

**FY 20\_\_ SECTION 5304 PROGRAM APPLICATION**  
**INSTRUCTIONS: Complete and return this form to the Michigan Department of Transportation.**

---

NAME OF APPLICANT (Legal Organization Name)

---

NAME OF APPLICANT'S PROJECT MANAGER

---

APPLICANT'S PROJECT MANAGER PHONE NUMBER

---

APPLICANT'S PROJECT MANAGER E-MAIL ADDRESS

---

PROJECT TITLE

---

PROJECT OBJECTIVE (Explain why the project is needed, what is the existing issue to be resolved, what the purpose or goal of the project is, how this project will resolve the issue, who will benefit from the project, and who the target audience of the project is. How will you achieve the project's purpose or goal? Who will conduct the project? What methods do you anticipate using and why do you prefer these methods? Why do you think these methods are the best choice for the target audience and what are the anticipated results? How will you communicate these results to the target audience? Please include any additional relevant information about the project and its expected impacts and outcomes.)

---

PROJECT AND DELIVERABLES: What will be produced and/or implemented using the results of this project?

---

What is the time frame for the projects? Projects are expected to begin within six months of an executed authorization. Please complete milestone dates.

**Note: If the project is funded, the award letter will be issued in June of the year funded. The Section 5304 funds will be available by October 1st of the year funded. These funds are available for three years from the date of award of the grant.**

Solicitation Issued:

Contract Awarded:

Contract Completed:

**PROJECT SUPPORT**

**Note: Provide letters of support - if the project is within a transit agency's geographical area, letters of support and coordination from the local transit agency must be provided.**

**BUDGET** (If project will have multiple activities, or is paid based on milestone progress, split budget accordingly; otherwise show as one activity with the total amount being requested.)

ACTIVITY/ITEM	FEDERAL	STATE	LOCAL	TOTAL
<b>TOTAL</b>				