

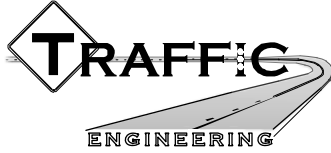
1100 Attachments

1110 Cost of Highway Crashes

1120 NE Statute Information Summary for Speed Zoning

1130 Forms for Copying & Use by Districts/Divisions

Annual Visual Night Time Inspection:	NDOT Form 192
Speed Zone Authorization:	NDOT Form 44
Log of Work Area Speed Zones:	NDOT Form 471



Procedure.1110.0

COST OF HIGHWAY CRASHES

The Department has adopted the FHWA values for crash costs. The FHWA crash cost base values are presented in Publication No. FHWA-SA-17-071, "Crash Costs for Highway Safety Analysis", January 2018. The cost values are adjusted periodically for inflation. The most recent adjusted values are attached to this memo. The Highway Safety Section Manager is responsible for keeping up the adjusted FHWA cost values.

For consistency, these values should be used with any analytical tool, including the Roadside Analysis software (RSAP), Highway Safety Manual (HSM), or other crash data analysis tools

SOCIETAL COSTS OF NEBRASKA TRAFFIC CRASHES (2021)

Costs Recommended by FHWA

Fatal Crash	\$15,302,310
A-Injury Crash	\$887,360
B-Injury Crash	\$268,920
C-Injury Crash	\$170,150
PDO Crash	\$16,130

MULTI-VEHICLE CRASHES	URBAN	RURAL
Right Angle Collision	\$136,010	\$636,610
Rearend Collision	107,830	225,660
Sideswipe (Same Direction)	73,750	190,670
Sideswipe (Opposite Direction)	167,520	1,054,370
Head-on Collision	506,960	3,739,460
Left-turn Collision	184,650	377,610
Other Collision	37,880	54,190

SINGLE VEHICLE CRASHES	URBAN	RURAL
Collision with Train	\$594,640	\$1,993,320
Collision with Pedestrian	780,760	2,761,480
Collision with Bicycle	347,040	1,822,920
Collision with Animal	33,590	48,060
Collision with Parked Vehicle	46,010	94,690
Collision with Fixed Object	216,500	367,590
Overturn	471,240	765,120
Other Single Vehicle Accident	256,250	158,430

Sources: Recommended costs come from FHWA Report, FHWA-SA-17-071, Crash Costs for Highway Safety Analysis, January 2018.

Nebraska Department of Transportation
**Highway Signing
Visual Nighttime Inspection Form**

Highway: _____ R.P.: _____ to R.P.: _____

Date: _____ Start Time: _____ End Time: _____

Inspection Driver: _____ Inspection Recorder: _____

Signs Which Need Replaced:

Highway	Location/R.P.	Sign ID	Replacement Date

All signs in the above referenced highway segment PASSED Visual Nighttime Inspection.

Sign replacement should be completed in a timely manner!

Maintenance Supervisor: _____

Maintenance Superintendent: _____

Date Completed: _____

cc: District Office

Speed Zone Authorization

Pursuant to the authority contained in Section 60-6, 188 Reissue Revised Statutes of Nebraska, and in accordance with NDOT Operating Instruction 60-18 signed on July 19, 2018, by the Director, the maximum speed limit of 35 miles per hour in a rural area, or 25 miles per hour in an urban area through highway maintenance, repair, or construction zones on the portion of the state highway system, has been increased as set forth below.

Highway No.: _____ Location: _____
 Ref. Post: _____ to Ref. Post: _____
 Project No. (if applicable): _____

The **prima facie** speed limit shall be increased from ___ miles per hour to ___ miles per hour. This increase maintains the same posted speed limit as the speed limit prior to work for the entire length of the work zone, and will be in effect 24 hours a day, except as changed below.

Starting Date: _____ Ending Date: _____

The following **prima facie** speed limit for sections of the work zone shall be increased from ___ miles per hour to the speed shown below, and shall be in effect only when standard signs giving notice thereof are installed as provided by law, for the lengths and time periods as set forth below.

Work Zone Section One: ___ Miles Per Hour Activity: _____

Transition Speed Zone Required Yes No If yes, Transition Speed Zone = ___ Miles Per Hour.

Stationary: Sta. or Ref. Post: _____ To: _____
 (Longer than 3 days)

Starting Date: _____ Ending Date: _____

24 Hours: Yes No or Daily, Start Time: _____ Ending Time: _____

Non-Stationary: Actual Starting and Ending Locations, Dates and Times will be documented in a daily log.
 (Less than 3 days)

Work Zone Section Two: ___ Miles Per Hour Activity: _____

Transition Speed Zone Required Yes No If yes, Transition Speed Zone = ___ Miles Per Hour.

Stationary: Sta. or Ref. Post: _____ To: _____
 (Longer than 3 days)

Starting Date: _____ Ending Date: _____

24 Hours: Yes No or Daily, Start Time: _____ Ending Time: _____

Non-Stationary: Actual Starting and Ending Locations, Dates and Times will be documented in a daily log.
 (Less than 3 days)

Project Manager

Signature of Authorizing Authority

Title

Date

cc: District Office
 Nebraska State Patrol
 County Sheriff

Log of Work Area Speed Zones

Project No.: _____
 Contract I.D. No.: _____
 Control No.: _____

Date	Hwy. No.	Speed Limit	Reference Post		Location	Start	Time		Divided Highways Direction of Travel
			From	To			End		

Note: If special remarks or comments are necessary for a particular speed zone, use an extra line.
 The direction of travel is needed only if work is being performed on one side of a divided highway.

 (Signature)

 (Title)