

<p align="center"><b>SHEET 1</b></p> <p align="center"><b>LTPP TRAFFIC DATA</b></p> <p align="center"><b>SUMMARY TRANSMITTAL FORM</b></p>	<p>*STATE ASSIGNED ID [ _ _ _ _ ]</p>
	<p>*STATE CODE <u>1051</u></p>
	<p>*SHRP SECTION ID <u>104001</u></p>

STATE OR PROVINCE Arkansas COUNTY Sebastian

HIGHWAY ROUTE NO. I-540 MILEPOST# 13.7 (.milepoint)

NEAREST CITY/TOWN Ft. Smith NEAREST INTERSECTION N. of SH 253

FUNCTIONAL CLASS 11 NO. LANES EACH DIRECTION 2 TOTAL NO. LANES 4

DIRECTION OF TRAVEL GPS LANE SB DATE OPENED TO TRAF. 04-01-91 ?

FIPS COUNTY CODE \_\_\_\_\_ FHWA STATION IDENTIFICATION NO. \_\_\_\_\_

HPMS SAMPLE NO. \_\_\_\_\_ HPMS SUBDIVISION NO. \_\_\_\_\_

TYPE OF PAVEMENT: AC \_\_\_\_\_ PCC Y OTHER \_\_\_\_\_

CONTROL OF ACCESS: YES ✓ NO \_\_\_\_\_ MEDIAN: YES ✓ NO \_\_\_\_\_

CURRENT SURROUNDING DEVELOPMENT:  
 URBAN ✓ SUBURBAN \_\_\_\_\_ RURAL \_\_\_\_\_

HAS INTENSITY OF ROADSIDE DEVELOPMENT INCREASED OVER PAST 10 YEARS?  
 YES \_\_\_\_\_ NO ✓  
 IF YES, DESCRIBE CHANGES \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**NOTE: ATTACH ALL RELATED FORMS AND COUNT DATA AND SUBMIT TO THE SHRP REGIONAL OFFICE. ATTACH MAP INDICATING THE LOCATION OF EACH TRAFFIC COUNT, VEHICLE CLASSIFICATION COUNT, OR WEIGHT STATION RELATIVE TO THIS GPS TEST SECTION.**

NAME OF PREPARER _____	PHONE # _____
DATE PREPARED _____	

ENTERED NOV 07 2000 D M

<b>SHEET 1</b> <b>LTPP TRAFFIC DATA</b> <b>SUMMARY TRANSMITTAL FORM</b>	*STATE ASSIGNED ID [ _ _ _ _ ] *STATE CODE [ <u>05</u> ] *SHRP SECTION ID [ <u>164</u> ]
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STATE OR PROVINCE Arkansas COUNTY Sebastian  
 HIGHWAY ROUTE NO. \_\_\_\_\_ MILEPOST# 13.70  
 NEAREST CITY/TOWN \_\_\_\_\_ NEAREST INTERSECTION \_\_\_\_\_  
 FUNCTIONAL CLASS 11 NO. LANES EACH DIRECTION 2 TOTAL NO. LANES 4  
 DIRECTION OF TRAVEL GPS LANE 5 DATE OPENED TO TRAF. 04-01-91  
 FIPS COUNTY CODE \_\_\_\_\_ FHWA STATION IDENTIFICATION NO. \_\_\_\_\_  
 HPMS SAMPLE NO. \_\_\_\_\_ HPMS SUBDIVISION NO. \_\_\_\_\_  
 TYPE OF PAVEMENT: AC \_\_\_\_\_ PCC 1 OTHER \_\_\_\_\_  
 CONTROL OF ACCESS: YES ✓ NO \_\_\_\_\_ MEDIAN: YES ✓ NO \_\_\_\_\_  
 CURRENT SURROUNDING DEVELOPMENT:  
 URBAN \_\_\_\_\_ SUBURBAN \_\_\_\_\_ RURAL \_\_\_\_\_  
 HAS INTENSITY OF ROADSIDE DEVELOPMENT INCREASED OVER PAST 10 YEARS?  
 YES \_\_\_\_\_ NO \_\_\_\_\_  
 IF YES, DESCRIBE CHANGES \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ENTERED NOV 09 2000 T M

**NOTE: ATTACH ALL RELATED FORMS AND COUNT DATA AND SUBMIT TO THE**  
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**STATION RELATIVE TO THIS GPS TEST SECTION.**

NAME OF PREPARER _____	PHONE # _____
DATE PREPARED _____	