



## **TRAIL SEGMENT REALIGNMENT APPLICATION**

RGT Segments:

**Date of Submittal:**

**Submittal to:** RGT Commission

**Approval Date** (RGT Commission):

### **Applicant Information for Proposed New Alignment**

**Name/Title:**

**Name/Title:**

**Email:**

☐ Land Owner / ☐ Land Manager (Check which applies) / ☐ Other

**If additional applicants:**

**Name/Title:**

**Email:**

☐ Land Owner / ☐ Land Manager (Check which applies) / ☐ Other

### **Accessibility**

**Public Access:**

☐ Yes / ☐ No / ☐ With permit

**User Groups** (if not open to all the below groups, note alternate accommodation for those groups in the "Connectivity" section of the application):

☐ Hikers / ☐ Bikers / ☐ Equestrians

**Surfacing:**

☐ Paved / ☐ Unpaved / ☐ Blue (water)

**Universal Design/ADA Accessible:**

☐ Yes / ☐ No / ☐ Partial

**Difficulty:**

☐ Easy (mostly flat & smooth) / ☐ Moderate (some elevation change) /

☐ Difficult (significant elevation change)



## TRAIL SEGMENT REALIGNMENT APPLICATION

RGT Segments:

Traffic Flow:

Barriers:

Signage:

Features:

### Designation Type

☐ Proposed/ ☐ Full Designation of through trail / ☐ Full Designation of spur trail (Check which applies)

*(Note: Proposed Designation is for proposed future trail segments; Full Designation is for existing/constructed trail segments.)*

### RGT Segment for Designation (for future identification purposes)

County	Jurisdiction	Segments	Existing Facility	Existing Facility Name	Miles	Application Type
				Total		

### Location/Description of Current Alignment

*Please describe the boundaries, extent, and relative location of the trail segment and how it relates to the Rio Grande Trail Corridor.*

### Location/Description of Proposed New Alignment

*Please describe the boundaries, extent, and relative location of the proposed new alignment of this trail segment and how it relates to the Rio Grande Trail Corridor.*

### Reason for New Alignment



## **TRAIL SEGMENT REALIGNMENT APPLICATION**

RGT Segments:

*Please describe the reasons for realigning this trail segment.*

### **RGT Vision**

*How does this segment support the vision of the Rio Grande Trail?*

### **Ownership**

*Is the segment in public ownership, or are necessary easements or agreements in place? If not, describe the plan for obtaining and/or managing trail right-of-way.*

### **Public Support**

*Please indicate whether there has been any public outreach and whether there are any groups, organizations, or individuals that have demonstrated support for this trail segment.*

### **Connectivity**

*Describe how this trail segment would provide continuity and/or connectivity within the overall Rio Grande Trail system.*

### **Accessibility**

*What level of access/accessibility is anticipated for the general public and different user groups?*

### **Impact Studies**

*Have environmental impact studies and/or cultural surveys been conducted to understand the potential impacts of trail designation? How may the impacts support existing efforts, community visions, or regional planning? (Required for full designation, optional for proposed designation)*

### **Capacity to Maintain**

*How will the trail segment be maintained, and by whom?*



## **TRAIL SEGMENT REALIGNMENT APPLICATION**

RGT Segments:

### **Public Safety**

*Indicate how public safety will be addressed.*

#### **1. Additional Documentation**

*Please provide any supporting documentation that would help the Commission evaluate your request as a separate attachment. This could include maps of the proposed route for designation, letters of support, resolutions from the respective municipality or county, existing planning studies, easement documentation, pictures of the trail, etc.*