



ARAPAHOE COUNTY

Traffic Impact Study Report Checklist

Revised February 2020

Yes	No	N/A	Report Requirements
I. COVER SHEET			
			1. Name of Project/Site Name
			2. Address
			3. Owner Contact Information (Name, Address, Phone)
			4. Developer Contact Info (Name, Company, Address, Phone)
			5. Engineer Contact Info (Name, Company, Address, Phone)
			6. Submittal Date and Revision Date(s) as applicable
			7. Case Number(s)
II. INTRODUCTION AND PROJECT DESCRIPTION			
			1. Project Description
			2. Site Vicinity Map (figure)
			3. Proposed Project Site Plan (figure)
			4. Proposed Development Phasing
			5. Existing & Proposed Developments, surrounding or adjacent developments, including land use or zoning information
			6. Existing and Proposed Streets, Roadways, and Highways, adjacent to and within the proposed development, or within the area served by the proposed development
III. EXISTING CONDITIONS			
			1. Intersection and Roadway Count (< 1 yr. old)
			2. Existing Transportation Network and Traffic Volumes (figure)
			3. Existing LOS & Delay Summary (table)
			4. Multimodal Facilities – pedestrian, bicycle, transit
IV. PROPOSED CONDITIONS			
			1. Trip Generation Summary (table)
			2. Internal Trip Reduction Justification (<10%)
			3. Pass-by Trip Reduction Justification (<25%)
			4. Trip Distribution Assumptions
			5. Site Trip Distribution (figure)
			6. Projected Site Traffic Volumes (figures) – each horizon yr./scenario
V. FUTURE CONDITIONS			
			1. Existing and Committed Transportation Network
			2. Background Traffic Growth Method & Assumptions
			3. Background Traffic Volumes (figure) – each horizon yr./scenario
			4. Total Future Traffic Volumes (figure) – each horizon yr./scenario
VI. TRAFFIC EVALUATION			
			1. LOS & Delay- each horizon yr./scenario (figures/tables)
			2. Traffic Signal Warrant Analysis - each horizon yr./scenario
			3. Traffic Signal Progression
			4. Safety Analysis
			5. Queuing Analysis



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VI. IMPROVEMENT ANALYSIS			
			1. LOS & Delay with mitigation- each horizon yr./scenario (figures/tables)
			2. Sight Distance
			3. Acceleration and Deceleration – storage & tapes (table)
			4. Multimodal – Pedestrian, bicycle, transit and TDM
			5. Special Analysis/Issues
			6. Proposed Mitigation Measures
			7. Proposed Improvements (table)
XII. APPENDICES			
			1. Traffic Impact Study Content Checklist – completed, signed and sealed
			2. Pre-Study Summary Worksheet
			3. Traffic Count Data (including vehicle classification)
			4. Lanes, Volume and Timing Report
			5. Existing Signal Timing (sheets from maintaining agency)
			6. Level of Service Analysis Reports (all horizon years and scenarios with and without Project) (input and output)
			7. Time-Space Diagrams (if applicable, for any signal modifications or new signals)
			8. Electronic files of input and output data

“I have reviewed the attached report with this checklist and all required items have been included except as noted above.”

Signature _____ Date _____

Name: _____

Case Name: _____

Case Number: _____