

## TRAFFIC IMPACT ANALYSIS (TIA) THRESHOLD WORKSHEET

**Complete this form as an aid to determine if your project requires a Traffic Impact Analysis.**

Project Name: \_\_\_\_\_  
 Location: \_\_\_\_\_ Applicant: \_\_\_\_\_ Owner: \_\_\_\_\_  
 Agent: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Work: \_\_\_\_\_ Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Permit Type (check one):** Zoning: \_\_\_\_\_ Subdivision Master Plan: \_\_\_\_\_ Bldg. Plan #: \_\_\_\_\_ Other: \_\_\_\_\_

**Box A (Original TIA) Residential Development**

Anticipated Land Use	Number of Units	Peak Hour? (e.g., 5-6p.m. weekday)	Peak Hour Trip Rate	Peak Hour Trips	Trip Rate Source
					ITE Code: Other:

**Box B (Original TIA) Non-Residential Development**

Anticipated Land Use	Project Size			Peak Hour? (e.g., 5-6p.m. weekday)	Peak Hour Trip Rate	Peak Hour Trips	Trip Rate Source
	Acres	GFA	Other*				
							ITE Code: Other:

\* specify: \_\_\_\_\_

**Box C (Updated TIA) If property already has a TIA on file, complete Box C; if not ignore Box C**

Peak Hour trips Projected in <i>Current</i> TIA	Peak Hour Trips (from Box A or B) Projected in <i>Updated</i> Project	Increase in Peak Hour Trips (if over 100 additional trips, a new TIA is required)

**Box D (Information regarding the person/agency who prepared the TIA)**

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_  
 Comments: \_\_\_\_\_

**Box E (For Official Use Only – Do not write in this box)**

\_\_\_\_\_ A TIA is **required**. The consultant preparing this study must meet with City staff to discuss the scope and requirements of the stuffy before beginning the study.  
 \_\_\_\_\_ A TIA is **not required**. The traffic generated by the proposed development does not exceed the threshold requirements.  
 \_\_\_\_\_ The traffic impact analysis has been waived for the following reasons:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_ Notes: GFA = Gross