SIGHT DISTANCE EVALUATION

Facility/Subdivision Name: ____________________________  Preliminary Plan Number: 1-

Street Name: __________________________________________  Master Plan Road
Classification: __________________________________________

Posted Speed Limit: ___________________________ mph

Street/Driveway #1 (__________________________)  Street/Driveway #2 (__________________________)
Sight Distance (feet)  OK?  Sight Distance (feet)  OK?
Right _______________  ____  Right _______________  ____
Left _______________  ____  Left _______________  ____

Comments:________________________________________  Comments:________________________________________

GUIDELINES

<table>
<thead>
<tr>
<th>Classification or Posted Speed (use higher value)</th>
<th>Required Sight Distance in Each Direction*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tertiary - 25 mph</td>
<td>150'</td>
</tr>
<tr>
<td>Secondary - 30</td>
<td>200'</td>
</tr>
<tr>
<td>Business - 30</td>
<td>200'</td>
</tr>
<tr>
<td>Primary - 35</td>
<td>250'</td>
</tr>
<tr>
<td>Arterial - 40 (45)</td>
<td>325'</td>
</tr>
<tr>
<td>Major - 50 (55)</td>
<td>475'</td>
</tr>
<tr>
<td></td>
<td>550'</td>
</tr>
</tbody>
</table>

*Sight distance is measured from an eye height of 3.5’ at a point on the centerline of the driveway (or side street) 6’ back from the face of curb or edge of traveled way of the intersecting roadway where a point 2.75’ above the road surface is visible. (See attached drawing)

*Source: AASHTO

ENGINEER/ SURVEYOR CERTIFICATE

I hereby certify that this information is accurate and was collected in accordance with these guidelines.

__________________________  ________________
Signature               Date

PLS/P.E. MD Reg. No.

Montgomery County Review:
☐ Approved
☐ Disapproved:

By: ____________________________  Date: ____________________________

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