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| **SIGNATURE PAGE** | Version 1.0  |
| PROJECT TITLE |  |
| REPORT TYPE | Non-Access Feasibility Study | REGION | Choose an item. | Report Date | 5/12/2020 |
| Work Order # |  | PIN # |  | WIN # |  |
| SR |  | Begin MP |  | End MP |  |
| ENGINEER(S) OF RECORD |
| The general content of this document has been prepared under my direct supervision, in accordance with Chapter 18.43 RCW and appropriate WSDOT manuals.*PE stamp must be electronically signed using a digital representation of your handwritten signature per WAC 196-23.* *Include a date stamp with* the electronic signature. | The traffic analysis in this document has been prepared under my direct supervision, in accordance with Chapter 18.43 RCW and appropriate WSDOT manuals.*PE stamp must be electronically signed using a digital representation of your handwritten signature per WAC 196-23.* *Include a date stamp with* the electronic signature. |
| Organization/Company Name & Address: | Organization/Company Name & Address: |
| SPONSORING AGENCY SIGNATURES(if applicable) |
| Recommended for Approval:Apply electronic signature using Adobe or Bluebeam including name and date. | Typed Name, Titled, Agency Name & Address: |
| SPONSORING REGION SIGNATURES |
| Choose an item. Approval:Apply electronic signature using Adobe or Bluebeam including name and date. | Region Traffic Engineer |
| Choose an item. Approval:Apply electronic signature using Adobe or Bluebeam including name and date. | Region Project Development Engineer |
| **APPROVAL SIGNATURES****Signature of this document acknowledges WSDOT Policy has been followed, and it has been determined that the performance gaps cannot be addressed with non-access improvements. See WSDOT Design Manual 550.05.**  |
| WSDOT – Assistant State Design EngineerApply electronic signature using Adobe or Bluebeam including name and date. | FHWA – *[insert job title]*Apply electronic signature using Adobe or Bluebeam including name and date. |

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| **CONCURRENCE SIGNATURES****The following signatures are members of the Executive Support Team who did not sign on the prior page.** **See Design Manual Chapter 550.04(1).** |
| Executive Support Team Member Name, Title, Organization/Agency/Company, Address | Sign electronically with date |
| Executive Support Team Member Name, Title, Organization/Agency/Company, Address | Sign electronically with date |
| Executive Support Team Member Name, Title, Organization/Agency/Company, Address | Sign electronically with date |
| Executive Support Team Member Name, Title, Organization/Agency/Company, Address | Sign electronically with date |
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