

Please use this form to submit a new Crash Reduction Factor (CRF) that is not in the current ODOT CRF List or to modify an existing CRF from the current list.

Today's Date:

First Name:

Last Name:

Agency/Affiliation:

Title:

Phone Number:

Email Address:

Proposed Countermeasure:

Countermeasure Type:

Target Crash Type:

If Other, specify:

Target Crash Severity:

If Other, specify:

Proposed CRF Value:

Has the proposed CRF value been developed based on a study?
(If yes, please provide a copy of the study. If not, provide justification below.)

Justification (attach additional sheet, if necessary)