

Field Review Form

Unsignalized Pedestrian Crossing Locations

Safe Transportation for Every Pedestrian (STEP)

Important: This form is customized for the roadway characteristics of the crossing location. Please make sure that the AZ STEP Guide Output table below matches the lane configuration, Daily Traffic Volume (Vehicle AADT) and posted speed limit of the crossing location being evaluated. If they do not match, please see www.azdot.gov/azstep to print the correct form.

Investigator:

Location:

Date of Report:

Roadway	Data										
Daily Traffi	c Volume	(both di	rections):		Sidewalks	Bike Lanes					
		Spe	eed Limit:		Present (Y/N):	Present (Y/N):					
		Number	of Lanes:		Both sides (Y/N):	Both sides (Y/N):					
		Street [Direction:	E/W	Width:	Width:					
Mile Post or	other De	escription	e.g. 500 ft w	est of X/Y Into		•					
AZ STEP G											
			without Raised	Median							
		Vehic	le AADT 9,000-:	-		For each countermeasure below, document why it IS or IS NOT appropriate for the crossing being evaluated.					
	Conflicts at	Excessive	Speed Limit 35 Inadequate	Drivers not	Insufficient						
	Crossing Locations	Vehicle Speed	Conspicuity/ Visibility	Yielding to Pedestrians	Separation from Traffic	Consider lower co	st countermeasures first.				
X-walk Visibility*	Also	эрсси	Also	Also	TOTAL TRAINE						
Raised X-walk						Not Recommended					
Advance Yield	Always		Always	Always	Always	The recommended					
In-Street Ped Sign						Not Recommended					
Curb Extension	Also	Also	Also		Also	The recommended					
Refuge Island	Also	Also	Also		Also						
RRFB	Always		Always	Always							
Road Diet						Not Recommended					
РНВ	Always	Always	Always	Always							
Also = The counterme	measure should g asure is <u>also</u> a c	always be considerated andidate treatment	dered, but not mai ent at a marked ur	ndated or requirence	ed, based upon e ing location.	ad. ngineering judgment at a marked uncontrolled c walks and/or TGP640 PHB)	rossing location.				

Pedestrian Crash Data

	Injury Severity							Pedestrian Crossing				
							Vehicle Action				Pedestrian Not Crossing	
Year	Fatal	Serious Injury	Minor Injury	Possible Injury	Property Damage Only	Total	Thru	Turning Right	Tuning Left	Other	Walking Along Roadway	Other
Total												

Total													
How many o	of the abo	ove crash	es happe	ned:									
At night?	<u></u>			During commute hours? 7-9am: 4-6pm:									
During rain,	/snow e	vents?		While th	e pedes	trian w	as cro	ossing	the roa	dway? _			
In the heat/summer? While the pedestrian was walking alongside the roadway?													
When the p	edestria	n was wa	alking: N	orth	Sout	th	Ea	ast	We	est	_		
When the d	river wa	s headin	g: North		South	E	East		West				
Possible A	ction Pl	an:											