#

# Choose an item. Funding Approval Request

**TO:** Program Development & Scheduling Division, TDOT.PDSO@tn.gov

**FROM:**

**DATE:** Click here to enter a date.

**SUBJECT:** COUNTY:

 PIN:

 PROJECT NO.

 PROJECT DESCRIPTION:

 In accordance with the Project Delivery Network (PDN) and Roadway Design Guidelines, I am requesting funding approval for Choose an item.. For your use, I have attached one (1) half-size title sheet of this project. *As applicable (for a PE-D funding request only)*, the NEPA document was approved on Click here to enter a date..

 At your earliest convenience following funding approval, please sign and date below and return a copy of this form to my office.

Funding approved:

**BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DATE:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Attachment