|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lead Agency or Organization:** | | | | |
| **Mailing Address:** | | | | **Contact:** |
| **City:** | **State:** | **Zip:** | | **Title:** |
| **Phone:** | | | | |
| **E-mail:** | | | **Date:** | |

# Project Information

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| **Project Name:** |
| **Project Type (check one)**  Bike & Ped\_\_\_ Roads\_\_\_ Transit\_\_\_ Other\_\_\_  **Year Requesting Funds:**  FFY 15/16 \_\_\_ FFY 16/17\_\_\_ FFY 17/18\_\_\_  \*Agencies applying for 15/16 funds will need to obligate funds by August 2016.  **Phase of Work**  Preliminary Engineering \_\_\_ Right of Way\_\_\_ Construction\_\_\_ |
| **Project Description and Summary** |
| **Project Location** |
| **Work Plan and Timeline** |
| **Project Status and Delivery Plan**  Provide the current status of the project. Identify the stage of work the project is in: Environmental Review, Design, or Right of Way, not started, in progress, completed? Provide an overview of the delivery plan (public outreach, board support, funding timelines, etc.). |
| **Available Funding**  Provide the other dedicated/secured funding sources to complete the project and the capacity to maintain the project in the future. |
| **Project Consistency /Conformity**  Is the project consistent with local, regional, or statewide plans (Regional Transportation Plan, Active Transportation Plan, EIP, Area Plan, Etc.)? |
| **Delivery Experience/Capacity**  Describe experience delivering similar projects and staff resource capacity for delivering this project. |

# Project Funding Plan

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| --- | --- | --- | --- |
|  | **FFY 15/16** | **FFY 16/17** | **FFY 17/18** |
| **Requested STBG Amount** |  |  |  |
| **California or Nevada STBG** |  |  |  |
| **Matching/Other Funds** |  |  |  |
| **Total Project Cost** |  |  |  |
| **Phase of Work (PE, ROW, CON)** |  |  |  |