

Transportation Improvement Program Federal Project Application

Instructions

Complete the application in the space provided. Applicants are limited to the application form and 5 pages of attachments including map, crash data, resolution, project drawings, and other supporting documents. Submit the completed application and attachments to cravada@ecia.org. If you have questions contact Chandra Ravada at 563-556-4166.

General Information

Project Title: _____
Project Location and Limits: _____
Project Length (miles): _____ Federal Functional Class: _____
Agency: _____
Contact Person: _____
Telephone: _____ Email: _____
Certified Acceptance Date: _____

Project Screening Criteria

Check all that apply.

- Project is consistent with the DMATS, City or County five year program and local land use plans
- Project is federally classified as an Urban Collector/Rural Major Collector or above
- Project is an improvement project
- Project is a maintenance project
- Project meets the STP funding regulations
- Project is ready to proceed and has a reasonable timeline for implementation
- Input from safety teams has been taken into consideration while designing the project
- Input from Jule and/or RTA transit has been taken into consideration while designing the project
- Input from planning agencies has been taken into consideration while designing the project

Cost Summary

Project Phase	Start Date	STP Funds	Other Funds	Total Cost
Design				
Right of Way				
Construction				
Totals				
Overall Match Ratio:				

Estimated date of project completion (Month/Year) _____

Funding Partners

List all "Other Funds" contributing to the project: (Must match "Other Funds" from Cost Summary Table)

Funding Source	Amount

Project Information

1. Project Description - Explain the nature of the project, indicate major work involved, and briefly compare existing and proposed conditions (Attach 8.5" X 11" vicinity map):

2. Describe the work plan and schedule for project completion. Include current project status if the project is underway or has multiple phases:



3. Describe the performance measures and reporting process:



Mobility

Use DMATS data from the Congestion Management Process, Traffic Count Program, Regional Model, or attached documentation.

Existing facility type: _____ Improved facility type: _____

Existing peak hour direction traffic volume: _____

Existing speed: _____ Posted speed limit: _____

State truck classification: _____ Existing truck percentage (peak period): _____

What is the major concern for congestion management and how will it be addressed?



Will the proposed project include the following elements?
(Check all that apply)

- Signal integration/upgrade
- Provide bus stop pull-outs or shelters
- Separate bicycle and/or pedestrian roadways and sidewalks
- Increase freight carrying potential
- Improve access to meet ADA requirements
- Upgrade or improve any rail crossings
- Improve roadways adjacent to a barge terminal
- Smart transit management/transit signal priority
- Improve airport access
- Located on or improve a transit route


Explain:

Safety

Number of crashes in the past 5 years: _____

(Attach crash count and severity data)

Describe other safety benefits (transit, pedestrian, bicycle, intersection, and other):



Existing and Proposed Conditions:

	Existing Condition	Proposed Condition
Pavement width in feet		
Minimum road standard width		
Number of travel lanes		
Center turn lane/turn pockets	__ Yes	__ Yes
Shoulder width in feet		
Paved shoulder	__ Yes	__ Yes

What is the current surface type of the facility?

- Gravel
- Sealcoat, poor base
- Low type asphalt, good base
- Pavement, asphalt, portland

What is the current pavement condition of the roadway?



Economic Development

Freight Generators

- Improves existing access
- Creates new access

Describe how the project will improve access to existing employment, freight generators, distribution center, and other employers:

Financial/Implementation

Previously Completed Work - Prior to application submittal:
(check all that apply)

- | | |
|--|-------------|
| <input type="checkbox"/> Environmental permits approved | Date: _____ |
| <input type="checkbox"/> Final designs complete | Date: _____ |
| <input type="checkbox"/> Right of way acquisition completed/No RW needed | Date: _____ |

Sustainability/Air Quality

Check all that apply

- Reduces VMT
- Incorporates multimodal transportation
- Reduces travel time

Explain:



Other Information

You may use this space to provide any additional project information considered worth noting:

