

08023788

LaDOTD Permit # _____	Permit Expiration Date: <u>3-27-25</u>
Permit Entered By: _____	Date Permit Entered: _____

State of Louisiana
 Department of Transportation & Development
ACCESS CONNECTION PERMIT CERTIFICATE

Property Owner's Name: Central LA State Hospital

Physical (g11) Address of Property: 6250 Esler Field Rd

City: Pineville State: LA Zip: 71360

State Highway Adjacent to Property (Hwy. #): LA 116 Parish: Rapides

Property located on the (circle one) N S E W side of the highway 1.1 miles (circle one) N S E W

From (nearest LA/US route # or other major roadway) US 165

Control Section: 153-01 Log Mile: _____ Latitude: 31.370964 Longitude: 92.392571

Proposed Use of Property:

- Single-Family Residential
- Non-Commercial Agricultural
- Commercial – Total Facility Sq. Ft. _____
 Select One: Retail Educational Mixed-Use Public Medical Agricultural Utility Religious Bank
- Multi-Residence Single Family - Number of Homes Proposed _____
- Temporary (less than 1 year) – Explain Use _____
- Other – Explain _____

Property Frontage along Highway (ft.): 400' Depth of Property (ft.): _____

Apparent Right-of-Way (ft.): _____ Current Highway Surface Material: Asphalt

Approved Driveway Material: Concrete Culvert Size: Dia. (in.) Length (ft.) 24" x 64'

Setback from Right-of-Way to nearest building/gas pump/etc. (ft.) _____ Culvert Material RCP

Driveway Width 26' ft. Radius of Driveway 30' ft. (see attached standard)

Hydraulic Review: Not Required Required, Approved on _____ by _____

Traffic Impact Study: Not Required Required, Approved on _____ by _____

(Attach a copy of the Letter of Compliance)

Traffic Signal Study: Not Required Required, Approved on _____ by _____

Signal Permit Issued: No Yes, Signal Permit Number: _____

La DOTD Access Connection Detail to Be Used for Construction: _____ Notes: _____

Other permits related to this property: _____

Driveway Sharing: Not Required Required –Attached signed agreement.

Details: _____

Mitigation Required: No Yes –Details: _____

Construction of Access Connection shall be subject to the following additional restrictions:

Temporary Permit? No Yes. Terms:

Additional Provisions:

- 1. All documentation associated with this permit shall remain attached to this Permit Certificate and shall at all times be available for review, when requested, by a representative of the Louisiana Department of Transportation and Development.
- 2. All signed and stamped plans associated with this permit which are affixed with the LaDOTD Permit # shall remain with this permit and shall at all times be kept on the job site. If requested by a representative of the Louisiana Department of Transportation and Development, the entire plan package shall be produced at the job sit for review.
- 3. The DOTD District Office will handle all necessary public notices regarding temporary traffic control related to work authorized by this permit. The Permittee shall notify the District office a minimum of five (5) working days before construction if the traffic control plan was previously approved or contained in the approved plans or a minimum of ten (10) working days before construction if the traffic control plan must be submitted for lane closures not addressed in the plans.

All conditions of this permit are subject to the provisions of LAC 70:11, Chapter 5, §531 and LAC 70:1, Chapter 15, §1501.

I, the applicant, agree to hold harmless the DOTD and its duly appointed agents and employees against any action for personal injury or property damage sustained by reason of the exercise of this permit, whether or not the same may have been caused by the negligence of the DOTD, its agents, or its employees. I understand that this permit may be modified or rescinded at anytime at the discretion of the DOTD and any costs incurred as a result will be at my expense. I certify that the information contained herein is true, complete, and correct to the best of my knowledge. I understand that if any information contained herein is found to be falsified, this request and any permit issued based on this information shall be voided.

The provisions of this permit are hereby accepted and agreed to this 27th day of March 20 24.
SIGNED Celeste Gauthier

Owner's Name (printed): Celeste Gauthier
Mailing Address: 242 W. Shamrock St.
City: Pineville State: LA Zip: 71360
Home/Work Phone: 318-484-6202 Cell Phone: 318-359-3747

If exercising Power of Attorney:

Name of Authorized Representative: _____

(Attach a copy of Power of Attorney documentation)

APPROVED BY:

LOUISIANA DEPARTMENT OF TRANSPORTATION & DEVELOPMENT

DISTRICT PERMIT SPECIALIST -

Print Name _____ Date _____

Christopher Soileau

DISTRICT ADMINISTRATOR (OR DESIGNEE) -

Print Name christopher Soileau Date 3-27-24



LOUISIANA DEPARTMENT OF TRANSPORTATION & DEVELOPMENT
PRELIMINARY ACCESS CONNECTION REQUEST FORM
TRAFFIC GENERATOR TYPE ACCESS ON A STATE ROUTE

An access connection is any physical connection between a state roadway and private or public property which allows the ingress and egress of vehicles to or from said property.

THIS FORM IS NOT TO BE USED FOR SINGLE-FAMILY RESIDENTIAL OR NON-COMMERCIAL AGRICULTURE ACCESS CONNECTION REQUESTS.

PROPERTY OWNER INFORMATION

Name Central LA. State Hospital
Company (If Applicable to Permit) _____
Mailing Address 6250 Estler Field Rd
City Pineville State LA Zip Code 71360
Home/Bus Phone 318-484-6201 Cell Phone _____
E-Mail Celeste.Gauthier@la.gov

Check here if Owner is to be the Primary Contact.

DESIGNATED CONTACT INFORMATION (If Primary Contact is not the Owner)

Name Yosha Goudeau
Company (If Applicable to Permit) Central LA. State Hospital
Phone (318) 664-1533 Fax _____
Email Yosha.goudeau@LA.gov
Relationship to Property Owner: Engineer Attorney Other _____

Submit Power of Attorney documentation stating this person has the authority to enter into a legally-binding agreement on behalf of the Owner.

PROPERTY INFORMATION

Property 911 Address 6250 Estler Field Rd
City Pineville State LA Zip Code 71360
Parish Rapides Current Hwy Surface Asphalt
State Highway Adjacent to Property (LA/US Route #): 116

Property is located on the (circle applicable) N E W side of the highway
1.1 miles (circle applicable) N E W from (nearest state highway
or other major roadway) W 765

Lot Depth (ft): _____ Frontage Width (ft): 400'
Proposed driveway width (ft): 26'

Distance from Centerline of Roadway to Property Line (ft): _____

Proposed Building Dimensions _____

Setback from Right-of-Way to nearest building/gas pump/etc. (ft): _____

Distance from Property Lines to Nearest Driveways/Roadways _____

Property Latitude 31° 22' 15" N Property Longitude 92° 23' 33" W

REQUIRED INFORMATION

OPTIONAL INFORMATION

YOU MUST ATTACH A PROPERTY MAP TO THIS DOCUMENT.

Attach property survey or plat of property. Show proposed location of access point and locations of nearest existing driveways and median openings (if applicable). Everything must be dimensioned.

THIS FORM IS NOT TO BE USED FOR SINGLE-FAMILY RESIDENTIAL OR NON-COMMERCIAL AGRICULTURE ACCESS CONNECTION REQUESTS.

APPLICANT TO COMPLETE:

PROPOSED USE OF PROPERTY:

- Multi-Residence Single Family
Number of Homes Proposed _____
- Commercial
Total Facility Sq. Ft. _____
Select One:
 Retail Mixed-Use Medical
 Religious Educational Public
 Agricultural Utility Bank
 Other: _____
- Temporary (less than 1 year) – Explain Use _____
- Other – Explain _____

- Will access connection become a public road? Yes No
- Will the full development be built in phases? Yes No Unknown

SELECT ALL THAT APPLY:

- Applicant requests more than one access connection.
- Property is within 1/2 mile of an existing traffic signal.
- Applicant requests a new traffic signal.
- Applicant requests a new median opening.
- Requested access connection location aligns with an existing signal or intersection.
- Existing median opening or portion thereof, is within the frontage limits of the property.
- Requested access connection is not on a state route, but is within 1/4 mile of a state route.
- Railroad crossing located within 1/4 mile.
- Applicant requests a roundabout.
- Property has frontage on an existing local or parish roadway.
- Property is within the functional area of intersection or limits of turn lane.

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LaDOTD 01.2013

If requesting commercial access, indicate the types and number of businesses and provide the floor area square footage of each:

Business Type	Sq. Ft.
1. Maint. Shop. 16x40x8 portable Building	640
Maint Office 16x40x8 portable Building.	640
Maint Office 16x40x8 Portable Building.	640

If requesting residential development access, indicate the types and number of units (single family, apartment, townhome, etc.):

Residence Type	# Units

For agricultural access, indicate number of acres the access will serve: _____

Please answer the following questions. Provide additional documentation, if necessary:

Does the applicant have knowledge of any State Highway access permits serving this property, or adjacent properties, in which the applicant has, or may have, a property interest?

No Yes. Provide details: _____

Does the property owner own or have any interests in any adjacent properties?

No Yes. Provide details: _____

Are there other existing or dedicated public streets, roads, highways, or access easements bordering or within the property?

No Yes. If Yes, list them on all plans and indicate the proposed and existing access locations.

This application is for (check one): New Construction Remodel/Change in Use Expansion of Facility

I certify that the information contained herein is true, complete, and correct to the best of my knowledge. I understand that if any information contained herein is found to be falsified, this request and any permit issued based on this information shall be voided.

Signature of Owner Celeste Hawthorn Date 3/21/2024

Return Completed Form to the District Permit Specialist at the DOTD District Office where subject property is located.

DEPARTMENT OF TRANSPORTATION & DEVELOPMENT USE ONLY (Permit Specialist)

Date Requested Received _____ Date Owner Contacted _____
 (Owner should be contacted within 14 business days of date request is received.)

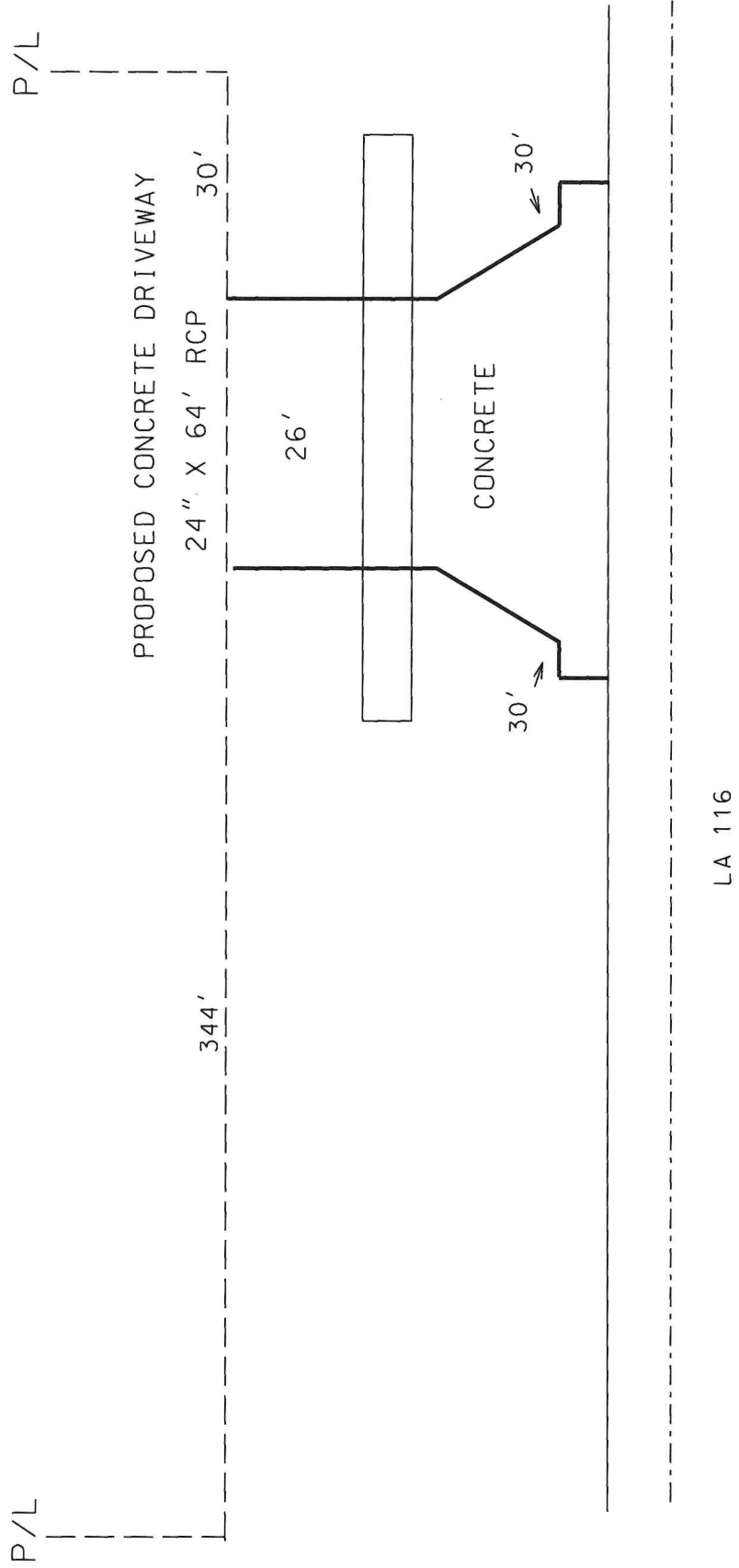
District _____ Request Processed By _____

Pre-Permit Application Meeting Required: No Yes

Meeting Scheduled for _____ 20 _____ at _____ AM/PM

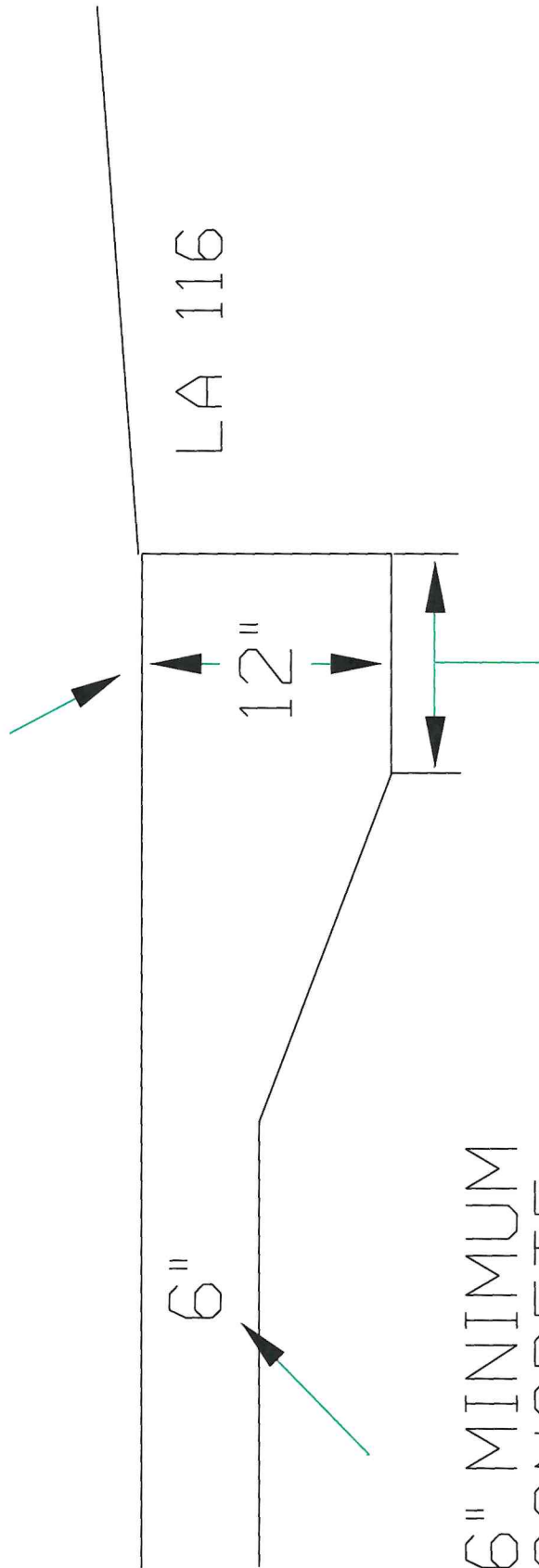
Applicant Contacted to Confirm Meeting by _____

CENTRAL LOUISIANA STATE HOSPITAL
CONTR. SECT. 153-01
1.1 MILES EAST FROM US 165



08023788

HARD SURFACE 25' FROM TRAVEL LANE
CONCRETE FOOTER MINIMUM 12" DEEP
WHERE DRIVEWAY MEETS ROADWAY



6" MINIMUM
CONCRETE
THICKNESS

12" WIDE
FOOTER

LA 116

6"

12"