Survey Coordinator: Andrew Lewandowski

Email This Form

Survey Type Requested:

Select all that apply

- ☐ Initial Topographic Survey
- ☐ Add on Topographic Survey
- ☐ Geodetic Control
- ☐ Construction/ Utility Stake Out/ RW Stake Out
- ☐ Drone requests

Project Information:

Contract #:_____ Contract Name:_____
Primavera ID: _____ County: County
DelDOT Project Manager:_____ Division: _____ Phone #: _____

Site visit with Survey Crew Leader Requested prior to work: Yes/ No
*If site visit is requested, Survey Section will reach out to designer to schedule a date.
Has a deed request been submitted: Yes/ No Date Required:_____

Required Information for Topographic and Geodetic Control Survey:

A. An orthographic map highlighting the project limits shall accompany all requests. This map can be in Microstation.
B. Scale of the map shall be of a size to clearly identify physical evidence (roadway edges, buildings etc.)
C. Bridge requests shall start from the center line of the specified bridge.
D. Roadway requests shall start from a known intersection or location point on the orthographic map.

Beginning or Primary Roadway Intersection: _____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
Tangent Roadway Name:_____
Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
Ending Roadway Intersection (If Applicable):
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____

Required Information for Stakeout Survey:

Attach two sets of highlighted plan sheets for required work to be performed. Plans should include traverse information to be utilized and coordinates list. Please provide a copy of the trespass letter for the project (responsibility of Project Manager).

Miscellaneous Comments:

FOR BRIDGE REQUESTS ONLY

Top of Existing Crossroad Pipes: Yes/ No Current Water Elevation/ Tidal Line: Yes/No
Bridge Number:_____ Beam Seats Required: Yes/ No Existing Bridge Type_____
Water Baseline Name:_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____
_____Length (ft)_____Interval (ft)_____Width LT (ft)_____Width RT (ft)_____

FOR DRONE FLIGHTS: Stock Pile Quantities ☐ Site Quantities ☐ Overall project video ☐ Overall project pictures ☐

HAZMAT: Is there known hazmat within survey limits Yes / No