



Guidelines for “Person with Disability Area” Signs

Background

Effective July 1, 2018 section § 46.2-830.2 was added to the Code of Virginia to require VDOT, upon request of persons with certain disabilities, to post signs to warn motorists of a person with a disability in or around the roadway. The Section also required that VDOT establish pertinent regulations regarding the Signs.

§ 46.2-830.2. Pedestrians with disabilities; traffic signs.

A. Upon request of any person who is deaf, blind, or deaf-blind, any person with autism or an intellectual or developmental disability as defined in § 37.2-100, or the agent of any such person, the Department of Transportation shall post and maintain signs informing drivers that a person with a disability may be present in or around the roadway.

B. The Department of Transportation shall establish regulations consistent with this section. Such regulations shall provide that any sign posted and maintained pursuant to this section shall be comparable in size and design to other signs typically used for traffic control.

In conformance with the requirements of § 46.2-830.2, VDOT developed the required regulation which sets specific requirements pertaining to requests and the related signs and is set forth in 24VAC30-630-10 (see <https://law.lis.virginia.gov/admincode/title24/agency30/chapter630/>). The regulation became effective on October 31, 2018 and requests for signs can be implemented effective on that date.

These guidelines convey the full requirements of the regulation and additional details for responding to and handling requests and selecting and installing the appropriate signs.

Requests for signs

A request for a sign is by the person with a disability or their agent who submits the completed “REQUEST FOR PERSON WITH DISABILITY AREA SIGN” (per Attachment 2 below) to their local Virginia Department of Transportation (VDOT) residency office (see http://www.virginiadot.org/about_vdot/residencies.asp for contact information). In the Northern Virginia area (Arlington, Fairfax, Loudoun and Prince William counties) requests are to the VDOT District Traffic Engineer’s office (see <http://www.virginiadot.org/about/districts.asp> for Northern Virginia District contact information).

The request must adhere to the following:

- i. Be on a primary or secondary highway maintained by VDOT that is not limited access. Note: VDOT does not maintain roads within cities or incorporated towns or, secondary roads (roads numbered 600 or higher) in Henrico and Arlington County.*
- ii. Include the address and location of the requested sign such as on a map or sketch.*

- iii. Provide medical certification from a licensed Physician, Physician Assistant or Nurse Practitioner that the person for whom the sign is requested is deaf, blind, deaf-blind, autistic or has an intellectual or developmental disability as defined in § 37.2-100.

VDOT may need to follow up with the requestor for additional information so that sign is installed at the proper location to fully address the needs of the person with a disability.

Consideration of Requests by VDOT

“Person with Disability Area” signs will be considered and installed, in the same manner as other warning signs; based on the MUTCD, standard engineering practice and the judgement of the VDOT District Traffic Engineer (DTE).

Signs must be on a state primary or secondary highway that is not limited access. It is anticipated that the typical request for signs will be in a residential area, at or near the residence of the person with a disability.

Although the DTE may find it necessary to reject requests for a variety of reasons, signs will not be installed in the following cases:

- Where pedestrian activity is highly discouraged due to safety concerns.
- At signalized locations such as crosswalks, at intersections or at pedestrian hybrid beacons. (VDOT does not install pedestrian-related signs at signalized locations since drivers are already watching for pedestrians and other potential conflicts.) *Note: Requests concerning a person with a visual disability and the absence of Accessible Pedestrian Signals at a particular traffic signal will be addressed separately.*
- At a crossing with an existing Rectangular Rapid Flashing Beacon (Drivers approaching these devices are already conditioned to watch for pedestrians whenever the devices are flashing). *Note: Requests concerning a person with a visual disability and the absence of Audible Information Devices will addressed separately.*

Design and type of Sign

The sign to warn motorists of persons with a disability shall be fluorescent yellow-green with the words “PERSON WITH DISABILITY AREA”. A single sign will be posted in each travel direction to sufficiently warn approaching motorists and cover the area of concern.

EXCEPTION: In the following instances, the indicated sign is used in lieu of the “PERSON WITH DISABILITY AREA” sign (also fluorescent yellow-green):



- In school areas, where a S1-1 sign is normally used to warn motorists of schoolchildren a supplementary plaque indicating “DISABILITY” may be attached to the S1-1 sign to warn motorist’s of schoolchildren with a disability.
- For pedestrian areas other than at a school where a W11-2 sign is normally used to warn motorists of pedestrians, a supplementary plaque indicating “DISABILITY” may be attached to the W11-2 sign to warn motorist’s of persons with a disability.
- For pedestrian areas other than a school where the W11-9 sign is normally used to warn motorists of pedestrians confined to a wheelchair and where the request is for a person with a disability confined to a wheelchair, the W11-9 (international symbol of accessibility) sign will be used, with the supplementary “Disability” plaque omitted.



Note: Specifications for the “PERSON WITH DISABILITY AREA” sign and the supplementary “DISABILITY” plaque are in ATTACHMENT 1 (see below).

Location of Signs

Per the MUTCD or based on the judgement of the DTE, signs will not be installed where they may conflict with or are redundant to other regulatory or warning signs such as but not limited to the following:

- Closer than 200 feet to any existing regulatory or warning signs.
- In combination (e.g. on the same pole) with any other regulatory or warning signs.

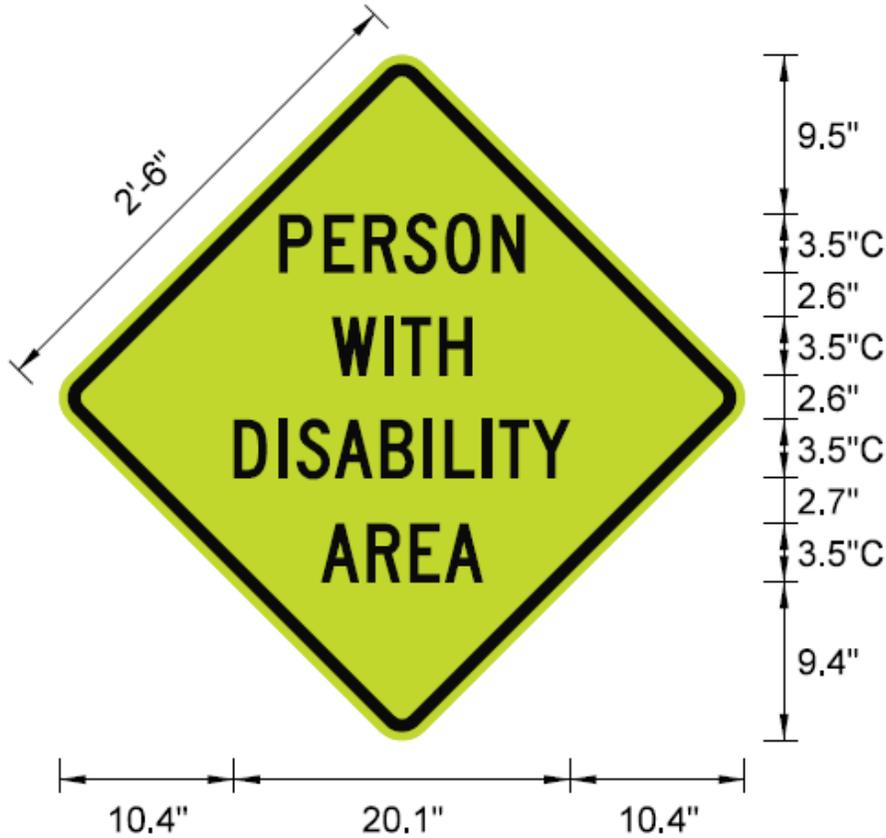
Installation & Maintenance of Signs

The installation and maintenance of signs is in accordance with the MUTCD and other VDOT procedures and requirements just as any other traffic control device including other warning signs. Where a maintenance, operational or safety issue arises, VDOT may modify, relocate or remove the sign at its discretion just as it does with any other traffic control device.

Notification by Requestor of change in circumstances

The requestor shall notify VDOT at any future time of a change in circumstances such that the originally requested sign is no longer necessary (e.g. such as when the person with a disability relocates). Additionally, at any point in time that VDOT confirms that the signs are no longer necessary VDOT may remove the signs at its discretion.

ATTACHMENT 1





ATTACHMENT 2 –PART 1

REQUEST FOR PERSON WITH DISABILITY AREA SIGN

Purpose: Persons with a disability or their agent use this form to request "Person with Disability" Signs.

Instructions: Submit the completed form (including the medical certification) to the local VDOT office for the location of the requested sign. See http://www.virginiadot.org/about_vdot/residencies.asp for your local VDOT office and their contact information.

REQUESTORS INFORMATION (PERSON WITH DISABILITY)

Name: Last First M.I.

Address: Street Address Apartment/Unit #

VA City State ZIP Code

Phone: Email (optional):

Does the request pertain to a person who generally uses a wheelchair? Yes No

(This pertains to the type of signs used).

LOCATION OF SIGN REQUEST

If the requested sign is at a different address than indicated above for the person with a disability, enter that street address and the nearest cross street below (otherwise leave blank).

Street Address Nearest Cross Street

VA City State ZIP Code

Provide any additional information below (or attach) regarding the nature of the request and the location of the requested sign such as a map or sketch of the area of the street where the person with disability may be on or near or crossing, the road.



ATTACHMENT 2 –PART 2

MEDICAL CERTIFICATION

Medical Professional's Name: Last First M.I. Date:

Office Address: Street Address Suite/Unit #

City State VA ZIP Code

Office Phone:

I certify and affirm that I am one of the following (check all that apply)

- Physician Physician Assistant Nurse Practitioner

I further affirm that the person indicated below is my patient and is one or more of the following: deaf, blind, deaf-blind, autistic or has an intellectual or developmental disability as defined in § 37.2-100 of the Code of Virginia.

Per § 37.2-100 "Developmental disability" means a severe, chronic disability of an individual that (i) is attributable to a mental or physical impairment, or a combination of mental and physical impairments, other than a sole diagnosis of mental illness; (ii) is manifested before the individual reaches 22 years of age; (iii) is likely to continue indefinitely; (iv) results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, or economic self-sufficiency; and (v) reflects the individual's need for a combination and sequence of special interdisciplinary or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

Patient's Last Name Patient's First Name Patient's M.I.

Medical Professional's Signature: Date:

CERTIFICATION OF REQUESTOR, GUARDIAN OR AGENT

I certify that the information above is true and complete to the best of my knowledge and that I will notify VDOT of any future change in circumstances such that the request is no longer valid or the signs are no longer necessary.

Name: Last First M.I. Date:

Signature:



August 20, 2018

Virginia Department of Transportation

Privacy of Requestor's Information

Although the privacy rules and standards established under HIPAA (Health Insurance Portability and Accountability Act) are intended for health plans, health care providers etc. it is VDOT's intent to maintain the privacy of health-related information for a request. Therefore, other than what is necessary in order to respond to or act upon a request, VDOT shall not disclose or otherwise discuss a record on file or other knowledge or information pertaining to the person with disability including their name, address, medical condition or their medical provider.