

Ordinance Worksheet - STAA Routes

Application No.: _____	Developed By: _____	Date: _____
Adjusted No.: _____	Initial Check By: _____	Date: _____
Effective Date: _____	Entered By: _____	Date: _____
Total Length: _____ miles	Final Check By: _____	Date: _____
Requestor: _____		
Address: _____		

Ordinance Type: _____	County: _____	City: _____
On Road: _____	Local Name: _____	
Begin Road: _____	Local Name: _____	Distance: _____ Direction: _____
End Road: _____	Local Name: _____	Distance: _____ Direction: _____
Segment Length: _____ miles	Map Designation Type: _____	Ordinance Number: _____

Ordinance Type: _____	County: _____	City: _____
On Road: _____	Local Name: _____	
Begin Road: _____	Local Name: _____	Distance: _____ Direction: _____
End Road: _____	Local Name: _____	Distance: _____ Direction: _____
Segment Length: _____ miles	Map Designation Type: _____	Ordinance Number: _____

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|---|---|---|--|---|
| Ordinance Types (STAA Vehicles): | 40 - Reasonable Access (53' and Twins)
41 - Reasonable Access (53' Only)
42 - Reasonable Access (Twins Only)
43 - National Truck Network (53' and Twins) | 44 - Designated Route (53' and Twins)
45 - Designated Route (53' Only)
46 - Designated Route (Twins Only) | Map Color: 1 - Red (53' and Twins)
2 - Gray (53' Only)
3 - Green (Twins Only)
4 - Black (Restricted) | 5 - Blue Dashed (Eligible)
6 - None (not on map) |
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