**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

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

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