

## CONCEPT STATEMENT FOR LOCAL PUBLIC AGENCY FEDERAL-AID PROJECTS

**Please Note:** Before completing this form, refer to the Concept Statement Instructions located in Instructional Memorandum (I.M.) 3.020 Concept Statement Instructions.

GENERAL INFORMATION:

County: Chickasaw/Howard City: Alta Vista/Elma Date Submitted: 8/1/2023  Original Submittal  Revised  
 Project No: ILL-CO19()-92-19 In STIP?  Y  N STIP Year(s): 2025 Estimated Letting Date: 12/17/2024  
 Contact Person: Roman Lensing Phone Number: 641-394-2321  
 Title: Chickasaw County Engineer  
 Address: 8 E. Prospect (PO Box 316), New Hampton, IA 50659 E-mail: r.lensing@chickasawcounty.iowa.gov

Draft

1. a Project Location Description (include road or street name(s):

**ATTACH A DETAILED LOCATION MAP  
OR LINK TPMS Development Map**

Yes  No The map in TPMS Development is accurate. If no, please correct the map as soon as possible and attach a paper map with this submittal.

The TPMS Development map can be found at the following link, by adding the TPMS ID number to the end of the web address below.  
<https://www.tpms.org/#development/projects/53372>

1. b. Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ TPMS ID No.: 53372

2. Type of Work (check all that apply):

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> HMA Paving            | <input checked="" type="checkbox"/> Grading                    | <input type="checkbox"/> PCC Widening  | <input checked="" type="checkbox"/> Bicycle or pedestrian facilities |
| <input type="checkbox"/> HMA Resurfacing       | <input checked="" type="checkbox"/> Intersection Modifications | <input type="checkbox"/> RCB Culvert   | <input type="checkbox"/> Scenic or landscaping improvements          |
| <input type="checkbox"/> HMA Widening          | <input type="checkbox"/> Lighting                              | <input type="checkbox"/> Traffic Signals                                       | <input type="checkbox"/> Historic restoration or renovation          |
| <input type="checkbox"/> Bridge Replacement    | <input type="checkbox"/> Patching                              | <input checked="" type="checkbox"/> Other (describe): <u>ADA Accomodations</u> |  |
| <input type="checkbox"/> Bridge Rehabilitation | <input checked="" type="checkbox"/> PCC Paving                 |  |  |

3. Project Length: 4.6 miles (to nearest tenth)

4. Existing Bridge Information: FHWA No.: 000136 Year Built: 2020 Size: 130' x 30'-6"  
 Type: Continuous Concrete Slab

5. Project Costs: For each item that applies, indicate if Federal-aid reimbursement will be requested. If yes, enter the estimated cost.  
 Note: When using STBG and/or Bridge funding, the use of Federal-aid will only be allowed for Construction.

Federal-aid?	Cost Item	Total Estimated Cost
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Preliminary engineering (if yes, see <u>I.M. 3.310</u> for procedures)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Construction engineering (if yes, see <u>I.M. 3.310</u> for procedures)	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Acquisition of land or property rights (if yes, see <u>I.M. 3.600</u> )	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Construction	6,852,000
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Utility relocation (if yes, see <u>I.M. 3.640</u> and <u>I.M. 3.650</u> )	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Railroad work (if yes, see <u>I.M. 3.670</u> and <u>I.M. 3.680</u> )	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	In-kind contribution (attach documentation as per <u>I.M. 3.050</u> )	

6. Total Federal-Aid (as shown in the STIP): \$ 5,139,000 Total Estimated Project Cost: 6,852,000

Yes  No Has the LPA secured other funds, such as HSIP, TSIP, U-STEP, C-STEP, etc.

If yes, enter information regarding other funding sources the LPA has been awarded, has applied for, or intends to apply for:

7. Estimate of Land or Property Acquisition Impacts: -- Will the proposed project:

**ANSWER ALL SIX QUESTIONS**

- a. Require temporary construction easements?  Yes  No If yes, indicate the approximate area (acres): 1.5
- b. Require permanent easement(s) or fee title?  Yes  No If yes, indicate the approximate area (acres): 0.25
- c. Require borrow material?  Yes  No If yes, indicate the proposed source (check all that apply):  
 New borrow area  Contractor furnished  Existing borrow area  Within existing right-of-way  Not yet determined
- d. Require total property acquisition(s)?  Yes  No If yes, approx. how many properties will be totally acquired? \_\_\_\_\_
- e. Involve relocation assistance for displaced person(s) and/or businesses?  Yes  No  
 If yes, approximately how many relocations will be required? \_\_\_\_\_
- f. Involve a change in property access which results in damage to the remainder parcel?  Yes  No

If Item 7a, 7b, or 7c are marked Yes, provide an aerial map or plan sheet with project limits and proposed ROW/Temporary Construction Easement need lines. Also provide an aerial map with ROW need lines if the ROW is already owned by the LPA but has not yet been utilized as ROW for a project (i.e., trail through a park or other land previously not used for roadway/trail purposes).

8. Public Acceptance: Is it anticipated that the proposed project will receive a substantial degree of public opposition?  Yes  No

If yes, explain:

**Safety Considerations:**

**Water Trails and Paddling Routes:**

Water Trails and Paddling Routes are considered recreational areas under 23 CFR 774 (see question 10 below). Does this project include a DNR designated water trail or paddling route, as listed on this website:

<https://iowadnr.maps.arcgis.com/apps/webappviewer/index.html?id=767d75008b0f40ce922138d3c5d7f4f0>

- Yes  No

**Environmental Impacts:** -- Will the proposed project:

**ANSWER ALL QUESTIONS**

9. Involve any ground disturbance, per the example Cross Section?

- Yes  No
- a. If yes, a Cultural Resources Evaluation (CRE) shall be completed and may require an Archaeological survey. Refer to I.M. 4.120. Submittal of these documents at the time of Concept Statement submittal is not required.
  - b. If no, LPA is encouraged to complete Form 231033, Cultural Resources Assessment (CRA) Form, and submit to Location and Environment with the Concept Statement, or soon thereafter. The CRA form can be completed with the LPA's local Historic Preservation Commission (HPC), Historical Society (HS), or SOI Qualified Professional.

10. Be in the proximity of a recreational area (i.e., park, playground, trail, greenbelt, etc.) or wildlife refuge?  Yes  No  
 If no, skip to No. 11; If yes, **provide a map showing the project location and park location and amenities**, and answer the following questions:

- Yes  No a. Is the property used as a recreational area or wildlife refuge?
- Yes  No b. Is the property publicly owned? Who is the owner? Howard County/City of Elma
- Yes  No c. If it is a recreational area, is it open to the public?
- Yes  No d. Will access to the recreational area be impacted by the project?
- Yes  No e. Has the official with jurisdiction over the property or facility (recreational area or wildlife refuge) been contacted?
- f. List and describe the recreational areas or wildlife refuges, and their total area in acres.

	Description (include name of agency with jurisdiction)	Total property area (acres)
a.	Howard County - Joachim Woods Wildlife Area	40.0
b.	City of Elma - Elma Park	7.0
c.		

d.	
e.	
f.	
g.	

Yes  No g. Will any part of the identified properties be acquired as permanent right-of-way?

Describe what part will be acquired, using approximate area, the anticipated severity of impacts, why the property can't be avoided, and the steps that will be taken to mitigate or minimize impacts.

Yes  No h. Will any part of the identified properties be acquired as temporary easement?

Yes  No i. Were any of the identified properties originally acquired or developed with Federal Land and Water Conservation Act (LWCN) or similar type funds?

Yes  No j. Will the property sustain permanent adverse physical impacts?

Yes  No k. Will any of the recreational features (ball diamond, playground, picnic area, etc.) be impacted within any permanent or temporary easement?

Yes  No l. After the work is complete, will the property be changed from its original condition?

If the answer to j, k or l is no, is the agency with jurisdiction over the property in agreement with all these determinations? Attach additional documentation as necessary from the agency with jurisdiction.

For any yes answers to j, k or l, list the properties and specifically describe what part will be acquired, including approximate area, the anticipated severity of the impacts, why the property can't be avoided, and the steps that will be taken to minimize or mitigate the impacts.

For projects Administered by the Systems Planning Bureau, complete the "Park, Recreation Land, and Wildlife and Waterfowl Refuge Section 4(f) Determination form" (Form 760006). For example, this form is required when there is a recreational trail or pedestrian facility being built through a recreational area.

Yes  No 11. Determine if the project is in the proximity of known Federal or State threatened or endangered species or their habitat by completing and submitting the T&E form, as per I.M. 4.110.

Yes  No 12. Will the project involve placement of fill or dredged material into waters of the United States, including wetlands? If yes, refer to I.M. 4.130 to determine if a 404 permit is needed.

Yes  No 13. Will the project disturb 1 or more acres of land? If yes, NPDES General Permit No. 2 will be required by the Iowa DNR. When estimating the amount of disturbed land, include all areas where soil will be exposed at any time to erosive forces. Refer to I.M. 4.140 Storm Water Permits for more information.

Yes  No 14. Will the project require a Floodplain Permit or a Sovereign Lands permit from the Iowa DNR? Refer to I.M. 4.150 for more information.

N/A  Yes  No 15. Will the project meet the backwater and freeboard requirements shown in I.M. 4.150?

N/A  Yes  No 16. Is the proposed structure located in an area where the 100-year flood water surface elevations have been determined by a Flood Insurance Rate Map (FIRM)? Refer to I.M. 3.500 for more information.

Yes  No 17. Will the project involve the acquisition of more than 5 acres of farmland in any one-mile (or less) length of the project? Is it a water storage area? Is the area designated for city land use plan? If yes, refer to I.M. 4.170 for more information. If no, the Farmland Conversion Rating Form is not required.

Yes  No 18. Is there potential for the cleanup of any known hazardous materials? This would include areas where gas stations, dry cleaners, or other potentially hazardous sites were previous located, or would include items containing asbestos or lead paint. Refer to this site for more information:  
<https://programs.iowadnr.gov/contaminatedsites/>

- Yes  No 19. Will the project have significant noise, air quality, or water quality impacts that may raise public concern or warrant special mitigation measures? If yes, describe the types of impacts anticipated and the proposed mitigation, if any.
  - Yes  No a. Noise impacts? Specifically describe: Noise during construction. No permanent impacts
  - Yes  No b. Aesthetic impacts? Specifically describe:
  - Yes  No c. Reduced access? Specifically describe: Temporary reduced access during construction. No permanent impacts
  - Yes  No d. Vibration impacts? Specifically describe:
- Yes  No 20. Is the project in a special landscape area of the Loess Hills?  
 Yes  No Is the project in the National Rivers Inventory? Refer to this site for more information:  
<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>
- Yes  No 21. Will the proposed project be within a 20,000-foot radius of a public airport?  
Refer to I.M. 4.190 to determine whether to answer yes or no.
- Yes  No Will the Federal Aviation Administration (FAA) need to be notified? If yes, follow the procedures in I.M. 4.190.
- Yes  No 22. Will the proposed project have a railroad crossing or railroad signals within the project limits?  
If yes, contact the railroad company to develop an agreement. Refer to I.M. 3.670 and I.M. 3.680.  
Which railroad is affected? \_\_\_\_\_
- Yes  No 23. Is the distance from the railroad crossing at a side road less than 100 feet? If so, the railroad crossing will need further review to determine if adequate traffic control, warning devices, and crossing surfaces are in place. Refer to I.M. 3.680.
- Yes  No 24. Will the proposed project include Intelligent Transportation System (ITS) elements? If yes, include a map showing the approximate areas of impacts.  
*\* Grooved in Pavement Markings (E/Edge Lines)*

# CONCEPT STATEMENT FOR LOCAL PUBLIC AGENCY FEDERAL-AID PROJECTS

**Please Note:** Before completing this form, refer to the Concept Statement Instructions located in [Instructional Memorandum \(I.M.\) 3.020 Concept Statement Instructions](#).

### GENERAL INFORMATION:

County: Fayette City: Wadena Date Submitted: \_\_\_\_\_  Original Submittal  Revised  
 Project No: \_\_\_\_\_ In STIP?  Y  N STIP Year(s): \_\_\_\_\_ Estimated Letting Date: \_\_\_\_\_  
 Contact Person: Joel Fantz Phone Number: 5634223552  
 Title: County Engineer  
 Address: 114 N Vine St., West Union, IA 52175 E-mail: jfantz@co.fayette.ia.us

1.a Project Location Description (include road or street name(s):

**ATTACH A DETAILED LOCATION MAP  
OR LINK TPMS Development Map**

Yes  No The map in TPMS Development is accurate. If no, please correct the map as soon as possible and attach a paper map with this submittal.

The TPMS Development map can be found at the following link, by adding the TPMS ID number to the end of the web address below.  
<https://www.tpms.org/#development/projects/>

1. b.

Section: 27 Township: 93 Range: 7 TPMS ID No.: \_\_\_\_\_

2. Type of Work (check all that apply):

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> HMA Paving                 | <input type="checkbox"/> Grading                    | <input type="checkbox"/> PCC Widening            | <input type="checkbox"/> Bicycle or pedestrian facilities   |
| <input checked="" type="checkbox"/> HMA Resurfacing | <input type="checkbox"/> Intersection Modifications | <input type="checkbox"/> RCB Culvert             | <input type="checkbox"/> Scenic or landscaping improvements |
| <input checked="" type="checkbox"/> HMA Widening    | <input type="checkbox"/> Lighting                   | <input type="checkbox"/> Traffic Signals         | <input type="checkbox"/> Historic restoration or renovation |
| <input type="checkbox"/> Bridge Replacement         | <input type="checkbox"/> Patching                   | <input type="checkbox"/> Other (describe): _____ |   |
| <input type="checkbox"/> Bridge Rehabilitation      | <input type="checkbox"/> PCC Paving                 |  |   |

3. Project Length: 1.7 miles (to nearest tenth)

4. Existing Bridge Information: FHWA No.: \_\_\_\_\_ Year Built: \_\_\_\_\_ Size: \_\_\_\_\_  
 Type: \_\_\_\_\_

5. Project Costs: For each item that applies, indicate if Federal-aid reimbursement will be requested. If yes, enter the estimated cost.  
 Note: **When using STBG and/or Bridge funding, the use of Federal-aid will only be allowed for Construction.**

Federal-aid?	Cost Item	Total Estimated Cost
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Preliminary engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Construction engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Acquisition of land or property rights (if yes, see <a href="#">I.M. 3.600</a> )	_____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Construction	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Utility relocation (if yes, see <a href="#">I.M. 3.640</a> and <a href="#">I.M. 3.650</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Railroad work (if yes, see <a href="#">I.M. 3.670</a> and <a href="#">I.M. 3.680</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	In-kind contribution (attach documentation as per <a href="#">I.M. 3.050</a> )	_____

6. Total Federal-Aid (as shown in the STIP): \$ \_\_\_\_\_ Total Estimated Project Cost: \_\_\_\_\_  
 Yes  No Has the LPA secured other funds, such as HSIP, TSIP, U-STEP, C-STEP, etc. \_\_\_\_\_

If yes, enter information regarding other funding sources the LPA has been awarded, has applied for, or intends to apply for:

**ANSWER ALL SIX QUESTIONS**

7. Estimate of Land or Property Acquisition Impacts: - - Will the proposed project:
- a. Require temporary construction easements?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - b. Require permanent easement(s) or fee title?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - c. Require borrow material?  Yes  No If yes, indicate the proposed source (check all that apply):  
 New borrow area  Contractor furnished  Existing borrow area  Within existing right-of-way  Not yet determined
  - d. Require total property acquisition(s)?  Yes  No If yes, approx. how many properties will be totally acquired? \_\_\_\_\_
  - e. Involve relocation assistance for displaced person(s) and/or businesses?  Yes  No  
 If yes, approximately how many relocations will be required? \_\_\_\_\_
  - f. Involve a change in property access which results in damage to the remainder parcel?  Yes  No

If Item 7a, 7b, or 7c are marked Yes, provide an aerial map or plan sheet with project limits and proposed ROW/Temporary Construction Easement need lines. Also provide an aerial map with ROW need lines if the ROW is already owned by the LPA but has not yet been utilized as ROW for a project (i.e., trail through a park or other land previously not used for roadway/trail purposes).

8. Public Acceptance: Is it anticipated that the proposed project will receive a substantial degree of public opposition?  Yes  No  
 If yes, explain:

**Safety Considerations:**

**Water Trails and Paddling Routes:**

Water Trails and Paddling Routes are considered recreational areas under 23 CFR 774 (see question 10 below). Does this project include a DNR designated water trail or paddling route, as listed on this website:  
<https://iowadnr.maps.arcgis.com/apps/webappviewer/index.html?id=767d75008b0f40ce922138d3c5d7f4f0>  
 Yes  No

**ANSWER ALL QUESTIONS**

**Environmental Impacts:** - - Will the proposed project:

9. Involve any ground disturbance, per the example [Cross Section](#)?
- Yes  No a. If yes, a Cultural Resources Evaluation (CRE) shall be completed and may require an Archaeological survey. Refer to [I.M. 4.120](#). Submittal of these documents at the time of Concept Statement submittal is not required.
  - b. If no, LPA is encouraged to complete [Form 231033, Cultural Resources Assessment \(CRA\) Form](#), and submit to Location and Environment with the Concept Statement, or soon thereafter. The CRA form can be completed with the LPA's local Historic Preservation Commission (HPC), Historical Society (HS), or SOI Qualified Professional.

10. Be in the proximity of a recreational area (i.e., park, playground, trail, greenbelt, etc.) or wildlife refuge?  Yes  No  
 If no, skip to No. 11; If yes, **provide a map showing the project location and park location and amenities**, and answer the following questions:

- Yes  No a. Is the property used as a recreational area or wildlife refuge?
- Yes  No b. Is the property publicly owned? Who is the owner? \_\_\_\_\_
- Yes  No c. If it is a recreational area, is it open to the public?
- Yes  No d. Will access to the recreational area be impacted by the project?
- Yes  No e. Has the official with jurisdiction over the property or facility (recreational area or wildlife refuge) been contacted?
- f. List and describe the recreational areas or wildlife refuges, and their total area in acres.

	Description (include name of agency with jurisdiction)	Total property area (acres)
a.	Wadena City Park	1.24
b.		
c.		

d.	
e.	
f.	
g.	

Yes  No g. Will any part of the identified properties be acquired as permanent right-of-way?

Describe what part will be acquired, using approximate area, the anticipated severity of impacts, why the property can't be avoided, and the steps that will be taken to mitigate or minimize impacts.

Yes  No h. Will any part of the identified properties be acquired as temporary easement?

Yes  No i. Were any of the identified properties originally acquired or developed with Federal Land and Water Conservation Act (LWCN) or similar type funds?

Yes  No j. Will the property sustain permanent adverse physical impacts?

Yes  No k. Will any of the recreational features (ball diamond, playground, picnic area, etc.) be impacted within any permanent or temporary easement?

Yes  No l. After the work is complete, will the property be changed from its original condition?

If the answer to j, k or l is no, is the agency with jurisdiction over the property in agreement with all these determinations? Attach additional documentation as necessary from the agency with jurisdiction.

For any yes answers to j, k or l, list the properties and specifically describe what part will be acquired, including approximate area, the anticipated severity of the impacts, why the property can't be avoided, and the steps that will be taken to minimize or mitigate the impacts.

For projects Administered by the Systems Planning Bureau, complete the "Park, Recreation Land, and Wildlife and Waterfowl Refuge Section 4(f) Determination form" ([Form 760006](#)). For example, this form is required when there is a recreational trail or pedestrian facility being built through a recreational area.

Yes  No 11. Determine if the project is in the proximity of known Federal or State threatened or endangered species or their habitat by completing and submitting the T&E form, as per [I.M. 4.110](#).

Yes  No 12. Will the project involve placement of fill or dredged material into waters of the United States, including wetlands? If yes, refer to [I.M. 4.130](#) to determine if a 404 permit is needed.

Yes  No 13. Will the project disturb 1 or more acres of land? If yes, NPDES General Permit No. 2 will be required by the Iowa DNR. When estimating the amount of disturbed land, include all areas where soil will be exposed at any time to erosive forces. Refer to [I.M. 4.140](#) Storm Water Permits for more information.

Yes  No 14. Will the project require a Floodplain Permit or a Sovereign Lands permit from the Iowa DNR? Refer to [I.M. 4.150](#) for more information.

Yes  No 15. Will the project meet the backwater and freeboard requirements shown in [I.M. 4.150](#)?

Yes  No 16. Is the proposed structure located in an area where the 100-year flood water surface elevations have been determined by a Flood Insurance Rate Map (FIRM)? Refer to [I.M. 3.500](#) for more information.

Yes  No 17. Will the project involve the acquisition of more than 5 acres of farmland in any one-mile (or less) length of the project? Is it a water storage area? Is the area designated for city land use plan? If yes, refer to [I.M. 4.170](#) for more information. If no, the Farmland Conversion Rating Form is not required.

Yes  No 18. Is there potential for the cleanup of any known hazardous materials? This would include areas where gas stations, dry cleaners, or other potentially hazardous sites were previous located, or would include items containing asbestos or lead paint. Refer to this site for more information: <https://programs.iowadnr.gov/contaminatedsites/>

- Yes  No 19. Will the project have significant noise, air quality, or water quality impacts that may raise public concern or warrant special mitigation measures? If yes, describe the types of impacts anticipated and the proposed mitigation, if any.
  
- Yes  No a. Noise impacts? Specifically describe:
- Yes  No b. Aesthetic impacts? Specifically describe:
- Yes  No c. Reduced access? Specifically describe:
- Yes  No d. Vibration impacts? Specifically describe:
- Yes  No 20. Is the project in a special landscape area of the Loess Hills?
- Yes  No Is the project in the National Rivers Inventory? Refer to this site for more information:  
<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>
- Yes  No 21. Will the proposed project be within a 20,000-foot radius of a public airport?  
Refer to [I.M. 4.190](#) to determine whether to answer yes or no.
- Yes  No Will the Federal Aviation Administration (FAA) need to be notified? If yes, follow the procedures in [I.M. 4.190](#).
- Yes  No 22. Will the proposed project have a railroad crossing or railroad signals within the project limits?  
If yes, contact the railroad company to develop an agreement. Refer to [I.M. 3.670](#) and [I.M. 3.680](#).  
Which railroad is affected? \_\_\_\_\_
- Yes  No 23. Is the distance from the railroad crossing at a side road less than 100 feet? If so, the railroad crossing will need further review to determine if adequate traffic control, warning devices, and crossing surfaces are in place. Refer to [I.M. 3.680](#).
- Yes  No 24. Will the proposed project include Intelligent Transportation System (ITS) elements? If yes, include a map showing the approximate areas of impacts.



25. Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. **Design Check column is for Department Use Only.**

**Facility Name:** W51

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 860 (Year = 2021) Design Year AADT: 2041 (Year = 920) % Trucks: 10

**Design Speed:** 25 mph **Posted Speed:** 25 mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, attach documentation for each exception requested.

Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	11	
Traveled way surface type	Asphalt	Asphalt	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)	40	40	
Curb and gutter width (ft)	2	2	
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)	9	9	
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	30	30	
Shoulder surface type	Granular	Asphalt/Granular	
Shoulder width (ft)	4	4	
Fore slope ratio (horizontal: vertical)	2:1	2:1	
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

26. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

27. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

28. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

**CHECKLIST OF REQUIRED SUBMITTAL ITEMS**


- Location Map or TPMS Development Map link
- Form 760005 – Determination of Effect for Threatened and Endangered Species for Local Public Agencies

**CHECKLIST OF SUBMITTAL ITEMS, IF APPLICABLE**

- ROW Needs Map (if Y for 7a, 7b, 7c) - include ROW Needs lines, which can be an approximation. There is no need to create a “buffer zone”, as Location and Environment Bureau will account for a 25’ buffer when they perform the NEPA clearance.
- Cultural Resources Evaluation or Archaeological Survey (if Y for 9a). Submittal of this information at the time of Concept Statement submittal is not required; however, submittal as soon as possible will speed up the NEPA Clearance process.
- Cultural Resources Assessment (if Y for 9b). Submittal of this information is not required for Concept Statement submittal; however, submittal of this information will speed up the NEPA Clearance process.
- Recreational Area Location Map (if Y for 10)
- Explanation for using AASHTO criteria/SUDA / Acceptable criteria instead of the “Aids” tables/SUDAS Preferred (Items 25-28)
- Documentation for using 3R criteria [Address the severe safety considerations] (Items 25-28)
- Design Exception Request (Items 25-28)

Preliminary Signed

Project is a low impact overlay/reconstruction of an existing road on the existing alignment. Fayette County expects no project impacts in complying with all state and federal laws with respect to cultural resources, wetlands, threatened and endangered species, Waters of the US, NEPA regulations, utility relocation, etc. as detailed in this preliminary concept statement. Permitting in accordance with federal laws is expected to fall within general conditions and categorical exclusions of existing nationwide permits.

  
\_\_\_\_\_  
Joel D. Fantz, P.E.  
Fayette County Engineer



## Determination of Effect for Threatened & Endangered Species For Local Public Agencies

Form 760005 (07-23)

### PROJECT INFORMATION

<b>Project Number:</b>	<b>Letting Date:</b>	<b>County:</b> Fayette
<b>Project Description:</b> HMA Paving	<b>Road/Location:</b> W51, D Ave	

### PROJECT EVALUATION

**Determine what species to look for: Check IADNR and USFWS websites. Attach findings.**

**What habitats are present in the project area? Check all that apply. Attach photos of each.**

- Forest/Woodland   
  Prairie   
  Pasture   
  Stream/River   
  Residential/Urban  
 Disturbed ROW   
  Wetland   
  Row Crops   
  Other:

**Review habitat characteristics as described on IA DNR and USFWS websites for each species.**

**Is there suitable habitat for protected species present in the project area?**

Yes     No

*If No, mark **No Effect** and Section 7 is complete. Submit form with attachments.  
If Yes, move on to the next question.*

**Will the project impact suitable habitat for protected species? Ensure all feasible options to avoid impacting suitable habitat are pursued.**

Yes     No

*If No, mark **No Effect** and Section 7 is complete. Submit form with attachments.  
If Yes, what species/species habitats will be impacted? Move on to the next question.*

- Indiana Bat   
  Northern Long-eared Bat   
  Topeka Shiner   
  Other:

**Are there measures that can be taken to minimize potential impacts to species/habitat?**

Yes     No

*If No, mark **May Affect - Likely to Adversely Affect** and move-on to next section.  
Formal consultation may be required.  
If Yes, mark **May Affect - Not Likely to Adversely Affect** and list minimization measures below.  
Move-on to next section.*

### MINIMIZATION MEASURES

### PROJECT IMPACT DETAILS

**Tree Clearing for Bat Habitat Only:** Will impacts occur greater than 100 ft from an existing edge of road?

Acreage > 100 ft:      Acreage 0-100 ft:

If No, stay with **May Affect - Not Likely to Adversely Affect** determination      Max distance for clearing:  
If Yes, list acreage and move to next question.

Will impacts occur greater than 300 ft from an existing edge of road?      Acreage > 300 ft:

If Yes, list acreage and change determination to **May Affect - Likely to Adversely Affect**  
If No, stay with **May Affect - Not Likely to Adversely Affect** determination      Max distance for clearing:

### DETERMINATION OF EFFECT

- No Effect   
  May Affect – Not Likely to Adversely Affect   
  May Affect – Likely to Adversely Affect

**References:**

- Natural Areas Inventory   
  IA DNR Environmental Review Letter   
  Aerial Photos   
  Soils of Concern Data  
 IA DNR Website   
 USFWS Website   
 Other:

<b>Print Name of Preparer and Name of Organization:</b> Luke Bowdish, Fayette County Road Department	<b>Date:</b>
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<b>Agency Concurrence:</b>	<b>Date:</b>
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# CONCEPT STATEMENT FOR LOCAL PUBLIC AGENCY FEDERAL-AID PROJECTS

**Please Note:** Before completing this form, refer to the Concept Statement Instructions located in [Instructional Memorandum \(I.M.\) 3.020 Concept Statement Instructions](#).

### GENERAL INFORMATION:

County: Guthrie City: \_\_\_\_\_ Date Submitted: August 2023  Original Submittal  Revised  
 Project No: TPMS ID 52972 In STIP?  Y  N STIP Year(s): 2026 Estimated Letting Date: 12/2025  
 Contact Person: Josh Sebern Phone Number: 641-747-2274  
 Title: -County Engineer  
 Address: 2211 215 Rd Guthrie Center IA 501115 E-mail: j.sebern@guthriecounty.gov

1.a Project Location Description (include road or street name(s):

**ATTACH A DETAILED LOCATION MAP  
OR LINK TPMS Development Map**

Yes  No The map in TPMS Development is accurate. If no, please correct the map as soon as possible and attach a paper map with this submittal.

The TPMS Development map can be found at the following link, by adding the TPMS ID number to the end of the web address below.  
<https://www.tpms.org/#development/projects/>

1. b. Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ TPMS ID No.: \_\_\_\_\_

2. Type of Work (check all that apply):

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> HMA Paving                 | <input type="checkbox"/> Grading                    | <input type="checkbox"/> PCC Widening                 | <input type="checkbox"/> Bicycle or pedestrian facilities   |
| <input checked="" type="checkbox"/> HMA Resurfacing | <input type="checkbox"/> Intersection Modifications | <input type="checkbox"/> RCB Culvert                  | <input type="checkbox"/> Scenic or landscaping improvements |
| <input type="checkbox"/> HMA Widening               | <input type="checkbox"/> Lighting                   | <input type="checkbox"/> Traffic Signals              | <input type="checkbox"/> Historic restoration or renovation |
| <input type="checkbox"/> Bridge Replacement         | <input checked="" type="checkbox"/> Patching        | <input checked="" type="checkbox"/> Other (describe): | <u>Complete street enhancements in muni</u>                 |
| <input type="checkbox"/> Bridge Rehabilitation      | <input type="checkbox"/> PCC Paving                 |   | _____   |

3. Project Length: 12 miles (to nearest tenth)

4. Existing Bridge Information: FHWA No.: \_\_\_\_\_ Year Built: \_\_\_\_\_ Size: \_\_\_\_\_  
 Type: \_\_\_\_\_

5. Project Costs: For each item that applies, indicate if Federal-aid reimbursement will be requested. If yes, enter the estimated cost.  
 Note: **When using STBG and/or Bridge funding, the use of Federal-aid will only be allowed for Construction.**

Federal-aid?	Cost Item	Total Estimated Cost
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Preliminary engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Construction engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Acquisition of land or property rights (if yes, see <a href="#">I.M. 3.600</a> )	_____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Construction	\$9,590,000
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Utility relocation (if yes, see <a href="#">I.M. 3.640</a> and <a href="#">I.M. 3.650</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Railroad work (if yes, see <a href="#">I.M. 3.670</a> and <a href="#">I.M. 3.680</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	In-kind contribution (attach documentation as per <a href="#">I.M. 3.050</a> )	_____

6. Total Federal-Aid (as shown in the STIP): \$ \$6,247,500 requested Total Estimated Project Cost: \$9,590,000  
 Yes  No Has the LPA secured other funds, such as HSIP, TSIP, U-STEP, C-STEP, etc. \_\_\_\_\_

If yes, enter information regarding other funding sources the LPA has been awarded, has applied for, or intends to apply for:

**ANSWER ALL SIX QUESTIONS**

7. Estimate of Land or Property Acquisition Impacts: - - Will the proposed project:
- a. Require temporary construction easements?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - b. Require permanent easement(s) or fee title?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - c. Require borrow material?  Yes  No If yes, indicate the proposed source (check all that apply):  
 New borrow area  Contractor furnished  Existing borrow area  Within existing right-of-way  Not yet determined
  - d. Require total property acquisition(s)?  Yes  No If yes, approx. how many properties will be totally acquired? \_\_\_\_\_
  - e. Involve relocation assistance for displaced person(s) and/or businesses?  Yes  No  
 If yes, approximately how many relocations will be required? \_\_\_\_\_
  - f. Involve a change in property access which results in damage to the remainder parcel?  Yes  No

If Item 7a, 7b, or 7c are marked Yes, provide an aerial map or plan sheet with project limits and proposed ROW/Temporary Construction Easement need lines. Also provide an aerial map with ROW need lines if the ROW is already owned by the LPA but has not yet been utilized as ROW for a project (i.e., trail through a park or other land previously not used for roadway/trail purposes).

8. Public Acceptance: Is it anticipated that the proposed project will receive a substantial degree of public opposition?  Yes  No  
 If yes, explain:

**Safety Considerations:**

**Water Trails and Paddling Routes:**

Water Trails and Paddling Routes are considered recreational areas under 23 CFR 774 (see question 10 below). Does this project include a DNR designated water trail or paddling route, as listed on this website:  
<https://iowadnr.maps.arcgis.com/apps/webappviewer/index.html?id=767d75008b0f40ce922138d3c5d7f4f0>  
 Yes  No

**ANSWER ALL QUESTIONS**

**Environmental Impacts:** - - Will the proposed project:

9. Involve any ground disturbance, per the example [Cross Section](#)?
- Yes  No a. If yes, a Cultural Resources Evaluation (CRE) shall be completed and may require an Archaeological survey. Refer to [I.M. 4.120](#). Submittal of these documents at the time of Concept Statement submittal is not required.
  - b. If no, LPA is encouraged to complete [Form 231033, Cultural Resources Assessment \(CRA\) Form](#), and submit to Location and Environment with the Concept Statement, or soon thereafter. The CRA form can be completed with the LPA's local Historic Preservation Commission (HPC), Historical Society (HS), or SOI Qualified Professional.

10. Be in the proximity of a recreational area (i.e., park, playground, trail, greenbelt, etc.) or wildlife refuge?  Yes  No  
 If no, skip to No. 11; If yes, **provide a map showing the project location and park location and amenities**, and answer the following questions:

- Yes  No a. Is the property used as a recreational area or wildlife refuge?
- Yes  No b. Is the property publicly owned? Who is the owner? \_\_\_\_\_
- Yes  No c. If it is a recreational area, is it open to the public?
- Yes  No d. Will access to the recreational area be impacted by the project?
- Yes  No e. Has the official with jurisdiction over the property or facility (recreational area or wildlife refuge) been contacted?
- f. List and describe the recreational areas or wildlife refuges, and their total area in acres.

	Description (include name of agency with jurisdiction)	Total property area (acres)
a.		
b.		
c.		



d.	
e.	
f.	
g.	

Yes  No g. Will any part of the identified properties be acquired as permanent right-of-way?

Describe what part will be acquired, using approximate area, the anticipated severity of impacts, why the property can't be avoided, and the steps that will be taken to mitigate or minimize impacts.

Yes  No h. Will any part of the identified properties be acquired as temporary easement?

Yes  No i. Were any of the identified properties originally acquired or developed with Federal Land and Water Conservation Act (LWCN) or similar type funds?

Yes  No j. Will the property sustain permanent adverse physical impacts?

Yes  No k. Will any of the recreational features (ball diamond, playground, picnic area, etc.) be impacted within any permanent or temporary easement?

Yes  No l. After the work is complete, will the property be changed from its original condition?

If the answer to j, k or l is no, is the agency with jurisdiction over the property in agreement with all these determinations? Attach additional documentation as necessary from the agency with jurisdiction.

For any yes answers to j, k or l, list the properties and specifically describe what part will be acquired, including approximate area, the anticipated severity of the impacts, why the property can't be avoided, and the steps that will be taken to minimize or mitigate the impacts.

For projects Administered by the Systems Planning Bureau, complete the "Park, Recreation Land, and Wildlife and Waterfowl Refuge Section 4(f) Determination form" ([Form 760006](#)). For example, this form is required when there is a recreational trail or pedestrian facility being built through a recreational area.

Yes  No 11. Determine if the project is in the proximity of known Federal or State threatened or endangered species or their habitat by completing and submitting the T&E form, as per [I.M. 4.110](#).

Yes  No 12. Will the project involve placement of fill or dredged material into waters of the United States, including wetlands? If yes, refer to [I.M. 4.130](#) to determine if a 404 permit is needed.

Yes  No 13. Will the project disturb 1 or more acres of land? If yes, NPDES General Permit No. 2 will be required by the Iowa DNR. When estimating the amount of disturbed land, include all areas where soil will be exposed at any time to erosive forces. Refer to [I.M. 4.140](#) Storm Water Permits for more information.

Yes  No 14. Will the project require a Floodplain Permit or a Sovereign Lands permit from the Iowa DNR? Refer to [I.M. 4.150](#) for more information.

Yes  No 15. Will the project meet the backwater and freeboard requirements shown in [I.M. 4.150](#)?

Yes  No 16. Is the proposed structure located in an area where the 100-year flood water surface elevations have been determined by a Flood Insurance Rate Map (FIRM)? Refer to [I.M. 3.500](#) for more information.

Yes  No 17. Will the project involve the acquisition of more than 5 acres of farmland in any one-mile (or less) length of the project? Is it a water storage area? Is the area designated for city land use plan? If yes, refer to [I.M. 4.170](#) for more information. If no, the Farmland Conversion Rating Form is not required.

Yes  No 18. Is there potential for the cleanup of any known hazardous materials? This would include areas where gas stations, dry cleaners, or other potentially hazardous sites were previous located, or would include items containing asbestos or lead paint. Refer to this site for more information: <https://programs.iowadnr.gov/contaminatedsites/>

- Yes  No 19. Will the project have significant noise, air quality, or water quality impacts that may raise public concern or warrant special mitigation measures? If yes, describe the types of impacts anticipated and the proposed mitigation, if any.
  - Yes  No a. Noise impacts? Specifically describe:
  - Yes  No b. Aesthetic impacts? Specifically describe:
  - Yes  No c. Reduced access? Specifically describe:
  - Yes  No d. Vibration impacts? Specifically describe:
- Yes  No 20. Is the project in a special landscape area of the Loess Hills?  
 Yes  No Is the project in the National Rivers Inventory? Refer to this site for more information:  
<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>
- Yes  No 21. Will the proposed project be within a 20,000-foot radius of a public airport?  
Refer to [I.M. 4.190](#) to determine whether to answer yes or no.  
 Yes  No Will the Federal Aviation Administration (FAA) need to be notified? If yes, follow the procedures in [I.M. 4.190](#).
- Yes  No 22. Will the proposed project have a railroad crossing or railroad signals within the project limits?  
If yes, contact the railroad company to develop an agreement. Refer to [I.M. 3.670](#) and [I.M. 3.680](#).  
Which railroad is affected? \_\_\_\_\_
- Yes  No 23. Is the distance from the railroad crossing at a side road less than 100 feet? If so, the railroad crossing will need further review to determine if adequate traffic control, warning devices, and crossing surfaces are in place. Refer to [I.M. 3.680](#).
- Yes  No 24. Will the proposed project include Intelligent Transportation System (ITS) elements? If yes, include a map showing the approximate areas of impacts.

25. Project Design Elements -- Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** White Pole Road, County Rd F65

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 2300 (Year = 2023) Design Year AADT: 2600 (Year = 2043) % Trucks: 20

**Design Speed:** 55 mph **Posted Speed:** 55 mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, attach documentation for each exception requested.

Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	12	
Traveled way surface type	HMA over PCC	HMA Overlay	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	Varies 26 to 32	32	
Shoulder surface type	Granular	Granular/millings	
Shoulder width (ft)	Varies 2 to 5 ft	4 ft	
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A	Match existing	
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

26. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

27. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

28. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

**CHECKLIST OF REQUIRED SUBMITTAL ITEMS**

- Location Map or TPMS Development Map link
- Form 760005 – Determination of Effect for Threatened and Endangered Species for Local Public Agencies

**CHECKLIST OF SUBMITTAL ITEMS, IF APPLICABLE**

- ROW Needs Map (if Y for 7a, 7b, 7c) - include ROW Needs lines, which can be an approximation. There is no need to create a “buffer zone”, as Location and Environment Bureau will account for a 25’ buffer when they perform the NEPA clearance.
- Cultural Resources Evaluation or Archaeological Survey (if Y for 9a). Submittal of this information at the time of Concept Statement submittal is not required; however, submittal as soon as possible will speed up the NEPA Clearance process.
- Cultural Resources Assessment (if Y for 9b). Submittal of this information is not required for Concept Statement submittal; however, submittal of this information will speed up the NEPA Clearance process.
- Recreational Area Location Map (if Y for 10)
- Explanation for using AASHTO criteria/SUDAS Acceptable criteria instead of the “Aids” tables/SUDAS Preferred (Items 25-28)
- Documentation for using 3R criteria [Address the seven safety considerations] (Items 25-28)
- Design Exception Request (Items 25-28)

# CONCEPT STATEMENT FOR LOCAL PUBLIC AGENCY FEDERAL-AID PROJECTS

**Please Note:** Before completing this form, refer to the Concept Statement Instructions located in [Instructional Memorandum \(I.M.\) 3.020 Concept Statement Instructions](#).

**GENERAL INFORMATION:**

County: Mitchell City: Stacyville Date Submitted: \_\_\_\_\_  Original Submittal  Revised  
 Project No: ILL- C066()-92-66 In STIP?  Y  N STIP Year(s): 2025 Estimated Letting Date: 1/2025  
 Contact Person: Richard Brumm Phone Number: 641-732-5849  
 Title: County Engineer  
 Address: 3625 March Ave., Osage IA 50461 E-mail: rbrumm@mitchellcoia.us

**ATTACH A DETAILED LOCATION MAP  
OR LINK TPMS Development Map**

1.a Project Location Description (include road or street name(s):

Yes  No The map in TPMS Development is accurate. If no, please correct the map as soon as possible and attach a paper map with this submittal.

The TPMS Development map can be found at the following link, by adding the TPMS ID number to the end of the web address below.  
<https://www.tpms.org/#development/projects/>

1. b. Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ TPMS ID No.: 52978

2. Type of Work (check all that apply):

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> HMA Paving            | <input type="checkbox"/> Grading                    | <input type="checkbox"/> PCC Widening            | <input type="checkbox"/> Bicycle or pedestrian facilities   |
| <input type="checkbox"/> HMA Resurfacing       | <input type="checkbox"/> Intersection Modifications | <input type="checkbox"/> RCB Culvert             | <input type="checkbox"/> Scenic or landscaping improvements |
| <input type="checkbox"/> HMA Widening          | <input type="checkbox"/> Lighting                   | <input type="checkbox"/> Traffic Signals         | <input type="checkbox"/> Historic restoration or renovation |
| <input type="checkbox"/> Bridge Replacement    | <input type="checkbox"/> Patching                   | <input type="checkbox"/> Other (describe): _____ |   |
| <input type="checkbox"/> Bridge Rehabilitation | <input checked="" type="checkbox"/> PCC Paving      |  |   |

3. Project Length: 6.6 miles (to nearest tenth)

4. Existing Bridge Information: FHWA No.: \_\_\_\_\_ Year Built: \_\_\_\_\_ Size: \_\_\_\_\_  
 Type: \_\_\_\_\_

5. Project Costs: For each item that applies, indicate if Federal-aid reimbursement will be requested. If yes, enter the estimated cost.  
 Note: **When using STBG and/or Bridge funding, the use of Federal-aid will only be allowed for Construction.**

Federal-aid?	Cost Item	Total Estimated Cost
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Preliminary engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Construction engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Acquisition of land or property rights (if yes, see <a href="#">I.M. 3.600</a> )	_____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Construction	7,378,203
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Utility relocation (if yes, see <a href="#">I.M. 3.640</a> and <a href="#">I.M. 3.650</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Railroad work (if yes, see <a href="#">I.M. 3.670</a> and <a href="#">I.M. 3.680</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	In-kind contribution (attach documentation as per <a href="#">I.M. 3.050</a> )	_____

6. Total Federal-Aid (as shown in the STIP): \$ 5,522,652 Total Estimated Project Cost: 7,528,203  
 Yes  No Has the LPA secured other funds, such as HSIP, TSIP, U-STEP, C-STEP, etc. \_\_\_\_\_

If yes, enter information regarding other funding sources the LPA has been awarded, has applied for, or intends to apply for:



**ANSWER ALL SIX QUESTIONS**

7. Estimate of Land or Property Acquisition Impacts: - - Will the proposed project:
- a. Require temporary construction easements?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - b. Require permanent easement(s) or fee title?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - c. Require borrow material?  Yes  No If yes, indicate the proposed source (check all that apply):  
 New borrow area  Contractor furnished  Existing borrow area  Within existing right-of-way  Not yet determined
  - d. Require total property acquisition(s)?  Yes  No If yes, approx. how many properties will be totally acquired? \_\_\_\_\_
  - e. Involve relocation assistance for displaced person(s) and/or businesses?  Yes  No  
 If yes, approximately how many relocations will be required? \_\_\_\_\_
  - f. Involve a change in property access which results in damage to the remainder parcel?  Yes  No

If Item 7a, 7b, or 7c are marked Yes, provide an aerial map or plan sheet with project limits and proposed ROW/Temporary Construction Easement need lines. Also provide an aerial map with ROW need lines if the ROW is already owned by the LPA but has not yet been utilized as ROW for a project (i.e., trail through a park or other land previously not used for roadway/trail purposes).

8. Public Acceptance: Is it anticipated that the proposed project will receive a substantial degree of public opposition?  Yes  No  
 If yes, explain:

**Safety Considerations:**

**Water Trails and Paddling Routes:**

Water Trails and Paddling Routes are considered recreational areas under 23 CFR 774 (see question 10 below). Does this project include a DNR designated water trail or paddling route, as listed on this website:  
<https://iowadnr.maps.arcgis.com/apps/webappviewer/index.html?id=767d75008b0f40ce922138d3c5d7f4f0>  
 Yes  No

**ANSWER ALL QUESTIONS**

**Environmental Impacts:** - - Will the proposed project:

9. Involve any ground disturbance, per the example [Cross Section](#)?
- Yes  No a. If yes, a Cultural Resources Evaluation (CRE) shall be completed and may require an Archaeological survey. Refer to [I.M. 4.120](#). Submittal of these documents at the time of Concept Statement submittal is not required.
  - b. If no, LPA is encouraged to complete [Form 231033, Cultural Resources Assessment \(CRA\) Form](#), and submit to Location and Environment with the Concept Statement, or soon thereafter. The CRA form can be completed with the LPA's local Historic Preservation Commission (HPC), Historical Society (HS), or SOI Qualified Professional.
10. Be in the proximity of a recreational area (i.e., park, playground, trail, greenbelt, etc.) or wildlife refuge?  Yes  No  
 If no, skip to No. 11; If yes, **provide a map showing the project location and park location and amenities**, and answer the following questions:
- Yes  No a. Is the property used as a recreational area or wildlife refuge?
  - Yes  No b. Is the property publicly owned? Who is the owner? Mitchell County/ City of Stacyville
  - Yes  No c. If it is a recreational area, is it open to the public?
  - Yes  No d. Will access to the recreational area be impacted by the project?
  - Yes  No e. Has the official with jurisdiction over the property or facility (recreational area or wildlife refuge) been contacted?
  - f. List and describe the recreational areas or wildlife refuges, and their total area in acres.

	Description (include name of agency with jurisdiction)	Total property area (acres)
a.	Riverside Park / Campground Owner- Mitchell County	15
b.	Stacyville City Park Owner - City of Stacyville	1.6
c.		

d.	
e.	
f.	
g.	

Yes  No g. Will any part of the identified properties be acquired as permanent right-of-way?

Describe what part will be acquired, using approximate area, the anticipated severity of impacts, why the property can't be avoided, and the steps that will be taken to mitigate or minimize impacts.

Yes  No h. Will any part of the identified properties be acquired as temporary easement?

Yes  No i. Were any of the identified properties originally acquired or developed with Federal Land and Water Conservation Act (LWCN) or similar type funds?

Yes  No j. Will the property sustain permanent adverse physical impacts?

Yes  No k. Will any of the recreational features (ball diamond, playground, picnic area, etc.) be impacted within any permanent or temporary easement?

Yes  No l. After the work is complete, will the property be changed from its original condition?

If the answer to j, k or l is no, is the agency with jurisdiction over the property in agreement with all these determinations? Attach additional documentation as necessary from the agency with jurisdiction.

For any yes answers to j, k or l, list the properties and specifically describe what part will be acquired, including approximate area, the anticipated severity of the impacts, why the property can't be avoided, and the steps that will be taken to minimize or mitigate the impacts.

For projects Administered by the Systems Planning Bureau, complete the "Park, Recreation Land, and Wildlife and Waterfowl Refuge Section 4(f) Determination form" ([Form 760006](#)). For example, this form is required when there is a recreational trail or pedestrian facility being built through a recreational area.

Yes  No 11. Determine if the project is in the proximity of known Federal or State threatened or endangered species or their habitat by completing and submitting the T&E form, as per [I.M. 4.110](#).

Yes  No 12. Will the project involve placement of fill or dredged material into waters of the United States, including wetlands? If yes, refer to [I.M. 4.130](#) to determine if a 404 permit is needed.

Yes  No 13. Will the project disturb 1 or more acres of land? If yes, NPDES General Permit No. 2 will be required by the Iowa DNR. When estimating the amount of disturbed land, include all areas where soil will be exposed at any time to erosive forces. Refer to [I.M. 4.140](#) Storm Water Permits for more information.

Yes  No 14. Will the project require a Floodplain Permit or a Sovereign Lands permit from the Iowa DNR? Refer to [I.M. 4.150](#) for more information.

Yes  No 15. Will the project meet the backwater and freeboard requirements shown in [I.M. 4.150](#)?

Yes  No 16. Is the proposed structure located in an area where the 100-year flood water surface elevations have been determined by a Flood Insurance Rate Map (FIRM)? Refer to [I.M. 3.500](#) for more information.

Yes  No 17. Will the project involve the acquisition of more than 5 acres of farmland in any one-mile (or less) length of the project? Is it a water storage area? Is the area designated for city land use plan? If yes, refer to [I.M. 4.170](#) for more information. If no, the Farmland Conversion Rating Form is not required.

Yes  No 18. Is there potential for the cleanup of any known hazardous materials? This would include areas where gas stations, dry cleaners, or other potentially hazardous sites were previous located, or would include items containing asbestos or lead paint. Refer to this site for more information: <https://programs.iowadnr.gov/contaminatedsites/>

- Yes  No 19. Will the project have significant noise, air quality, or water quality impacts that may raise public concern or warrant special mitigation measures? If yes, describe the types of impacts anticipated and the proposed mitigation, if any.
  - Yes  No a. Noise impacts? Specifically describe:
  - Yes  No b. Aesthetic impacts? Specifically describe:
  - Yes  No c. Reduced access? Specifically describe:
  - Yes  No d. Vibration impacts? Specifically describe:
- Yes  No 20. Is the project in a special landscape area of the Loess Hills?  
 Yes  No Is the project in the National Rivers Inventory? Refer to this site for more information:  
<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>
- Yes  No 21. Will the proposed project be within a 20,000-foot radius of a public airport?  
Refer to [I.M. 4.190](#) to determine whether to answer yes or no.  
 Yes  No Will the Federal Aviation Administration (FAA) need to be notified? If yes, follow the procedures in [I.M. 4.190](#).
- Yes  No 22. Will the proposed project have a railroad crossing or railroad signals within the project limits?  
If yes, contact the railroad company to develop an agreement. Refer to [I.M. 3.670](#) and [I.M. 3.680](#).  
Which railroad is affected? \_\_\_\_\_
- Yes  No 23. Is the distance from the railroad crossing at a side road less than 100 feet? If so, the railroad crossing will need further review to determine if adequate traffic control, warning devices, and crossing surfaces are in place. Refer to [I.M. 3.680](#).
- Yes  No 24. Will the proposed project include Intelligent Transportation System (ITS) elements? If yes, include a map showing the approximate areas of impacts.

25. Project Design Elements -- Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** T40 Rural

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 1270 (Year = \_\_\_\_ ) Design Year AADT: \_\_\_\_ (Year = \_\_\_\_ ) % Trucks: \_\_\_\_

**Design Speed:** \_\_\_\_ mph **Posted Speed:** \_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, attach documentation for each exception requested.

Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	12	12	
Traveled way surface type	HMA	PCC	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	31	31	
Shoulder surface type	granular	PCC /granular	
Shoulder width (ft)	4	4	
Fore slope ratio (horizontal: vertical)	UAC	UAC	
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

26. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** T40 Urban (2200')

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 1270 (Year = \_\_\_\_ ) Design Year AADT: \_\_\_\_ (Year = \_\_\_\_ ) % Trucks: \_\_\_\_

**Design Speed:** \_\_\_\_ mph **Posted Speed:** \_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	11	
Traveled way surface type	HMA	PCC	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)	30	30	
Curb and gutter width (ft)	4	4	
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)	12	12	
Horizontal clearance (ft)	20	20	
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

27. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** A23 West and from Bridge east

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 610 (Year = \_\_\_\_ ) Design Year AADT: \_\_\_\_ (Year = \_\_\_\_ ) % Trucks: \_\_\_\_

**Design Speed:** \_\_\_\_ mph **Posted Speed:** \_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	11	
Traveled way surface type	PCC	PCC	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	22	22	
Shoulder surface type	granular/soil	granular/soil	
Shoulder width (ft)	4	4	
Fore slope ratio (horizontal: vertical)	UAC	UAC	
Clear zone distance (ft). See I.M. 3.240.	N/A	UAC	
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	5 <input checked="" type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type		PCC Sidewalk to Park	
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

28. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

A23 East to

**Facility Name:** Bridge

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 570 (Year = \_\_\_\_ ) Design Year AADT: \_\_\_\_ (Year = \_\_\_\_ ) % Trucks: \_\_\_\_

**Design Speed:** \_\_\_\_ mph **Posted Speed:** \_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	11	
Traveled way surface type	HMA	PCC	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	22	22	
Shoulder surface type	HMA/Soil	HMA/Soil	
Shoulder width (ft)	2-6	2-6	
Fore slope ratio (horizontal: vertical)	UAC	UAC	
Clear zone distance (ft). See I.M. 3.240.	N/A	UAC	
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

**CHECKLIST OF REQUIRED SUBMITTAL ITEMS**

- Location Map or TPMS Development Map link
- Form 760005 – Determination of Effect for Threatened and Endangered Species for Local Public Agencies

**CHECKLIST OF SUBMITTAL ITEMS, IF APPLICABLE**

- ROW Needs Map (if Y for 7a, 7b, 7c) - include ROW Needs lines, which can be an approximation. There is no need to create a “buffer zone”, as Location and Environment Bureau will account for a 25’ buffer when they perform the NEPA clearance.
- Cultural Resources Evaluation or Archaeological Survey (if Y for 9a). Submittal of this information at the time of Concept Statement submittal is not required; however, submittal as soon as possible will speed up the NEPA Clearance process.
- Cultural Resources Assessment (if Y for 9b). Submittal of this information is not required for Concept Statement submittal; however, submittal of this information will speed up the NEPA Clearance process.
- Recreational Area Location Map (if Y for 10)
- Explanation for using AASHTO criteria/SUDAS Acceptable criteria instead of the “Aids” tables/SUDAS Preferred (Items 25-28)
- Documentation for using 3R criteria [Address the seven safety considerations] (Items 25-28)
- Design Exception Request (Items 25-28)



# CONCEPT STATEMENT FOR LOCAL PUBLIC AGENCY FEDERAL-AID PROJECTS

**Please Note:** Before completing this form, refer to the Concept Statement Instructions located in [Instructional Memorandum \(I.M.\) 3.020 Concept Statement Instructions](#).

**GENERAL INFORMATION:**

County: Wapello City: \_\_\_\_\_ Date Submitted: 8/3/23  Original Submittal  Revised  
 Project No: ILL-C090()-92-68 In STIP?  Y  N STIP Year(s): 2025 Estimated Letting Date: 12/17/2024  
 Contact Person: Jeff Skalberg Phone Number: 641.684.5425  
 Title: Wapello County Engineer  
 Address: 536 Mill Street E-mail: jskalberg@wapellocounty.org

1.a Project Location Description (include road or street name(s):

**ATTACH A DETAILED LOCATION MAP OR LINK TPMS Development Map**

Yes  No The map in TPMS Development is accurate. If no, please correct the map as soon as possible and attach a paper map with this submittal.

The TPMS Development map can be found at the following link, by adding the TPMS ID number to the end of the web address below.  
<https://www.tpms.org/#development/projects/>

1. b. Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ TPMS ID No.: \_\_\_\_\_

2. Type of Work (check all that apply):

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> HMA Paving                 | <input type="checkbox"/> Grading                    | <input type="checkbox"/> PCC Widening            | <input type="checkbox"/> Bicycle or pedestrian facilities   |
| <input checked="" type="checkbox"/> HMA Resurfacing | <input type="checkbox"/> Intersection Modifications | <input type="checkbox"/> RCB Culvert             | <input type="checkbox"/> Scenic or landscaping improvements |
| <input type="checkbox"/> HMA Widening               | <input type="checkbox"/> Lighting                   | <input type="checkbox"/> Traffic Signals         | <input type="checkbox"/> Historic restoration or renovation |
| <input type="checkbox"/> Bridge Replacement         | <input type="checkbox"/> Patching                   | <input type="checkbox"/> Other (describe): _____ |   |
| <input type="checkbox"/> Bridge Rehabilitation      | <input type="checkbox"/> PCC Paving                 |  |   |

3. Project Length: 4.6 miles (to nearest tenth)

4. Existing Bridge Information: FHWA No.: \_\_\_\_\_ Year Built: \_\_\_\_\_ Size: \_\_\_\_\_  
 Type: \_\_\_\_\_

5. Project Costs: For each item that applies, indicate if Federal-aid reimbursement will be requested. If yes, enter the estimated cost.  
 Note: **When using STBG and/or Bridge funding, the use of Federal-aid will only be allowed for Construction.**

Federal-aid?	Cost Item	Total Estimated Cost
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Preliminary engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Construction engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Acquisition of land or property rights (if yes, see <a href="#">I.M. 3.600</a> )	_____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Construction	3,670,000
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Utility relocation (if yes, see <a href="#">I.M. 3.640</a> and <a href="#">I.M. 3.650</a> )	_____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Railroad work (if yes, see <a href="#">I.M. 3.670</a> and <a href="#">I.M. 3.680</a> )	10,000
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	In-kind contribution (attach documentation as per <a href="#">I.M. 3.050</a> )	_____

6. Total Federal-Aid (as shown in the STIP): \$ 1,200,000 Total Estimated Project Cost: 3,680,000  
 Yes  No Has the LPA secured other funds, such as HSIP, TSIP, U-STEP, C-STEP, etc. \_\_\_\_\_

If yes, enter information regarding other funding sources the LPA has been awarded, has applied for, or intends to apply for:

**ANSWER ALL SIX QUESTIONS**

7. Estimate of Land or Property Acquisition Impacts: - - Will the proposed project:
- a. Require temporary construction easements?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - b. Require permanent easement(s) or fee title?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - c. Require borrow material?  Yes  No If yes, indicate the proposed source (check all that apply):  
 New borrow area  Contractor furnished  Existing borrow area  Within existing right-of-way  Not yet determined
  - d. Require total property acquisition(s)?  Yes  No If yes, approx. how many properties will be totally acquired? \_\_\_\_\_
  - e. Involve relocation assistance for displaced person(s) and/or businesses?  Yes  No  
 If yes, approximately how many relocations will be required? \_\_\_\_\_
  - f. Involve a change in property access which results in damage to the remainder parcel?  Yes  No

If Item 7a, 7b, or 7c are marked Yes, provide an aerial map or plan sheet with project limits and proposed ROW/Temporary Construction Easement need lines. Also provide an aerial map with ROW need lines if the ROW is already owned by the LPA but has not yet been utilized as ROW for a project (i.e., trail through a park or other land previously not used for roadway/trail purposes).

8. Public Acceptance: Is it anticipated that the proposed project will receive a substantial degree of public opposition?  Yes  No  
 If yes, explain:

**Safety Considerations:**

**Water Trails and Paddling Routes:**

Water Trails and Paddling Routes are considered recreational areas under 23 CFR 774 (see question 10 below). Does this project include a DNR designated water trail or paddling route, as listed on this website:  
<https://iowadnr.maps.arcgis.com/apps/webappviewer/index.html?id=767d75008b0f40ce922138d3c5d7f4f0>  
 Yes  No

**Environmental Impacts:** - - Will the proposed project:

**ANSWER ALL QUESTIONS**

9. Involve any ground disturbance, per the example [Cross Section](#)?
- Yes  No a. If yes, a Cultural Resources Evaluation (CRE) shall be completed and may require an Archaeological survey. Refer to [I.M. 4.120](#). Submittal of these documents at the time of Concept Statement submittal is not required.
  - b. If no, LPA is encouraged to complete [Form 231033, Cultural Resources Assessment \(CRA\) Form](#), and submit to Location and Environment with the Concept Statement, or soon thereafter. The CRA form can be completed with the LPA's local Historic Preservation Commission (HPC), Historical Society (HS), or SOI Qualified Professional.

10. Be in the proximity of a recreational area (i.e., park, playground, trail, greenbelt, etc.) or wildlife refuge?  Yes  No  
 If no, skip to No. 11; If yes, **provide a map showing the project location and park location and amenities**, and answer the following questions:

- Yes  No a. Is the property used as a recreational area or wildlife refuge?
- Yes  No b. Is the property publicly owned? Who is the owner? \_\_\_\_\_
- Yes  No c. If it is a recreational area, is it open to the public?
- Yes  No d. Will access to the recreational area be impacted by the project?
- Yes  No e. Has the official with jurisdiction over the property or facility (recreational area or wildlife refuge) been contacted?
- f. List and describe the recreational areas or wildlife refuges, and their total area in acres.

	Description (include name of agency with jurisdiction)	Total property area (acres)
a.		
b.		
c.		

d.	
e.	
f.	
g.	

Yes  No g. Will any part of the identified properties be acquired as permanent right-of-way?

Describe what part will be acquired, using approximate area, the anticipated severity of impacts, why the property can't be avoided, and the steps that will be taken to mitigate or minimize impacts.

Yes  No h. Will any part of the identified properties be acquired as temporary easement?

Yes  No i. Were any of the identified properties originally acquired or developed with Federal Land and Water Conservation Act (LWCN) or similar type funds?

Yes  No j. Will the property sustain permanent adverse physical impacts?

Yes  No k. Will any of the recreational features (ball diamond, playground, picnic area, etc.) be impacted within any permanent or temporary easement?

Yes  No l. After the work is complete, will the property be changed from its original condition?

If the answer to j, k or l is no, is the agency with jurisdiction over the property in agreement with all these determinations? Attach additional documentation as necessary from the agency with jurisdiction.

For any yes answers to j, k or l, list the properties and specifically describe what part will be acquired, including approximate area, the anticipated severity of the impacts, why the property can't be avoided, and the steps that will be taken to minimize or mitigate the impacts.

For projects Administered by the Systems Planning Bureau, complete the "Park, Recreation Land, and Wildlife and Waterfowl Refuge Section 4(f) Determination form" ([Form 760006](#)). For example, this form is required when there is a recreational trail or pedestrian facility being built through a recreational area.

Yes  No 11. Determine if the project is in the proximity of known Federal or State threatened or endangered species or their habitat by completing and submitting the T&E form, as per [I.M. 4.110](#).

Yes  No 12. Will the project involve placement of fill or dredged material into waters of the United States, including wetlands? If yes, refer to [I.M. 4.130](#) to determine if a 404 permit is needed.

Yes  No 13. Will the project disturb 1 or more acres of land? If yes, NPDES General Permit No. 2 will be required by the Iowa DNR. When estimating the amount of disturbed land, include all areas where soil will be exposed at any time to erosive forces. Refer to [I.M. 4.140](#) Storm Water Permits for more information.

Yes  No 14. Will the project require a Floodplain Permit or a Sovereign Lands permit from the Iowa DNR? Refer to [I.M. 4.150](#) for more information.

Yes  No 15. Will the project meet the backwater and freeboard requirements shown in [I.M. 4.150](#)?

Yes  No 16. Is the proposed structure located in an area where the 100-year flood water surface elevations have been determined by a Flood Insurance Rate Map (FIRM)? Refer to [I.M. 3.500](#) for more information.

Yes  No 17. Will the project involve the acquisition of more than 5 acres of farmland in any one-mile (or less) length of the project? Is it a water storage area? Is the area designated for city land use plan? If yes, refer to [I.M. 4.170](#) for more information. If no, the Farmland Conversion Rating Form is not required.

Yes  No 18. Is there potential for the cleanup of any known hazardous materials? This would include areas where gas stations, dry cleaners, or other potentially hazardous sites were previous located, or would include items containing asbestos or lead paint. Refer to this site for more information: <https://programs.iowadnr.gov/contaminatedsites/>

- Yes  No 19. Will the project have significant noise, air quality, or water quality impacts that may raise public concern or warrant special mitigation measures? If yes, describe the types of impacts anticipated and the proposed mitigation, if any.
  
- Yes  No a. Noise impacts? Specifically describe:
- Yes  No b. Aesthetic impacts? Specifically describe:
- Yes  No c. Reduced access? Specifically describe:
- Yes  No d. Vibration impacts? Specifically describe:
- Yes  No 20. Is the project in a special landscape area of the Loess Hills?
- Yes  No Is the project in the National Rivers Inventory? Refer to this site for more information:  
<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>
- Yes  No 21. Will the proposed project be within a 20,000-foot radius of a public airport?  
Refer to [I.M. 4.190](#) to determine whether to answer yes or no.
- Yes  No Will the Federal Aviation Administration (FAA) need to be notified? If yes, follow the procedures in [I.M. 4.190](#).
- Yes  No 22. Will the proposed project have a railroad crossing or railroad signals within the project limits?  
If yes, contact the railroad company to develop an agreement. Refer to [I.M. 3.670](#) and [I.M. 3.680](#).  
Which railroad is affected? CP
- Yes  No 23. Is the distance from the railroad crossing at a side road less than 100 feet? If so, the railroad crossing will need further review to determine if adequate traffic control, warning devices, and crossing surfaces are in place. Refer to [I.M. 3.680](#).
- Yes  No 24. Will the proposed project include Intelligent Transportation System (ITS) elements? If yes, include a map showing the approximate areas of impacts.

25. Project Design Elements -- Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** T61

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 4840 (Year = 2018) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** 55 mph **Posted Speed:** 55 mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, attach documentation for each exception requested.

Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	11	
Traveled way surface type	HMA	HMA	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)	N/A	N/A	
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	38	38	
Shoulder surface type	Granular	Granular	
Shoulder width (ft)	8	8	
Fore slope ratio (horizontal: vertical)	3:1	3:1	
Clear zone distance (ft). See I.M. 3.240.	N/A	24	
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)	N/A	N/A	
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	11 <input checked="" type="checkbox"/> 2-way <input type="checkbox"/> 1-way	11 <input checked="" type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type	HMA	HMA	
Shoulder width (ft)	8	8	
Lateral clearance (ft)	N/A	N/A	
Vertical clearance (ft)	N/A	N/A	
Clear width of path on bridge (ft)	N/A	N/A	
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

26. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** T61

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 4840 (Year = 2018) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** 25 mph **Posted Speed:** 25 mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	11	11	
Traveled way surface type	PCC	PCC	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)	46	46	
Curb and gutter width (ft)	12	3	
Median width (ft) and type	N/A <input type="checkbox"/> raised <input type="checkbox"/> painted	N/A <input type="checkbox"/> raised <input type="checkbox"/> painted	
On-street parking lane width (ft)	0	9	
Horizontal clearance (ft)	14	14	
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	N/A	N/A	
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)	N/A	N/A	
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	11 <input checked="" type="checkbox"/> 2-way <input type="checkbox"/> 1-way	11 <input checked="" type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type	HMA	HMA	
Shoulder width (ft)	0	3	
Lateral clearance (ft)	N/A	N/A	
Vertical clearance (ft)	N/A	N/A	
Clear width of path on bridge (ft)	N/A	N/A	
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

27. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

28. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		



**CHECKLIST OF REQUIRED SUBMITTAL ITEMS**

- Location Map or TPMS Development Map link
- Form 760005 – Determination of Effect for Threatened and Endangered Species for Local Public Agencies

**CHECKLIST OF SUBMITTAL ITEMS, IF APPLICABLE**

- ROW Needs Map (if Y for 7a, 7b, 7c) - include ROW Needs lines, which can be an approximation. There is no need to create a “buffer zone”, as Location and Environment Bureau will account for a 25’ buffer when they perform the NEPA clearance.
- Cultural Resources Evaluation or Archaeological Survey (if Y for 9a). Submittal of this information at the time of Concept Statement submittal is not required; however, submittal as soon as possible will speed up the NEPA Clearance process.
- Cultural Resources Assessment (if Y for 9b). Submittal of this information is not required for Concept Statement submittal; however, submittal of this information will speed up the NEPA Clearance process.
- Recreational Area Location Map (if Y for 10)
- Explanation for using AASHTO criteria/SUDAS Acceptable criteria instead of the “Aids” tables/SUDAS Preferred (Items 25-28)
- Documentation for using 3R criteria [Address the seven safety considerations] (Items 25-28)
- Design Exception Request (Items 25-28)



## Determination of Effect for Threatened & Endangered Species For Local Public Agencies

Form 760005 (07-23)

### PROJECT INFORMATION

<b>Project Number:</b> ILL-C090()--92-68	<b>Letting Date:</b> 12/17/2024	<b>County:</b> Wapello
<b>Project Description:</b> HMA Resurfacing	<b>Road/Location:</b> T61 From HWY 34 S. to CP RR	

### PROJECT EVALUATION

**Determine what species to look for: Check IADNR and USFWS websites. Attach findings.**

**What habitats are present in the project area? Check all that apply. Attach photos of each.**

- Forest/Woodland   
  Prairie   
  Pasture   
  Stream/River   
  Residential/Urban  
 Disturbed ROW   
  Wetland   
  Row Crops   
  Other:

**Review habitat characteristics as described on IA DNR and USFWS websites for each species.**

**Is there suitable habitat for protected species present in the project area?**

Yes     No

*If No, mark **No Effect** and Section 7 is complete. Submit form with attachments.  
If Yes, move on to the next question.*

**Will the project impact suitable habitat for protected species? Ensure all feasible options to avoid impacting suitable habitat are pursued.**

Yes     No

*If No, mark **No Effect** and Section 7 is complete. Submit form with attachments.  
If Yes, what species/species habitats will be impacted? Move on to the next question.*

- Indiana Bat   
  Northern Long-eared Bat   
  Topeka Shiner   
  Other:

**Are there measures that can be taken to minimize potential impacts to species/habitat?**

Yes     No

*If No, mark **May Affect - Likely to Adversely Affect** and move-on to next section.  
Formal consultation may be required.  
If Yes, mark **May Affect - Not Likely to Adversely Affect** and list minimization measures below.  
Move-on to next section.*

### MINIMIZATION MEASURES

### PROJECT IMPACT DETAILS

**Tree Clearing for Bat Habitat Only:** Will impacts occur greater than 100 ft from an existing edge of road?

Acreage > 100 ft:      Acreage 0-100 ft:

If No, stay with **May Affect - Not Likely to Adversely Affect** determination      Max distance for clearing:  
If Yes, list acreage and move to next question.

Will impacts occur greater than 300 ft from an existing edge of road?      Acreage > 300 ft:

If Yes, list acreage and change determination to **May Affect - Likely to Adversely Affect**  
If No, stay with **May Affect - Not Likely to Adversely Affect** determination      Max distance for clearing:

### DETERMINATION OF EFFECT

No Effect   
  May Affect – Not Likely to Adversely Affect   
  May Affect – Likely to Adversely Affect

**References:**

- Natural Areas Inventory   
  IA DNR Environmental Review Letter   
  Aerial Photos   
  Soils of Concern Data  
 IA DNR Website   
 USFWS Website   
 Other:

<b>Print Name of Preparer and Name of Organization:</b> Jeff Skalberg	<b>Date:</b> 8/4/2023
--	--------------------------

<b>Agency Concurrence:</b>	<b>Date:</b>
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# CONCEPT STATEMENT FOR LOCAL PUBLIC AGENCY FEDERAL-AID PROJECTS

**Please Note:** Before completing this form, refer to the Concept Statement Instructions located in [Instructional Memorandum \(I.M.\) 3.020 Concept Statement Instructions](#).

**GENERAL INFORMATION:**

County: Webster City: \_\_\_\_\_ Date Submitted: 08/18/23  Original Submittal  Revised  
 Project No: ILL-C094(D20/D36)--92-94 In STIP?  Y  N STIP Year(s): 2026 Estimated Letting Date: 1/17/26  
 Contact Person: Dalton Marsh Phone Number: 515-576-3281  
 Title: Assistant to the County Engineer  
 Address: 703 Central Ave, Suite 3, Fort Dodge Iowa, 50501 E-mail: Dalton.Marsh@Webstercountyia.org

1. a Project Location Description (include road or street name(s):

**ATTACH A DETAILED LOCATION MAP  
OR LINK TPMS Development Map**

Yes  No The map in TPMS Development is accurate. If no, please correct the map as soon as possible and attach a paper map with this submittal.

The TPMS Development map can be found at the following link, by adding the TPMS ID number to the end of the web address below.  
<https://www.tpms.org/#development/projects/>

1. b. Section: 30 Township: 88 Range: 30 TPMS ID No.: 53492

2. Type of Work (check all that apply):

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> HMA Paving                 | <input type="checkbox"/> Grading                               | <input type="checkbox"/> PCC Widening            | <input checked="" type="checkbox"/> Bicycle or pedestrian facilities |
| <input checked="" type="checkbox"/> HMA Resurfacing | <input checked="" type="checkbox"/> Intersection Modifications | <input type="checkbox"/> RCB Culvert             | <input type="checkbox"/> Scenic or landscaping improvements          |
| <input checked="" type="checkbox"/> HMA Widening    | <input type="checkbox"/> Lighting                              | <input type="checkbox"/> Traffic Signals         | <input type="checkbox"/> Historic restoration or renovation          |
| <input type="checkbox"/> Bridge Replacement         | <input checked="" type="checkbox"/> Patching                   | <input type="checkbox"/> Other (describe): _____ |  |
| <input type="checkbox"/> Bridge Rehabilitation      | <input type="checkbox"/> PCC Paving                            |  |  |

3. Project Length: 11.8 miles (to nearest tenth)

4. Existing Bridge Information: FHWA No.: \_\_\_\_\_ Year Built: \_\_\_\_\_ Size: \_\_\_\_\_  
 Type: \_\_\_\_\_

5. Project Costs: For each item that applies, indicate if Federal-aid reimbursement will be requested. If yes, enter the estimated cost.  
 Note: **When using STBG and/or Bridge funding, the use of Federal-aid will only be allowed for Construction.**

Federal-aid?	Cost Item	Total Estimated Cost
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Preliminary engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Construction engineering (if yes, see <a href="#">I.M. 3.310</a> for procedures)	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Acquisition of land or property rights (if yes, see <a href="#">I.M. 3.600</a> )	_____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Construction	9,700,000
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Utility relocation (if yes, see <a href="#">I.M. 3.640</a> and <a href="#">I.M. 3.650</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Railroad work (if yes, see <a href="#">I.M. 3.670</a> and <a href="#">I.M. 3.680</a> )	_____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	In-kind contribution (attach documentation as per <a href="#">I.M. 3.050</a> )	_____

6. Total Federal-Aid (as shown in the STIP): \$ \_\_\_\_\_ Total Estimated Project Cost: 9,700,000  
 Yes  No Has the LPA secured other funds, such as HSIP, TSIP, U-STEP, C-STEP, etc. \_\_\_\_\_

If yes, enter information regarding other funding sources the LPA has been awarded, has applied for, or intends to apply for:

**ANSWER ALL SIX QUESTIONS**

7. Estimate of Land or Property Acquisition Impacts: - - Will the proposed project:
- a. Require temporary construction easements?  Yes  No If yes, indicate the approximate area (acres): \_\_\_\_\_
  - b. Require permanent easement(s) or fee title?  Yes  No If yes, indicate the approximate area (acres): 0.60
  - c. Require borrow material?  Yes  No If yes, indicate the proposed source (check all that apply):  
 New borrow area  Contractor furnished  Existing borrow area  Within existing right-of-way  Not yet determined
  - d. Require total property acquisition(s)?  Yes  No If yes, approx. how many properties will be totally acquired? \_\_\_\_\_
  - e. Involve relocation assistance for displaced person(s) and/or businesses?  Yes  No  
 If yes, approximately how many relocations will be required? \_\_\_\_\_
  - f. Involve a change in property access which results in damage to the remainder parcel?  Yes  No

If Item 7a, 7b, or 7c are marked Yes, provide an aerial map or plan sheet with project limits and proposed ROW/Temporary Construction Easement need lines. Also provide an aerial map with ROW need lines if the ROW is already owned by the LPA but has not yet been utilized as ROW for a project (i.e., trail through a park or other land previously not used for roadway/trail purposes).

8. Public Acceptance: Is it anticipated that the proposed project will receive a substantial degree of public opposition?  Yes  No  
 If yes, explain:

**Safety Considerations:**

**Water Trails and Paddling Routes:**

Water Trails and Paddling Routes are considered recreational areas under 23 CFR 774 (see question 10 below). Does this project include a DNR designated water trail or paddling route, as listed on this website:  
<https://iowadnr.maps.arcgis.com/apps/webappviewer/index.html?id=767d75008b0f40ce922138d3c5d7f4f0>  
 Yes  No

**ANSWER ALL QUESTIONS**

**Environmental Impacts:** - - Will the proposed project:

9. Involve any ground disturbance, per the example [Cross Section](#)?
- Yes  No a. If yes, a Cultural Resources Evaluation (CRE) shall be completed and may require an Archaeological survey. Refer to [I.M. 4.120](#). Submittal of these documents at the time of Concept Statement submittal is not required.
  - b. If no, LPA is encouraged to complete [Form 231033, Cultural Resources Assessment \(CRA\) Form](#), and submit to Location and Environment with the Concept Statement, or soon thereafter. The CRA form can be completed with the LPA's local Historic Preservation Commission (HPC), Historical Society (HS), or SOI Qualified Professional.

10. Be in the proximity of a recreational area (i.e., park, playground, trail, greenbelt, etc.) or wildlife refuge?  Yes  No  
 If no, skip to No. 11; If yes, **provide a map showing the project location and park location and amenities**, and answer the following questions:

- Yes  No a. Is the property used as a recreational area or wildlife refuge?
- Yes  No b. Is the property publicly owned? Who is the owner? \_\_\_\_\_
- Yes  No c. If it is a recreational area, is it open to the public?
- Yes  No d. Will access to the recreational area be impacted by the project?
- Yes  No e. Has the official with jurisdiction over the property or facility (recreational area or wildlife refuge) been contacted?
- f. List and describe the recreational areas or wildlife refuges, and their total area in acres.

	Description (include name of agency with jurisdiction)	Total property area (acres)
a.		
b.		
c.		

d.	
e.	
f.	
g.	

Yes  No g. Will any part of the identified properties be acquired as permanent right-of-way?

Describe what part will be acquired, using approximate area, the anticipated severity of impacts, why the property can't be avoided, and the steps that will be taken to mitigate or minimize impacts.

Yes  No h. Will any part of the identified properties be acquired as temporary easement?

Yes  No i. Were any of the identified properties originally acquired or developed with Federal Land and Water Conservation Act (LWCN) or similar type funds?

Yes  No j. Will the property sustain permanent adverse physical impacts?

Yes  No k. Will any of the recreational features (ball diamond, playground, picnic area, etc.) be impacted within any permanent or temporary easement?

Yes  No l. After the work is complete, will the property be changed from its original condition?

If the answer to j, k or l is no, is the agency with jurisdiction over the property in agreement with all these determinations? Attach additional documentation as necessary from the agency with jurisdiction.

For any yes answers to j, k or l, list the properties and specifically describe what part will be acquired, including approximate area, the anticipated severity of the impacts, why the property can't be avoided, and the steps that will be taken to minimize or mitigate the impacts.

For projects Administered by the Systems Planning Bureau, complete the "Park, Recreation Land, and Wildlife and Waterfowl Refuge Section 4(f) Determination form" ([Form 760006](#)). For example, this form is required when there is a recreational trail or pedestrian facility being built through a recreational area.

Yes  No 11. Determine if the project is in the proximity of known Federal or State threatened or endangered species or their habitat by completing and submitting the T&E form, as per [I.M. 4.110](#).

Yes  No 12. Will the project involve placement of fill or dredged material into waters of the United States, including wetlands? If yes, refer to [I.M. 4.130](#) to determine if a 404 permit is needed.

Yes  No 13. Will the project disturb 1 or more acres of land? If yes, NPDES General Permit No. 2 will be required by the Iowa DNR. When estimating the amount of disturbed land, include all areas where soil will be exposed at any time to erosive forces. Refer to [I.M. 4.140](#) Storm Water Permits for more information.

Yes  No 14. Will the project require a Floodplain Permit or a Sovereign Lands permit from the Iowa DNR? Refer to [I.M. 4.150](#) for more information.

Yes  No 15. Will the project meet the backwater and freeboard requirements shown in [I.M. 4.150](#)?

Yes  No 16. Is the proposed structure located in an area where the 100-year flood water surface elevations have been determined by a Flood Insurance Rate Map (FIRM)? Refer to [I.M. 3.500](#) for more information.

Yes  No 17. Will the project involve the acquisition of more than 5 acres of farmland in any one-mile (or less) length of the project? Is it a water storage area? Is the area designated for city land use plan? If yes, refer to [I.M. 4.170](#) for more information. If no, the Farmland Conversion Rating Form is not required.

Yes  No 18. Is there potential for the cleanup of any known hazardous materials? This would include areas where gas stations, dry cleaners, or other potentially hazardous sites were previous located, or would include items containing asbestos or lead paint. Refer to this site for more information: <https://programs.iowadnr.gov/contaminatedsites/>

- Yes  No 19. Will the project have significant noise, air quality, or water quality impacts that may raise public concern or warrant special mitigation measures? If yes, describe the types of impacts anticipated and the proposed mitigation, if any.
  - Yes  No a. Noise impacts? Specifically describe:
  - Yes  No b. Aesthetic impacts? Specifically describe:
  - Yes  No c. Reduced access? Specifically describe:
  - Yes  No d. Vibration impacts? Specifically describe:
- Yes  No 20. Is the project in a special landscape area of the Loess Hills?
  - Yes  No Is the project in the National Rivers Inventory? Refer to this site for more information:  
<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>
- Yes  No 21. Will the proposed project be within a 20,000-foot radius of a public airport?  
Refer to [I.M. 4.190](#) to determine whether to answer yes or no.
- Yes  No Will the Federal Aviation Administration (FAA) need to be notified? If yes, follow the procedures in [I.M. 4.190](#).
- Yes  No 22. Will the proposed project have a railroad crossing or railroad signals within the project limits?  
If yes, contact the railroad company to develop an agreement. Refer to [I.M. 3.670](#) and [I.M. 3.680](#).  
Which railroad is affected? Union Pacific
- Yes  No 23. Is the distance from the railroad crossing at a side road less than 100 feet? If so, the railroad crossing will need further review to determine if adequate traffic control, warning devices, and crossing surfaces are in place. Refer to [I.M. 3.680](#).
- Yes  No 24. Will the proposed project include Intelligent Transportation System (ITS) elements? If yes, include a map showing the approximate areas of impacts.

25. Project Design Elements -- Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** D36 from County Line to Highway 20 Interchange

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 1550 (Year = 2019) Design Year AADT: 2561 (Year = 2040) % Trucks: 15

**Design Speed:** 55 mph **Posted Speed:** 55 mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, attach documentation for each exception requested.

Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	12	12	
Traveled way surface type	HMA	HMA	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	42	42	
Shoulder surface type	GRAVEL	HMA/GRAVEL	
Shoulder width (ft)	10	4' HMA 6' GRAVEL	
Fore slope ratio (horizontal: vertical)	4:1	4:1	
Clear zone distance (ft). See I.M. 3.240.	N/A	16 (MIN)	
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

26. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** D20 from Highway 20 interchange to Highway 169

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: 3740 (Year = 2019) Design Year AADT: 2040 (Year = 4070) % Trucks: 15

**Design Speed:** 55 mph **Posted Speed:** 55 mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_

3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes	2	2	
Travel lane width (ft)	12	12	
Traveled way surface type	HMA	HMA	
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)	44	44	
Shoulder surface type	GRAVEL	HMA/GRAVEL	
Shoulder width (ft)	10	4' HMA 6' GRAVEL	
Fore slope ratio (horizontal: vertical)	4:1	4:1	
Clear zone distance (ft). See I.M. 3.240.	N/A	16 (MIN)	
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	10 <input checked="" type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type		HMA	
Shoulder width (ft)		2	
Lateral clearance (ft)		4	
Vertical clearance (ft)		50	
Clear width of path on bridge (ft)		N/A	
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		



27. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

28. Additional Project Design Elements - - Provide the project design information requested below. If the project involves multiple facilities, or significantly different sections on the same facility, complete a separate page for each. For design elements that are not applicable for the facility listed below, enter "N/A" in the appropriate space. If the project does not involve a roadway, bicycle trail, or shared use path, this page may be left blank. Design Check column is for Department Use Only.

**Facility Name:** \_\_\_\_\_

**Federal Functional Classification:**  Interstate  Other Principal Arterial  Minor Arterial  
 Rural Major Collector  Rural Minor Collector  Urban Collector  Local  N/A (trail or path)

**Traffic Volumes:** Existing AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) Design Year AADT: \_\_\_\_\_ (Year = \_\_\_\_\_) % Trucks: \_\_\_\_\_

**Design Speed:** \_\_\_\_\_ mph **Posted Speed:** \_\_\_\_\_ mph

**Terrain:**  Level  Rolling **Type of Area:**  Commercial or Industrial  Fringe or Residential  Rural

**Design Guidelines (check only one):**

For urban roadways, use the design guidelines contained in SUDAS Chapter 5 or [Iowa DOT Design Manual](#) Chapter 1c-1 and indicate which table was used below:

SUDAS Preferred Criteria  SUDAS Acceptable Criteria\*  Urban 3R Guidelines\*\*  Other: \_\_\_\_\_

For rural roadways, use the design guidelines contained in I.M.s. [3.210](#) or [3.220](#) and indicate which table was used below:

Design Aids for Rural Collectors  AASHTO Guidelines for Rural Collectors\*  
 Design Aids for Rural Local Roads  AASHTO Guidelines for Rural Local Roads\*  
 Other: \_\_\_\_\_  
 3R Table for Rural Collectors\*\* (if checked, indicate type of improvement:  Rehabilitation  Restoration  Resurfacing)

\* If any of these tables are used, explain reasons for not using the "Aids" tables.

\*\* If used, provide documentation for using 3R criteria per [I.M. 3.220](#).

For bicycle trails or shared use paths, use the most current edition of the SUDAS Chapter 12 or [Iowa DOT Design Manual](#) Chapter 12.

**Design Exceptions:** Will a design exception be required?  Yes  No If yes, provide comments here: \_\_\_\_\_

or attach documentation for each exception requested. Refer to [I.M. 3.260](#) for Design Exception information.

Design Element	Existing	Proposed	Design Check
<b>All Roadways (urban or rural)</b>			
Number of traffic lanes			
Travel lane width (ft)			
Traveled way surface type			
<b>Urban Roadways</b>			
Total roadway width (ft) (back-of-curb to back-of-curb)			
Curb and gutter width (ft)			
Median width (ft) and type	<input type="checkbox"/> raised <input type="checkbox"/> painted	<input type="checkbox"/> raised <input type="checkbox"/>	
On-street parking lane width (ft)			
Horizontal clearance (ft)			
<b>Rural Roadways</b>			
Roadway top width (ft) (should-to-shoulder)			
Shoulder surface type			
Shoulder width (ft)			
Fore slope ratio (horizontal: vertical)			
Clear zone distance (ft). See I.M. 3.240.	N/A		
<b>Bridges (urban or rural)</b>			
Bridge roadway width (ft)			
Is guardrail present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Is guardrail proposed?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Will channel change be required?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Bicycle Trails or Shared Use Paths</b>			
Trail or path surface width (ft) and traffic direction	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	<input type="checkbox"/> 2-way <input type="checkbox"/> 1-way	
Trail or path surface type			
Shoulder width (ft)			
Lateral clearance (ft)			
Vertical clearance (ft)			
Clear width of path on bridge (ft)			
<b>Traffic Signals</b>			
If new signals are proposed, are MUTCD warrants met?	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, which warrants are met?	N/A		

**CHECKLIST OF REQUIRED SUBMITTAL ITEMS**

- Location Map or TPMS Development Map link
- Form 760005 – Determination of Effect for Threatened and Endangered Species for Local Public Agencies

**CHECKLIST OF SUBMITTAL ITEMS, IF APPLICABLE**

- ROW Needs Map (if Y for 7a, 7b, 7c) - include ROW Needs lines, which can be an approximation. There is no need to create a “buffer zone”, as Location and Environment Bureau will account for a 25’ buffer when they perform the NEPA clearance.
- Cultural Resources Evaluation or Archaeological Survey (if Y for 9a). Submittal of this information at the time of Concept Statement submittal is not required; however, submittal as soon as possible will speed up the NEPA Clearance process.
- Cultural Resources Assessment (if Y for 9b). Submittal of this information is not required for Concept Statement submittal; however, submittal of this information will speed up the NEPA Clearance process.
- Recreational Area Location Map (if Y for 10)
- Explanation for using AASHTO criteria/SUDAS Acceptable criteria instead of the “Aids” tables/SUDAS Preferred (Items 25-28)
- Documentation for using 3R criteria [Address the seven safety considerations] (Items 25-28)
- Design Exception Request (Items 25-28)