

COMPLETE STREETS CHECKLIST
For projects over \$500,000

Project Name:

Project Developer:

Phone Number:

Opportunity Statement (See Project Roadmap for instructions):

Description of scope from originating project:

Project Extent:

Project Budget and Funding Source(s) (List modal plans if applicable):

If grant funded, list timeline:

1 Purpose of the Complete Streets Checklist

Seattle's Complete Streets policy is about creating and maintaining safe streets for everyone. In 2007, the Seattle City Council passed Ordinance 122386, known as the Complete Streets ordinance, which directs Seattle Department of Transportation (SDOT) to design streets for pedestrians, bicyclists, transit riders, and persons of all abilities, while promoting safe operation for all users, including freight. This is the lens through which SDOT views our major maintenance and construction projects.

SDOT uses a rigorous, data-driven process to evaluate planned projects consistent with the Complete Streets policy. The Complete Streets checklist is the tool SDOT uses to collect data and information about the status of the street and surroundings, as well as the details of the project, with a goal of identifying specific improvements that can be incorporated into the project to balance the needs of all users.

2 Complete Streets Review Story Map - Getting Started

Data pertaining to questions in this checklist can be found in the [Complete Streets Review Story Map](#). To use the map you need to know the following:

Using your mouse wheel or the zoom controls at the top left corner of the map, zoom to your project area. As you will notice, zooming in makes new data appear on the map. Alternatively, you can use the search tool (magnifying glass button) to type in an address for the location you are looking for. For the most accurate results, include both the city (Seattle) and the state (WA) after the address.

Once you have reached an acceptable scale, begin by clicking on step #3 (Arterial Classification and Street Type), and click on the following numbered tabs to see just the relevant data for each topic. Each map will preserve the scale of the previous map.

Within each map you can click on any of the features to get whatever information is associated with that layer. Because these maps include data with the same shapes, you may need to zoom in or out to see other available layers.

Summary:

- **Some data layers will only display at a distinct scale, you will need to zoom in or out on the maps to find and view all the layers you need for each topic.**

Questions or comments about the checklist template?

Please email Gabriel Seo (gabriel.seo@seattle.gov) for more information.

3 Project Coordination

1. Review [DOTMaps](#), the [Complete Streets Review Story Map](#) and associated links. Are there any opportunities to coordinate with relevant City projects/initiatives within the project area? Yes No

Discuss coordination opportunities and list contact information:

Describe final decision:

2. Are there any opportunities to coordinate with relevant active private development within the project area? Yes No

Discuss private development coordination opportunities and contact information:

4 Street Classification & Type

Arterial Classification: Principal Minor Collector

 Non-Arterial Boulevard SFD Non-Arterial

If project area has multiple arterial classifications, describe:

<p>Street Types:</p> <ul style="list-style-type: none"> Alley Downtown Downtown Neighborhood Downtown Neighborhood Access Industrial Access Minor Industrial Access Neighborhood Corridor 	<ul style="list-style-type: none"> Neighborhood Yield Street Parks Boulevard Urban Center Connector Urban Village Main Urban Village Neighborhood Urban Village Neighborhood Access 	<p>Other Facilities:</p> <ul style="list-style-type: none"> Trails Unopened Right of Way Non-SDOT Property
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If project area has multiple street types, please list which segments per type:

ROW
Width:

Describe relevant standards from [Streets Illustrated](#) and any [deviations](#) you'll be requesting:

5 Safety & Channelization

1. Posted Speed:
2. 85th percentile speed (if available):
Location, date collected:
 - a. *Is the 85th percentile over posted speed?* Yes No
 - b. Are there high collision locations in the project area? Yes No
 - c. Are there Bicycle and Pedestrian Safety Analysis priority locations in the project areas? Yes No
 - d. Does the frequent Transit Network or RapidRide network operate in the project area? Yes No

If Yes to a, b, or c contact Vision Zero to discuss traffic calming recommendations. If yes to d. contact Transit and Mobility to discuss.

Describe recommendations:

4. a. Average Weekday Traffic (AWDT):
Location, date collected:
- c. Average Weekday Traffic (AWDT):
Location, date collected:
- b. Average Weekday Traffic (AWDT):
Location, date collected:
5. Does the project area have 4 or more lanes? Yes No
6. If AWDT is less than 25K and lane configuration includes 4 or more through lanes, contact Traffic Operations for review for potential rechannelization. If along RapidRide (existing or future), Priority Bus Network, or Frequent Transit Network include Transit and Mobility in these discussions.

Describe final decision:

Should rechannelization be considered in the project scope?

6 Pavement Condition

1. Is the Pavement Condition Index 65 or below at any point in the project area? Yes No

2. Describe any visible areas of disrepair in the roadway:

4. Describe any areaways in the project area:

Describe recommendations:

Please provide planning level cost estimates for recommendations:

Describe final decision:

7 Flex Lane

1. Will project change existing flex lane use(s)? If No, skip to #7. If known, describe proposed changes:	Yes	No	Describe recommendations for flex lane:
2. Describe existing flex zone use(s) (e.g., loading zones) in project area:			<p>Describe final decisions:</p>
3. Describe adjacent land use(s) that utilize the flex lane:			
<div style="display: flex; justify-content: space-around;"> Residential Commercial + Mixed Use Industrial </div>			
4. Describe ROW Allocation Framework prioritized functions for the flex lane for specified land use(s) in your project area :			
5. What is the utilization of existing parking (e.g., peak parking occupancy)?			
6. How can flex lane functions be met nearby or off-street?			
7. Will any existing accessible parking spaces be impacted?	Yes	No	
8. How many accessible on-street parking spaces is your project required to install? (per Streets Illustrated section 3.13)			

8 Signals & Intelligent Transportation Systems (ITS)

1. Does the project include or impact traffic signals that are on the left-turn Signal List, the High Priority (new) Signal List, or the Major Maintenance (rebuild) List?

2. Is a full signal warranted in the project area? Yes No
If yes, consult with signal design manager about opportunities to upgrade.

3. Does the project area include any signals with a Condition Index read as the worst 10% of all signals?

4. Is the project on the ITS Key Arterial Network? Yes No
If so, list segments:

Describe recommendations:

Please provide planning level cost estimates:

Describe final decisions:

9 Pedestrian Infrastructure

- | | | | |
|----|--|-----|----|
| 1. | Is sidewalk repair needed in the project area? | Yes | No |
| 2. | Will sidewalk repair impact trees?
If yes, summarize recommendations from Urban Forestry: | Yes | No |
| 3. | Are there missing sidewalks in the project area?
If yes, contact the PMP Implementation Coordinator | Yes | No |
| 4. | Are there missing curb ramps or tactile pads in the project area?
If yes, contact ADA Program Manager | Yes | No |
| 5. | Are there Accessible Pedestrian Signal requests in the project area? If yes, contact ADA Program Manager | Yes | No |
| 6. | Are there tier 1 or tier 2 signalized intersections in the project area? If yes, contact Pedestrian Crossing Lead | Yes | No |
| 7. | Are there tier 1 or tier 2 unsignalized intersections in the project area? If yes, contact Pedestrian Crossing Lead | Yes | No |
| | Describe tier 1 and tier 2 signalized & unsignalized recommendations: | | |
| 8. | Describe any adverse impacts to pedestrian travel triggered by your project (e.g., removal of a pedestrian buffer): | | |

Describe recommendations:

Please provide planning level cost estimates:

Describe final decisions:

10 Bicycle Infrastructure

- | | | | |
|----|--|-----|----|
| 1. | Does the project area contain locations on the Recommended Bicycle Network? | Yes | No |
| 2. | Is there an existing bike facility?
If yes, list street segments: | Yes | No |
| 3. | Do facilities in the project area meet the existing Bike Master Plan (BMP) designation?

<i>If existing facilities do not meet BMP designation, review Streets Illustrated for bicycle design guidance and consult with BMP Coordinator about opportunity to upgrade the facilities.</i> | Yes | No |
| 4. | Describe any adverse impacts to bicycle travel triggered by your project (e.g., bike lane closure during construction, pavement seam in bike lane, etc): | | |

Describe recommendations:

Please provide planning level cost estimates:

Describe final decision:

11 Transit Infrastructure

- | | |
|--|---------------------------------------|
| <p>1. Is there a bus route/bus stop/bus layover within the project area?</p> <p>If Yes, describe and consult Streets Illustrated for transit design standards. List them here.</p> | <p>Yes No</p> |
| <p>2. Is there a RapidRide (existing or future), Priority Bus Network, or Frequent Bus Network route within the project area?</p> <p>If Yes, describe which bus routes and type of overlap. Consult Transit Master Plan for investment recommendations. List recommendations here and consult with the Transit and Mobility group.</p> | <p>Yes No</p> |
| <p>3. Is there overhead catenary wire for trolley buses within the project area?</p> <p>Is a change to channelization proposed with this project?</p> <p>If Yes to either of the above, describe and consult with the Transit and Mobility group who will connect you with the appropriate Metro contact if necessary.</p> | <p>Yes No</p> <p>Yes No</p> |
| <p>4. Are there transit stops in the project area more than 500 ft from a controlled crossing in the project area? Is there an opportunity to consolidate bus stops? List recommendations here and consult with the Transit and Mobility group who will connect you with the appropriate Metro contact if necessary.</p> | <p>Yes No</p> |
| <p>5. Describe any adverse impacts to transit operations triggered by your project (e.g., any anticipated operational impacts to bus travel times, rechannelization, bus stop impacts etc.)</p> | |

Describe recommendations:

Please provide planning level cost estimates:

Describe final decision:

12 Freight Infrastructure

- | | | | | | | | | | |
|-----------------------------|---|--------------------|-----------------------|--------------------|------------------|-----------------------------|------------|--|--|
| 1. | Is the project on the Recommended Freight Network? | Yes | No | | | | | | |
| | <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Major Truck Street</td> <td style="width: 50%;">Limited Access Street</td> </tr> <tr> <td>Minor Truck Street</td> <td>Over-Legal Route</td> </tr> <tr> <td>First / Last Mile Connector</td> <td>Heavy Haul</td> </tr> </table> | Major Truck Street | Limited Access Street | Minor Truck Street | Over-Legal Route | First / Last Mile Connector | Heavy Haul | | |
| Major Truck Street | Limited Access Street | | | | | | | | |
| Minor Truck Street | Over-Legal Route | | | | | | | | |
| First / Last Mile Connector | Heavy Haul | | | | | | | | |
| 2. | Does project area meet curb radius and clearance standards ? | Yes | No | | | | | | |
| 3. | Are there identified freight projects in project area? (Freight Master Plan (FMP)) | Yes | No | | | | | | |
| 4. | Is this project in the downtown traffic control zone ? | Yes | No | | | | | | |

Describe recommendations:

Please provide planning level cost estimates:

Describe final decision:

13 Urban Forestry

1. Describe any existing [urban forestry](#) assets within the project limits that need to be protected during construction:

Describe recommendations:

2. Are there Heritage Trees in the project area? Yes No

3. Does your project propose planting trees or expanding the ground plane landscape? Yes No

4. Will there be ground cover that requires maintenance or pruning? Yes No

Please provide planning level cost estimates:

Describe final decision:

14 Urban Design and Planning

- | | | |
|---|-----|----|
| 1. Is there a Street Design Concept Plan for the project area? | Yes | No |
| 2. List any plan(s) that overlap with project area (and relevant plan boundaries): | | |
| 3. Have other urban design or transportation plans been completed, or are draft plans in progress, within project area (including plans from other City departments)? | Yes | No |
| 4. Is there an opportunity to add pedestrian lighting in the project area? | Yes | No |

Describe recommendations:

Please provide planning level cost estimates:

Describe final decision:

15 On-Site Stormwater Management

			<i>Describe recommendations:</i>
1. Does your project create or replace 2,000 SF of hard surface, or disturbing 7,000 SF of land? If yes to either, do an early draft of drainage memo to better understand requirements If no, skip to item 3.	Yes	No	
2. Have the minimum requirements of the 2016 Stormwater Code been evaluated?	Yes	No	
i. Is this project in an area identified as suitable for infiltrating GSI approaches (per SPU GIS data), including permeable pavement options?	Yes	No	
ii. Does project area require infiltration investigation? If investigation has been done, include findings in description of BMPs below	Yes	No	
iii. Are there opportunities in the project limits to accommodate On-Site Stormwater Management BMPs?	Yes	No	
iv. Is there an opportunity to remove impervious surface as part of this project in accordance with the 2013 Executive Order which urges all City departments to incorporate natural drainage features into capital projects?	Yes	No	<i>Please provide planning level cost estimates:</i>
<i>Please describe opportunities:</i>			Describe final decision:
<i>Please provide rough cost estimates:</i>			
3. Is this project on a street identified as potentially eligible for SPU partnership opportunities (per SPU GIS data)?	Yes	No	

Art

Consult with SDOT Arts & Enhancements Project Manager to complete this section.

Seattle was one of the first cities in the United States to adopt a percent-for-art ordinance in 1973. The program specifies that 1% of eligible city capital improvement project funds be set aside for the commission, purchase and installation of artworks in a variety of settings.

- | | | |
|---|-----|----|
| 1. Is there an opportunity for a 1% Percent for Art funded public art project(s) in the project area? | Yes | No |
| 2. Consult the SDOT Art Plan . Is there an opportunity to implement SDOT Art Plan toolbox elements (e.g. signal box art, sidewalk inlays, creative street furniture or bollards or planters, creative bicycle racks, etc.) in the project area? | Yes | No |

Contact: Kristen Ramirez
Email: kristen.ramirez@seattle.gov
Phone: (206) 615-1095

Prepare the following information:

1. Name of Program (official CIP name)
2. Approximate project scope & budget
3. Timing/schedule
4. Whether there is space for art in the project area

Describe final decisions:

Describe Public Art or SDOT Art Plan opportunities:

Based on the initial project information provided, the above noted Complete Streets elements are recommended to be incorporated into the project scope. The Project Definition Steering Committee will make all final decisions regarding project scope, based on these preliminary Complete Streets recommendations.

In addition to these broad preliminary scope recommendations, ongoing urban design review is required for 30%, 60%, and 90% design drawings to review consistency with these preliminary recommendations, as well as ongoing design details and urban design opportunities. To the greatest extent possible, all major scope recommendations will be made during the Project Definition phase.

Project Developer _____
name (please print) *date*

signature

Project Manager _____
name (please print) *date*

signature