

COUNTY OF NEVADA
DEPARTMENT OF TRANSPORTATION
AND SANITATION

950 Maidu Avenue, Nevada City, California 95959-8600
(530) 265-1411

August 16, 2005

File: 240.14 005

The Honorable Board of Supervisors
Eric Rood Administrative Center
950 Maidu Avenue
Nevada City, CA 95959-8600

DATE OF MEETING: September 13, 2005

SUBJECT: Approval of Roadside Memorial Signs Program

RECOMMENDATION: Approve the attached Resolution.

FUNDING: Road Funds will fund this program.

BACKGROUND:

It has been recognized in recent years that in the aftermath of a roadway fatality various kinds of homemade "memorials" to remember loved ones often appeared at the site along County roadways. It has come to the attention of this Department that these roadside memorials may have the potential to create distractions to passing motorists. This problem exists through out the State and has caught the attention of various agencies. In recognition of the family and friends who desire to place roadside memorials, CalTrans and several other counties, including Placer County, have adopted various policies to legally allow roadside "memorial signs". Such signs, designed to meet the standard criteria for roadway signs, can honor love ones without creating potential hazards to the roadway.

This Department is proposing that the Board of Supervisors approves and adopts a Program for requesting and installing roadside memorial signs along Nevada County maintained roadways. The (12" x 18") signs would memorialize the individual(s) and may advise motorists not to "Drink and Drive". The estimated cost of each sign installation is \$200. The signs would remain in place for a maximum of five years.

Respectfully submitted,

MICHAEL P. HILL-WELD, DIRECTOR

SMZ:jm

APPROVAL OF ROADSIDE MEMORIAL SIGNS PROGRAM

WHEREAS, in the aftermath of a roadside tragedy homemade roadside “memorials” often appear at the site to remember loved ones involved in an accident; and

WHEREAS, it has come to the attention of the County that such memorials in themselves may have the potential to create distractions to passing motorists; and

WHEREAS, no fee will be charged for this program.

NOW, THEREFORE, BE IT HEREBY RESOLVED that the Nevada County Board of Supervisors:

1. Approves and adopts a program as shown in Exhibit “A” for application and installation of roadside memorial signs along Nevada County maintained roadways.
2. Authorizes the Department of Transportation and Sanitation to monitor the program.

EXHIBIT “A”

ROADSIDE MEMORIAL SIGNS PROGRAM REQUEST FOR APPLICATION AND INSTALLATION

The Nevada County Board of Supervisors recognizes the public’s desire to honor and remember loved ones lost in traffic accidents on Nevada County roadways and adopts the following process to request installation of roadside memorial signs:

1. Following a fatality on a County maintained road, a family member may submit a Request for Installation of Roadside Memorial Sign application to the Department of Transportation and Sanitation (DOTS). (Application attached)
2. Department staff will verify the accident and location with the California Highway Patrol.
3. Upon approval by the Director of the Department of Transportation and Sanitation, the Road Maintenance Division will install the monument option indicated on the application. All signs are reflective blue with white lettering.
4. The Department will determine the exact location of installation. Location will be as close to the actual accident site as possible based on sign installation safety requirements.
5. County will maintain the monument area and shall remove any inappropriate appurtenances.
6. The sign will be removed within five (5) years from the date of accident.
7. No fee will be charged for this program.

APPLICATION FOR ROADSIDE MEMORIAL SIGN INSTALLATION

DEPARTMENT OF TRANSPORTATION AND SANITATION
950 Maidu Avenue, Nevada City, California 95959-8600
Tel: (530) 265-1411 Fax: (530) 265-9849

Applicant must complete all portions of this application.

PERSON REQUESTING MEMORIAL:
NAME: _____
RELATIONSHIP: _____
ADDRESS: _____

PHONE: (Day) _____ Email (optional): _____
(Evening) _____

MEMORIAL INFORMATION:
Check one: **OPTION A** () **OPTION B** ()
DATE (Option A only): _____
NAME TO APPEAR ON MEMORIAL: _____
ACCIDENT LOCATION: _____
ACCIDENT DATE: _____

<p>OPTION A 12" X 18"</p> <div style="border: 1px solid black; padding: 10px; text-align: center;"><p>IN MEMORY OF JOHN P. DOE</p><p>00/00/00</p></div>	<p>OPTION B 12" X 18"</p> <div style="border: 1px solid black; padding: 10px; text-align: center;"><p>PLEASE DON'T DRINK AND DRIVE</p></div> <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 5px;"><p>IN MEMORY OF INDIVIDUAL'S</p></div>
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Notes:

1. Accident will be verified with the California Highway Patrol.
2. Exact location of installation shall be determined by the Department of Transportation and Sanitation based on installation requirements for shoulder width and sight distance.
3. County shall remove any inappropriate appurtenances around the installation site.
4. Sign shall be removed within five years.

For Official Use Only:
Authorized by: _____ Installation Date: _____
Proposed Removal Date: _____