

EXHIBIT 7-B FIELD REVIEW FORM

Local Agency _____ Field Review Date _____
 Project Number _____ Locator _____
 _____ (Dst/Co/Rte/PM/Agncy) _____
 Project Name _____ Bridge No.(s) _____

1. PROJECT LIMITS (see attached list for various locations) _____

 _____ Net Length _____ (mile)

2. WORK DESCRIPTION _____

ITS project or ITS element: Yes _____ No _____
 If yes, choose: High-Risk (formerly "Major") ITS _____, Low-Risk (formerly "Minor") ITS _____, Exempt ITS _____

3. PROGRAMMING DATA FTIP (MPO/RTPA) _____ FY _____ Page _____
 Amendment No. _____ FTIP PPNO _____ FHWA/FTA Approval Date _____
 Federal Funds \$ _____ Phases PE _____ R/W _____ Const _____
 Air Basin: _____ (CMAQ only)

4. FUNCTIONAL CLASSIFICATION:
 URBAN _____ RURAL _____
 Principal Arterial: _____ Principal Arterial: _____
 Minor Arterial: _____ Minor Arterial: _____
 Collector: _____ Major Collector: _____
 Local: _____ Minor Collector: _____
 Rural Local: _____

5. STEWARDSHIP CATEGORY
 FHWA Full Oversight (Stewardship): Yes _____ No _____
 State-Authorized(Stewardship): Yes _____ No _____ (a) DLAE oversight: Yes _____ No _____
 (b) District Construction Oversight: Yes _____ No _____
 ITS High-Risk project or element requiring FHWA oversight per stewardship: Yes _____ No _____

6. CALTRANS ENCROACHMENT PERMIT Is it required? Yes _____ No _____

7. COST ESTIMATE BREAKDOWN \$1,000's Fed. Participation
 (Including Structures)

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 \$ _____

7a. Value Engineering Analysis Required? Yes _____ No _____
 (Yes, if total project costs are \$25M or more on the Federal-aid System, or \$20M or more for bridges)

8. PROPOSED FUNDING

		Total Cost		Cost Share	
Grand Total		\$ _____			
Federal Program #1 _____		\$ _____	Fed.	\$ _____	Reimb. Ratio _____
(Name/App. Code) #2 _____		\$ _____	Fed.	\$ _____	Reimb. Ratio _____
Matching Funds Breakdown	Local:			\$ _____	_____%
	State:			\$ _____	_____%
	Other:			\$ _____	_____%

State Highway Funds? Yes _____ Source _____ No _____
 State CMAQ/RSTP Match Eligible Yes _____ No _____ Partial _____
 Is the Project Underfunded? (Fed \$ < Allowed Reimb.) Yes _____ No _____

9. PROJECT ADMINISTRATION

		Agency	Consultant	State
PE	Environ Process	_____	_____	_____
	Design	_____	_____	_____
	System Man./Integ.	_____	_____	_____
R/W	All Work	_____	_____	_____
CONST ENGR	Contract	_____	_____	_____
CONSTRUCTION	Contract	_____	_____	_____
MAINTENANCE		_____	_____	_____

Will Caltrans be requested to review PS&E? Yes _____ No _____

10. SCHEDULES: PROPOSED ADVERTISEMENT DATE _____
 Other critical dates: _____

11. PROJECT MANAGER'S CONCURRENCE

Local Entity _____ Date: _____
 Signature & Title _____ Phone No. _____

Is field review required? Yes _____ No _____

Caltrans (District): _____ Date: _____
 Signature & Title: _____

12. LIST OF ATTACHMENTS (Include all appropriate attachments if field review is required. See the "[]" notation for minimum required attachments for non-NHS projects)

- _____ Field Review Attendance Roster or Contacts 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 HBRR] _____ Signal Warrants
- _____ Railroad Grade Crossing Data Sheet _____ Collision Diagram

- | | | | |
|-------|---|-------|--|
| _____ | Airport Data Sheet (if within 10,000 feet) | _____ | CMAQ/RSTP State STIP Match |
| _____ | Sketch of Each Proposed Alternate Improvement | _____ | Systems Engineering Review Form (SERF) |
| _____ | TE Application Document | | Req'd for High-Risk (formerly "Major") and |
| _____ | Existing federal, state, and local ADA deficiencies not included on other Attachments | | Low-Risk (formerly "Minor") ITS projects |

13. DLAE FIELD REVIEW NOTES:

A. MINUTES OF FIELD REVIEWS

B. ISSUES OR UNUSUAL ASPECTS OF PROJECT

(Attachment to Field Review Form)

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

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