

## ALACHUA COUNTY SCENIC ROAD DESIGNATION REQUEST FORM

GENERAL INFORMATION	
Date:	
County Road Name/Number:	
Starting:	
Ending:	
Historical/Popular Name of Road (if applicable):	
Contact Person: Phone: ( )	
REQUIRED ATTACHMENTS	
1. Does the road have a significant scenic resource (e.g.: geomorphic formations, tree canopy, etc.)?	
Yes D No If yes, please attach a description of the scenic resource detailing its signific Photographs or other visual representations are encouraged.	icance.
2. Does the road have a significant historical or archeological resource?	
Yes D No If yes, please attach a description of the historical or archeological resource significance. Please include references to published documents on the sub	Ū
3. Is the character of the road basically unspoiled (no adverse land uses or structures)?	
Yes D No If yes, please attach a description of the primary types of land uses and/or buildings, and utilities currently present along the road.	fences, signs,
4. Does the road provide for multiple recreational uses for the public?	
Yes D No D If yes, please attach a description of what types of recreation (pedestrian, e bicycle and/or passive recreation) would be appropriate for the area.	equestrian,
Please send this request and all attachments to: Alachua County Growth Management Department 10 SW 2 <sup>nd</sup> Avenue, 3 <sup>rd</sup> floor Gainesville, FL 32601	