CITY OF NEW BRAUNFELS TRAFFIC IMPACT ANALYSIS (TIA) WORKSHEET

Complete this worksheet as a requirement for zoning, master plan, plat and permit as specified in City of New Braunfels Code of Ordinances Sections 114-99 and 118-46. *Note: The Code provides the minimum information for a TIA report and it is recommended that a scoping meeting be scheduled with the Engineering Division.*

	1: General Information	on jor a m	report une	i it is recom	mineriaea ti	iat a scopii	ig meeting	be serieuur	ca with th	Liigiiicciiii	ig Division.				
Project Name:							Date:								
Subdivision Plat Name:						Project Address/Location:									
Location? City of New Braunfels New Braunfels ETJ						Comal County Guadalupe County									
Owner Name:						Owner Email:									
Owner Address: Ov							Owner Phone:								
Prepar	er Company:														
Preparer Name:							Preparer Email:								
Preparer Address:							Preparer Phone:								
TIA scoping meeting with City Engineering Yes. Date:						TIA Worksheet/Report approved with				No. Complete Page 1 only.					
Division staff? (<u>required</u> for reports) No.						previous zoning, plan, plat or permit?				Yes. Complete Pages 1 and 2.					
	tion Type or Reason for TIA Worksheet	-													
Zoning/Concept Plan/Detail Plan Master Plan Preliminary Plat							nal Plat		Permit		Othe	er			
	mittal Type (A TIA Worksheet is require		ning, plan,	plat and pe	ermit appli	ications)	_	_							
TIA Worksheet Only – Previous TIA Report Approved Level 2 TIA Report ((101-500 peak hour trips) (501-1,000 peak hour trips)						
L TIA	Worksheet Only – Previous TIA Report	not required	d (supporti	ng docume	ntation ma	ay be requi	red)	Level 3 TI	A Report (1,001 or mo	ore peak ho	our trips)			
Section	2: Proposed Land Use and Trip Informa	tion for Apı	olication												
Unit	Land Use	ITE Code ¹	ITE Unit ²	Est. Project Units	Critical Peak Hour	AM Peak Hour Rate	PM Peak Hour Rate	WKND Peak Hour Rate	Daily Trip Rate	AM Peak Hour Trips	PM Peak Hour Trips	WKND Peak Hour Trips	Daily Trips		
			<u> </u>	1	Total fr	om addition	ı al tabulatio	n sheet (if n	i necessary):						
Total:															
¹ Institute	of Transportation Engineers (ITE) Trip Gene	ration, 10 th Ed	dition or mo	st recent; ² E	.g., Dwelling	g Units, Acre	s, Employee	s, KSF, etc.	iotal.						

TIA Worksheet Revised 10/2019 Page 1

☐ TIA Report required.

☐ TIA Worksheet requires corrections.

Date:

☐ TIA Report not required.

Reviewed by:

☐ TIA Worksheet is acceptable.

Internal Use Only