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|   | M-950 R1 (3-19) |   |   |   |   |   |   |   |   |   |
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| **Access Approval Procedure - Impacts to Access of Neighboring Owners** |

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| **Phase 1 Worksheet** |  |
|   | **Directions:**  | This worksheet is intended to help HOP applicants through the access approval procedures (Pub. 282, Ch. 3.6 - HOP Guidelines). Document  |   |   |
|   |   |   | all property owners within the limits of work, and work across the columns to determine whether an approval (letter or signed plan) or  |   |   |
|   |   |   | HOP application (M-950 A or M-945 A) is required. Please use the included sample approval letter template if warranted. |   |   |   |
|   |   |   | **Note: Continue to Phase 2 Worksheet if approval procedure is not resolved.** |   |   |   |   |   |
|   |   | **All Property Owners within the Limits of Work** | **Property Owner Address** | **Property Impacted by Proposed Improvements (See Pub. 282, Ch. 3.7 - Approval Procedures)?** | **Existing Driveway accessing SR?** | **Driveway Needs Reconstructed, Relocated or Restricted?** | **Approval Obtained?** | **Application Obtained?** |  |
|   | **Yes = Next Column** | **Yes = Next Column** | **Yes = Obtain Application** | **Yes = End of procedure No = Continue to Phase 2 Worksheet** | **Yes = End of procedure No = Continue to Phase 2 Worksheet** |   |
|   | **No = No Approval Necessary** | **No = Obtain Approval** | **No = Obtain Approval** |   |
|   | 1 | smith |   | Yes | No | N/A |   |   |   |
|   | 2 |   |   |   |   |   |   |   |   |
|   | 3 |   |   |   |   |   |   |   |   |
|   | 4 |   |   |   |   |   |   |   |   |
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|   | 16 |   |   |   |   |   |   |   |   |
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|   | 20 |   |   |   |   |   |   |   |   |
|  |   |   |   |   |   |   |   |  |   |
|  | M-950 R1 (3-19)**Access Approval Procedures - Impacts to Access of Neighboring Owners** |   |   |   | **Phase 2** |   |
|   | Directions: If obtaining approval is unsuccessful, continue following the columns until you reach the end of the approval procedure either by successfully obtaining an |   |   |
|   | approval, or reaching the need to begin the indemnification process. |   |   |   |   |   |   |
|   | **Note: This is a supplement to the Phase 1 worksheet for use when an approval or application cannot be obtained.** |   |   |   |   |   |
|   |  | **All Affected Properties** | **Engineering Study of Alternatives with Recommendations** | **Interference with Access Unreasonable?** | **Offer Compensation and Attempt to Obtain Approval or Application** |   |
|   |  | **Modified Design No Longer Impacts Property** | **Modified Design Mitigates but not completely eliminates impact to property** | **No Mitigation is feasible** | **Yes = Conduct loss assessment or appraisal** | **No = Indemnification Process** | **Yes = End of Procedure** | **No = Unreasonably rejected, Indemnification Process** |   |
|   |  | **End of approval procedure** | **Obtain approval or application, end of procedure if successful** | **Continue with approval procedure** |   |
|   | 1 |   |   |   |   |   |   |   |   |   |
|   | 2 |   |   |   |   |   |   |   |   |   |
|   | 3 |   |   |   |   |   |   |   |   |   |
|   | 4 |   |   |   |   |   |   |   |   |   |
|   | 5 |   |   |   |   |   |   |   |   |   |
|   | 6 |   |   |   |   |   |   |   |   |   |
|   | 7 |   |   |   |   |   |   |   |   |   |
|   | 8 |   |   |   |   |   |   |   |   |   |
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Form M-950R1 (3-19)

[Sample Letter Template]

Property owner name(s)

Street Address

City, State ZIP

Date

HOP Applicant

Street Address

City, State ZIP

**RE: Approval for Impacts to Access of Neighboring Property Owners**

Highway Occupancy Permit (HOP) Application No. 123456

Municipality Name, County Name

SR 1234 Segment 0000 Offset 0000

To whom it may concern:

I have reviewed the proposed improvements along my property frontage associated with your development referenced above. I am aware that an auxiliary lane and/or other features under the Permit will be installed along my property frontage Choose an item.

I am also aware that the proposed improvements located along my property frontage may restrict where a future access may be located and/or may restrict certain turning movements at a future access.

With that, I approve the proposed improvements, including the auxiliary lane, along my property frontage as shown on your plan titled xxxxxxxxxx and dated xx/xx20xx.

Sincerely,

Property owner name