Tennessee ITS Project Identification Form

INSTRUCTIONS: Refer to Section 4.2 of the TDOT ITS Project Development Guidelines. Attach or make available any documents referenced in this form when submitting.

SECTION 1 – PROJECT INFORMATION

Agency: _____

Agency Information (Address, phone number, e-mail, etc):

_____

Project Name and Location:

_____

☐ New Project
☐ Modification Project
☐ Expansion Project

Nature of Work:

☐ Planning   ☐ Scoping
☐ Design Software / Integration   ☐ Construction
☐ Operations   ☐ Maintenance (Equipment Replacement)
☐ Evaluation   ☐ Other: _____

Please provide the following background information. In most cases, 1-3 sentences will be sufficient for each item.

Brief Description of ITS project objectives – (What is the purpose of the project? What needs are being addressed?):

_____

_____

Project Summary – (What solutions will address the needs? What major elements will be installed? What major function(s) will be performed?)

_____

_____

Work to Date: (Any preliminary planning, investigation of options, associated internal or external systems examined?)

_____

SECTION 2 – RISK ASSESSMENT

(For each question, answer Yes, No, Not Sure or N/A for not applicable):

1 – Will the project depend on **only your agency** to implement and operate?
_____

2 - Will the project use only software proven elsewhere, with **no** new software writing?
_____

3 - Will the project use only hardware and communications **proven** elsewhere?

_____

4 - Will the project use only **existing interfaces** (no new interfaces to other systems)?

_____ (If YES include reference)

5 - Will the project use only **existing system requirements** that are well documented?

_____ (If YES include reference)

6 - Will the project use only **existing operating procedures** that are well documented?

_____ (If YES include reference)

7 - Will the project use only technologies with service life **longer** than 2-4 years?

_____

SECTION 3 – FUNDING

Identify all that apply: ☐ Local Agency   ☐ State   ☐ Federal Funds

TIP/STIP Identification and Description:

_____

Agency Representative	Signature	Date

MPO/RPO Representative	Signature	Date

FOR TDOT USE ONLY:

☐ No additional documentation required   ☐ Inconclusive risk level determination (SSEAF is required)

☐ Low Risk (SSEAF is required)   ☐ High Risk (SEAR is required)

TDOT Representative	Signature	Date