

REGIONAL PLANNING AFFILIATION - REGION 18 2222 Cuming St., Omaha, NE PH: 402.444.6866 FAX: 402.342.0949 LONG DISTANCE: 1.800.827.6866

2022-2025 Regional Transportation Improvement Program **Surface Transportation Block Grant Application**

APPLICATION FOR REGION 18 TRANSPORTATION PROJECTS

Complete and return the original plus (1) copy to Travis Halm, Associate Planner, MAPA 2222 Cuming Street, Omaha NE 68102 or by e-mail to thalm@mapacog.org by 12:00 P.M. (Noon) 1/29/2021 (Please do not send any color maps or maps larger than 8.5" x 14" legal size paper) <u>Note</u>: Application not required for County Bridge Program Projects

1. Project Name: Click here to enter text.	Date: Click here to enter a date.			
2. Contact Person: Click here to enter text.	Phone Number: Click here to enter text.			
3. Address of Contact Person City	Count	zy Zip Code		
Click here to enter text. Click here to enter to	ext. Click here to e	nter text. Click here to enter text.		
4. Project Sponsor (lead entity if multi-jurisdictional)		Sponsor Signature		
Click here to enter text.				
5. Classification of Project: (check all that a	••••			
Highway	Transit	Transportation Alternatives		
Construction, reconstruction resurfacing, restoration, and rehabilitation	 Capital Costs for transit projects Surface Trans. 	Construction, planning, and design of on-road and off-road trail facilities for pedestrians, bicyclists, and other non-motorized forms of transportation, including sidewalks, bicycle		
□ Highway safety improvements	planning for transit	infrastructure, pedestrian and bicycle signals,		
Capital and operating costs for traffic	technology transfer	traffic calming techniques, lighting and other		
management and control	activities	safety-related infrastructure, and transportation projects to achieve compliance with the Americans		
□ Surface Transportation planning, a highway		with Disabilities Act of 1990		
And research and development				
Operational Improvements		Conversion and use of abandoned railroad corridors for trails for pedestrians, bicyclists, or other non-motorized transportation users		
Fringe and corridor parking facilities				
		\Box Construction of turnouts, overlooks, and viewing		
\Box Most transportation control measures in		areas		
The Clean Air Act				
Development and establishment of		Community improvement activities, including-		
Development and establishment of management system		 *inventory, control, or removal of outdoor advertising; 		
indiagement system		*historic preservation and rehabilitation of historic transportation facilities;		
		*vegetation management practices in transportation		
		rights-of-way to improve roadway safety, prevent		
		against invasive species, and provide erosion control; and		
		*archaeological activities relating to impacts from		
		Implementation of a transportation project eligible under title 23		
		Any environmental mitigation activity, including prevention and pollution abatement activities and		
		mitigation to-		
		*address stormwater management, control, and water pollution prevention and abatement related to highway construction or due to highway runoff, including activities described in sections 133(b)(11), 328(a), and 329 of title 23; o		
		*reduce vehicle-caused wildlife mortality or to restore and Maintain connectivity among terrestrial or aquatic habitats		
		maintain connectivity among terrestriar or aquatic fidbitats		
		\Box The recreational trails program under section 206 of title 23		
		Planning, designing, or constructing boulevards and other roadways largely in the right-of-way of the former right-of-wa of former Interstate System routes or other divided highways		

6. Please describe the proposed project and its regional significance within the space provided, including any bridges

Click here to enter text.

7. Please provide a brief description of the project area. Include a map with the area marked (please do not enclose and color maps or maps larger than 8.5" x 14" (legal size) paper

Click here to enter text.

8. Project Budget

EXPENSES		REVENUE			
ITEM COST		SOURCE	AMOUNT	%	
Land/Site Acquisition Costs Click here to enter text.		Fed.	Click here to enter text	Click here to enter text	
Construction/Materials Costs Click here to enter text.		Local	Click here to enter text	Click here to enter text	
Engineering/Consulting Costs	Click here to enter text.		Click here to enter text	Click here to enter text	
Capital Acquisition					
explain: Click here to enter text.			Click here to enter text	Click here to enter text	
Click here to enter text.			Click here to enter text	Click here to enter text	
Other (explain.) Click here to enter text.					
TOTAL COST	Click here to enter text.	TOTAL COST	Click here to enter text	Click here to enter text	

9. Work plan and schedule for project completion (please be sure to coincide the work plan with the correct federal fiscal year, the fiscal year for this cycle is Click here to enter text.) (Federal fiscal year is October 1-September 30)

Click here to enter text.			
10. Is there a need to coordinat	e with another entity in the programming and	l/or implementation	of this project?
□ Yes	□ No	/ - 1	
If yes, list other entities involved Click here to enter text.	d and describe the interaction needed and co	ordination to date.	
QUES	STIONS 11-13 ARE FOR HIGH	WAY PROJEC	TS ONLY
11. What is the Average Daily Traffic of the proposed project?		ADT	Click here to enter text
		Year of Count	Click here to enter text
12. What is the Federal Functional Classification(s) of the route within the proposed project? Has a change been requested? If yes, please describe.		Click here to enter text.	
🗆 Major Arterial 🔲 Minor Arte	erial 🛛 Major Collector 🗌 Minor Collector		
13. What are the basic roadway	and bridge sufficiency values (including pave	ment age) for the rou	ite within the proposed project?
Bridge Data (if applicable)			
 Structurally Deficient Functionally Obsolete Sufficiency Rating 	Click here to enter text.		

Click here to enter text.

PROJECT CHECKLIST

14. The following items are required		Note: Applications must specifically and directly answer each criterion within
	Project Description	the space provided to receive points. Pertinent attachments are allowed sur as maps, drawings, and/or photos as long as they are reproducible
	Project Location Map (reproducible)	
	Project Budget	
	A project work plan with a schedule	
	Motion/Letter of Support for Local Match	

Please fill in the following appropriate blanks:

We, the <u>Click here to enter text</u>. Support this application for <u>Click here to enter text</u>.

(city, County or State) (Project Name) by submitting this application, regional funding through the FAST Act (Transportation Alternatives or Surface Transportation Block Grant) (underline one) funds in the amount of \$<u>Click here to enter text.</u> are requested. This project has the support of local match

funding of \$Click here to enter text., which is Click here to enter text.% of the anticipated project costs.

BY: ______ Click here to enter text.

ATTEST: _____

Click here to enter text.