



Transportation Project Sponsors

1. Project Sponsor (must be a public agency)–REQUIRED

Organization Name: <input type="text"/>	
Contact Person Name: <input type="text"/>	Title: <input type="text"/>
Street Address: <input type="text"/>	Phone: <input type="text"/>
City, State Zip: <input type="text"/>	
E-mail: <input type="text"/>	

2. Co-Sponsor(s)

List the organization names for any Co-Sponsors of this project:

Transportation Project Information

3. Project Name–REQUIRED

Project Name:

4. Project Budget Summary - This table will automatically fill in.

	Project Funds	% of Project Costs
Total Costs		
Non-Eligible Costs		
Total Transportation Project Cost		
Matching Funds		
Requested Funds		

5. Provide a brief summary of the project (max 800 characters)–REQUIRED:

6. Is this project a continuation of a previous Statewide Transportation Improvement Program (STIP) Project?

- Yes No



MULTIMODAL TRANSPORTATION PROGRAM PROJECT APPLICATION

If yes, describe the status of the previous STIP project.

7. Does this project complement or enhance an existing or planned STIP project? For example, does it provide a more complete solution for an existing project or is it intended to work with another planned project, including a "Fix-It" STIP project?

- Yes
 No

If yes, describe the relationship of this proposed project to the other, including planned timing of both projects.

8. Project Problem Statement–REQUIRED

Provide a paragraph explaining the problem or transportation need the project will address:

9. Transportation Project Location–REQUIRED

City: <input style="width: 90%;" type="text"/>	County: <input style="width: 90%;" type="text"/>
MPO: <input style="width: 90%;" type="text"/>	Special District: <input style="width: 90%;" type="text"/>

Project Location Detail: (include as appropriate: road and milepost range, rail line and milepost range, GPS coordinates, bus route and stops, bike path or multipurpose trail locations, sidewalk locations, or other location detail)

10. Maps and Plans (Project Site and Vicinity Maps are required for all construction projects. Include other applicable maps or drawings, if available.)

<input type="radio"/> Attached/Upload <input type="radio"/> Not Applicable	Vicinity Map (8.5x11) (may be inset on site map page)
<input type="radio"/> Attached/Upload <input type="radio"/> Not Applicable	Site map/air photo (showing existing site) (8.5x11)



MULTIMODAL TRANSPORTATION PROGRAM PROJECT APPLICATION

<input type="radio"/> Attached/Upload <input type="radio"/> Not Applicable	Site map (showing proposed construction area clearly marked) (8.5x11)
<input type="radio"/> Attached/Upload <input type="radio"/> Not Applicable	Typical Cross Section Drawings (showing proposed construction funded by the requested funds clearly marked) (8.5x11)

11. Project Description–REQUIRED

Clearly describe the work to be funded and describe what will be built, any services that will be provided, what equipment will be purchased, or project planning or environmental document efforts that will be paid for with Requested Funds. Include whether Practical Design considerations have been applied to the proposed project. Identify if the project can be completed in phases, and whether the project or phase will provide a complete, useful product or service. (Maximum 4000 characters)

12. Primary Project Mode(s)

<input type="checkbox"/> Passenger Rail	<input type="checkbox"/> Light Rail	<input type="checkbox"/> Bus/Transit
<input type="checkbox"/> Pedestrian	<input type="checkbox"/> Bike	<input type="checkbox"/> Highway/Road
<input type="checkbox"/> Other:		

13. Project Activities

<input type="checkbox"/> Infrastructure Engineering, Design, or Construction	<input type="checkbox"/> Project Planning and Development	<input type="checkbox"/> Operations/Service Delivery
<input type="checkbox"/> Capital Equipment Purchases	<input type="checkbox"/> Transportation Demand Management	<input type="checkbox"/> Other

Timetable and Readiness Information

14. Indicate anticipated timing for the following activities, as applicable. Provide a date, if known, or year–REQUIRED.



MULTIMODAL TRANSPORTATION PROGRAM PROJECT APPLICATION

Anticipated Dates	Activity
	Requested STIP Funding Year (e.g. 2016, 2017, 2018) - REQUIRED
	Bid Let Date
	Construction Contract Award
	Construction Complete
	Capital Equipment Purchase
	Operations/Service Begin
	Other Major Milestone:
	Project Completion/End of Activities funded through this request - REQUIRED

15. Is the proposed project consistent with adopted plans? (Plans may include, for example, transportation plans, mode plans such as bike/ped or transit plans, economic development plans, comprehensive plans, corridor plans or facility plans.)–REQUIRED

- Yes
 No

Describe how the proposed project is consistent with adopted plans. List plans that include the project (with page numbers if possible) or describe how the project meets plan intent. If the project is not consistent, explain how and when plans will be amended to include the project.

16. Is the proposed Transportation Project consistent with Major Improvement Policies including OTP Strategy 1.1.4 and OHP Action 1G.1?–REQUIRED

- Yes
 No

Describe how the proposed investment is consistent with OTP Strategy 1.1 and for highway projects, OHP Action 1G.1. If the project corresponds to a later priority in these strategies, describe how higher priority solutions have already been tried or why they are not applicable or not appropriate to the location.

Project Benefit Information

Questions 17 through 26: Describe how the proposed solution will help achieve the outcomes listed below. Describe the benefits that the proposed solution is expected to achieve and provide documentation of those benefits where available, such as summaries of data analysis or modeling results, or letters of commitment from participants or employers. Where appropriate, also include in the description whether the proposal will mitigate or prevent a negative impact to the desired outcome.

This information and information throughout the application will be used as input to the STIP decision process. It is not expected that every solution will help achieve every benefit. Different types of solutions are likely to have different kinds of benefits and no type of solution or benefit is assumed to be more important than others. Please provide a realistic description of expected benefits of the proposed solution and feel free to use N/A where the benefit or outcome listed does not apply to the proposal.

17. Benefits to State-Owned Facilities

Outcome sought: preserve public investment by maintaining efficient operation of state-owned highways and other facilities through operational improvements, local connectivity, congestion-reducing projects and activities, etc.

For example, will the solution:

- Provide an alternative to travel on state owned facilities?
- Cost less than a state facility improvement with equal benefits?
- Include local efforts to protect the investment such as an Interchange Area Management Plan?
- Plan for or contribute to development of a seamless multimodal transportation system?
- Complete or extend a critical system or modal link?

18. Mobility

Outcome sought: provide mobility for all transportation system users and a balanced, efficient, cost-effective and integrated multimodal transportation system.

For example, will the solution:

- Improve or better integrate passenger or freight facilities and connections, including multimodal connections, to expedite travel and provide travel options?
- Improve or provide a critical link in the transportation system or connection between modes for travelers or goods?

19. Accessibility

Outcome sought: ensure appropriate access to all areas with connectivity among modes and places and enable travelers and shippers to reach and use various modes with ease.

For example, will the solution:

- Improve connections within residential areas and/or to schools, services, transit stops, activity centers and open spaces, such as by filling a gap in bicycle, pedestrian, or transit facilities?
- Improve or expand access to employers, businesses, labor sources, goods or services?
- Plan for or contribute to expanding transportation choices for all Oregonians?

20. Economic Vitality

Outcome sought: expand and diversify Oregon's economy by efficiently transporting people, goods, services and information.

For example, will the solution:

- Support, preserve, or create long-term jobs and capital investment? Will it do so in an economically distressed area?
- Enhance opportunities for tourism and recreation?
- Plan for or contribute to linking workers to jobs?

21. Environmental Stewardship

Outcome sought: provide an environmentally responsible transportation system that does not compromise the ability of future generations to meet their needs and encourage conservation of natural resources.

For example, will the solution:

- Use design, materials or techniques that will more than meet minimum environmental requirements or mitigate an existing environmental problem in the area?
- Help meet air or water quality, energy or natural resource conservation, greenhouse gas reduction or similar goals?
- Plan for or contribute to the use of sustainable energy sources for transportation?

22. Land Use and Growth Management

Outcome sought: support existing land use plans and encourage development of compact communities and neighborhoods that integrate land uses to help make short trips, transit, walking and biking feasible.

For example, will the solution plan for or contribute to:

- Efficient development and use of land as designated by comprehensive or other land use plans?
- Community revitalization including downtowns, economic centers and main streets?
- Compact urban development and mixed land uses?

23. Livability

Outcome sought: promote solutions that fit the community and physical setting, enable healthy communities and serve and respond to the scenic, aesthetic, historic, cultural and environmental resources.

For example, will the solution:

- Enhance or serve unique characteristics of the community?
- Use context sensitive principles in design and minimize impacts on the built and natural environment?
- Encourage a healthy lifestyle and enable active transportation by enhancing biking and walking networks and connections to community destinations or public transit stops or stations?
- Include elements that will make the facility or service more attractive, enjoyable, comfortable or convenient for potential users?

24. Safety and Security

Outcome sought: Investment improves the safety and security of the transportation system and takes into account the needs of potential users.

For example, will the solution:

- Improve safety by using designs or techniques that exceed minimum requirements for safety and are likely to reduce the frequency or severity of crashes?
- Help reduce crashes involving vulnerable road users such as bicyclists and pedestrians?
- Improve the ability to respond to an emergency and quickly recover use of the facility or service?

25. Equity

Outcome sought: promote a transportation system with multiple travel choices for potential users and fairly share benefits and burdens among Oregonians.

For example, will the solution:

- Benefit a large segment of the community?
- Benefit one or more transportation disadvantaged populations?
- Improve environmental justice or economic equity of the community or region?

26. Funding and Finance

Outcome sought: investment uses funding structures that will support a viable transportation system and are fair and fiscally responsible.

For example, will the solution:

- Have ongoing funding available for operations and maintenance?
- Support the continued use of prior investments or reduce the need for future investments?

Budget Information



MULTIMODAL TRANSPORTATION PROGRAM PROJECT APPLICATION

27. Estimated Project Costs–REQUIRED

List estimated costs for the various activities listed below, as applicable to proposed project. Shaded fields are automatically calculated.

	Enter Values in this Column	Total Column
Project Administration		
Staff Costs (for Service/Educational Projects)		
Project development and PE		
Environmental Work		
Coordination and Outreach		
Leased Space		
Building purchase and/or Right of Way		
Capital Equipment		
Non-Construction Project Costs Total		
Utility Relocation		
Construction		
Construction Project Costs Total		
Total Eligible Project Cost		
Non-Eligible Costs (other project non-transportation expenditures, e.g. un-reimbursable utilities)		

28. Project Participants and Contributions–REQUIRED

List expected project participants and their contributions in the table below. Begin with the amount contributed by the Sponsor and include contributions from Project Co-Sponsor and other participants, if applicable. Sponsor and participant contributions must add to at least 10.27% of Total Transportation Project Costs. This is the amount of matching funds typically required for most federal funding programs. The specific amount of matching funds required for the proposed project may be more or less than 10.27%, depending on its funding eligibility. Specific match requirements will be determined during application review.



MULTIMODAL TRANSPORTATION PROGRAM PROJECT APPLICATION

Participant Role	Participant Name	Project Funds Contribution	Percent of Transportation Project Total Cost
Sponsor			
Co-Sponsor			
Participant			
Participant			
Total			

If you have more co-sponsors and participants than lines in the table above, list their names and contribution amounts in the box below and enter the totals of Co-Sponsor and Participant contributions in the appropriate spaces in the table above.



Submittal Approval

29. Project Sponsor Signature Authority Information–REQUIRED

The Authorizing Authority identified below approved the submittal of this application on behalf of the Project Sponsor. Project sponsors other than the Oregon Department of Transportation will be required to sign an Intergovernmental Agreement (IGA) with ODOT prior to receiving any project funds. The IGA with the state will detail the requirements for the use and management of requested funds.

Authorizing Authority Name:

Authorizing Authority Title:

Electronic submittal was approved by the identified authorizing individual. No signature needed if checked.

Signature: Date:

30. Co-Sponsor Signature Authority Information

The signature below demonstrates support of this application on behalf of the Co-Sponsor:

Authorizing Authority Name:

Authorizing Authority Title:

Signature: Date:

If you have more than one Co-Sponsor, list further Co-Sponsors' submittal authority names and titles in the box below and ask those named to provide their signatures and the date signed by their names.

Electronic submittal was approved by the identified authorizing individuals. No signatures needed if checked.