

CAPITAL GRANT APPLICATION FORM

Project Title:
Applicant (Jurisdiction):
Amount Requested:

APPLICATION CHECKLIST

- Ten hard copies and one CD of the complete Active Transportation application (including all attachments, clearly labeled).
 - Resolution authorizing the application, committing to provide matching funds, and authorizing staff to accept grant funds and execute the grant agreement, and documenting community support.
 - Format: narrative pages on 8.5x11 paper, all narrative text has at least 1 inch margins on all sides and no less than 10pt. font size (footers and headers exempt from the above requirements).
 - Baseline data collection included in Scope of Work, Schedule, and Budget.
 - Documentation of matching funds.
 - Vicinity maps showing project location and local/regional street, bicycle, transit, and highway facilities within and near the project area (may be printed on up to 11x17 paper).
 - Documentation of support for the project from community groups or individuals (recommended but not required).
 - Aerial photos and other photographs depicting existing conditions.
 - Feasibility study or project study report (include in CD ONLY, do NOT attach as hard copy).
- | | |
|----------------------------------------------------------|----------------------------------------------------------------------------------|
| <input type="checkbox"/> Completed application form: | <input type="checkbox"/> Quality of Project |
| <input type="checkbox"/> Project Summary | <input type="checkbox"/> Supportive Policies and Programs |
| <input type="checkbox"/> Project Location Map | <input type="checkbox"/> Scope of Work, Schedule, and Budget |
| <input type="checkbox"/> Project Costs & Funding Sources | <input type="checkbox"/> Engineer's Estimate |
| <input type="checkbox"/> Project Readiness | <input type="checkbox"/> Plans showing that minimum design standard has been met |
| <input type="checkbox"/> Project Connections and Safety | |

If any of the above are not included with the application by the deadline (with the exception of documentation of community support), the application will be deemed ineligible.

GRANTEE STATEMENTS

- The proposed grantee has read the standardized sample grant agreement
- The proposed grantee understands that SANDAG will not reimburse applicants for expenses incurred prior to execution of a grant agreement.
- If the SANDAG Board of Directors approves the grant, the proposed grantee agrees to sign and return the standardized grant agreement to SANDAG, without exceptions, within 45 days of receipt.
- The proposed grantee agrees to comply with SANDAG's Board Policy No. 035 *Competitive Grant Program Procedures*, which outlines "use-it-or-lose-it" project milestones and completion deadlines. Board Policy No. 035 is included in the standardized grant agreement as Attachment B, and is also on the SANDAG website at the following link: http://www.sandag.org/organization/about/pubs/policy_35.pdf
- The proposed grantee understands that all invoices must be accompanied by a written progress report of the charges for both requested reimbursement of grant and matching funds and submitted to SANDAG no less frequently than quarterly. Invoice and progress report templates are available on the SANDAG website at the following link: <http://www.sandag.org/grants/forms>
- The proposed grantee understands that upon approval of funding by the SANDAG Board of Directors, the applicant will provide a copy of their approved indirect cost rate audit or their proposed indirect cost rate methodology, if charging for overhead, to SANDAG for review and approval, which must occur prior to execution of the grant agreement.
- The proposed grantee understands that a resolution including the requirements of Board Policy No. 035, Section 4.1, must be submitted to SANDAG at least two weeks prior to the recommendation by the Transportation Committee of the list of grant projects to be considered eligible. SANDAG will provide applicants with advance notice of the Transportation Committee's anticipated meeting dates.

I certify that I agree with the above statements, have reviewed the Active Transportation Grant Program Guidelines, and that the information submitted in this application is accurate and in accordance with these guidelines.

I have the authorization to submit this grant on behalf of my organization.

Grantee Name (print or type)

Title

Grantee Signature (signature cannot be electronic)

Date (mm/dd/yyyy)

PROJECT SUMMARY

Applicant (Agency):
Project Title:

Project Area Limits: e.g. 4th St. between Laurel St. and Ash St., and 5th St. between Laurel St. and Ash St.

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Project Description: (6 lines max)

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Primary Contact Person <i>(Project Manager):</i>	
Title:	
Street Address:	City and Zip Code:
Phone:	E-mail Address:

Is this project in your agency's adopted capital improvement program? (Y/N) ____

Is the project part of a larger capital improvement project?

If so, describe the larger project in its entirety, as well as the funding sources:

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Active Transportation Grant Funds Request	\$
Matching Funds	\$
Total Project Cost	\$
<i>Total Project Cost = Active Transportation Grant Funds + Matching Funds</i>	

Can this project be broken into phases? (Y/N) ____ If yes, briefly list phased scope and costs:

(Please use separate page if necessary.)

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PROJECT LOCATION MAP

[INSERT PROJECT LOCATION MAP HERE]

PROJECT COSTS AND FUNDING

TOTAL ESTIMATED PROJECT COST:

Project Cost Estimates: On a separate sheet, provide an itemized engineer's cost estimate for all eligible expenses.

Summary of Cost Estimates

Category	Cost
Baseline Data Collection	
Preliminary Engineering or Planning	
Engineering	
Project Management	
Contract Engineering	
Environmental Clearance	
Right-of-Way Acquisition	
Final Design	
Construction	
Construction Management	
Construction Contract	
Total Cost	\$

Funding Sources:

Funding Source	Amount
Active Transportation Grant	
Other (specify source)	
Total Funding	\$

MINIMUM DESIGN STANDARDS & GUIDELINES

Clearly illustrate that the minimum design standard is being met. Plans provided must be actual cross-section drawings. (Provide photographs, if applicable) See Eligibility Criteria for more information on design standards and guidelines.

PROJECT READINESS

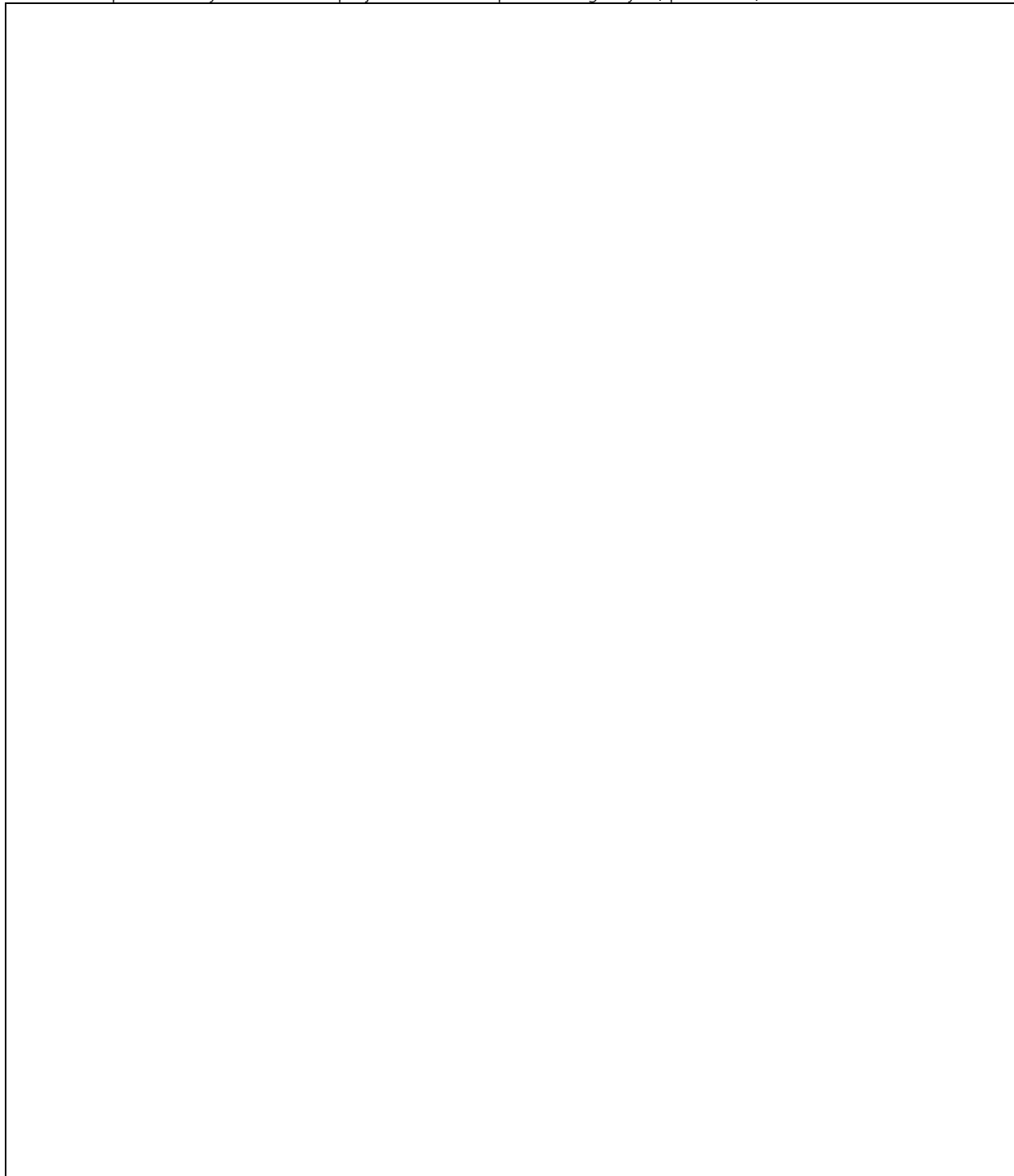
COMPLETION OF MAJOR MILESTONES

<u>Phase</u>	<u>Start Date</u>	<u>Completion Date</u>
1. Community Active Transportation Strategy/Neighborhood-level plan/corridor study		
2. Environmental Documentation/Certification		
3. Right-of-Way Acquisition		
4. Final Design		

PROJECT CONNECTIONS AND SAFETY

Connection to Regional Bicycle Network, Completes Connection in Local Bicycle Network, Completes Connection in Existing Pedestrian Network, Connection to Transit

Provide a map that clearly illustrates the project's relationship to existing bicycle, pedestrian, and transit facilities.



Safety Improvements and Overcoming Barriers (250 words max plus collision data attachments)

Describe, in bullets, the **specific** safety issues addressed by the project. Please attach documentation for safety and collision history. If collision data is provided, it must be annotated to highlight collisions applicable to the project and why they are relevant.

If applicable,(1) attach a map and/or photos indicating gaps and barriers, including changes in facility type where appropriate; (2) describe any locations within the project limits where barriers or hazardous conditions exist that prohibit safe access for bicyclists and pedestrians.

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Vehicle Speed Limit and Average Daily Traffic (ADT)

Street Name:	
Speed Limit:	ADT:

Street Name:	
Speed Limit:	ADT:

Street Name:	
Speed Limit:	ADT:

Street Name:	
Speed Limit:	ADT:

QUALITY OF PROJECT

For this section, please provide answers in bullet format. A short, concise narrative may be provided, if necessary, to describe the project.

Effectiveness and Comprehensiveness of Proposed Bicycle, Pedestrian, and/or Traffic Calming Measures, and Relationship to Program Objectives

Describe the need for traffic calming, pedestrian, and bicycle improvements in the project area, in **bullets**. (, lines max)

List the goals of the project, in **bullets**. (, lines max)

Describe the proposed improvements and why they are particularly suited to address the needs stated above, in **bullets**. (, lines max)

INNOVATION

Is this or will this project be an FHWA or State experimentation effort? Yes No If yes, evidence must be attached.

Does this project propose any solutions that are new to the region? If so, please describe, in **bullets**. (, lines max)

SUPPORTIVE POLICIES AND PROGRAMS

COMPLEMENTARY PROGRAMS

Describe in **bullets**, any programs that complement the proposed capital improvements: awareness, education efforts, increased enforcement, bicycle parking. Describe who will be responsible in implementing the programs and how they relate directly to the capital improvements. In order to receive points, programs must be included in project Scope of Work, Schedule, and Budget.

SUPPORTIVE POLICIES AND PLANS

Cite in **bullets**, any policy language in approved plans that support this project, or cite Community Active Transportation Strategy that was completed prior to this application.

Briefly describe any other relevant aspects of the project.

SCOPE OF WORK, SCHEDULE, AND BUDGET

In the section below, state the scope of work, schedule, budget, and project deliverables (including specific quantities and locations of improvements). Please note that if this project is funded, this will be added to the grant agreement and the grantee will be held to this scope, budget, and schedule, for the purpose of project oversight. Applicants are required to identify phasing for the project, in the event that the project cannot be fully funded by SANDAG.

Please print completed Excel scope of work, schedule, and budget sheet and attach to application.

RESOLUTION NO. Insert Text

AUTHORIZING THE FILING OF AN APPLICATION FOR
ACTIVE TRANSPORTATION GRANT PROGRAM FUNDS THROUGH
THE SAN DIEGO ASSOCIATION OF GOVERNMENTS
FOR PROJECT NAME, AND ACCEPTING THE TERMS OF THE
GRANT AGREEMENT.

WHEREAS, \$8.8 million of Transportation Development Act/TransNet funding for capital and non-capital active transportation projects is available to local jurisdictions and the County of San Diego from Fiscal Year 2011-2012; and

WHEREAS, NAME OF JURISDICTION wishes to receive \$Insert Amount in Active Transportation Grant funds for the following project: Project Name; and

WHEREAS, Name of Jurisdiction understands that the Active Transportation Grant Program funding is fixed at the programmed amount, and therefore project cost increases that exceed the grant awarded will be the sole responsibility of the grantee; and

WHEREAS, Name of Organization agrees to complete the proposed grant project within a timely matter and in compliance with Board Policy No. 035.

NOW, THEREFORE, BE IT RESOLVED by Governing Board Name that Name of Jurisdiction is authorized to submit an application to SANDAG for Active Transportation Grant Program funding in the amount of \$Insert Amount for Project Name; and

BE IT FURTHER RESOLVED that, if a grant award is made by SANDAG to fund Project Name, Governing Board commits to providing \$Insert Amount Even if Zero of matching funds and/or in-kind contributions and authorizes Name of Jurisdiction staff to accept the grant funds, execute the attached grant agreement with SANDAG with no exceptions, and complete the Project.

PASSED AND ADOPTED by Name of Jurisdiction's Governing Board this Insert Date of Insert Month and Year.

Ayes: _____
Nayes: _____
Absent/Abstention: _____

Signature of Governing Board's Chair/Director

ATTEST:

Clerk or Secretary of the Governing Board of Name of Organization

ATTACHMENT: Active Transportation Grant Program Grant Agreement with SANDAG