

**DIRECT GRANT PROGRAM APPLICATION
TRANSPORTATION ECONOMIC DEVELOPMENT FUND
ROAD AND BRIDGE PROJECTS**

Administered through MDOT Office of Economic Development

Please prepare a separate Page 1 & 2 for each roadway segment or bridge. Attach a map showing the project location.

PROJECT LOCATION AND LIMITS

ELIGIBLE APPLICANT / AGENCY NAME		DATE
ROUTE NAME		
PROJECT LIMITS FROM:	TO:	
LENGTH OF PROJECT (miles)	ZIP CODE OF MAJORITY OF PROJECT LOCATION	
NAME OF MPO OR RURAL TASK FORCE		TIP ID #

PROJECT ADMINISTRATION

Proposed Letting Date:		Proposed Completion Date:	
Is this project on the National Highway System (NHS): <input type="checkbox"/> Yes <input type="checkbox"/> No			
What is the Functional Classification of the roadway?			

CROSS-SECTION

EXISTING CROSS-SECTION									
Number of Lanes:		at		feet, for a traveled roadway width (excluding curb & gutter) of		feet			
Type of Pavement:									
Width of Sidewalks:		feet	<input type="checkbox"/> One side	<input type="checkbox"/> Both sides	<input type="checkbox"/> None				
Curb and Gutter:		feet	<input type="checkbox"/> One side	<input type="checkbox"/> Both sides	<input type="checkbox"/> None				
Shoulders	Paved Width:		feet	Aggregate Width:		feet	Total Shoulder Width:		feet
PROPOSED CROSS-SECTION									
Number of Lanes:		at		feet, for a traveled roadway width (excluding curb & gutter) of		feet			
Type of Pavement:									
Width of Sidewalks:		feet	<input type="checkbox"/> One side	<input type="checkbox"/> Both sides	<input type="checkbox"/> None				
Curb and Gutter:		feet	<input type="checkbox"/> One side	<input type="checkbox"/> Both sides	<input type="checkbox"/> None				
Shoulders	Paved Width:		feet	Aggregate Width:		feet	Total Shoulder Width:		feet
Detailed description of proposed work:									

DESIGN GUIDELINES

<input type="checkbox"/> Section B* – New Construction/Reconstruction (4R-AASHTO)	<input type="checkbox"/> Section D* – Preventative Maintenance (PM)
<input type="checkbox"/> Section C* – Resurfacing, Restoration and Rehabilitation (3R)	<input type="checkbox"/> Other (please indicate)
<input type="checkbox"/> Current AASHTO "Guide for the Development of Bicycle Facilities"	
<input type="checkbox"/> Current AASHTO "Guidelines for Geometric Design of Very Low-Volume Local Roads," with the MDOT Engineering Operating Committee acceptance stipulations dated 3/25/2004.	

PARKING

	Prohibited	Not Prohibited	Parallel		Diagonal	
			One Side	Both Sides	One Side	Both Sides
Existing Dedicated Parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proposed Dedicated Parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MDOT RIGHT-OF-WAY

Within project limits or has an impact on an MDOT signal? Yes No

If yes; has the local Transportation Service Center been consulted? Yes No

RAILROAD CROSSING

Is there a railroad crossing within project limits? Yes No

If yes; has a Diagnostic Study Team Review meeting been requested? Yes No

UTILITY COORDINATION CERTIFICATION

All private and municipal utility locations, if required, will either be relocated prior to contract award or have been identified in the bid proposal's Notice to Bidders - Utility Coordination. Yes No

BRIDGE INFORMATION

A bridge IS WITHIN the project limits or along the route used by the development's traffic - Complete this section.
 A bridge IS NOT WITHIN the project limits or is not on the route used by the development's traffic - Skip this section.

PROJECT NAME/ROUTE NO./FACILITY NAME: _____

EXISTING STRUCTURE

Number of spans: _____ at _____ feet for a total overall length of _____ feet

Clear Roadway Width of _____ feet Sidewalk Width of _____ feet

Railing Type: _____

Structure Type: _____

Approximate Year Built: _____

Posted load restriction of _____ tons

Is the existing structure able to carry all legal loads in Michigan? Yes No
 If no, please explain:

NEW OR REHABILITATED STRUCTURE

Number of spans: _____ at _____ feet for a total overall length of _____ feet

Clear Roadway Width of _____ feet Sidewalk Width of _____ feet

Railing Type: _____

Structure Type: _____

Will the structure meet all AASHTO requirements? Yes No
 If no, please explain:

FUNDING INFORMATION

Direct Grant contracts are limited to construction costs. Do not include non-construction match such as PE, CE, or ROW. Local Force Account work is not permitted under the Direct Grant process. You may use the amounts shown on the application budget.

APPROVED FUNDING SOURCE		APPROVED AMOUNT	PERCENTAGE
TEDF Grant:	Category ___ A ___ F		%
Other			%
Local Match			%
Total Programmed Funds:			100%
ENGINEER'S CONSTRUCTION COST ESTIMATE		AMOUNT	
Non-Participating Costs			
Participating Costs			
Total Construction Cost Estimate:			

PROJECT DECLARATIONS AND CERTIFICATIONS

The local agency agrees that the following have been considered and appropriate actions have been, or will be, taken to resolve any outstanding issues before a Notification to Proceed is requested:

All social, economic and environmental factors have been evaluated and addressed in accordance with the appropriate state statutes.

The local agency has received and will retain all necessary approvals and/or permits from the appropriate agency.

The local agency has consulted with, and received any necessary permits from the local MDOT Transportation Service Center for any work within the MDOT right-of-way or that impacts any MDOT signal.

If appropriate, the local agency has contacted the MDOT Office of Rail at (517) 373-8235 to determine if a Diagnostic Study Team Review is necessary.

If applicable, the local agency is responsible for any insurance requirements related to the construction contract.

If a Diagnostic Study Team Review is held, all recommendations from the review have been incorporated into the project plans and that Railroad Liability Protective Insurance and Flagging Coordination have been incorporated into the bid documents, as necessary.

If a bridge or structure is within the project limits or within the development's traffic route indicated on the grant application, but not being funded under this grant, the structure can accommodate all legal loads or is scheduled to be reconstructed so that it may do so.

A Registered Professional Engineer, licensed in the State of Michigan, has designed the project and will oversee construction.

All necessary documents certifying the material and installation thereof, including contractor payments, will be retained by the agency.

The project meets all applicable warranty requirements of state statutes, (PA 175 of 2015).

The agency has reviewed the FAA guidance on [Obstruction Evaluation/Airport Airspace Analysis](#) and affirms that the project will not have an impact on airspace.

CERTIFIED BY (<i>Authorized Person Employed by the Eligible Applicant Agency</i>):		DATE
NAME	TITLE	

PROPERTY ACQUISITION CERTIFICATION

I certify that no property acquisition was required for this project.

If property acquisition was required for this project:

- I have complied with all applicable State and Federal laws and regulations when acquiring property for this project, including the following:
 - Federal Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended;
 - Provisions of 23 USC.23 CFR, and 49 CFR;
 - Provisions of P.A. 1980, No.87, as amended.
- I certify that all property acquisition was at fair market value determined by appraisal, market study, or valuation analysis, and that the property owner was offered fair market value.
- I certify that staff qualified to comply with all applicable State and Federal laws and regulations performed all property acquisition tasks.

CERTIFIED BY (<i>Authorized Person Employed by the Eligible Applicant Agency</i>):		DATE	
NAME		TITLE	
E-MAIL ADDRESS		TELEPHONE NUMBER	

PROJECT CERTIFICATION

Certification is required regardless of whether or not the project required property acquisition, including, but not limited to, permanent takes, permanent easements, consent to construct, temporary permits, or rights of access.

The _____ has legal and physical possession of **all** the property necessary for the construction, operation, and maintenance of this project.
(Eligible Applicant Agency)

CERTIFIED BY (<i>Authorized Person Employed by the Eligible Applicant Agency</i>):			DATE	
NAME		TITLE		
ADDRESS		CITY	STATE	ZIP CODE
PHONE NUMBER		E-MAIL ADDRESS		

NOTE: The local agency is responsible to obtain and retain adequate documentation of legal possession of all property required for construction of the project including but not limited to permanent takes, permanent easements, consent to construct, temporary permits or rights of access. Adequate documentation includes, but is not limited to, copies of executed and recorded deeds or easements, completed and signed permits and forms, and court-ordered possession agreements for condemned parcels.

PROJECT SUPERVISOR STATEMENT

The _____ has designated _____ as the Project Supervisor
(Eligible Applicant Agency) (Name of Project Supervisor)

for the following project:

ROUTE NAME	PROJECT LIMITS FROM:	TO:
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In this regard, the Project Supervisor, shall (at a minimum):

- Be a full time employee of the local agency;
- Approve for funding all construction documents prepared and signed by the Project Engineer or Architect;
- Attend the grade inspection meeting and the pre-construction meeting;
- Be available for meetings with the Michigan Department of Transportation and/or the Project Engineer or Architect;
- Assure that the project record files are maintained;
- Be in attendance at the final project review.
- Be responsible for submitting all requested documents to the MDOT Office of Economic Development.

SIGNATURE (<i>Project Supervisor</i>)		DATE	
NAME		TITLE	
ADDRESS		CITY	STATE ZIP CODE
PHONE NUMBER		E-MAIL ADDRESS	