

# 2020 Regional Transportation Alternatives (TA) Grant Application



<b>1. PROJECT TITLE</b>			
If the project is programmed in the State Transportation Improvement Program, please use the same title.			
<b>2. LEAD AGENCY</b>			
Lead Agency			
Contact Person			
Phone Number		Email Address	
<b>3. PROJECT CO-SPONSOR</b> (Leave blank if not applicable)			
Co-Sponsor Agency			
Contact Person			
Phone Number		Email Address	
<b>4. PROJECT OVERVIEW</b>			
Provide a brief description of the proposal. State the problem and need, how the proposal addresses the need, and the anticipated benefits. (~150 words)			
<b>5. TRANSPORTATION ALTERNATIVES PROJECT TYPE</b> (Select the single most applicable type)			
a. Safe Routes to School project or program			<input type="checkbox"/>
b. Provision of facilities for pedestrians and/or bicycles			<input type="checkbox"/>
c. Preservation and/or conversion of abandoned railway corridors for bike/pedestrian trails			<input type="checkbox"/>
d. Construction of turnouts, overlooks, and viewing areas			<input type="checkbox"/>
e. Recreational Trails Program (Section 206 of title 23)			<input type="checkbox"/>
f. Inventory, control, and removal of outdoor advertising			<input type="checkbox"/>
g. Preservation & rehabilitation of historic transportation buildings, structures, facilities			<input type="checkbox"/>
h. Vegetation management in right-of-way to control invasive species or control erosion			<input type="checkbox"/>
i. Archaeological activities related to impacts from transportation projects			<input type="checkbox"/>
j. Environmental mitigation to address stormwater associated with highway runoff			<input type="checkbox"/>
k. Environmental mitigation to reduce wildlife mortality or improve habitat connectivity			<input type="checkbox"/>
l. Other _____			

<b>6. SUMMARY DETAILS</b> (complete the section that best matches your project type)				
CONSTRUCTION PROJECT				
Project Location				
Limits				
Project Length				
ALL OTHER PROJECT TYPES				
Project Location				
Duration of Project				
<b>7. PROPOSAL PRIORITY</b> (If submitting more than one proposal for TA funds, indicate the priority of this proposal compared to others)				
<input type="checkbox"/> 1		<input type="checkbox"/> 2		<input type="checkbox"/> 3
<input type="checkbox"/> Check if this project is a contingency proposal				
<b>8. YEAR OF OBLIGATION</b> (Select the preferred year the phase will obligate)				<b>9. ADVANCE CONSTRUCTION (AC)*</b>
Year	Study/Program	PE	ROW	CN
2021				
2022				
2023				
2024				
2025				
Are you able to obligate this project using Advance Construction? <input type="checkbox"/> Yes <input type="checkbox"/> No Use the space below to provide any relevant information on obligation, AC timing, or preferences.				
*AC allows applicants to obligate a project prior to available funding for reimbursement of eligible expenses. Selecting the AC option does not guarantee this option will be available. AC is evaluated on a case by case basis.				
<b>9. FUNDS FOR PROJECT COMPLETION</b>				
9a. Has this project previously received federal funding through TRPC or other grant programs? <input type="checkbox"/> Yes <input type="checkbox"/> No				
9b. If Yes, please indicate which phases were completed with previous grant awards. <input type="checkbox"/> Planning/Study/Program <input type="checkbox"/> Preliminary Engineering <input type="checkbox"/> Right-of-Way <input type="checkbox"/> Other				
9c. Will the requested grant funds allow the applicant to successfully complete the project? <input type="checkbox"/> Yes <input type="checkbox"/> Other phases will require additional funding <input type="checkbox"/> Funding supports an ongoing program				

10. PROJECT PHASING AND COSTS			
Select the applicable project phases and specify their costs for this proposal.			Cost
CONSTRUCTION	Preliminary Engineering/Design	<input type="checkbox"/>	\$
	Right-of-Way		\$
	Construction	<input type="checkbox"/>	\$
PROGRAMS AND OTHER PROJECTS	Planning, Study, or Program/Services	<input type="checkbox"/>	\$
Total Project cost (Sum of all phases identified above)			\$
11. TA FUNDING REQUEST AND MATCHING REVENUES			
*Applicants must provide a minimum 13.5% non-federal share to federal share. Federal share cannot exceed 86.5% of total project cost. See example on the right.			Non-federal share: \$13,500 Federal TA Funds: <u>\$86,500</u> Total Project Cost: \$100,000
Local funding or other sources			\$
State funding			\$
Federal TA Request			\$
Total Project Revenue			\$
12. MATCHING FUND DETAILS			
12a. Please itemize the source, status, and amount of all matching funds.			
Source of Funds	Current Status (secure or unsecure)	Amount	
		\$	
		\$	
		\$	
		\$	
12b. Do any matching funds pose limitations on the timing of project obligation? <input type="checkbox"/> Yes; <input type="checkbox"/> No If yes, please provide comments below.			
Comments on matching fund limitations, if applicable (~150 words).			

<b>13. CONSTRUCTION AND RIGHT-OF-WAY PROJECT READINESS</b>	
<b>13a. DESIGN COMPLETENESS</b> (enter completed or target completion dates)	
Preliminary Engineering	
NEPA Approval	
<b>13b. RIGHT-OF-WAY COMPLETENESS</b> (enter completed or target completion dates). Use the space below to provide additional details, if necessary.	
<input type="checkbox"/> Right-of-Way is not required	
Right-of-Way acquisition	
Relocation Plan	
Approved Right-of-Way Plan	
Right-of-Way Cost Estimate or True Cost Estimate	
Use the space below to provide any relevant right-of-way information (~150 words).	
<b>14. PROJECT DESCRIPTION DETAILS</b>	
<b>14a. PROJECT NEED</b> — For all project types, describe the need and current conditions or deficiencies to be addressed. (~300 words).	

14b. SCOPE OF WORK— Succinctly describe the overall scope of the project: **1) Construction projects—** include all the types of transportation facilities and infrastructure the project will address and the proposed phase deliverables and the anticipated deliverables when fully completed; **2) For programs,** describe the type of services or programs that will be delivered (~300 words).

**15. ENVIRONMENTAL SUSTAINABILITY**

Skip this question if not applicable.

15a. DESIGN ELEMENTS— For construction projects, does this project mitigate or minimize the environmental impacts beyond current design standards? Check all that apply. Use the 'Other' box below to provide additional details, if necessary.

- Low Impact Development Best Management Practices
- Use of drought resistant vegetation/landscaping
- Includes terrestrial or stream or wetland habitat restoration (such as fish passage barrier removal)
- Flood mitigation
- Use of LED lighting
- Use of Solar-powered lighting or signage
- Other (describe other sustainability benefits or use the space below to provide additional details for any elements checked above ~150 words).

**15b. GREENHOUSE GAS EMISSIONS REDUCTION**— After application submission, TRPC will assist applicants with calculating the estimated reduction in emissions for each source shown below.

Source	Estimated reduction expressed in average kg/day*
Particulate Matter 2.5	
Particulate Matter 10	
Carbon dioxide	
Ozone	

\*Applicants may be required to provide TRPC data to perform the analysis, if applicable.

**16. BICYCLE AND PEDESTRIAN MOBILITY AND CONNECTIVITY**

Skip question 17 if your project doesn't address bicycle or pedestrian elements.

**16a. BICYCLE AND PEDESTRIAN MOBILITY**— Describe how the project will improve access for bicycle and/or pedestrian transportation. (~150 words).

**16b. NETWORK CONNECTIVITY**—Detail how the project will provide greater network connectivity or services that connect people by bicycling and/or walking to schools, parks, commercial centers, and other desirable community destinations. (~150 words)

**16c. REGIONAL TRAIL SYSTEM ADVANCEMENT**— Describe how the project advances regional shared-use path goals and objectives included in the Thurston Regional Trails Plan (~150 words).

<b>17. SUSTAINABLE THURSTON</b>			
<i>Sustainable Thurston Water Quality Target</i> —Protect small stream basins that are currently ranked as “Intact” or “Sensitive.” Improve and restore as many as possible “Impacted” stream basins.			
Refer to the Thurston County Basins Current Conditions Assessment Map for question 17a: <a href="https://www.trpc.org/881/Application-Materials">https://www.trpc.org/881/Application-Materials</a>			
17a. STREAM BASIN LOCATION—Is the project located within a stream basin ranked as “intact,” “sensitive,” or “impacted?” <input type="checkbox"/> Yes <input type="checkbox"/> No			
17b. STORMWATER MANAGEMENT STRATEGY—If applicable, describe how the project supports Sustainable Thurston’s priority goal to protect the Puget Sound, local streams, lakes, and groundwater through stormwater management activities. (~150 words)			
17c. FISH AND WILDLIFE MITIGATION— If applicable, describe how the project reduces wildlife mortality and improves habitat connectivity. (~150 words)			
18. <b>EQUITY</b> — Based on the project location*, refer to the TRPC Title VI maps to enter values for each of the criteria shown below. Link to maps: <a href="https://www.trpc.org/881/Application-Materials">https://www.trpc.org/881/Application-Materials</a>			
Age 65 or Older	Limited English Proficiency	Minority Population	Poverty Rate
<input type="checkbox"/> 10.0 % or less	<input type="checkbox"/> 2.0% or less	<input type="checkbox"/> 10.0 % or less	<input type="checkbox"/> 5.0% or less
<input type="checkbox"/> 10.1 - 15.0%	<input type="checkbox"/> 2.1 - 5.0%	<input type="checkbox"/> 10.1 - 20.0%	<input type="checkbox"/> 5.1 - 10.0%
<input type="checkbox"/> 15.1 - 20.0%	<input type="checkbox"/> 5.1 - 10.0%	<input type="checkbox"/> 20.1 - 30.0%	<input type="checkbox"/> 10.1 - 15.0%
<input type="checkbox"/> 20.1 - 25%	<input type="checkbox"/> More than 10%	<input type="checkbox"/> 30.1 - 40%	<input type="checkbox"/> 15.1 - 20%
<input type="checkbox"/> More than 25%		<input type="checkbox"/> More than 40%	<input type="checkbox"/> More than 20%
*If the project limits extend beyond one census tract, indicate the values of the census tract where the project will have the greatest impact.			

**19. COMMUNITY CO-BENEFITS**

If applicable, describe any co-benefits expected from this project such as community wellness and human health, quality of life, placemaking, sustainability education, climate adaptation or mitigation, or hazard mitigation. Please cite relevant local and regional planning documents, where appropriate (~150 words).

**20. OPTIONAL ATTACHMENTS**

**Note:** The total number of attachments to support proposal should not exceed five pages.

Please identify the supporting materials that are included in your application.

- Vicinity Map
- Photographs
- Illustrations, cross-sections, or schematics
- Letter of Support
- Other \_\_\_\_\_

**21. CERTIFICATION ACCEPTANCE (CA)**

The applicant must have good standing with the WSDOT Certification Acceptance program specified in Chapter 13 of the WSDOT Local Agency Guidelines Manual:  
<https://www.wsdot.wa.gov/Publications/Manuals/M36-63.htm>

The applicant is a CA agency     The applicant is partnering with a CA agency

CA Agency	
CA Agency Representative	
CA Representative Title	

I acknowledge this proposal will be administered by a CA agency.    Date: \_\_\_\_\_



**22. PROJECT VERIFICATION AND ENDORSEMENT**

This project proposal reflects established local funding priorities consistent with the Regional Transportation Plan. Costs represent accurate planning level estimates needed to accomplish the work described herein. The project described is financially feasible, and local match revenue identified is available and will be committed to the project if TRPC awards the requested STBG funds. If selected, **the project must obligate by the date specified on the award letter.** Failure to do so could result in loss of funding for the project. I realize that the use of federal funds for this project entails administrative and project compliance requirements over which TRPC has no control, and for which this agency or organization will be responsible. This project has the full endorsement of the governing body/leadership of this agency or organization.

LEAD AGENCY AUTHORIZATION

Name of Lead Agency Representative Authorized to Submit the Application	Title
<input type="checkbox"/> I verify and endorse this proposal as stated in the preceding statement.	Date: _____

CO-SPONSOR AUTHORIZATION

Name of Co-Sponsor Representative Authorized to Submit the Application	Title
<input type="checkbox"/> I verify and endorse this proposal as stated in the preceding statement.	Date: _____