



TIA SCOPING WORKSHEET & MEETING REQUEST

If a development application triggers the requirement for a Traffic Impact Analysis (TIA) this form must be completed and submitted to request a TIA Scoping Meeting, as per [Section 2.5.12B\(1\)](#) of the Unified Development Code (UDC). Meetings will not be scheduled with incomplete worksheets or without all required additional items. Meeting requests should be submitted as soon as possible. Requests are processed in the order in which they are received, and available time slots fill quickly. **A TIA Scoping Meeting is required for all developments requiring a TIA and must be held prior to the commencement of the TIA.**

GENERAL INFORMATION

Project Name: _____

TCAD ID(s) of Subject _____

Parcels: _____

Project Type Subdivision (*platting*)

Rezoning (including PDD Amendments & SUPs)

Site Plan

Other: _____

Applicant Name: _____

Applicant Phone: _____

Applicant Email: _____

Affiliation Property Owner Developer Prospective Buyer TIA Preparer

Other, please explain: _____

Property Owner Name _____

Property Owner Phone: _____

Property Owner Email: _____

TIA Preparer _____

(if different from applicant)

TIA Preparer Phone: _____

TIA Preparer Email: _____

TIA SCOPING PROCESS

The process for TIA Scoping involves the following steps:

1. **Meeting Request.** Submit a complete signed meeting request form and all required documents via email to Lmaurer@beecavetexas.gov with the subject line "TIA Scoping Meeting Request."
2. **Scheduling of Meeting.** City staff will review the form and documents to ensure all required information has been submitted and respond within five business days with available meeting dates and times.
3. **TIA Scoping Meeting.** is For all developments where a TIA is required, a TIA scoping meeting shall be required. The TIA scoping meeting shall include the engineer performing the TIA, the property owner, or owner's agent, and city staff, and may include TxDOT and county staff, if applicable. The



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purpose of the meeting is to jointly review the requirements and methodology to complete the TIA and to establish specific elements of the TIA.

4. **After Meeting.** The City will update the city sections of this worksheet and return to the Applicant. The applicant shall review and update additional materials as discussed at the Scoping Meeting and resubmit for City approval. Once approved, the Applicant may proceed with preparation of the Traffic Impact Analysis.

REQUIRED ITEMS FOR PRE-APPLICATION MEETING

The following items are required for scheduling a TIA Scoping Meeting. These items should be combined in the order listed to form one (1) PDF document. Please flatten PDF before submittal.

- Completed and signed TIA Scoping Worksheet & Meeting Request
- Site Location Map, indicating the location of the proposed project
- Site Plan with Driveway Locations
- Peak Hour Trip Generation Calculation Table (See [UDC 2.5.11B.1](#))
- Turn Lane Analysis (See [UDC Section 2.5.12F](#))
- List of Study Intersections & Traffic Control
- Preliminary Trip Distribution & Assignment Diagrams
- Growth Rate Background Data
- [Completed Rough Proportionality Spreadsheet](#) (See [UDC Section 2.5.12E](#))

GENERAL INFORMATION

To the best of the applicant’s ability, identify the presumed scope of the TIA. Final determination will be made by the City subsequent to the Scoping Meeting.

TO BE COMPLETED BY APPLICANT		TO BE COMPLETED BY CITY STAFF	
Trip Generation Land Use Codes, Calculation Methods & Results	Comments:	Approved Y/N	Modifications Required/Comments
Full Build-Out Year of Project: _____			
Phased Project? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Phase 1 Year: _____			
Phase 2 Year: _____			
Phase 3 Year: _____			
Annual Growth Rate: _____			
TIA Analysis Periods: <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Other: _____			



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TO BE COMPLETED BY APPLICANT			TO BE COMPLETED BY CITY STAFF	
Other Developments to Include in Build Year(s)				
Name	Year	TIA Y/N	Approved Y/N	Modifications Required/ Comments
1. _____				
2. _____				
3. _____				
4. _____				
Planned Intersection / Roadway Improvements to be Included in Build Year(s)				
Name	Year	Agency	Approved Y/N	Modifications Required/ Comments
1. _____				
2. _____				
3. _____				
4. _____				
Sight Distance Evaluation Required? <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach map of intersections)				
Circulation Study Required? <input type="checkbox"/> Yes <input type="checkbox"/> No				



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APPLICANT GENERAL NOTES/COMMENTS

CITY GENERAL NOTES/COMMENTS

use additional sheets as necessary



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DRAFT TIA SCOPING WORKSHEET SUBMITTAL

Name (Print) Signature Date

FOR BEE CAVE STAFF USE ONLY

MPN Project # TIA Scoping Meeting Date

TIA SCOPING WORKSHEET RESUBMITTAL

Name (Print) Signature Date

FOR BEE CAVE STAFF USE ONLY

MPN Project # TIA Scope Approval Date

TIA Scope Expiration Date
(if the TIA is not completed by this date a new scoping approval will be required)