**To:** \_\_\_ Region Planning Chief: <Chief Name>

Bureau of Traffic Operations – Traffic Engineering & Safety Section

**From:** <Analyst Name>

\_\_\_ Region

**Date:** <MM/DD/YYYY>

**RE:** Amendment of the Safety & Operations Certification Document   
Original Approval Date: <MM/DD/YYYY>

Design ID:

Construction ID:

Highway:

Project Title:

Project Subtitle:

      County

Scheduled Construction Year:

Improvement Concept Code:

*This amendment includes analysis of locations or improvements that were not included within the original Safety and Operations Certification Document. Any analysis within this document may have used different configuration files or values when compared to the original analysis. The original information produced shall be used for comparison purposes only.*

Having considered the safety performance of the existing corridor and any proposed improvements, we believe this document reflects the intent of the policy and guidelines described in section 11-38 of the Wisconsin Facilities Development Manual.

If applicable, having considered the operational performance of the existing corridor and any proposed improvements, we believe this document reflects the intent of the policy and guidelines described in section 11-52 of the Wisconsin Facilities Development Manual.

**Preparer:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Region Analyst Date

**Approval:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Bureau of Traffic Operations Date

Traffic Engineering and Safety Section

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Region Supervisor Date

# Purpose of Amendment

A1. Provide a narrative for the reason of the amendment to the original Safety & Operations Certification Document.

# Diagnosis

A2. For new Sites of Promise or additional sites, describe the crashes or operational deficiencies. If the location was described in the original Safety & Operations Certification Document, skip to Section A3.  
Sites of Promise:

# Countermeasure/Alternative Identification, Analysis Results and Economic Appraisal

A3. Provide a brief description of the alternative(s) and the contributing factors that are being targeted. Include information within A3.1 from the original document for comparison purposes only. If the location was not identified within the original document, list all alternatives and the contributing factors that are being targeted by the alternative.

|  |  |  |
| --- | --- | --- |
| **Location:** | | |
| **Reason for improvement (check all that apply):** Safety  Operations | | |
| **Alternative(s)** | **General Description** | **How improvements address safety/operational issues** |
| Alternative Name: |  |  |
| Alternative Name: |  |  |

A3.1. Analysis Results

|  |  |
| --- | --- |
| Analysis Location: |  |
| Safety Analysis Method: |  |
| External CMF Value: |  |
| External CMF Source: |  |
| Unique Safety Analysis Notes: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Base | Alt. 1 | Alt. 2 | Alt. 3 |
| Alternative Name | |  |  |  |  |
| Safety Certification Process (See FDM 11-38) | Fatal & Injury Crashes |  |  |  |  |
| Property Damage Only Crashes |  |  |  |  |
| Total Crashes |  |  |  |  |
| Crash Cost Value |  |  |  |  |
| Project Cost |  |  |  |  |
| Net Safety Benefit |  |  |  |  |
| Net Cost |  |  |  |  |
| Safety B/C |  |  |  |  |
| Operations Certification Process (See FDM 11-52-15) | Delay Cost Over  Project Life |  |  |  |  |
| Net Operational Benefit |  |  |  |  |
| Operations B/C |  |  |  |  |
| Safety & Operations B/C |  |  |  |  |
| STN-Only Operational Benefit  (intersections only) |  |  |  |  |
| STN-Only B/C (intersections only) |  |  |  |  |

A3.2. Provide the economic justification for alternative(s) considered. Include information within A3.2 from the original document for comparison purposes only. If the location was not identified within the original document, list all alternatives and the economic condition for each.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Analysis Location | Alt. |  | B/Cs |  | SSOP/OSOP/  Additional Site | Economic Condition |
| Safety | Ops | Total |
|  | Base |  |  |  |  |  |
|  | 1 |  |  |  |  |  |
|  | 2 |  |  |  |  |  |
|  | 3 |  |  |  |  |  |

A3.3. Describe other information relevant to the project such as community considerations, unique features, potential funding sources, etc.

# ATTACHMENTS

Include attachments that were not included within the original analysis that are pertinent to the amended Safety & Operations Certification Document analysis

1. Project Information
   1. Project Location/Overview Map
2. Diagnosis Documentation
   1. WisTransPortal crash data spreadsheet with vetting comments
   2. Crash Diagram(s)
3. Countermeasure/Alternative Identification
   1. Layout/Schematic for each alternative
4. Analysis Results and Economic Appraisal
   1. Cost estimate for each alternative
   2. Crash Prediction Evaluation Report for each alternative
   3. Economic Analysis Report
   4. Highway Safety Benefit-Cost Analysis Tool results
5. Operations Certification Summary (if applicable)
   1. Turning movement counts
   2. Diagram of traffic volumes for each analysis period
   3. AWSC warrants
   4. Signal warrants
   5. Software reports for operation analysis
   6. DT 1887
   7. Exhibit highlighting queues vs. available storage for each analysis period
   8. OCP Benefit-Cost Tool printouts
6. Original Safety & Operations Certification Document