



**LOUISIANA DEPARTMENT OF TRANSPORTATION & DEVELOPMENT
PRELIMINARY ACCESS CONNECTION REQUEST FORM
TRAFFIC GENERATOR TYPE ACCESS ON A STATE ROUTE**

An access connection is any physical connection between a state roadway and private or public property which allows the ingress and egress of vehicles to or from said property.

THIS FORM IS NOT TO BE USED FOR SINGLE-FAMILY RESIDENTIAL OR NON-COMMERCIAL AGRICULTURE ACCESS CONNECTION REQUESTS.

PROPERTY OWNER INFORMATION

Name _____
 Company (If Applicable to Permit) _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Home/Bus Phone _____ Cell Phone _____
 E-Mail _____

Check here if Owner is to be the Primary Contact.

DESIGNATED CONTACT INFORMATION (If Primary Contact is not the Owner)

Name _____
 Company (If Applicable to Permit) _____
 Phone _____ Fax _____
 Email _____
 Relationship to Property Owner: Engineer Attorney Other _____

Submit Power of Attorney documentation stating this person has the authority to enter into a legally-binding agreement on behalf of the Owner.

PROPERTY INFORMATION

Property 911 Address _____
 City _____ State _____ Zip Code _____
 Parish _____ Current Hwy Surface _____
 State Highway Adjacent to Property (LA/US Route #): _____
Property is located on the (circle applicable) N S E W side of the highway
_____ miles (circle applicable) N S E W from (nearest state highway
or other major roadway) _____

Lot Depth (ft): _____ Frontage Width (ft): _____
 Proposed driveway width (ft): _____

Distance from Centerline of Roadway to Property Line (ft): _____
 Proposed Building Dimensions _____
 Setback from Right-of-Way to nearest building/gas pump/etc. (ft): _____
 Distance from Property Lines to Nearest Driveways/Roadways _____
 Property Latitude _____ Property Longitude _____

REQUIRED INFORMATION

OPTIONAL INFORMATION

YOU MUST ATTACH A PROPERTY MAP TO THIS DOCUMENT.

Attach property survey or plat of property. Show proposed location of access point and locations of nearest existing driveways and median openings (if applicable). Everything must be dimensioned.

THIS FORM IS NOT TO BE USED FOR SINGLE-FAMILY RESIDENTIAL OR NON-COMMERCIAL AGRICULTURE ACCESS CONNECTION REQUESTS.

APPLICANT TO COMPLETE:

PROPOSED USE OF PROPERTY:

- Multi-Residence Single Family
Number of Homes Proposed _____
- Commercial
Total Facility Sq. Ft. _____
Select One:
 Retail Mixed-Use Medical
 Religious Educational Public
 Agricultural Utility Bank
 Other: _____
- Temporary (less than 1 year) – Explain Use _____
- Other – Explain _____

- Will access connection become a public road? Yes No
- Will the full development be built in phases? Yes No Unknown

SELECT ALL THAT APPLY:

- Applicant requests more than one access connection.
- Property is within 1/2 mile of an existing traffic signal.
- Applicant requests a new traffic signal.
- Applicant requests a new median opening.
- Requested access connection location aligns with an existing signal or intersection.
- Existing median opening or portion thereof, is within the frontage limits of the property.
- Requested access connection is not on a state route, but is within 1/4 mile of a state route.
- Railroad crossing located within 1/4 mile.
- Applicant requests a roundabout.
- Property has frontage on an existing local or parish roadway.
- Property is within the functional area of intersection or limits of turn lane.

If requesting commercial access, indicate the types and number of businesses and provide the floor area square footage of each:

Business Type	Sq. Ft.

If requesting residential development access, indicate the types and number of units (single family, apartment, townhome, etc.):

Residence Type	# Units

For agricultural access, indicate number of acres the access will serve: _____

Please answer the following questions. Provide additional documentation, if necessary:

Does the applicant have knowledge of any State Highway access permits serving this property, or adjacent properties, in which the applicant has, or may have, a property interest?

No Yes. Provide details: _____

Does the property owner own or have any interests in any adjacent properties?

No Yes. Provide details: _____

Are there other existing or dedicated public streets, roads, highways, or access easements bordering or within the property?

No Yes. If Yes, list them on all plans and indicate the proposed and existing access locations.

This application is for (check one): New Construction Remodel/Change in Use Expansion of Facility

I certify that the information contained herein is true, complete, and correct to the best of my knowledge. I understand that if any information contained herein is found to be falsified, this request and any permit issued based on this information shall be voided.

Signature of Owner _____ Date _____

Return Completed Form to the District Permit Specialist at the DOTD District Office where subject property is located.

DEPARTMENT OF TRANSPORTATION & DEVELOPMENT USE ONLY (Permit Specialist)

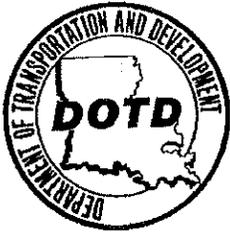
Date Requested Received _____ Date Owner Contacted _____
 (Owner should be contacted within 14 business days of date request is received.)

District _____ Request Processed By _____

Pre-Permit Application Meeting Required: No Yes

Meeting Scheduled for _____ 20 ____ at _____ AM/PM

Applicant Contacted to Confirm Meeting by _____



**LOUISIANA DEPARTMENT OF TRANSPORTATION & DEVELOPMENT
REQUEST FOR RE-EVALUATION FOR EXISTING ACCESS CONNECTIONS WHEN A
PROPERTY IS REMODELED, RECONSTRUCTED, OR REDEVELOPED**

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PROPERTY OWNER INFORMATION

Name _____
 Company (If Applicable to Permit) _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Home/Bus Phone _____ Cell Phone _____
 E-Mail _____
 Check here if Owner is to be the Primary Contact.

**DESIGNATED CONTACT INFORMATION
(If Primary Contact is not the Owner)**

Name _____
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_____ miles (circle applicable) N S E W from (nearest state highway
or other major roadway) _____
 Lot Depth (ft): _____ Frontage Width (ft): _____
 Proposed driveway width (ft): _____
 Distance from Centerline of Roadway to Property Line (ft): _____
 Property Latitude _____ Property Longitude _____
 Existing Number of Access Connections: _____
 Do you own the access connection(s)? Yes No, it is leased.
 Do you own the parking lot area? Yes No, it is leased.

PROPOSED CHANGES:

CHECK ALL THAT APPLY:

- Repave parking lot
- Reconfigure parking area
- Remodel interior of building(s)
- Remodel exterior of building(s)
- Build addition to building(s) to increase size
- Demolish existing building(s)
- Reconstruct/Repair existing access connection(s)
- Change or reconfigure access connection(s)
- Remove existing access connection(s)
- Change use of the property:
Existing/Most Recent Use: _____
Proposed Use: _____
- Property is within 1/2 mile of an existing traffic signal.
- Existing access connection location aligns with an existing signal, intersection, or median opening
- Existing median opening or portion thereof, is within the frontage limits of the property.
- Railroad crossing located within 1/4 mile.
- Property has frontage on an existing local or parish roadway.

Please answer the following questions. Provide additional documentation, if necessary:

Does the applicant have knowledge of any State Highway access permits serving this property, or adjacent properties, in which the applicant has, or may have, a property interest?

No Yes. Provide details: _____

Does the property owner own or have any interests in any adjacent properties?

No Yes. Provide details: _____

Are there other existing or dedicated public streets, roads, highways, or access easements bordering or within the property?

No Yes. If Yes, list them on all plans and indicate the proposed and existing access locations.

This application is for (check one): New Construction Remodel/Change in Use Expansion of Facility

I certify that the information contained herein is true, complete, and correct to the best of my knowledge. I understand that if any information contained herein is found to be falsified, this request and any permit issued based on this information shall be voided.

Signature of Owner _____ Date _____

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DEPARTMENT OF TRANSPORTATION & DEVELOPMENT USE ONLY (Permit Specialist)

Date Requested Received _____ Date Owner Contacted _____
 (Owner should be contacted within 14 business days of date request is received.)

District _____ Request Processed By _____

Internal Reviews:

Area Engineer _____ Date _____

District Traffic Operations Engineer _____ Date _____

- New Permit Required: Letter sent to applicant
- Meeting scheduled with DOTD staff and applicant
- No Action Required: Letter sent to applicant

LaDOTD Permit # _____	Date Permit Issued: _____
Date Permit Entered/Initials: _____	Construction Must Begin By: _____

State of Louisiana
 Department of Transportation & Development
ACCESS CONNECTION PERMIT CERTIFICATE

FOR USE FOR SINGLE FAMILY RESIDENTIAL & NON-COMMERCIAL AGRICULTURE ACCESS CONNECTION PERMITS ONLY.

Single-Family Residential Access Connections: *single family residential— 1 to 5 homes on a single access connection (Six or more residences on a single shared access or a single property subdivided for multiple homes must apply as a multi-family residential commercial access.); residential sporting and recreation camps (Fulltime or part-time residential camps used for hunting, fishing, etc.)*

Non-Commercial Agricultural Operations: *unimproved land (farm, pasture, or wooded; passenger vehicle or farm equipment access and use only)*

TO BE COMPLETED BY THE PROPERTY OWNER:

Property Owner's Name: _____

Physical (911) Address of Property: _____

City: _____ State: _____ Zip: _____

Proposed Use of Property:

Single-Family Residential Non-Commercial Agricultural

State Highway Adjacent to Property (Hwy. #): _____ Parish: _____

Property located on the (circle one) N S E W side of the highway _____ miles (circle one) N S E W

From (nearest LA/US route # or other major roadway) _____

Specific Requests Regarding Location, Size, Materials, Landscaping, Etc.: _____

Control Section: _____ Log Mile: _____ Latitude: _____ Longitude: _____

Property Frontage along Highway (ft.): _____ Depth of Property (ft.): _____

Current Highway Surface Material: _____

Approved Driveway Material (within limits of the ROW): _____

Culvert Size: Dia. (in.) _____ Length (ft.) _____ Material Type _____

Driveway Width _____ ft. Radius of Driveway _____ ft. (see attached standard)

Hydraulic Review: Not Required Required – Approved on _____ by _____

La DOTD Access Connection Detail to Be Used for Construction: _____ Notes: _____

Other permits related to this property: _____

Driveway Sharing: Not Required Required –Attached signed agreement.

Details: _____

Cattle Guards: Not Applicable Subject to the following conditions: _____

Construction of Access Connection shall be subject to the following additional restrictions:

Temporary Permit? No Yes. Terms: _____

Additional Provisions:

1. All documentation associated with this permit shall remain attached to this Permit Certificate and shall at all times be available for review, when requested, by a representative of the Louisiana Department of Transportation and Development.
2. All signed and stamped plans associated with this permit which are affixed with the LaDOTD Permit # shall remain with this permit and shall at all times be kept on the job site. If requested by a representative of the Louisiana Department of Transportation and Development, the entire plan package shall be produced at the job site for review.
3. The DOTD District Office will handle all necessary public notices regarding temporary traffic control related to work authorized by this permit. The Permittee shall notify the District office a minimum of five (5) working days before construction if the traffic control plan was previously approved or contained in the approved plans or a minimum of ten (10) working days before construction if the traffic control plan must be submitted for lane closures not addressed in the plans.
4. Prior to performing any excavations, the applicant is required to call Louisiana One Call. If installing any underground facilities such as cable or conduits, the applicant must be a member of Louisiana One Call. In addition, the applicant must contact DOTD at 1-800-259-4929 or DOTD-FiberLocates@la.gov at least 24 hours prior to performing any excavation on DOTD Right-of-way (either for installation or maintenance).

All conditions of this permit are subject to the provisions of LAC title 70.

I, the applicant, agree to hold harmless the DOTD and its duly appointed agents and employees against any action for personal injury or property damage sustained by reason of the exercise of this permit, whether or not the same may have been caused by the negligence of the DOTD, its agents, or its employees. I understand that this permit may be modified or rescinded at any time at the discretion of the DOTD and any costs incurred as a result will be at my expense. I understand additional conditions to this permit may be added after I have signed it, prior to final issuance, and I agree to review this permit upon receipt of the official copy and agree to abide by said conditions. I certify that the information contained herein is true, complete, and correct to the best of my knowledge. I understand that if any information contained herein is found to be falsified, this request and any permit issued based on this information shall be voided.

The provisions of this permit are hereby accepted and agreed to this _____ day of _____ 20 _____.

SIGNED _____

Owner's Name (printed): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home/Work Phone: _____ Cell Phone: _____

If exercising Power of Attorney:

Name of Authorized Representative: _____

(Attach a copy of Power of Attorney documentation)

APPROVED BY:

LOUISIANA DEPARTMENT OF TRANSPORTATION & DEVELOPMENT

DISTRICT PERMIT SPECIALIST –

Print Name _____ Date _____

DISTRICT ADMINISTRATOR (OR DESIGNEE) –

Print Name _____ Date _____