



Illinois Department of Transportation

HSIP Candidate Form

FY

ID:	Contract:	Award Date:	Completion Date:
District:	County:	City:	
Key route:	Marked route:		
Road Name:	Intersecting Roadway: <input type="checkbox"/> N/A		
Length:	<input type="checkbox"/> N/A	Mile station:	to

Location Description:

<input type="checkbox"/> Rural	<input type="checkbox"/> Urban	Lanes:
AADT(Segment):	Total Entering AADT (Intersection):	Speed Limit: mph
Friction Test Results:	<input type="checkbox"/> N/A	Lighting Present: <input type="checkbox"/> Y <input type="checkbox"/> N
CHSP Emphasis Area(s):	<input type="checkbox"/> District Documentation	<input type="checkbox"/> Systematic Improvements <input type="checkbox"/> N/A
Peer Group:	<input type="checkbox"/> N/A	
Other:		

Crashes Details

Year	Total Crashes	Fatal Crashes	Fatalities	A-Injury Crashes	A-Injuries	B-Injury Crashes	B-Injuries	C-Injury Crashes	C-Injuries	PDO	Wet-Weather Crashes	Darkness (Not lighted) Crashes
Total												

Location Description:	
Problem Description:	
Previous Safety Improvements:	
Collision Diagram: <input type="checkbox"/> Y <input type="checkbox"/> N	Images: <input type="checkbox"/> Y <input type="checkbox"/> N
Predominant Crash Types:	

Proposed Improvement(s):

Estimated Project Cost (\$000's): \$	Benefit-Cost Ratio:
Local Projects:	
Annual Fatal Crash Rate (Fatal Crashes/100 Miles):	Annual A-Injury Crash Rate (A-Injury Crashes/100 Miles):
Local Roads Rural Functional Class:	
Approved:	Central HSIP Approval Date:
Signed: State Safety Engineer	Funding: <input type="checkbox"/> HSIP <input type="checkbox"/> HRRR <input type="checkbox"/> RAIL

Comment:

Distribution:	<input type="checkbox"/> OPP	<input type="checkbox"/> District	<input type="checkbox"/> BSPE	<input type="checkbox"/> LRS	<input type="checkbox"/> BDE
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