



City of Albuquerque

Planning Department
Development Review Services Division

Traffic Scoping Form (REV 05/2024)

Project Title: _____

Zone Atlas Page: _____ DFT/DHO #: _____ BP #: _____

Development Street Address: _____

(If no City Address include a Vicinity Map with site highlighted and legible street names)

Applicant: _____ **Contact:** _____

Address: _____

Phone#: _____ E-mail: _____

Development Information

Build out/Implementation Year: _____

Existing Use: _____

Describe Proposed Development and Uses:

Days and Hours of Operation (if known): _____

Facility

Building Size (sq. ft.): _____

Number of Residential Units: _____

Number of Commercial Units: _____

Traffic Considerations

Expected Number of Daily Visitors/Patrons (if known):* _____

Expected Number of Employees (if known):* _____

Expected Number of Delivery Trucks/Buses per Day (if known):* _____

Trip Generations during PM/AM Peak Hour and ITE # (if known):* _____

Driveway(s) Located on: Street Name _____

Adjacent Roadway(s) Posted Speed: Street Name _____ Speed _____

Street Name _____ Speed _____

** If these values are not known, assumptions will be made by City staff. Depending on the assumptions, a full TIS may be required.*

Roadway Information (adjacent to site)

Comprehensive Plan Corridor Designation (e.g. Main Street, Major Transit, N/A): _____ (See Attachments)
<https://cabq.maps.arcgis.com/apps/webappviewer/index.html?id=53bf716981b14d25a31e7a2549c2d61b>

Comprehensive Plan Center Designation (e.g. urban center, Downtown, N/A): _____ (See Attachment)
<https://cabq.maps.arcgis.com/apps/webappviewer/index.html?id=53bf716981b14d25a31e7a2549c2d61b>

Street Functional Classification (e.g. Principal Arterial, Collector) : _____
<https://cabq.maps.arcgis.com/apps/webappviewer/index.html?id=53bf716981b14d25a31e7a2549c2d61b>

Jurisdiction of roadway (NMDOT, City, County): _____

Adjacent Roadway(s):

Name: _____ Traffic Volume: _____ Volume-to-Capacity Ratio (v/c): _____

Name: _____ Traffic Volume: _____ Volume-to-Capacity Ratio (v/c): _____

Traffic Volume and V/C Ratio: <https://www.mrcog-nm.gov/623/Traffic-Flow-Maps-and-Busiest-Intersecti> and <https://mrcog-nm.gov/574/Transportation-Analysis-and-Querying-App>

Adjacent Transit Service(s) : _____ Nearest Transit Stop(s): _____
<https://www.cabq.gov/gis/advanced-map-viewer>

Is site within 660 feet of Premium Transit?: _____
<https://cabq.maps.arcgis.com/apps/webappviewer/index.html?id=53bf716981b14d25a31e7a2549c2d61b>

Current/Proposed Bicycle Infrastructure : _____
Bikeways: <https://mrcog-nm.gov/544/Long-Range-System-maps>

Current/Proposed Sidewalk and buffer Infrastructure: _____
Sidewalk and buffer width : DPM Table 7.2.29

Submit by email to Traffic Engineer Ernest Armijo: earmijo@cabq.gov. Email or call 505-924-3991 for information.

For City Personnel Use:

TIS Determination

Note: Changes made to development proposals / assumptions, from the information provided above, will result in a new TIS determination.

Traffic Impact Study (TIS) Required: Yes [] No [x]

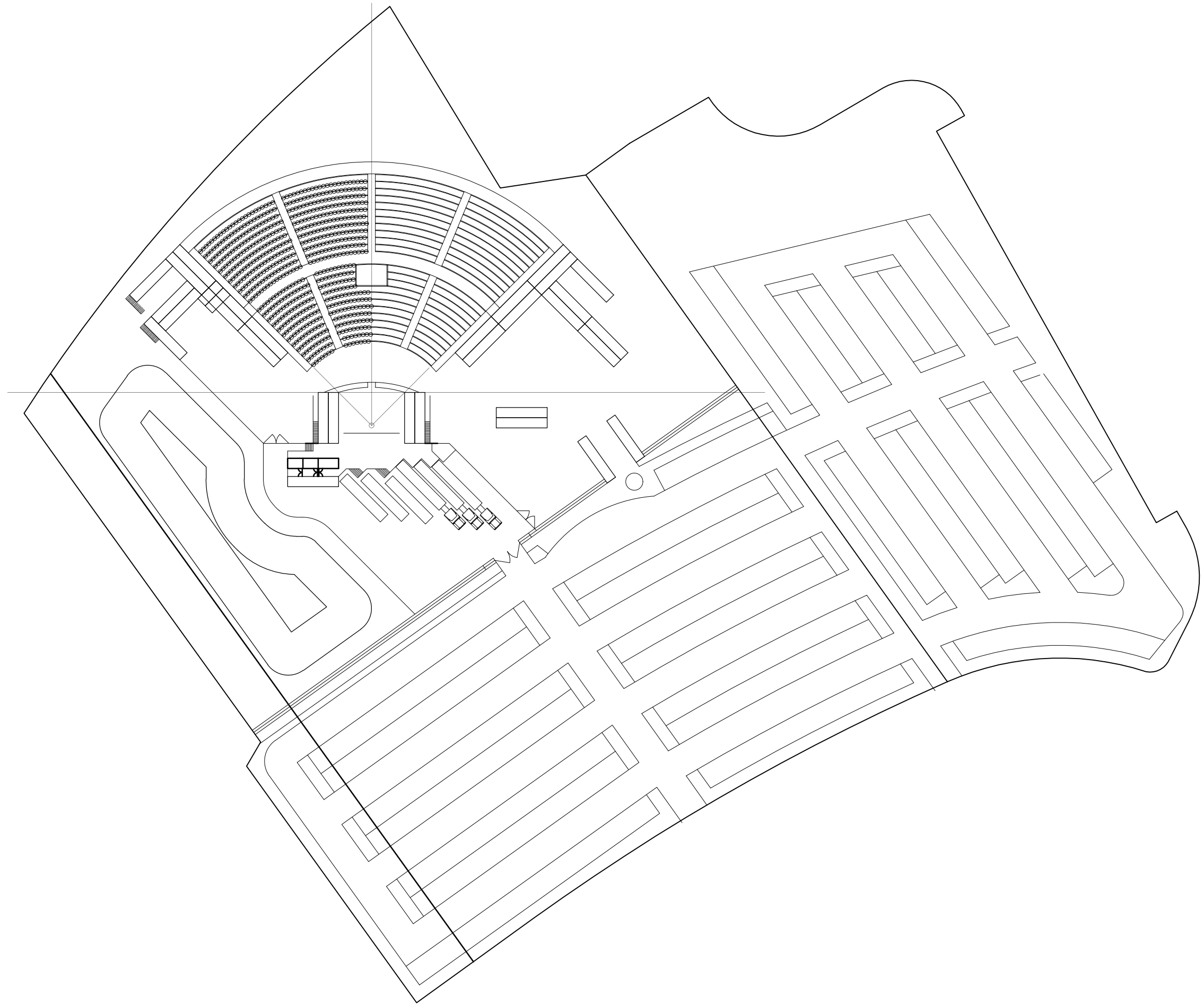
Thresholds Met? Yes [x] No []

Mitigating Reasons for Not Requiring TIS and/or Notes:

The highest concentration of traffic generated will occur after the PM peak hour has ended

Ernest Armijo
TRAFFIC ENGINEER

DATE



**Peak Hour Volume Calculation
Revel Extension, Albuquerque, NM**

Peak Days	Average Attendance	Attendee Per Vehicle*	Number of Visiting Vehicles	Peak Hour Factor	Peak Hour volume
Thursday	350		137		103
Friday	600	2.55	235	0.75	176
Saturday	850		333		250

*Note : Based on review of traffic studies, industry reports, and empirical data specific to concert halls, music venues, and similar entertainment/auditorium