

**KANSAS SCENIC BYWAYS PROGRAM
BACKROADS ROUTE REVIEW REQUEST APPLICATION FORM**

Please complete both sides of form and submit one copy to: Lisa Hecker, Byways & Signage Manager, Kansas Tourism, Kansas Department of Commerce, 1000 SW Jackson, Suite 100, Topeka, KS 66612. For more information, contact Lisa at 785-296-4654; lisa.hecker@ks.gov.

Road Description _____ Length (mi.) _____

Route Begins at _____ Route Ends at _____

Surface Type _____

Location - County(s) _____

Local Government(s) Contacted _____

Government Representatives Contacted (Name & Title) _____

Request Submitted by (Person or Group)

Contact Person _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____

Email _____

ATTRACTIVE VISUAL FEATURES ALONG ROADWAY:

ROAD ALIGNMENT: (Mark with X)

- Road does not curve at all _____
- Road curves some of the time _____
- Road curves most of the time _____
- Road is flat the entire length _____
- Road rises and falls some of the time _____
- Road rises and falls most of the time _____

DISTRACTIVE VISUAL FEATURES ALONG ROADWAY:

OTHER NOTEWORTHY QUALITIES, HISTORIC RESOURCES, ETC.:
