24VAC 30-325
R07-176

Form U-1 (Rev. 1-1-07)

LOCAL ASSISTANCE DIVISION
VDOT
REQUEST FOR STREET ADDITIONS AND DELETIONS
FOR STREET PAYMENTS

MUNICIPALITY_____

STREET NAME ROUTE NUMBER *	TERMINI FROM	TERMINI TO	R/W WIDTH (FEET)	PAVEMENT WIDTH (FEET)	CENTER-LANE MILES	NUMBER OF LANES	LANE MILES	FUNC. CLASS. (T&MPD USE ONLY)

*Council Resolution and Map Attached

SIGNED_____
MUNICIPAL OFFICIAL DATE

SIGNED_____
RESIDENCY ADMINISTRATOR DATE

CLASSIFIED BY_____
T&MPD ENGINEER DATE

Submit to: Residency Administrator in triplicate