

Figure 5.1: Example Design Exception Request Summary Form

KANSAS DEPARTMENT OF TRANSPORTATION		
DESIGN EXCEPTION REQUEST		
GENERAL INFORMATION		
Project Number:	County/ City:	Route No or Name:
Project Description:		
PROJECT INFORMATION		
Functional Class:	Traffic Volume:	Traffic Volume Yr:
Current Estimate:	Additional Cost to Meet Criteria:	Funding:
Design Life:		Letting Date:
DESIGN EXCEPTIONS (CHECK ALL THAT APPLY)		
<input type="checkbox"/> Design Speed	<input type="checkbox"/> Maximum Grade*	
<input type="checkbox"/> Lane Width*	<input type="checkbox"/> Cross Slope*	
<input type="checkbox"/> Shoulder Width*	<input type="checkbox"/> Vertical Clearance*	
<input type="checkbox"/> Horizontal Curve Radius*	<input type="checkbox"/> Design Loading Structural Capacity	
<input type="checkbox"/> Superelevation Rate*	<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Stopping Sight Distance*	<input type="checkbox"/>	
* Only for "high-speed" (Interstate, other freeways, and roadways with a design speed greater than or equal to 50 mph) NHS facilities.		
Description of Existing Conditions:		
Proposed design values for the exception element (state resource):		
Relationship of proposed to adjoining sections:		
Crash History and Potential Safety Impacts:		
Reasons for not attaining criteria: (such as cost/benefit, crash history, environmental, etc.)		
Proposed Mitigation:		
PREPARED BY:		
DESIGNER SIGNATURE: _____		DATE: _____
CONCURRENCE BY:		
OWNER (CITY/COUNTY) SIGNATURE: _____		DATE: _____
CONCURRENCE BY:		
KDOT PROJECT MANAGER SIGNATURE: _____		DATE: _____
APPROVED BY:		
KDOT BUREAU CHIEF SIGNATURE: _____		DATE: _____
Attach all supporting documentation (plan details, studies, reports, etc.)		