

Dutchess County Complete Streets Checklist

Dutchess County Complete Streets Policy

Dutchess County shall strive to plan, design, construct, operate, and maintain its streets, bridges, bus system, parks, trails, and buildings to promote safe, comfortable, efficient and convenient travel for people of all ages and abilities and for all types of transportation, including walking, bicycling, riding the bus, and driving, to the greatest extent possible. Over time, these facilities will be integrated into a countywide network that promotes the health, safety, environment, and economic vitality of Dutchess County and makes it a more desirable place to live, work and visit.

This checklist is intended to assist the County in achieving its vision for complete streets. It shall be completed for all projects involving County roads and property, as well as public and private projects over which the County Department of Public Works has permitting authority, either by the County's project manager or the project applicant.

Project Name _____

Date: _____

Project Location/Limits: _____

Tax Parcel Lot #: _____

Project Description: _____

Street Classification (street/streets within the project area, or County access road)

Rural Principal Arterial	<input type="checkbox"/>	Urban Principal Arterial	<input type="checkbox"/>
Rural Minor Arterial	<input type="checkbox"/>	Urban Minor Arterial	<input type="checkbox"/>
Rural Major Collector	<input type="checkbox"/>	Urban Major Collector	<input type="checkbox"/>
Rural Minor Collector	<input type="checkbox"/>	Urban Minor Collector	<input type="checkbox"/>
Rural Local Road	<input type="checkbox"/>	Urban Local Road	<input type="checkbox"/>

Annual Average Daily Traffic:

85th Percentile Speed:

5-yr total pedestrian crashes:

Pedestrian count (if available):

Posted Speed Limit:

% Heavy Vehicles (classes F4-F13):

5-yr total bicycle crashes:

Bicycle count (if available):

Instructions: For each box checked, please briefly describe how the item is addressed, not addressed, or not applicable and include supporting documentation.

Refer to best practice design standards as needed, including from the American Association of State Highway Officials (AASHTO), the Manual on Uniform Traffic Control Devices (MUTCD), the New York State Department of Transportation (NYSDOT), the Institute of Transportation Engineers (ITE), the National Association of City Transportation Officials (NACTO), the Americans with Disabilities Act (ADA), and the US Access Board's Public Right-of-Way Accessibility Guidelines (PROWAG).

EXISTING CONDITIONS				
Item to Be Addressed/Considered	YES	NO	N/A	Required Description
Existing Walking & Bicycling Facilities				
Do walking or bicycling facilities exist within 300 feet of the project area? (see page 3 for examples)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there <u>bicycle parking</u> within 300 feet of the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Existing Roadway Facilities				
Are road shoulder widths adequate for walking and bicycling? If not, please specify travel lane and road shoulder widths.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are road shoulder surfaces in good condition for walking and bicycling? If not, please specify.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is on-street parking present on the road?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Existing Transit Facilities				
Is the project area on a transit route? (<u>Dutchess County Public Transit routes</u> , Metro-North, or other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are there bus stops or train stations within a quarter-mile of the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

EXISTING CONDITIONS				
Item to Be Addressed/Considered	YES	NO	N/A	Required Description
Existing Access and Mobility/ADA				
Do all sidewalks, ramps, signals, and other facilities within the project area meet ADA standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Existing Walking/Bicycling Issues				
Have local leaders, residents, or organizations been contacted to discuss issues related to walking, bicycling, or transit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Existing Safety Issues				
Has the local law enforcement agency (County Sheriff's Office and local police) and/or road owner been contacted to discuss any safety issues in the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Key Destinations (see also WalkBikeDutchess Chapters 5.1-5.5 for maps of key destinations)				
Are there shopping, employment centers, cultural centers, historic sites, landmarks, recreation areas , or other key destinations that could be connected to the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are there schools, hospitals, senior centers, community centers or centers for persons with disabilities within a half-mile of the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Planned Facilities				
Is there a planned walking, bicycling, or transit facility within a radius of 300 feet around the project area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Centers & Greenspaces				
Is this facility located within an identified center as per the County's Centers & Greenspaces Plan ? If yes, which center?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Plans & Policies				
<p>Briefly describe relevant recommendations from County & municipal planning or policy documents addressing walking, bicycling, transit, or truck/freight travel in or near the project area and how the project incorporates them, or if not, why not.</p> <p>Examples include: Metropolitan Transportation Plan (County-wide long-range transportation plan); Walk Bike Dutchess (County-wide Pedestrian & Bicycle Plan); municipal Comprehensive Plan, trail or open space plan, sidewalk or pedestrian plan, or bicycle plan. Also see Walk Bike Dutchess Chapter 2 for an overview of County & local policies and plans, and Chapter 6 for County-Wide Recommendations. Contact the Transportation Council if you need assistance.</p>				

Attach a project plan & map of the surrounding context, including existing & planned facilities and destinations.

PROPOSED DESIGN

Complete Streets Elements: what will be included in the Proposed Design?

Bicycling Facilities:	
Off-roadway path/trail	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Dedicated on-street bike lane	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Shared-lane markings (sharrows)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Paved Shoulders (4 feet minimum; 5+ feet preferred)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Bike detection at actuated traffic signals, including at turn lanes	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Signals with adequate minimum green time for bicyclists to cross the intersection	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Bicycle-safe inlet grates	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Bicycle parking (racks, lockers)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Transit Facilities:	
Transit vehicle access into site	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Bus pull-offs or curb extensions	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Bus stop signs/marked stops	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Bus stop shelters	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Has transit agency/ies been contacted to discuss options?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Access and Mobility/ADA Facilities:	
ADA-compliant sidewalk/path	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Accessible pedestrian traffic signals (push-buttons with audible tones)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Curb ramps with detectable warning surface	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
ADA-compliant slopes and cross-slopes for driveway ramps, sidewalks, & crossings	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Access management: reduce conflict points between pedestrians, bicyclists, and vehicles	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Freight & Emergency Vehicles:	
Loading/unloading zones	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Emergency vehicle access	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

Walking Facilities:	
Sidewalks (preferred on both sides of the street) or path	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Paved Shoulders (4 feet minimum; 5+ feet preferred)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
High-visibility crosswalks	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Curb extensions to reduce crossing distance	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pedestrian traffic signals with adequate crossing time	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Signal timing: protected left turn phases, leading pedestrian interval, no right turn on red, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Raised median with refuge islands (especially on roads with 2 or more lanes in each direction)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Traffic calming elements, lighting & signage, especially at uncontrolled crossings	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Connectivity:	
Connections to bicycling, walking, or transit facilities	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Connections to key destinations (see page 2)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Connections to neighborhoods	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Streetscape Elements:	
Landscaping, street trees, planters, buffer strips, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Pedestrian-scale lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Public seating or benches	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Wayfinding signage for walking, bicycling, & transit	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Utilities: relocate poles or wires	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
Responsible Agencies:	
Construction-period pedestrian/bicycle access:	
Ongoing facility maintenance:	
Law Enforcement:	
Road Owner:	

PROPOSED DESIGN

Diminished Access

Will the proposed project remove an existing walking or bicycling facility or hinder pedestrian or bicycle access?

Yes, Temporary Yes, Permanent No

If yes, describe why this is necessary and how access will be provided.

Reviewer Notes:

Prepared by: _____

Title: _____ Date: _____

Email: _____ Phone: _____

Public Works Dept Reviewer: _____

Title: _____ Date: _____

Email: _____ Phone: _____

Public Works Dept Approval: _____

Planning Dept Consulted: _____

Others Consulted: _____

Exception Requested: Yes No **Exception Granted:** Yes No

Justification Attached: Yes No

(exception required only if checklist is not to be completed; otherwise not required)

If you have feedback on this checklist, please email dctc@dutchessny.gov

Thanks to the City of Saratoga Springs for sharing their Complete Streets checklist for use as a model.