hazard Location:								
Hazard Location is: Paralle	l to the road	Traffic Count:						
Crossi	ng over the road	Traffic Count:						
Hazard Jurisdiction: Munic	pal (Identify:)Cou	inty State					
Has a letter of determination been requested from the jurisdiction to indicate a correction date?YesNo								
Permanent Hazard?YesNo If no, anticipated correction date:								
School District Representative:								
		Phone:						
Roadway Jurisdiction Representative:								
Agency/Entity:	Print Name	Signature						
Email:		Phone:						
Law Enforcement Representative:								
Agency/Entity:	Print Name	Signature						
Email:		Phone:						
Metropolitan Planning								
Organization Representative: (If applicable) Agency/Entity:	Print Name	Signature						
Email:		Phone:						

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