## KANSAS BYWAYS PROGRAM SCENIC 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.

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Request Submitted by (Person or Group)

Contact Person $\qquad$
Address $\qquad$
City __ State ___ Zip ___
Phone ( )
Email $\qquad$

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
$\qquad$

Road is flat the entire length
Road rises and falls some of the time
Road rises and falls most of the time $\qquad$

DISTRACTIVE VISUAL FEATURES ALONG ROADWAY:

OTHER NOTEWORTHY QUALITIES, HISTORIC RESOURCES, ETC.:

