

## Federal Railroad Administration Office of Railroad Safety State Action Plan (SAP) Portal User's Guide

Version 1.0 May 28, 2021

### CONTACT INFORMATION

For technical support to the SAP Portal, email RSISSPSupport@dot.gov. For questions related to the SAP Program, email Debra.Chappell@dot.gov and StateActionPlan@dot.gov

- 18%



FRA

SAP

### Preface

The SAP Portal has been created to allow designated SAP points of contact (and/or their designees) to electronically submit SAPs (and implementation reports, if applicable) to FRA as required by 49 CFR 234.11. All SAPs (and implementation reports, if applicable) MUST be uploaded through this portal. FRA's State Highway-Rail Grade Crossing Action Plan (SAP) regulations can be found in section 234.11 of title 49 of the Code of Federal Regulations (49 CFR § 234.11). FRA issued these SAP regulations in a final rule that was published in the Federal Register on December 14, 2020. A copy of FRA's SAP final rule can be obtained from the Federal Register and FRA's SAP website at https://railroads.dot.gov/sap.

#### PAPERWORK REDUCTION ACT STATEMENT

Public reporting burden for this information collection is estimated to average 222 hours per response (ranging between 24 hours and 1,100 hours), including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information, and submitting documents to this portal. According to the Paperwork Reduction Act of 1995, a federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with, a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 2130-0589. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Railroad Administration, Office of Railroad Safety, 1200 New Jersey Ave., S.E., Washington D.C. 20590.

Expires 03/31/2024

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\*The initial 10 States per the Rail Safety Improvement Act of 2008 (RSIA08) are Alabama, California, Florida, Georgia, Illinois, Indiana, Iowa, Louisiana, Ohio, and Texas.

Per Title 49 Code of Federal Regulations Section 234. 11, States *must* submit their plans no later than February 14, 2022.

## State Action Plan (SAP) Portal Login

1. Login with your credentials at <u>https://rrsp.fra.dot.gov/SAP/</u>

**NOTE:** The initial log-in list for this Portal consisted of members of American Association of State Highway and Transportation Official's (AASHTO's) Council on Rail Transportation. Additionally, the initial log-in list includes points of contact for the California Public Utilities Commission, Illinois Commerce Commission and the Ohio Rail Development Corporation. Changes to the log-in name and/or email address should be sent to StateActionPlan@dot.gov.

	FRA Railroad Portal[DOT HQ] - Sign In
1	User name:
	Password:
	Sign In Sign me in automatically Forgot Password?
	If you are experiencing issues logging into the site, please click here to contact an Administrator. **WARNING**WARNING**WARNING**

 Click on "Submit Your SAP" button on the main page or click on "My Submission(s)" to submit an SAP or implementation report. If you click on "My Submission(s)", please click on "Add new item" as well.



### Submitting New SAP (40 States and the District of Columbia)

 Complete all required fields below before attaching document(s). Note: Do not click on "Save" until you've uploaded your SAP document(s) and all required fields are completed.

**Note:** For the question, **"Is this a stand-alone SAP?"** select "No" if the SAP was developed by modifying an existing report. Select "Yes" if the SAP was created for the primary purpose of complying with FRA's SAP regulations.

Note: For "SAP Classification", please select "New SAP (40 States & District of Columbia)."

SAPList -	New Item							□ ×	
_									
Edit Save Cance	el Paste	ABC Spelling							
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State (	Code 🖌 🛛 Nan	ne	SAP Plan Type	Submissio	on Type	Туре	Modified By	~	
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♣ Add docu Please co	ment mplete all requ	ired fiel	ds below bef	ore attaching	j SAP doc	ument(s) a	bove.		
Name *									
Name				(First & Last)					
Job Title/Pos	ition *								
Mailing Stree	et Address *								
				This field has a r	maximum cha	aracter of 255			
City *									
State *									
ZIP Code *									
Daytime Pho	ne *			Phone Format: :	007-X007-X0007				
Email Addres	is *								
Additional POC *		~							
State Submit	ting Plan *				~				
State Code *									
				Enter your state's 2-digit postal abbreviation. Example Virginia is VA					
Is this a stand	Is this a stand-alone SAP? *								
Is this SAP a part of another plan to be submitted to DOT? *									
SAP Classification *					~				
Comments				A AL B Z	. ∏ I ≣ ≣		請 信   <u>A</u> 📎 🛏 🧃		
								~	
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					5	Save	Cancel		

2. Attaching SAP Document(s): To upload document(s), click on "Add document". A popup window will appear as shown in the screenshot below. Click on "Browse" to choose file from your local computer and click "OK" when done.

SAPList - New Item	
Edit Edit Save Cancel Paste Copy Sp	elling
Commit Clipboard Sp	
State Code V Name	SAP Plan Type Submission Type Type Modified By
There are no items to show in this view of t	e "SAPAttachments" document library. To add a new item, click "New" or "Upload".
Add document	
Please complete all required	I fields below before attaching SAP document(s) above.
Upload Docume	nt 🗆 🗶 📃 🔤
Name * Upload Document	Name
Iob Title/Posit Browse to the document	Pou Browse
Mailing Street	Upload Multiple Files
Maning ou cer	Add as a new version to existing files
City *	
State * Version Comments	Version Comments:
ZIP Code * Type comments describing	g what
Davtime Phon	
Email Address	
Additional PO	OK Coord
State Submitti	UK Cancel
State Code *	
	Enter your state's 2-digit postal abbreviation. Example Virginia is VA

3. After uploading the SAP documents, enter required information and click "Check In" either on the top left corner or below the form as shown in the screenshot below.

SAPAttachments - Demo1	.docx 🗆 🛪
Edit	
Check Cancel Paste Cut	Delete Item
Commit Clipboard	Actions
The document was uploaded succe fields are filled out. The file will no	essfully and is checked out to you. Check that the fields below are correct and that all required t be accessible to other users until you check in.
State Code *	
SAP Plan Type *	✓
Submission Type *	The "FRA Reviewer's Attachment" option is for FRA use only
Name *	Demo1 .docx
Description	
Comments	
Version: Created at Last modified at	Check In Cancel

**Note:** For multiple SAP document(s) repeat steps 2 and 3 by uploading each document individually and completing the pop-up form shown above for each document.

4. After all SAP documents have been uploaded, click "Save" at the bottom of the form to submit to FRA. See screenshot below.

SAPList - N	lew Item				⊟ ×			
Edit								
Save Cancel	Paste	ABC Spelling						
Commit	Clipboard	Spelling						
State Cod	e Name	SAP Plan Typ	e Submission Type	Туре	Modified By			
FL	Demo2	New SAP	Submitter's Attachment	<b>W</b>	-			
Add docume	ent							
	nloto all roqui	red fields below bet	ioro attaching CAD docum	ant(c) a	howo			
Please com	ipiete an requi	red fields below bei	ore attaching SAP docum	enc(s) a	bove.			
Name *			John Matthews					
			(First & Last)					
Job Title/Positi	ion *		Program Manager					
Mailing Street	Address *		123 Street					
City *			This field has a maximum charact	er of 255				
City *			Newport					
State *			Florida					
ZIP Code *			20202					
Daytime Phone *		202-200-1234						
Email Address	*		test@test.com					
Additional POC	*		No					
State Submittir	- nα Dian <b>*</b>		Florida V					
State Code *								
State Code			Enter your state's 2-digit postal abbreviation. Example Virginia is VA					
Is this a stand-a	alone SAP? *		Yes 🗸					
Is this SAP a pa	art of another plan t	o be submitted to DOT? *	No 🗸					
SAP Classificati	ion *		New SAP (40 States & District of	Columbia)	~			
Comments								
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					~			
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			_					
			Save		Cancel			

**NOTE:** Once form is submitted, an automatic confirmation email will be sent to the individual's email address on file confirming successful submission and FRA will be notified automatically.

# Submitting Updated SAP/Implementation Report (Initial 10 States per the RSIA08)

 Complete all required fields below before attaching document(s). Note: Do not click on "Save" until you've uploaded your SAP document(s) and all required fields are completed.

**Note:** For the question, **"Is this a stand-alone SAP?"** select "No" if the SAP was developed by modifying an existing report/document other than the FRA-approved highway-rail grade crossing action plan previously submitted by your State. Select "Yes" if the SAP was developed by modifying the FRA-approved highway-rail grade action plan previously submitted by your State.

**Note:** For **"SAP Classification,"** please select "Updated SAP/Implementation (10 States per RSIA08)".

SAPList - New Item			□ ×				
Edit							
Save Cancel Paste							
Commit Clipboard Spelling			Distanting and the				
State Code Y Name SAP Plan	ype Submissio	iype iype					
There are no items to show in this view of the "SAPAttachmen	document library. To add a	new item, click "New" or "Uploa	ad .				
Add document							
Please complete all required fields belo	v before attaching	SAP document(s) a	bove.				
• • • • • • • • • • • • • • • • • • • •							
Name *							
	(First & Last)						
Job Title/Position *							
Mailing Street Address *							
Cite *	This field has a n	naximum character of 255					
State *							
ZIP Code *							
Daytime Phone *	Phone Format: y	~~~~~~					
Email Address *	Filone Format.	~~~~~					
Additional POC *							
State Submitting Plan *		$\checkmark$					
State Code *							
	Enter your state	Enter your state's 2-digit postal abbreviation. Example Virginia is VA					
Is this a stand-alone SAP? *	~						
Is this SAP a part of another plan to be submitted to D	• * ?TC						
SAP Classification *							
Comments							
	A All B Z		課 課   <u>A</u> 🖄 M 💷				
			~				
			$\sim$				
		Save	Cancel				

2. Attaching SAP Document(s): To upload document(s), click on "Add document". A popup window will appear as shown in the screenshot below. Click on "Browse" to choose file from your local computer and click "OK" when done.

SAPList - New Item	
Edit	
Save Cancel Paste	ABC Spelling
Commit Clipboard S	
State Code V Name	SAP Plan Type Submission Type Type Modified By
There are no items to show in this view of	f the "SAPAttachments" document library. To add a new item, dick "New" or "Unload".
Add document	
Please complete all require	ed fields below before attaching SAP document(s) above.
Name *	ent
Upload Document	Name:
Job Title/Posit intend to upload.	Browse
Mailing Street	Upload Multiple Files
	✓ Add as a new version to existing files
City *	
State * Version Comments	Version Comments:
ZIP Code * Type comments describ	sion.
Daytime Phon	
Email Address	
Additional PO	OK
State Submitti	Canter
State Code *	
	Enter your state's 2-digit postal abbreviation. Example Virginia is VA

3. After uploading the SAP documents, enter required information and click "Check In" either on the top left corner or below the form as shown in the screenshot below.

SAPAttachments -	Demo1.docx	□ ×
Edit	_	
Check Cancel Paste	Cut Copy	
Commit Clipbo	oard Actions	
The document was uplo fields are filled out. The	aded successfully and file will not be access	d is checked out to you. Check that the fields below are correct and that all required sible to other users until you check in.
State Code *		
SAP Plan Type *		✓
Submission Type *	 The "F	RA Reviewer's Attachment" option is for FRA use only
Name *	Demo	1 .docx
Description		
Comments		
Version: Created at Last modified at		Check In Cancel

**Note:** For multiple SAP document(s) and/or the implementation report, repeat steps 2 and 3 by uploading each document individually and completing the pop-up form shown above for each document.

4. After all SAP documents and the implementation report have been uploaded, click "Save" at the bottom of the form to submit to FRA. See screenshot below.

SAPList - Sue Doe						
Edit						
Save Cancel Paste Copy Spelling						
Commit Clipboard Spelling						
Name *	Sue Doe					
	(First & Last)					
Job Title/Position *	Transportation Specialist					
Mailing Street Address *	123 Pecan Lane This field has a maximum character of 255					
City *	Trenton					
State *	Florida					
ZIP Code *	07303					
Daytime Phone *	609-123-4567 Phone Format: xxx-xxx-xxxx					
Email Address *	sue.doe@fl.state.us					
Additional POC *	No V					
State Submitting Plan *	Florida					
State Code *	FL Enter your state's 2-digit postal abbreviation. Example Virginia is VA					
Is this a stand-alone SAP? *	No V					
Is this SAP a part of another plan to be submitted to DOT? $\ensuremath{^*}$	Yes 🗸					
If Yes, please provide the name of the DOT plan						
Where is the SAP located within the document?						
	provide specific chapter, page, or appendix					
	Updated SAP/Implementation (10 States, per RSIA08)					
Comments	A AT B Z U I 美美国 注注注注注注 A M M M					
	$\sim$					
	$\sim$					
	-					
Version:	Save Cancel					

**NOTE:** Once form is submitted, an automatic confirmation email will be sent to the individual's email address on file confirming successful submission and FRA will be notified automatically.

### Submitting Corrected SAP

FRA will notify the State via email if the State Action Plan needs to be corrected. Follow the steps below if you need to submit a corrected SAP.

**Note:** Do not create a new submission for a corrected SAP.

- 1. Login in to the FRA Railroad Portal at <a href="https://rrsp.fra.dot.gov/SAP/">https://rrsp.fra.dot.gov/SAP/</a>
- 2. After successful login, click on "My Submission(s)". See screenshot below.

Peder Office	ral Railroad Administration of Safety Analysis	م			
State Action Plan					
<mark>My Submission(s)</mark> Florida SAP	Welcome to the Federal Railroad Administration's (FRA's) State Highway- Rail Grade Crossing Action Plan (SAP) Portal				
NOTE: Users of this portal must be the State's designated SAP point of contact or his/her designed is required to enter the portal					
	The moon one we may et all be all experience of through one submission status for PACE MAP				

3. Click on user name (e.g. Sue Doe) under "Name" as shown in the screenshot below.

Feder Office	ral Railro	oad Adm	inistration						
Gilless	on oranory	, and your		All Sit	es		<b>×</b>		۶
State Action Plan									
My Submission(s)	SAPList ► FL	View 👻							
Florida SAP	Name	Job Title/Position	Mailing Street Address	City	State	ZIP Code	Daytime Phone	Email Address	Additic
	Sue Doe E New	Transportation Specialist	123 Pecan Lane	Trenton	Florida	07303	609-123-4567	sue.doe@fl.state.us	No
	🕈 Add new it	tem							

4.	The form	og lliw	au-a	Simply	/ click on	"Add document"
•••			P . P .	•		

SAP	vList	- Sue Doe				□ ×	
	} 🙎	Version History	👾 Alert N	/le			
Edit	-390 	Manage Permissions	Workt	lows			
TOCT I		Manage	Action	5			
	Edit	State Code	Name	SAP Plan Type	Submission Type Com	ments	
		FL	3 🔡 NEW	Corrected SAP	Submitter's Attachment		
<mark>⊕</mark> A	dd do	cument.					
Nam	e				Sue Doe		
L dor	Title/P	osition			Transportation Specialist		
Maili	ing Str	eet Address			123 Pecan Lane		
City					Trenton		
State	2				Florida		
ZIP C	ode				07303		
Dayt	ime Pl	none			609-123-4567		
Emai	il Addr	ess			sue.doe@fl.state.us		
Addi	tional	POC			No		
2nd I	POC Jo	b Title/Position					
2nd I	POC N	1ailing Street Addre	ss				
2nd I	POC C	ity					
2nd I	POC St	tate					
2nd I	POC Zi	p Code					
2nd I	POC EI	mail Address					
2nd I	POC P	hone#					
State	Subn	nitting Plan			Florida		
State	e Code				FL		
Is thi	is a sta	ind-alone SAP?			No		
Is thi	is SAP	a part of another pl	an to be si	ubmitted to DOT?	Yes		
If Yes	s, plea	se provide the nam	e of the D	OT plan			
Whe	re is tl	ne SAP located with	in the doc	ument?			
SAP	Classif	ication			Updated SAP/Implementation (10 per RSIA08)	States,	
Assig	gnedTo	0			Unassigned		
FRA	Reviev	v Status			Not Processed	~	

5. The upload document window will pop-up. Upload your corrected SAP from your local computer and click "Ok". Note: Please use a name for the corrected SAP that is somewhat different from the name for the original SAP. For example, please consider adding a date after the end of the name of the original SAP.

Upload Document		□ ×
Upload Document Browse to the document you intend to upload.	Name: Browse Upload Multiple Files Add as a new version to existing files	
Version Comments Type comments describing what has changed in this version.	Version Comments:	$\langle \rangle$
	OK Cancel	

6. After SAP document(s) is uploaded, enter required information as indicated in the screenshot below. Select "Corrected SAP" for the "SAP Plan Type" then click "Check In" either on the top left corner or below the form as shown below.

SAPAttachments - Corrected SAP Demo.docx				
Edit				
Check Cancel Commit Clipboard	Copy Delete Item			
(i) The document was uploade file will not be accessible to	ed successfully and is checked out to you. Check that the fields below are correct and that all required fields are other users until you check in.	filled out. The		
State Code *	FL			
SAP Plan Type *	Corrected SAP			
Submission Type *	Submitter's Attachment  The "FRA Reviewer's Attachment" option is for FRA use only			
Name *	Corrected SAP Demo .docx			
Description				
Comments				
Version: ( Created at	Check In Ca	incel		

7. Simply close the form after uploading the SAP document(s).

SAPList -	- Sue Doe		ſ
View	Varsion History	(a) Alert Me	
	Manage Permissions	Workflows	
Edit Item 🗙 r	Delete Item		
N	/lanage	Actions	
Add doo	ument		
Name			Sue Doe
Ioh Title/Do	sition		Transportation Specialist
Mailing Stre	pot Addross		123 Decan Lane
City			Trenton
State			Florida
7IP Code			07303
Davtime Ph	one		609-123-4567
Email Addre	P55		sue.doe@fl.state.us
Additional F	POC		No
2nd POC Jo	b Title/Position		
2nd POC Ma	ailing Street Addre	55	
2nd POC Cit	ty		
2nd POC Sta	ate		
2nd POC Zip	p Code		
2nd POC En	nail Address		
2nd POC Ph	ione#		
State Subm	itting Plan		Florida
State Code			FL
Is this a star	nd-alone SAP?		No
Is this SAP a	a part of another pl	an to be submitted to DO	DT? Yes
If Yes, please provide the name of the DOT plan		e of the DOT plan	
Where is th	e SAP located with	in the document?	
SAP Classification			Updated SAP/Implementation (10 States, per RSIA08)
Comments			
Content Type			
Version: Created at			Close

**NOTE:** Once the corrected SAP is submitted, an automatic confirmation email will be sent to the individual's email address on file confirming successful submission and FRA will be notified automatically of the corrected SAP submission.

### FAQ #1: I hit "Save" before uploading my SAP/implementation report. How do I submit it now?

If the form was completed and user clicked on "Save" on the main form before attaching their SAP document(s), follow the instructions below.

1. Click on user name (e.g. John Matthews) under "Name" as shown in the screenshot below.

<b>Fede</b> Office	ral Railro of Safety A	ad Admir Analysis	nistration		1		XS		
State Action Plan				All Sites		~			Q
My Submission(s)	SAPList ► My St	ubmission(s) –							
Florida SAP	Name	Job Title/Position	Mailing Street Address	City	State	ZIP Code	Daytime Phone	Email Address	Addi
	John Matthews	Program Manager	123 Street	Newport	Florida	20202	202-200-1234	test@test.com	No
	🕈 Add new item	1							

2. The form will pop-up. Simply click on "Add document" as shown in the screenshot below to add/upload SAP document(s).

	SAPList - John Matthew	vs		×
rol Doiles	View			
ral Rallro	Version History	🙊 Alert Me		
of Safety	Edit Manage Permissions	🥙 Workflows		
	Item X Delete Item			
	Manage	Actions		
	Edit State Code	Name SAP F	lan Type Submission Type Comments	^
SAPList ► My S	There are no items to show in this v "Upload".	view of the "SAPAttachme	its" document library. To add a new item, click "New" or	
Name	Add document			
John Matthews	B Add document			
Add new iter	Name		John Matthews	
	Job Title/Position		Program Manager	
	Mailing Street Address		123 Street	
	City		Newport	
	State		Florida	
	ZIP Code		20202	
	Daytime Phone		202-200-1234	
	Email Address		test@test.com	
	Additional POC		No	
	2nd POC Job Title/Position			
	2nd POC Mailing Street Addres	55		
	2nd POC City			
	2nd POC State			
	2nd POC Zip Code			
	2nd POC Email Address			
	2nd POC Phone#			
	State Submitting Plan		Florida	
	State Code		FL	
	Is this a stand-alone SAP?		Yes	
	Is this SAP a part of another pl	an to be submitted to	DOT? No	
	If Yes, please provide the name	e of the DOT plan		
	Where is the SAP located with	in the document?		
	SAP Classification		New SAP (40 States & District of Columbia)	
	AssignedTo		Unassigned	
	FRA Review Status		Not Processed	~

3. A pop-up window will appear as shown in the screenshot below. Click on "Browse" to choose file from your local computer and click "OK" when done.

Upload Document	Name:	
Browse to the document you intend to upload.	Upload Multiple Files Add as a new version to existing files	Browse
Version Comments Type comments describing what has changed in this version.	Version Comments:	Ç
	OK	Cancel

4. After the SAP document(s) is uploaded, enter required information and click "Check In" either on the top left corner or below the form as shown in the screenshot below.

SAPAttachn	SAPAttachments - Demo1.docx				
Edit					
Check Cancel	Paste & Cut	Delete Item			
Commit	Clipboard	Actions			
The docume fields are fill	ent was uploaded succo led out. The file will no	essfully and is chec t be accessible to o	ked out to you. Check th other users until you che	at the fields below are co ck in.	rrect and that all required
State Code *		[			
SAP Plan Type	*		~		
Submission Typ	)e *	The "FRA Rev	iewer's Attachment"	option is for FRA use	only
Name *		Demo1		.docx	
Description					
Comments					$\langle \rangle$
Version: : Created at : Last modified at				Check In	Cancel

**Note**: For multiple SAP documents repeat steps 2 -4 above by uploading each document individually and completing the pop-up form shown above for each document.

5. After uploading SAP document(s), simply close the form as shown in the screenshot below.

SAPList - Sue Doe			×
View			
Version History	🙀 Alert Me		
Edit	🥙 Workflows		
Item 🗙 Delete Item			
Manage	Actions		
Add document			
Name		Sue Doe	
Job Title/Position		Transportation Specialist	
Mailing Street Address		123 Pecan Lane	
City		Trenton	
State		Florida	
ZIP Code		07303	
Daytime Phone		609-123-4567	
Email Address		sue.doe@fl.state.us	
Additional POC		No	
2nd POC Job Title/Position			
2nd POC Mailing Street Addres	is		
2nd POC City			
2nd POC State			
2nd POC Zip Code			
2nd POC Email Address			
2nd POC Phone#			
State Submitting Plan		Florida	
State Code		FL	
Is this a stand-alone SAP?		No	
Is this SAP a part of another pla	an to be submitted to DOT?	Yes	
If Yes, please provide the name	e of the DOT plan		
Where is the SAP located with	n the document?		
SAP Classification		opdated SAP/Implementation (10 States, per RSIA08)	
Comments			
Content Type:			
Version: Created at		Close	$\checkmark$

### FAQ #2: How do I change point of contact information for my State?

 Login with your credentials at <u>https://rrsp.fra.dot.gov/SAP/.</u> (If you need technical assistance with logging into the portal, please contact RSISSPSupport@dot.gov)

	FRA Railroad Portal[DOT HQ] - Sign In
1	User name:
	Sign In
	Sign me in automatically Forgot Password?
X	If you are experiencing issues logging into the site, please click here to contact an Administrator.
	**WARNING**WARNING**

### 2. Click on "My Submission(s)" as indicated in screenshot.

	al Railroad Administration
Gillag	All Sites
State Action Plan	
My Submission(s) Florida SAP	- Welcome to the Federal Railroad Administration's (FRA's) State Highway-
	Rail Grade Crossing Action Plan (SAP) Portal
	NOTE: Users of this portal must be the State's designated SAP point of contact or his/her designee. A login is required to enter the portal
	The public SAP webpage can be accessed here to obtain SAP submission status for each State.
	The SAP Portal has been created to allow designated SAP points of contact (and/or their designees) to electronically submit SAPs (and implementation reports, if applicable) to FRA as required by 49 CFR 234.11.
	All SAPs (and implementation reports, if applicable) MUST be uploaded through this portal no later than February 14, 2022. If you have any questions, please send your email to the SAP Team at StateActionPlan@dot.gov. Do not submit your SAPs via email. SAPs must be submitted to FRA via the SAP Portal for review and approval.
	Submit Your SAP

3. Click on your name under the "Name" column as shown in the screenshot below.

Feder Office									
State Action Plan				All Sit	es		~		Q
My Submission(s)	SAPList ► FL	View 🔻							
Florida SAP	Name	Job Title/Position	Mailing Street Address	City	State	ZIP Code	Daytime Phone	Email Address	Additi
	Sue Doe ≣ NEW	Transportation Specialist	123 Pecan Lane	Trenton	Florida	07303	609-123-4567	sue.doe@fl.state.us	No
	🕂 Add new it	em							

4. The form shown below will pop-up. Click on "Edit" as highlighted below

SAPList - Sue Doe				□ ×
View		_		
Version History	🙀 Alert Me			
Edit Manage Permissions	🥙 Workflows			
Item 🔀 Delete Item				
Manage	Actions		Attachment	
FL C		Correcte	d SAP Submitter's Attachment	^
Add document				
Name	Name			
Job Title/Position			Transportation Specialist	
Mailing Street Address	Mailing Street Address			
City			Trenton	
State			Florida	
ZIP Code			07303	
Daytime Phone	Daytime Phone			
Email Address	Email Address			
Additional POC			No	
2nd POC Job Title/Position				
2nd POC Mailing Street Addres	ss			
2nd POC City	2nd POC City			
2nd POC State				
2nd POC Zip Code				
2nd POC Email Address				
2nd POC Phone#				
State Submitting Plan			Florida	
State Code			FL	
Is this a stand-alone SAP?			No	
Is this SAP a part of another plan to be submitted to DOT?			Yes	
If Yes, please provide the name of the DOT plan				
Where is the SAP located with				
SAP Classification			Updated SAP/Implementation (10 State per RSIA08)	<u>*</u> S,

5. Edit the form as needed and click "Save" either on the top left corner or at the bottom right of the form when completed.

SAPList - Sue Doe	□ ×				
Save Cancel Paste Cut ABC Save Cancel Paste Copy					
Commit Clipboard Spelling					
	^				
Name *	Sue Doe				
	(First & Last)				
Job Title/Position *	Transportation Specialist				
Mailing Street Address *	123 Pecan Lane				
	This field has a maximum character of 255				
	Trenton				
State *	Florida V				
ZIP Code *	07303				
Daytime Phone *	609-123-4567 Phone Format: xxx-xxxx				
Email Address *	sue.doe@fl.state.us				
Additional POC *	No V				
State Submitting Plan *	Florida V				
State Code *	FL Enter your state's 2-digit postal abbreviation. Example Virginia is VA				
Is this a stand-alone SAP? *	No V				
Is this SAP a part of another plan to be submitted to DOT? *					
SAP Classification *	Updated SAP/Implementation (10 States, per RSIA08) V				
Comments					
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Version: Created at	Save Cancel				



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