

Buckeye Hills Regional Council RTPO Application for Transportation Funding Round 3 & 4

Applicant: _____

County: _____

Project Name: _____

Contact Name: _____

Title: _____

Email: _____

Phone #: _____

Cell #: _____

PROJECT INFORMATION

Project Purpose and Need (Describe the reason this project needs completed)

Project Location (Road name, termini, length of project, etc.) - Include detailed map in attachments (*if possible*)

Project Description (Please be as specific as possible)

FUNDING

Cost Estimates (Submittal of a certified cost estimate required. Construction may include the addition of 10% contingency. *Maximum request \$200,000.*)

	Requested Funds	Local Match	Project Estimate	Local Match %
PE-ROW				
PE detailed design				
Utilities				
Construction/Contract/ Engineering				
TOTAL PROJECT COST	\$	\$	\$	\$

Project Financial Resources

LOCAL SHARE \$

Other Public Resources:

ODOT \$ _____
 OPWC \$ _____
 BHRC STBG \$ _____
 Other \$ _____ Source _____
 Other \$ _____ Source _____
 TOTALS \$ _____

*Note: Total Resources should match **Total Project Cost** from above

PROJECT SCHEDULE

	Begin Date (mm/dd/yyyy)	End Date (mm/dd/yyyy)
Engineering/Right of Way/Utilities	_____	_____
Construction	_____	_____

ODOT PID

If the project has a PID # please list here PID# _____

OTHER

Does this project:

	Yes	No
Consider local land use patterns and zoning codes		
Provide linkage for regional travel and/or different modes of travel		

Does this project have any impact on the following Environmental Justice Groups?

	Yes	No
Minority		
Low-income		

If yes, please explain

Required Attachments/Checklist

- Professional engineer’s detailed cost estimate. Estimates shall contain an engineer’s seal or stamp and signature
- Cooperative agreement (if the project involves more than one jurisdiction) which identifies the fiscal and administrative responsibility of each participant
- A certified signed by the applicant’s chief financial officer stating that the amount of all local share funds required for the project will be available on or before the dates listed in the project schedule

APPLICANT CERTIFICATION

The undersigned certifies (1) he/she is legally authorized to request and accept financial assistance as identified in the attached legislation; (2) to the best of his/her knowledge and belief, all representations that are part of this application are true and correct; (3) all official documents and commitments of the applicant that are part of this application have been duly authorized by the governing body of the applicant; and (4) should the requested financial assistance be provided, that in execution of this project, the applicant will comply with all assurances required by Ohio and Federal Laws.

Name _____

Date _____

Title _____