**DEPARTMENT OF TRANSPORTATION AND DEVELOPMENT**

**INTRADEPARTMENTAL CORRESPONDENCE**

**REFERRED TO**

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REFERRED FOR ACTION

ANSWER FOR MY SIGNATURE

FOR FILE

FOR YOUR INFORMATION

FOR SIGNATURE

RETURN TO ME

PLEASE SEE ME

PLEASE TELEPHONE ME

FOR APPROVAL

PLEASE ADVISE ME

\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BY \_\_\_\_\_\_\_\_ DATE ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_

BY \_\_\_\_\_\_\_\_ DATE ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_

BY \_\_\_\_\_\_\_\_ DATE ­­­\_\_\_\_\_\_\_\_\_\_\_\_\_



**State Project:** [Enter Text]

**Fed #:** [Enter Text]

[Project Name]

**Route:** [Enter Text]

[Enter Text] **Parish**

**MEMORANDUM**

**TO: Donna Stinson**

**Chief Appraiser**

**FROM:** [Enter Text]

Choose an item.

**DATE: Select date.**

**SUBJECT: Initial Appraisal Request**

This is to request appraisals on the captioned project. In accordance with the guidelines of the Real Estate Section, the following are provided:

1. Date Notification Letters sent: Select date.
2. Funding: Available or Requested?
3. Right of Way Maps:
   * Date of Final: Select date.
   * Date of Latest Revision: Select date.
   * Link or Attached?
   * Choose plan version Construction Plans Link or Attached?
4. Title Research Reports:
   * Date of Last Update: Select date.
   * Link or Attached?
5. Sign Inventory: Attached or N/A
6. Improvement Inventory: Attached or N/A
7. Project Ownership Summary: Choose an item.

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RECOMMENDED FOR APPROVAL DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

RECOMMENDED FOR APPROVAL DATE

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RECOMMENDED FOR APPROVAL DATE

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APPROVED DATE

cc: Charles McBride, Right of Way Administrator

Heather Corsentino, Assistant Right of Way Administrator, Production

Cynthia Douglas, ADA/Title VI Compliance Program

Select Manager, Right of Way Region Manager

Radha Kumar, Right of Way Contracts