

CDOT TEMPORARY SPEED LIMIT REDUCTION FORM 568

| equired Information | | * Indicates a required field |
|------------------------------------|------------------|------------------------------|
| CDOT Project Engineer or Manag | <u>er</u> | |
| First Name* | Last Name* | Title* |
| Region* | Section | Patrol |
| First Name | Last Name | Title |
| First Name | Last Name | Title |
| Agency or Company Name | Email | Phone Number |
| Project Information | | |
| Subaccount No., Permit, or MPA | Code* | |
| Description of Project (example: I | oridge repair).* | |

Authority

The Department is legally authorized to temporarily reduce speed limits based on Colorado Revised Statute § 42-4-1102(1). The reduction must be based on an assessment of how the construction or maintenance work activity will impact traffic flow through the work zone. The traffic assessment, traffic investigation, or maintenance work order must be documented in this form. Additionally, CDOT projects which include recommendations for reduced speeds as part of the TSM&O evaluation shall include a copy of the evaluation report with this form. Procedural Directive 1502.2 "Temporary Reduction in Speed Limits" must be reviewed prior to execution.

Speed reductions shall only apply while the conditions exist that warrant the reduction. This is not always for the entire length and duration of the project. The permanently posted speed limits shall be effective upon completion of the speed reduction and signs shall be either unmasked or re-installed.

<u>Note</u>: If no work is occurring, temporary traffic control speed limit signs must be removed or masked within one hour of the completion of work.

The Chief Engineer shall delegate signature authority to the Region Traffic Engineers or designee, the LTC Ops I or higher (Maintenance Superintendents, Deputy Superintendents) to determine appropriate temporary speed limits. This Form 568 shall be routed to the Region Traffic Engineer for speed limit reductions associated with the issuance of a permit, an engineering project or a local agency project on a state highway, or a reduction of speed limit outside of Table I.

TABLE I
RECOMMENDED MINIMUM WORK ZONE SPEED LIMITS

| Existing Posted Speed Limit | Minimum width Available to Traffic ¹ | Non-active Work Zone Speed Limit ² | Active Work Zone Speed Limit ³ | Approaching a Potential Full Stop Condition |
|--------------------------------|--|--|--|---|
| 75 MPH | 14 FT | 65 MPH | 65-40 MPH | 40 MPH |
| 70 MPH | 14 FT | 60 MPH | 60-40 MPH | 40 MPH |
| 65 MPH | 14 FT | 55 MPH | 55-40 MPH | 40 MPH |
| 60 MPH | 14 FT | 50 MPH | 50-40 MPH | 40 MPH |
| 55 MPH | 14 FT | 45 MPH | 45-40 MPH | 40 MPH |
| 50 MPH | 12 FT | 40 MPH | 40 MPH | 40 MPH |
| 45 MPH | 12 FT | 40 MPH | 40 MPH | 40 MPH |

¹ Travel lane width adjacent to the shoulder plus the shoulder width. Reduced speeds are not recommended where width available to traffic exceeds these measurements.

² See notes 1 and 7 in Section (IV)(B) in PD 1502.2. Must include additional rationale for speed limit reduction for a non-active work zone.

³ See notes 1 and 7 in Section (IV)(B) in PD 1502.2. Speed limit should be set at the maximum value practical within this range and must be justified by the extent of exposure/risk.

Reduced Speed Limits Per Date/Time (This form is to be used per project.)

| Reduction Request 1 | | | |
|----------------------------|---|----------------------------|--------------------------------|
| State Highway* | From Mile Point* | To Mile Point* | Direction of Traffic* |
| Posted Speed Limit* | Temporary Reduced Speed Limit* | From Date & Time* | To Date & Time* |
| reduction is requested. Ex | n for speed reduction (You must ind camples include: reduced clear zone stances, physical hazards, etc.)* | _ | |
| Reduction Request 2 | | | |
| State Highway | From Mile Point | To Mile Point | Direction of Traffic |
| Posted Speed Limit | Temporary Reduced Speed | From Date & Time | To Date & Time |
| | xamples include: reduced clear zone stances, physical hazards, etc.) | es, temporary alignment or | geometric changes, exposure to |
| State Highway | From Mile Point | To Mile Point | Direction of Traffic |
| Posted Speed Limit | Temporary Reduced Speed Limit | From Date & Time | To Date & Time |
| reduction is requested. Ex | n for speed reduction (You must ind camples include: reduced clear zone stances, physical hazards, etc.) | _ | |
| Reduction Request 4 | | | |
| State Highway | From Mile Point | To Mile Point | Direction of Traffic |
| Posted Speed Limit | Temporary Reduced Speed | From Date & Time | To Date & Time |

Please provide justification for speed reduction (You must include a reason for reducing the speed limit any time a speed reduction is requested. Examples include: reduced clear zones, temporary alignment or geometric changes, exposure to workers, reduced sight distances, physical hazards, etc.)

Review and Approval

| signing author | ity is responsible for routing the | e approved form to the appropriate personnel per PD 1502.2. |
|----------------|------------------------------------|---|
| I hereby | Approve this request | Deny this request. |
| Reason for de | enial: | |
| | | |
| | | |
| | | |
| First Name* | | Last Name* |
| riistivame | | East Name |
| Title* | | |
| | | |
| | | |
| Signature* | | Date* |