ADA Transition Plan Needs Assessment

Idaho Transportation Department

ITD 0240 (Rev. 11-12)
itd.idaho.gov

1. Use the space below to indicate when the self-evaluation for the public rights-of-way under your jurisdiction's management was completed. If you have not conducted a self evaluation, please refer to the *Draft Guidelines for Public Rights-of-Way* available at http://itd.idaho.gov/civil/Title6.htm or by request. If you do not have jurisdiction over public rights-of-way you do not need to complete this form.

2. Does your agency employ more than 50 people?

   ☐ Yes (Proceed to number 3) ☐ No (You are finished with this assessment. Although you are not required to complete a formal Transition Plan, you are still required to perform a self-assessment in order to comply with the ADA.)

3. Agency Name		ADA Self Evaluation Completion Date (m/d/y)
Your ADA Coordinator's Name	Phone Number	E-mail Address

4. Summarize your grievance procedure or complaint process

5. Date Transition Plan Completed (m/d/y) - If you have not completed your plan, proceed to number 7.

6. Does your Transition Plan include the following elements? (A checkmark indicates "Yes")
   - ☐ Self evaluation (a summary is fine if the Self Evaluation is included in a separate document)
   - ☐ Physical description of existing deficiencies (indicate below how deficiencies are stored)
     - ☐ Text Description ☐ Map ☐ GIS Database ☐ Other (describe) _____
   - ☐ Remedies to repair or replace the deficiency
   - ☐ Action plan with costs and timeframes

   If you checked Yes to all of the elements, you are finished with this assessment; If not, proceed to number 7.

7. Estimated ADA Transition Plan Completion Date (m/d/y) _____

   ITD has prepared *ADA Compliance in Pubic Rights-of-Way Guidance*, a document to help those agencies not currently in compliance in conducting a self evaluation and developing a transition plan so that they may receive or continue to receive federal funds as administered through the Idaho Transportation Department. This guide is available online and/or by request.

Completed By (Printed)	Title	Phone Number
Signature		Date

Send this completed form to: Idaho Transportation Department
EEO Office
PO Box 7129
Boise ID 83707-1129