ROAD SAFETY AUDIT PROGRAM APPLICATION FORM
CONNECTICUT DEPARTMENT OF TRANSPORTATION

1. Applicant contact information

Name	
Title	
Email Address	
Telephone Number	

2. Location information

Address	
Description of Segment Start to End (Landmark(s), intersection, addresses)	

Section Length (Miles)

City/Town

3. Roadway
(Please select all that apply)

☐ **State road**

☐ **Local road**

☐ **Private Road**

☐ **Other** (please specify)

4. Adjacent land use types
(Please select all that apply)

☐ **Industrial**

☐ **Residential**

☐ **Commercial**

☐ **Mixed Use**

☐ **Retail**

☐ **N/A** (not applicable)

☐ **Other** (please specify)

5. Activity generator sites
   (Please select all that apply)

   ☐ **Community Centers**

   ☐ **Business Districts**

   ☐ **Restaurants or Bar Districts**

   ☐ **Churches**

   ☐ **Housing Complexes**

   ☐ **Proximity to Schools**

   ☐ **Tourist Locations (examples – Casino, Malls, Parks, Aquarium, etc.)**

   ☐ **N/A (not applicable)**

   ☐ **Other (please specify)**

   _____

6. If present, what type of educational facilities are nearby

   ☐ **Public, Parochial, Private Schools (more than 1 school within a ½ mile)**

   ☐ **University**

   ☐ **N/A (not applicable)**

   ☐ **Other (please specify)**

   _____

7. Transit facilities
(Please select all that apply)

☐ **Bus**

☐ **Rail**

☐ **Ferries**

☐ **Airports**

☐ **Park and Ride Lots**

☐ **N/A (not applicable)**

☐ **Other (please specify)**

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8. Safety Concerns
(Please select all that apply)

☐ **Traffic**

☐ **Crashes**

☐ **Sidewalks**

☐ **Traffic Signals**

☐ **Traffic Signs**

☐ **Parking Restrictions / Additions**

☐ **Drainage**

☐ **Non-motorized Accommodations (ADA compliance & bicycle)**

☐ **Agricultural & Livestock**

☐ **Maintenance Concerns** (cutting grass, leaves, snow removal)

☐ **N/A** (not applicable)

☐ **Other** (please specify)

9. **Please list and describe any past, current, or future transportation and/or economic development projects adjacent to the area location (*Federal, State and/or local projects*):**
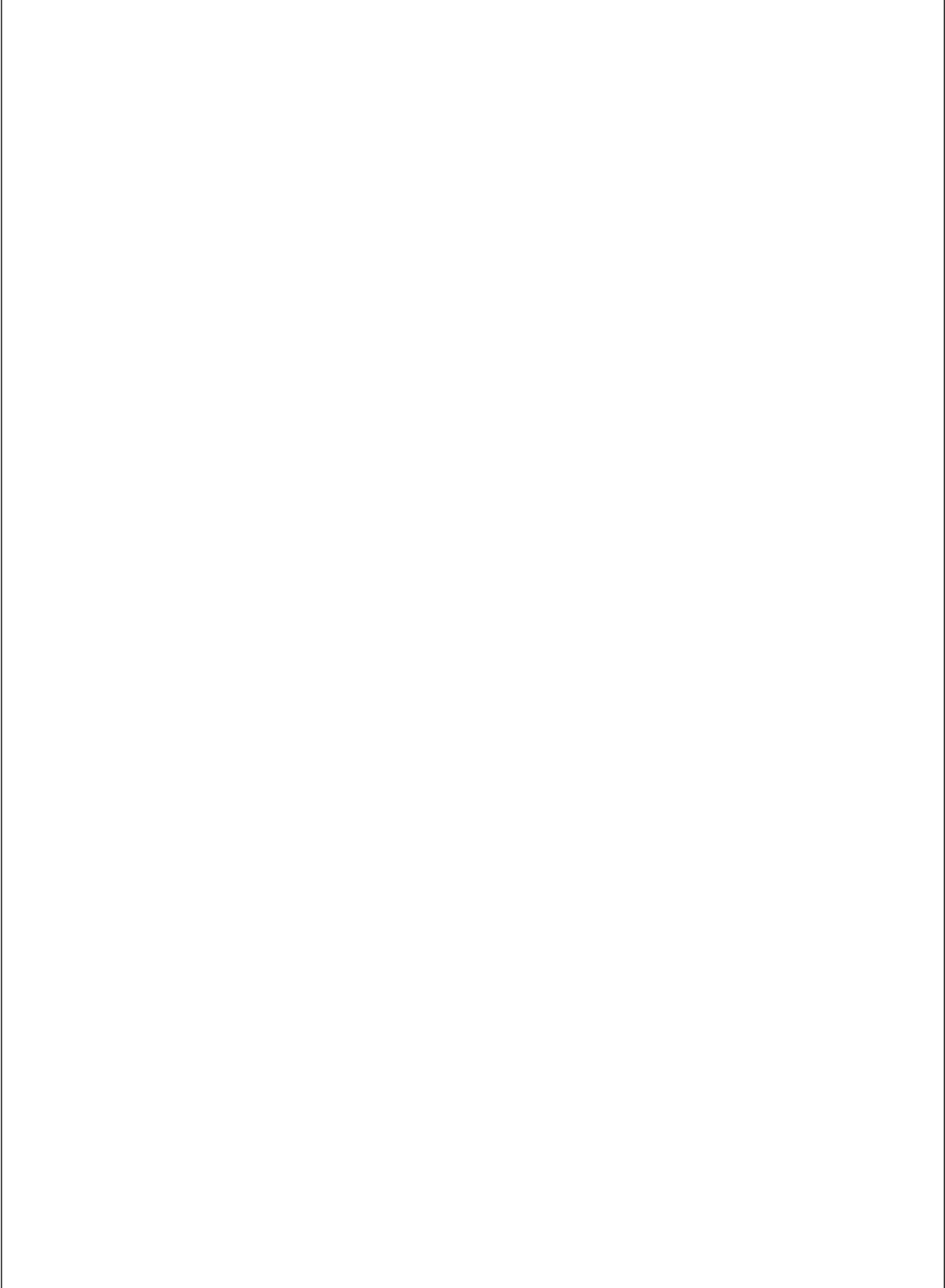
10. **Please describe environmental concerns, if any:**

11. **Please describe economic concerns, if any:**

12. **Are there any plans for development in the area?**
(Transit Oriented Development, Economic Development, Housing, Zoning/Land use changes, etc.)

13. **Any other pertinent information that is unique to this location?**

14. Please explain why this location should be considered for an RSA (provide as much information possible regarding safety concerns).

☐ *By submitting this application, the municipality acknowledges that an RSA is not a guarantee or commitment to fund potential recommendations identified in the Final RSA Report.*

Thank you for completing The RSA Program Application Form.

Please attach the following information:

- Please provide RSA limits location map (google or GIS) **(Required)**
- Please provide crash data (If available)
- Please provide traffic data (ADT or VMT) (If available)
- Please provide pedestrian/bicycle data (If available)

To apply for the RSA Program, email this form and supporting documentation to [RSA Program Manager](#).