County: «County»

Phase Number: «Phase Number»

Location: «Document Title»

NEPA ID: «NEPA ID»

NEPA Classification: «NEPA Classification»

NEPA Clearance: «NEPA clearance date»

Previous Reevaluation: «Previous Reevaluation»

The purpose of a re-evaluation is to determine whether an environmental document or decision remains valid, or a supplemental or new analysis [e.g., supplemental environmental impact statement (EIS) or environmental assessment (EA)] is needed.

|  |  |  |
| --- | --- | --- |
| Reason for Reevaluation | Yes | No |
| Decision document is over three-years old |[ ] [ ]
| Change in scope |[ ] [ ]
| Change in design |[ ] [ ]
| Change in affected environment |[ ] [ ]
| Change in applicable requirements |[ ] [ ]
| Describe the change(s), attach the plans, and other supporting information. |
|       |
| Document the changes in environmental impacts or mitigation (as applicable) and describe how the impact will be different from what was previously described in the original decision document. |
| ROW: |
|       |
| Home or businesses: |
|       |
| Cultural resources: |
|       |
| Section 4(f) - Parks, trails, refuges, etc.  |
|       |
| Wetlands or stream: |
|       |
| Regulated material sites: |
|       |
| Threatened or endangered species: |
|       |
| Floodplain or floodway: |
|       |
| Noise: |
|       |
| Farmland: |
|       |
| Construction/Detour Impacts: |
|       |
| Other: |
|       |

|  |  |  |
| --- | --- | --- |
|  |  Yes | No |
| Does this change warrant public involvement? If yes, describe the public involvement and provide results. |[ ] [ ]
|       |
|  |  Yes | No |
| Does this change warrant consultation with Federal resource agencies or coordination with State agencies? If yes, provide the results of consultation/coordination and attach documentation. |  [ ]  |[ ]
|       |
| Based on this review it has been determined: |  Yes | No |
| The original environmental decision remains valid after considering the changes. |[ ] [ ]
| The changes make the existing environmental document or decision no longer valid. |[ ] [ ]

|  |  |  |
| --- | --- | --- |
|  | Name | Date |
| Prepared by |       |       |
| Iowa DOT Reviewer |       |       |

**Attachments:**