



Southwest Missouri Council of Governments
Enhancing the quality of our communities through regional cooperation

Serving Barry, Christian, Dade, Dallas, Greene, Lawrence,
Polk, Stone, Taney, & Webster Counties

SMCOG 2017 Transportation Needs Reporting Form

Instructions: Please complete by hand or electronically by double-clicking the appropriate boxes to 'check' your selections. Type in the spaces provided, or attach additional pages. Please return via email to MeganClark@MissouriState.edu or fax to 417-836-4146, or mail to

SMCOG
c/o CRPM, Attn: Megan Clark
901 S. National Ave.
Springfield, MO 65897.

1. In what County is the need located?

- | | | | | |
|------------------------------------|---------------------------------|-----------------------------------|--------------------------------|----------------------------------|
| <input type="checkbox"/> Barry | <input type="checkbox"/> Dade | <input type="checkbox"/> Greene | <input type="checkbox"/> Polk | <input type="checkbox"/> Taney |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Dallas | <input type="checkbox"/> Lawrence | <input type="checkbox"/> Stone | <input type="checkbox"/> Webster |

2. In what City (if applicable) is the need located? _____

3. Please indicate the system level and mode of this need (Check all that apply):

- | | | | |
|--|---|---|-----------------------------------|
| <input type="checkbox"/> Interstate | <input type="checkbox"/> State Route | <input type="checkbox"/> Intersection | <input type="checkbox"/> Aviation |
| <input type="checkbox"/> US Highway | <input type="checkbox"/> Bridge | <input type="checkbox"/> Sidewalk/Walking Trail | <input type="checkbox"/> Rail |
| <input type="checkbox"/> Local/County Road | <input type="checkbox"/> Low Water Crossing | <input type="checkbox"/> Bike Lane/Path | <input type="checkbox"/> Transit |

4. Please describe the location of the need. Include cross roads and/or landmarks if possible. (Include attachment if needed)

5. Please indicate the type of need (select all that apply):

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Safety | <input type="checkbox"/> Maintenance/Taking Care of the System | <input type="checkbox"/> Congestion/Traffic Management | |
| <input type="checkbox"/> ADA/Accessibility Compliance | <input type="checkbox"/> Economic Development | <input type="checkbox"/> Freight | <input type="checkbox"/> Other (please explain) |

6. Please describe the need itself, including relevant data such as traffic counts, crash data, # of fatalities, its regional significance, photographs, etc. (if known). (Include attachment if needed)

7. Has the level of this need been identified as *High*, *Medium*, or *Low* for your county or community?

☐ High

☐ Medium

☐ Low

☐ Not Ranked

8. Please tell us more about yourself.

☐ County government representative

☐ Business representative

☐ City government representative

☐ Resident/Citizen

☐ Other _____

9. Do you have an estimated cost for this project? If so, what is the estimate?

10. Is your community or county willing to participate in the costs? If so, how much?

11. Have preliminary engineering plans or designs been developed for this need? (You may be asked to provide a copy of the plans to better present your need to the TAC)

12. Please provide your contact information in case we need more information about your transportation need. Include *at least* your full name and email address.

THANK YOU for providing us with your transportation needs. For assistance in completing this survey or for other related questions please contact Megan Clark at MeganClark@MissouriState.edu or contact our office at (417) 836-6977, fax: (417) 836-4146. Visit www.smcog.org for more information and a blank copy of this survey.