**APPLICATION INSTRUCTIONS**

When completing the application, applicants shall follow these guidelines:

* Applications will be accepted for the following counties: Cabell and Wayne, West Virginia; Boyd and Greenup, Kentucky and Lawrence County, Ohio.
* Complete the application in its entirety and submit application postmarked on or before the advertised deadline.
* Project description should provide a clear, concise and detailed representation of the project specifics including project termini (i.e. beginning and ending points) referencing on which side of the street/roadway work will occur, etc.
* Do not use “see attached” as an answer to any question in the application. If you require additional space, please continue on an attached separate 8 ½ x 11-inch sheet of paper with the Heading, Section and Item Number at the top of each page.

Mail applications to: Christopher M. Chiles, Executive Director

 KYVOA Interstate Planning Commission

 400 Third Avenue

 Huntington, WV 25701

FY 2017 Application Dates

|  |  |  |
| --- | --- | --- |
|  | **Round 3** | **Round 4\*** |
| **Application Dates** | August 15, 2016 through October 31, 2016 | February 6, 2017 through April 28, 2017 |
| **Intent to Apply Deadline** | August 31, 2016 | March 17, 2197 |
| **Workshop** | September 1, 2016 | To Be Determined |
| **Application Deadline** | October 31, 2016 | **April 28, 2017** |

\*Round 4 will occur following Round 3 project selection and only if funding is available by each state’s federally predetermined suballocated allowance.

**REQUIRED ATTACHMENTS FOR APPLICATION**

**Attachment A – Location Map(s) or Proposed Site(s)**

* An 8 1/2“x 11-inch location map identifying the site in proximity to federal, state or local highways. An aerial map is preferred.
* If the project involves acquiring real-property interest, include:
	+ Current ownership of the property.
	+ Plat or property sketch.
	+ Type of title being acquired.
	+ Identification of any improvements.
	+ Size of tract or size or area acquired.
	+ Parent tract if it is a partial acquisition.

**Attachment B – Detailed Engineer’s Estimate**

An engineer’s estimate must be included with the application. The estimate will be used to assess the project cost.

**Attachment C – Resolution and/or Letter of Match Commitment**

A 20% match is required for all STBG and STBG TA set-aside projects. A Resolution and/or signed letter of commitment from the signature authority (Judge/Executive, Mayor, etc.) committing the match for this project must be included. Please keep in mind there is extensive documentation required when using in-kind match and the project sponsor will be required to provide this as part of the reimbursement process. If cash will be used for the match, the letter should indicate that the Local Public Agency (LPA) has the funds available to use as soon as the project is approved to commence.

***SECTION 1: GENERAL INFORMATION***

***SECTION 1.1: APPLICANT INFORMATION***

|  |  |  |
| --- | --- | --- |
| **ORGANIZATION/AGENCY NAME**      | **PROJECT LOCATION(CITY/COUNTY/TOWNSHIP)**      | **HIGHWAY DISTRICT**      |
| **ADDRESS**      | **CITY**      | **STATE**       |
| **ZIP**      | **PHONE**      | **FAX**      |
| **POINT OF CONTACT** (The person designated as the point of contact will be the contact for the life of the project and should be able to answer any questions regarding this project. All correspondence and other documents from KYOVA, WVDOH, KYTC, ODOT, FHWA, FTA, etc., will be sent to this person. Applicant will be responsible for notifying all agencies if the point of contact for the project changes.) |
| **CONTACT NAME:**       |  **CONTACT E-MAIL**       |
| **PROJECT NAME OR LOCATION**      |
| **WHICH STATE FUNDS ARE YOU APPLYING? [ ]  West Virginia [ ]  Kentucky [ ]  Ohio**  |
| ***SECTION 1.2: KYOVA PLANNING DOCUMENTS*** *(2 points possible)* |
| 1. **Is the project included in KYOVA’s current Metropolitan Transportation Plan (MTP)? [ ]  Yes** *(1 point)* **[ ]  No**
 |
|  **If yes, please identify the location (page number) and project identification number. Page # :      MTP Project ID:** |
| 1. **Is the project included in KYOVA’s current Transportation Improvement Program (TIP)? [ ]  Yes** *(1 point)* **[ ]  No**
 |
|  **If yes, please identify the location (page number) and project identification number. Page # :**      **TIP Project ID:**       |

***SECTION 2: FUNDING PROGRAM***

Please mark the funding category. Select only one.

|  |
| --- |
| **[ ]  Surface Transportation Block Grant (STBG) Program [ ]  Transportation Alternatives (STBG Set-Aside Program)** |

***SECTION 3: DESIGN/CONSTRUCTION*** *(3 points)*

|  |  |  |
| --- | --- | --- |
| **Is this a Design/Planning Study involving no construction?**  ***If no, please complete the STBG/TA Set-Aside Construction Application.*** |  **[ ]  Yes** | **[ ]  No** |
| **Has a Design/Planning Study been completed for this project? If yes, please site date and title. A copy may be requested at time of project review.**  |  **[ ]  Yes** | **[ ]  No** |
| **Date:**       **Title of Design/Planning Study:**       |

***SECTION 4: PROJECT DESCRIPTION (10 points possible)***

|  |
| --- |
| **Please provide a detailed description of the project. Include targeted letting dates, purpose and need, any work that has been completed to date (such as studies regarding travel or other impacts of the project, preliminary engineering/design, meeting with public officials, project cost incurred to date, etc.). List all local government entities, contacts and civic groups that have been involved in the development of the project. If you require additional space for the Project Description please attach separate sheet labeled with Section Number and Heading.** |
| Click or tap here to enter text.  |

***SECTION 5: BUDGET INFORMATION*** *(20 points possible)*

***SECTION 5A: PROJECTED BUDGET*** *(10 points)*

List each phase and description of proposed project, estimated completion dates and project cost.

|  |  |  |  |
| --- | --- | --- | --- |
| **PHASE TYPE/ACTIVITY** | **PROJECT PHASE/ACTIVITY DESCRIPTION** | **ESTIMATED COMPLETION DATE** | **COST** |
| Preliminary Engineering/Detailed Environmental |       |       |       |
| Design |       |       |       |
| Design/Build Project |  |       |       |
| Right of Way (ROW) |       |       |       |
| Utilities |       |       |       |
| Construction |       |       |       |
| Construction Engineering/Inspection |       |       |       |
| Contingency (\_\_\_\_\_)% |       |       |       |
| Other |       |       |       |
| Other |       |       |       |
|  **TOTAL FUNDS REQUESTED** | **$0.00** |

***SECTION 5B: LOCAL PUBLIC AGENCY MATCH (HIGHWAY AND TRANSIT PROJECTS)***

*(10 points possible: 5 points for 20% match and additional 5 points for over 20% match)*

Projects require a 20 percent minimum match. Please provide source and amount.

|  |  |
| --- | --- |
| **ITEM/SOURCE** | **MATCH AMOUNT** |
|       |       |
|       |       |
|       |       |
|       |       |
|  **TOTAL LPA MATCH** | **$0.00** |

***SECTION 5C: RESOLUTION AND/OR LETTER OF COMMITTMENT***

Please attach a Resolution or Letter of Commitment signed by the agency’s Chief Official stating they support the project (include brief project description, dollars committed with source and timeline for project). If not included, the application may not be processed.

***SECTION 6: FUTURE FUNDING*** *(15 points possible)*

|  |
| --- |
| 1. **Will the funds requested in this application fully fund the project? [ ]  Yes [ ]  No** *(5 points possible)*
 |
| **If no, provide the gap amount and how the difference will be covered.**Click or tap here to enter text. |
| 1. **What is the status of future financing to maintain and/or continue the project after the STBG Program funds are spent and the project is complete?** *(10 points possible)*
 |
| **[ ]  Unknown/Not identified**  **(0 points)** | **[ ]  Good potential for future funding** *(5 points possible)* | **[ ]  Future financing committed** *(10 points possible)* |
| **Please explain future financing commitment(s) and how they will relate to the project.**Click or tap here to enter text. |

***SECTION 7: CONNECTIVITY*** *(20 points possible)*

|  |
| --- |
| **Is the planning study/design for Pedestrians, Bicycles or other non-motorized form of transportation and/or facilities?** *(10 points possible)* |
|  **[ ]  Yes**  |  **[ ]  No**  |
| **If yes, please explain.**Click or tap here to enter text. |
| **Does the project improve non-motorized connectivity?** *(10 points possible)* |
|  **[ ]  Yes** |  **[ ]  No** |
| **Please explain how the project improves or relates to non-motorized connectivity.**Click or tap here to enter text. |

***SECTION 8: PUBLIC INVOLVEMENT AND COMMUNITY PLANNING*** *(25 points possible)*

|  |
| --- |
| **Is the project part of an existing or proposed transportation community development plan?** *(10 points possible)* |
|  **[ ]  Yes** |  **[ ]  No** |
| **Please explain.**Click or tap here to enter text. |
| **Describe how the local community has been and will be involved in the planning study/design project. List key stakeholders who are already participating and those who will be contacted. If there is any opposition to this study, please describe and provide how it will be negotiated during the planning study/design phase.** *(10 points possible)* |
| Click or tap here to enter text. |
| **How does the project improve motorized safety or address specific safety issues? Include any safety statistics to support your project. Also illustrate how the project design maximizes non-motorized safety. Examples include the inclusion of bulb outs, improved signage and signals and other applicable improvements.** *(5 points possible)* |
| Click or tap here to enter text. |

***SECTION 9: ADA COMPLIANCE*** *(5 points possible)*

|  |
| --- |
| **Does the proposed project result in changes that achieve compliance with the Americans with Disabilities Act of 1990?**  |
|  [ ]  Yes |  [ ]  No |
| Please explain.Click or tap here to enter text. |

**To the best of my knowledge, the information within this application (Surface Transportation Block Grant/TA Set-Aside Non-Infrastructure/Design and Planning Program) is accurate; and as the applicant I have authority to pursue funding opportunities for**  **(agency).**

**Chief Official/Title:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**