

Functional Classification Update and Urban Boundary  
Consultation Verification Form - Small Urban Area

I, \_\_\_\_\_, Mayor of \_\_\_\_\_ in the  
\_\_\_\_\_ TxDOT District, verify TxDOT District staff has consulted with  
me on matters regarding functional classification updates and small urban boundary smoothing.

Mayor Signature \_\_\_\_\_ Date: \_\_\_\_\_

District Engineer Signature \_\_\_\_\_ Date: \_\_\_\_\_