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| **Access Approach Construction Inspection Form****South Dakota Department of Transportation** |
| To: (person who will conduct field inspection) | After completion, return form to person/office: |
| address |
| address |
| Address/zip |
| The assigned field inspector is to complete this form for each newly completed access and return the form as noted in the upper right. This form is to confirm installation of an access. If during construction, the inspector should determine problems, such as poor traffic control, materials, or failure to adhere to the permit, they are to order the problems corrected, work may be shut down if necessary, and/or area office contacted for direction. All construction shall be completed within 45 days unless extension granted in writing by Area Engineer. |
| Permittee name and phone: |
| Access location: | Permit number: |
| Local jurisdiction: | Permit issue date: |
| SDDOT Area: | Permit construction began: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Permit construction ended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Permit extension granted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| This access has been constructed in reasonable conformance with the issued access permit: Inspector signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| This access has NOT been constructed in reasonable conformance with the issued access permit: Inspector signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Items not in conformance or inspector comments: |
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