**FHWA – Indiana PSE Checklist**

|  |  |
| --- | --- |
|  Contract No.:       |  DES No.:       |
|  Route:       on NHS? Yes[ ]  No[ ]  |  County:       |
|  INDOT District:       |  Construction Cost at Stage 3:       |
|  Letting Date:       |  Contract Completion Date:       |
|  State Administered [ ]  FHWA Oversight [ ]  |
|  Location: location as shown in SPMS |
|  Description: work type as shown in SPMS |

*Notes:*

*See PSE Checklist Narrative for instructions on completing form.*

***Items in bold text below are critical****. Only Yes or NA answers can be given in order to for PSE to be approved.*

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Yes | No | NA |
| Section 1: DESIGN QUALITY, Plans Reviewer S3 Review |
| 1. Is Title Information accurate and complete?
 |[ ] [ ]   |
| 1. Is the design speed greater than or equal to the posted speed?
 |[ ] [ ]   |
| 1. Is the design speed appropriate for the facility?
 |[ ] [ ]   |
| 1. Are typical sections included?
 |[ ] [ ] [ ]
| 1. Has the pavement design been approved and does it match the typical

 section?  |[ ] [ ] [ ]
| 1. If there are 3 lanes sloped in same direction, does the outside lane

 have an increased slope?  |[ ] [ ] [ ]
| 1. Is drainage addressed and appear to drain away from the road?
 |[ ] [ ] [ ]
| 1. If required, is the median width adequate? If no, has a design exception

 been approved?  |[ ] [ ] [ ]
| 1. Do the foreslopes and backslopes meet standards?
 |[ ] [ ] [ ]
| 1. Do the vertical and horizontal alignments complement each other?
 |[ ] [ ] [ ]
| 1. Are all obstructions outside of the horizontal sight distance impact area?
 |[ ] [ ] [ ]
| 1. Are right of way limits defined?
 |[ ] [ ]   |
| 1. Is the proposed work within the ROW?
 |[ ] [ ]   |
| 1. Is the Level 1 checklist submitted along with design exception approval if applicable?
 |[ ] [ ] [ ]
| 1. Is safety hardware used appropriately? (guardrail?)
 |[ ] [ ] [ ]
| 1. Is lane alignment thru intersection appropriate?
 |[ ] [ ] [ ]
| 1. Is access control appropriate within the vicinity of interchanges and

 Intersections (interchange > 100’ and 300’ from ramp terminal)? If not, has documentation been approved by FHWA? | [ ] [ ]  | [ ] [ ]  | [ ] [ ]  |
| 1. Do signs and placement comply with the IMUTCD?
 |[ ] [ ] [ ]
| 1. Do signs convey the intended message? Are they placed in accordance

 with the IMUTCD and without unnecessary clutter?  |[ ] [ ] [ ]
| 1. Are appropriate pavement markings called for?
 |[ ] [ ] [ ]
| 1. Has the work zone traffic control plan or transportation management plan,

 as applicable, been completed? |[ ] [ ]   |
| 1. Are lane widths appropriate for MOT phases? If not, has a design exception

 been approved?  |[ ] [ ]   |
| 1. Does the MOT account for drainage?
 |[ ] [ ]   |

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| --- | --- | --- | --- |
| Item | Yes | No | NA |
| 1. Is the posted speed during construction less than or equal to the

 construction design speed? |[ ] [ ]   |
| 1. Does the MOT address bike and pedestrian traffic if applicable?
 |[ ] [ ] [ ]
| 1. Will emergency response teams be able to get through the construction

 zone easily? |[ ] [ ]   |
| 1. Based on the MOT, is the project constructible?
 |[ ] [ ]   |
| 1. Are there provisions to maintain access to businesses and residences

 during construction? |[ ] [ ] [ ]
| 1. Are provisions made for protecting motorists from drop-offs?
 |[ ] [ ] [ ]
| 1. Do sidewalks and trails comply with the ADA?
 |[ ] [ ] [ ]
| 1. Is the final design estimate complete and reasonable?
 |[ ] [ ]   |
| 1. If non-participating items are included in the project, are they listed separately with an asterisk in the estimate?
 |[ ] [ ] [ ]
| 1. Are proprietary items included in the contract documents?

 If Yes, has their use been approved? |[ ] [ ]   |
|  |[ ] [ ] [ ]
| Reviewed By (full name):       |
| Date (mo.day.yr):       |
| Phone / Email:       |
| **INDOT Comments for Section 1:**       |
| Section 2: Project Manager Review |
| 1. **Is the construction phase in the TIP/STIP? If Yes, list TIP/STIP reference and Date:**

 |[ ] [ ] [ ]
| 1. Is the project required to be on Federal-aid system? If Yes, is it on the

 Federal Aid System?  |[ ] [ ] [ ]
| 1. **Has right of way been certified? If Yes, list type and date of Right-of-way certificate:**
 |[ ] [ ] [ ]
| 1. If right of way certificate is a level 2 or 3 exception, has FHWA

 approval been given? |[ ] [ ] [ ]
| 1. If ROW is not clear prior to letting, are appropriate restrictions included in

 the contract documents? |[ ] [ ] [ ]
| 1. Has the utility certificate or waiver been completed? If Yes, list type and date of certificate:
 |[ ] [ ] [ ]
| 1. If utility relocations are required and not completed prior to construction

 authorization, are proper stipulations contained in the proposal? |[ ] [ ] [ ]
| 1. **Has a NEPA document been completed? If Yes, list type and date of initial and subsequent NEPA approval.**

**Date of most recent Additional Information (AI):**Has the Environmental Consultation Form been approved? |[ ] [ ]   |
|  |[ ] [ ]   |
| 1. Have all waterway permits been received? If Yes, list required permits:
 |[ ] [ ] [ ]
| 1. Is the project commitments database current and commitments incorporated in the final design?
 |[ ] [ ] [ ]
| 1. (a) Has the railroad coordination certification been completed?
 |[ ] [ ] [ ]

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Yes | No | NA |
| 43. (b) If the project requires use of or adjustment to railroad facilities, has a railroad agreement been signed? List date of agreement:      (c) Does the proposal include liability insurance requirements? |[ ] [ ] [ ]
|  |[ ] [ ] [ ]
| 1. Has coordination with FAA been completed for project located within 2 miles of an airport?
 |[ ] [ ] [ ]
| 1. For an Interstate interchange, is an IJ required? If so, was final approval

 given? List approval date:       |[ ] [ ] [ ]
| 1. **If the project is:**

• **a roadway and total cost exceeds $50 M *or***• **a bridge and the total cost exceeds $40 M****has a value engineering study been completed?** |[ ] [ ] [ ]
| 1. **If the total project cost is between $100 M and $500 M, has an Initial**

 **Financial Plan been completed? If applicable, have annual updates been completed? List approval date:**  |[ ] [ ] [ ]
| 1. **If the total Project cost is $500 M or more:**

 **Has a Project Management Plan (including Initial Finance Plan) been completed? If yes, list approval date:**  **Was a Cost Estimate Review completed? List date of review:** |[ ] [ ] [ ]
|  |[ ] [ ] [ ]
| 1. If applicable, has an FHWA approval letter been included for use of experimental features?
 |[ ] [ ] [ ]
| 1. If there are guarantees or warranties and the project is on the NHS, has

their use been approved by FHWA or State for delegated projects? |[ ] [ ] [ ]
| 1. If there are any incentive / disincentive clauses, have they been reviewed

 and approved by FHWA or State for delegated projects? |[ ] [ ] [ ]
| 1. If State furnished material (other than signal controllers), borrow or disposal

 sites are specified in the contract, has a public interest finding been completed with FHWA concurrence? |[ ] [ ] [ ]
| 1. If non-participating items were added after S3 review, are they listed separately with an asterisk in the estimate?
 |[ ] [ ] [ ]
| 1. Are proprietary items included in the contract documents?

 If yes, has their use been approved? |[ ] [ ]   |
|  |[ ] [ ] [ ]
| 1. Has a realistic construction completion date been set? Contract Completion Date:
 |[ ] [ ]   |
| 1. Are previous review comments incorporated into the Final Tracings plans?
 |[ ] [ ]   |
| Reviewed By (full name):       |
| Date (mo.day.yr):       |
| Phone / Email:       |
| **INDOT Comments for Section 2:**       |
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| --- | --- | --- | --- |
| Item | Yes | No | NA |
| Section 3: Contracts Administration Review |
| 1. **If procurement is by other than competitive bidding, has a cost**

 **effectiveness finding been approved by FHWA?** |[ ] [ ] [ ]
| 1. **Does the proposal contain:**

 • **FHWA-1273, Contract Provisions [633.102(b)]** • **US Department of Labor Wage Rate General Decision Number** • **Title VI Assurances** |[ ] [ ] [ ]
| 1. **Was a DBE goal established for the contract?**

**If Yes, list goal:**  |[ ] [ ] [ ]
| 1. If less than a 3 week advertisement period is requested, is the request

 appropriate and approvable as part of the PSE? |[ ] [ ] [ ]
| 1. Have prior comments, including phase I PSE been addressed?
 |[ ] [ ] [ ]
| 1. Final construction cost estimate submitted?

CE cost total to match/approx. FMIS request: |[ ] [ ] [ ]
| Reviewed By (full name): |       |
|  Submittal Date (mo.day.yr): |  |
| Phone / Email: |  |
| **INDOT Comments for Section 3:**       |

***INDOT Review & Approval:***

|  |  |
| --- | --- |
| Name: |       |
| Date: |
| Phone/Email: |

[ ]  INDOT hereby submits Phase 1 PS&E to FHWA for review and comments.

[ ]  INDOT hereby submits Phase 2 PS&E to FHWA, requesting approval.

**FHWA Review Comments (if Full Oversight):**

[ ]  Comments included on attached comment sheet

[ ]  No comments

**FHWA Signature (required for Full-Oversight Project):**

***Reviewed and approved By:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Date: \_\_\_\_\_\_\_\_***

**PSE has been approved and is ready for advertisement with the following conditions:**

[ ]  No conditions