

Transportation Alternatives (TA) Project Application

2018 Call for Projects



APPLICANT INFORMATION

1. ELIGIBLE APPLICANT AGENCY – indicate ONE <input type="checkbox"/> Municipality <input type="checkbox"/> County <input type="checkbox"/> State Agency <input type="checkbox"/> Federal Agency <input type="checkbox"/> Other _____			
2. AGENCY NAME		3. ADDITIONAL SPONSORS OR CO-SPONSORS	
4. CONTACT PERSON		TITLE	PHONE
5. AGENCY MAILING ADDRESS		CITY	STATE ZIP

PROJECT DESCRIPTION

6. PROJECT NAME (160-character limit)		
7. PROJECT LOCATION/ADDRESS		8. PROJECT LIMITS (mileposts, intersecting roadways, rivers, other geographic features)
9. COUNTY	10. MUNICIPALITY	11. PROJECT LENGTH
12. 1-2 SENTENCE DESCRIPTION OF PROJECT		

ELIGIBILITY

13. PROJECT CATEGORY – check all that apply

<p>PEDESTRIAN & BICYCLE/ NON-MOTORIZED TRANSPORTATION</p> <p><input type="checkbox"/> Bicycle & pedestrian / Non-Motorized transportation facilities</p> <p><input type="checkbox"/> Infrastructure related projects to provide safe routes for non-drivers</p> <p><input type="checkbox"/> Conversion of abandoned railway corridors to trails</p>	<p>HISTORIC / SCENIC TRANSPORTATION ACTIVITIES</p> <p><input type="checkbox"/> Construction of turnouts, overlooks, and viewing areas</p> <p><input type="checkbox"/> Control and/ or removal of outdoor advertising</p> <p><input type="checkbox"/> Historic preservation and rehabilitation of transportation facilities</p>
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ENVIRONMENTAL MITIGATION

Mitigation of water pollution due to highway runoff

Reduction of vehicle-caused wildlife mortality

Vegetation management practices

Archaeological activities relating to impacts from a transportation project

PLAN INTEGRATION14. Is your project defined in a regional plan? Y or N If yes, please identify the plan:15. Is your project defined in a local plan? Y or N If yes, please identify the plan:16. Is your project part of a Governor's Initiative for the State of Colorado? Y or N If yes, please identify the initiative:**FUNDING**

PROJECT COST	Source	FY2022	FY2023	TOTAL (\$)
17. FEDERAL REQUEST	TA			
18. LOCAL MATCH				
19. OTHER FUNDING SECURED				
20. TOTAL PROJECT COST				

FHWA INACTIVE LIST21. Has your agency had any project or project phase listed on the FHWA inactive list? Y or N (Check One)
If yes, please provide details:**REQUIRED INFORMATION**

22. REQUIRED ATTACHMENTS – please label attachments accordingly

Attachment A – Description of proposed project

Attachment B – Maps, plans and photographs

Attachment C – Evidence of eligibility by project category

Attachment D – Benefits of proposed project

Attachment E – Environmental Review

Attachment F – Budget and implementation schedule signed by CDOT

Attachment G – Proposed maintenance plans, agreements, covenants

Attachment H – Resolutions of community financial support and letters of approval

Attachment I – Right-of-way or legal property description

SIGNATURE

20. AUTHORIZED AGENCY REPRESENTATIVE

TITLE

21. SIGNATURE

DATE