Eastern Federal Lands Access Program (FLAP) Safety Approval Form

Acknowledgement of Coordination with State DOT or FHWA Federal Aid Division Safety Representative

By signing this support form, the State Safety Representative certifies that the proposed project scope meets the eligibility criteria for 100% HSIP (Highway Safety Improvement Program) funds. *Please Note: All fields are required.*

Name of FLAP Project:		State
Name of FLAP Applicant:		Phone
1.	State Safety Representative supporting	the project:
2.	Agency & Title: (Either State DOT or FHWA	Federal Aid Division Office)
3.	Email:	
4.	Phone:	
5.		
6.	Signature:	
7.	Comments on the proposed project:	Date
8.	-	
a	(If different from above) Email:	Phone:
Ο.	LIIIGII	

Additional information on the Federal Lands Access Program is located at: http://flh.fhwa.dot.gov/programs/flap/
This form can be saved, printed, signed, scanned and submitted electronically with your FLAP application to efl.planning@dot.gov