

2017 APPLIATION FORM For FY 22 or 23 Project Funding for Local Initiatives Program (LI)

General Information:				
Projec	oject Title:			
Name	me of Applicant (If other than Project Sponsor):			
Projec	oject Sponsor:			
_	(municipality, county, state, federal ag	ency, or tribal council)		
Conta	ntact Person:			
	Title:	Sponsor		
	Email:	Address:		
Phone	one Number:			
	(All of the following items are required - applications without	this information will not be reviewed)		
1	Qualifying LI Funded Activities:			
	eck the one Local Initiatives activity that represents ject will address. Eligible activities must be consisten 3(b).			
	Transportation System Management Improvemer	nts:		
i. ii.	equipment, access management improvements construction of complete streets enhancements	, etc. uipment, construction of new turn lanes,		
	Transit Capital Improvements: New or impenhancements, park-and-ride facilities, transit materials. Please note that the MPO cannot fund transit	aintenance facilities, vehicle purchases,		
	Non-Motorized Improvements: Widening an designated bike lanes, construction of pedegreenway/trail corridors, bike and pedestrian su water fountains, lockers, etc.			
	Freight Improvements:			
i. ii. iii.	cargo expansion, rehabilitation of taxiways, aproportion in the province of taxiways, aproportion in the province of taxiways, aproportion in the province of the province of taxiways, aproportion in taxiways, aproportion in the province of ta	on rehabilitation, etc. Into on and off the port, improvement of acility expansion, runway/rails for future		
	Other eligible activities not specified above			

2 Project Description:				
Road Name:				
Road Number: Local Road State Road				
	Off-System)	(On-Syste		
NOTE: All projects on the state road system will be a	• •	` -	•	
Project Limits: Begin:				
End:				
(a) Project Typical Section Information – Complete the	ne followina inf	ormation for exi	sting and	
proposed features, dimensions, and right of way I	•			
· · · · · · · · · · · · · · · · · · ·	EVICTING	DDODOSED	NI/A	
DIQUE OF WAY	EXISTING	PROPOSED	N/A	
RIGHT-OF-WAY				
Width (feet) NOTE: Right-of-Way acquisition is NOT permitted.				
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ROADWAY				
Number of Travel Lanes				
Typical Lane Width (feet)				
Total Roadway Width (No. Travel Lanes x Lane Width)				
Curb & Gutter to remain: yes no	N/A			
Bike Lane Width (feet) (Not Including Buffer Width)				
Buffer Width (feet)				
Re-stripe for Bike Lane: yes no no widen for Bike Lane: yes no				
Posted Speed Limit				
Design Speed (if known)				
MEDIAN				
Width (feet)				
widii (icot)				
SIDEWALK				
Width on North or East side (feet)				
Width on South or West side (feet)				
Material: asphalt paver other (specify)				
SWALE				
Width (feet)				

(b)	Right of Way		
	Describe the project's existing Right-of-Way ownerships. This description shall identify when the Right-of-Way was acquired and how ownership is documented (i.e. plats, deeds, prescriptions, certified surveys, easements). If right-of-way is an easement, please describe the easement language.		
3	Project Scope:		
(a)	Project Scope of Work		
	Project Scope of Work		
	tions: All blue highlighted boxes must be checked Yes or No. Check "N/A" if does not apply to the proposed project.		
Describ	e proposed ADA items (crosswalks, sidewalks, ramps, etc.):		
Describe proposed Access Management revisions:			
Describe proposed Pedestrian and/or Roadway Lighting:			
Describ	e proposed Landscape (with Local Funds):		
<u>Describ</u>	e proposed Signalization:		

Describe Proposed Transit Improvements:
Describe Utility Modifications Required:
Describe Drainage/Permit needs:
Describe Railroad Crossing Modifications:
Describe Bridge Modifications:
Describe Other Scope Items:
(b) Summarize any special characteristics of the project.
(c) Identify any upcoming projects or projects currently underway adjacent to the propose project.
(d) Other specific project information that should be considered.

4	Project Implementation Information:
(a)	Describe the proposed method of performing (i.e. consultant contract or in-house) and administering each work phase of the project. If it is proposed that the project be administered by a governmental entity other than the Department of Transportation, the Agency must be LAP certified to administer Federal Aid projects in accordance with the Department's <i>Local Agency Program Manual (topic no. 525-010-300)</i> . Web site: www.dot.state.fl.us/projectmanagementoffice/lap/default.htm
	Design to be conducted by applicant in-house staff
	Design to be conducted by FDOT but funded by applicant
	Design to be conducted by FDOT and funded by Local Initiatives Program
	CEI to be conducted by applicant in-house staff
	CEI to be conducted by FDOT
(b)	Describe any public (and private, if applicable) support of the proposed project. (Examples include: written endorsement, formal declaration, resolution, financial donations or other appropriate means).
(c)	Describe the proposed maintenance responsibilities for the project when it is completed.

5 Cost Estimate:

The total construction amount of Local Initiatives Program funds requested per projects (infrastructure) must be in excess of \$250,000 with a maximum project amount of \$3,500,000.

Local Initiatives Program funds will be used to fund Construction, Construction Engineering and Inspection Activities (CEI) and FDOT in-house support activities. The applicant may also request that Local Initiative Program funds be used for project Design, Environmental Services, and Post Design Services.

Local Funds (LF) will be used for all non-participating items, contingency activities, and any costs in excess of the awarded funding (LI) allocation.

(a) Provide <u>detailed</u> project cost estimate. Estimate shall be broken down to eligible and noneligible project costs. **Estimates are to be prepared and signed by a Professional Engineer from the Local Agency's Engineering office.**

Use the following links to access the basis of estimates manual as well as historical cost information for the project area:

Basis of Estimates Manual Historical Cost Information

5 **Certification of Project Sponsor:** I hereby certify that the proposed project herein described is supported by _ (municipal, county, state or federal agency, or tribal council) and that said entity will: (1) provide any funding required in addition to the grant amount; (2) enter into a LAP and maintenance agreement with the Florida Department of Transportation; (3) have complied with the Federal Uniform Relocation Assistance and Acquisition Policies Act for any Right of Way actions intended for this project previously performed within the project limits; (4) will comply with NEPA process prior to construction, which may involve coordination with the State Historic and Preservation Office (SHPO); and (5) support other actions necessary to fully implement the proposed project. I further certify that the estimated costs included herein are reasonable, and that increases in these costs could cause significant increase to the local agency required participation. understand failure to follow through on the project once programmed in the Florida Department of Transportation's Work Program is not allowed. Signature Name (please type or print) Title Date FOR FDOT USE ONLY

Application Complete

Implementation Feasible

Include in Work Program

Project Eligible

Yes

Yes

Yes

Yes

No

No

No

No