CITY OF ROSEVILLE CALIFORNIA

Transportation Systems Management (TSM) Plan
Submittal Form

The Transportation Systems Management (TSM) Program develops an integrated and cooperative approach between the City and the business community to promote alternative transportation options to reduce traffic congestion and to improve the air quality in the Roseville area.

The City of Roseville TSM program applies to all businesses or common work locations (such as an office building/complex, commercial/retail center, or industrial building/park) with 50 or more employees. The City's TSM requirements are located in Chapter 11.33 of the Roseville Municipal Code.

The TSM Plan is prepared by the applicant, owner, or developer of a project with the assistance from City staff and approved by the City's Transportation Commission during the Building Permit process. Upon approval of the TSM Plan, the project owner enters into a written agreement with the City obligating the project owner to comply with the TSM Plan, which is designed to reduce the number of employee vehicle trips to and from the work location.

As part of the Planning process, your project may have been required to prepare a TSM Plan, this requirement can be found in your Conditions of Approval. If you are unsure if your project, business or common work location is subject to the TSM requirements, please contact the City of Roseville TSM Coordinator, Sue Schooley.

Every Building Permit applicant of new construction is asked to complete the submittal form on the reverse side and submit the form and associated information to Sue Schooley, Alternative Transportation Analyst, Public Works – Alternative Transportation, 401 Vernon Street, Roseville, CA 95678. You can contact Sue Schooley at (916) 774-5365 or sschooley@roseville.ca.us.

See reverse for submittal form.

Alternative Transportation
401 Vernon Street • Roseville, CA 95678
www.roseville.ca.us/transportation
(916) 774-5365 • Fax (916) 746-1333 • TDD (916) 774-5220 • sschooley@roseville.ca.us

Transportation Systems Management Plan Submittal Form

Applicant	
Person Completing Form:	
Phone Number:	
E-mail:	
Name of Project:	
Address of Project:	

As part of the "Conditions of Approval" for your project, are you required to prepare a Transportation Systems Management (TSM) Plan?

(Circle one) Yes No Planning Department File #: _____

If yes, please complete the following form. If no, please submit this form as is.

Project Operating Characteristics (add additional information as needed)			
Total acreage of project:		Number of buildings:	
Stories of each building:			
Square footage each building:			
Expected hours of operation:			
Types of use for each building (e.g. office, medical, retail, bank):			

Employee Description (add additional information as needed)	
Estimated number of total employees (full and part-time):	
Estimated number of employees at the greatest shift (if applicable):	
Anticipated types of employment (e.g. professional, support staff):	
Potential communities from which employees will commute:	

Site Plan		
Please provide one clean copy of an 8.5" x 11" site plan and one marked-up copy of the site plan identifying the proposed bicycle parking space (bike racks and bike lockers) and carpool spaces based on the TSM criteria as well as any applicable State codes (e.g. Green Building Code).		
Bicycle Facilities	*Bicycle parking facilities must be a minimum of five perfect (5%) of the total number of employees on site during a maximum shift, and shall be provided for employees who bicycle to work.*	
	Number and type of bike racks:	
	Number and type of bike lockers:	
Preferential Carpool Parking	*Carpool spaces must be ten percent (10%) or greater of the total number of employees, and shall be provided for employees to carpool to work. The spaces shall be located for convenient access by the employee and, at a minimum, be labeled "carpool".*	
	Number of carpool spaces:	
Park & Ride Spaces*	Number of Park & Ride spaces:	
E.V. Charging Stations*	Number of EV charging spaces:	
Showers and Lockers*	*To help encourage bicycling as a viable commute transportation alternative, consider installing showers and lockers for employees. Please specify the numbers for showers and lockers for both males and females.*	
	Number of showers and lockers:	
On-Site Amenities* (add additional information as needed)	*Please include a list of facilities/amenities that will allow employees to dine, run errands, and/or conduct business on site (e.g. ATM, dry cleaners, coffee cart, cafeteria, health club facilities, postal service).*	
	Types of amenities:	

Site TSM Coordinator *(Person who will implement the TSM Plan)*			
Name / Title:			
E-mail:			
Telephone:		Fax:	
Address:			

**** If applicable***