CHAPTER 6, APPENDIX F

PARKING REMOVAL LETTERS
DATE

Municipality Contact Person
Municipality Name
Street Address
City, State Zip Code

Subject: Notice of Future PennDOT Construction Project: Americans with Disabilities Act Compliance and Removal of On Street Parking
County:
Municipality Name
SR , Section
Project Length:
Project Name:
MPMS Number:

Dear Municipality Contact Person:

The Pennsylvania Department of Transportation is planning a roadway alteration project within your [city/township/borough] which will affect the use of the public right-of-way.

The Americans with Disabilities Act (ADA) of 1990 is a civil rights statute that, among other things, defines the requirements for access to public programs and facilities by persons with disabilities. The implementing regulations for Title II of the ADA make clear that designing and constructing pedestrian facilities in the public right-of-way that are not accessible by persons with disabilities may constitute impermissible discrimination. Section 504 of the Rehabilitation Act of 1973 (504) includes similar prohibitions in the conduct of federally-funded programs.

All projects affecting the use of the public right-of-way must therefore incorporate needed pedestrian access measures within the scope of the project. Specifically, all pedestrian facilities within the scope of the project must comply with the current ADA standards and any locations missing a required pedestrian facility are subject to corrective action during construction of the project.

Along SR [_____] there is/are (##) "T" intersection(s) with on street parking directly across from the corners. The on street parking at these "T" intersections prevents the installation of a pedestrian crossing of the SR that would be safe for all users. PennDOT recommends that the appropriate number of on street parking spaces be removed at these intersections to allow a safe and accessible crossing to be established. [Municipality Name] should evaluate the necessary steps required to restrict parking in these locations. Please see attached sketches indicating the "T" intersections, affected parking spaces and proposed crossing details.

We desire to meet with you within the next two weeks to discuss ADA accessibility issues, appropriate cost sharing, utility or right-of-way concerns, and future maintenance responsibilities for this project. The individual listed below will contact you to set-up a meeting date.
Please direct all correspondence to the following contact:

- PennDOT Engineering District 0-0
- Contact Person
- Street Address
- City, State Zip Code
- Telephone: (000) 000-0000
- E-mail: xxxxx@pa.gov

Sincerely,

Project Manager's Name
Title
DATE

Municipality Contact Person
Municipality Name
Street Address
City, State Zip Code

VIA CERTIFIED MAIL

RE: Failure to remove on street parking to provide pedestrian accommodations

Dear Municipality Contact Person:

As indicated in the letter dated [Date] and the follow up meeting held on [Date], the Pennsylvania Department of Transportation plans to improve SR [_____] through roadway alterations that include [describe alteration work and location], which is under the jurisdiction of [Municipality Name]. To meet current accessibility standards required by the Americans with Disabilities Act (ADA), altered pedestrian facilities must meet the latest design standards. It has been determined that [Municipality Name] has not taken action to remove on street parking located at the "T" intersection(s) (see attached summary) along SR [_____] necessary for the establishment of a fully accessible crossing.

Due to the sight distance issues caused by [Municipality Name]'s lack of action regarding parking, PennDOT will not be able to install accessible pedestrian facilities at this/these intersection(s). [Municipality Name] must take appropriate action to prohibit pedestrian crossing at the intersection(s) referenced above. Complaints relating to the lack of accessibility under the ADA will be referred to [Municipality Name].

Thank you for your attention to this matter. If you have any questions, please contact Contact Person at (000) 000-0000.

Sincerely,

Project Manager's Name
Title