WVDOT Policy/Procedure Request Form

Updated 11/14/2022

Please print information. Complete and submit requests with New or Revised Policy. Incomplete forms will be returned.

Name/ Title of Policy	DOT Volume #	DOH Section #	Chapter #	Requesting Org/Unit #
	Rescind	Revise 🦳 New		
If rescinding a policy document(s), plea	ase provide the reason and	d process undertaken.	Once completed, pro	oceed to Approvals.
	Арр	roval		
District Engineer/Manager/Division Director:			Date:_	
E-mail:	Τε	lephone:		
WVDOT Secretary or designee:			Date:_	
E-mail:	T(elephone:		
WVDOT Agency Head or designee:			Date:_	
E-mail:	Те	elephone:		