Michigan Department of Transportation 5030 (05/19)

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DIRECT GRANT PROGRAM APPLICATION TRANSPORTATION ECONOMIC DEVELOPMENT FUND CATEGORY B - PROJECT

Administered through MDOT Office of Economic Development

PROJECT LOCATION AND DESCRIPTION

| ELIGIBLE APPLICANT / AGENCY NAME | | DATE | | |
|----------------------------------|-----------------------------|----------------|---------|--------------|
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| MDOT RIGHT-OF-WAY | | | | | | |
| Within project limits or has an impact on an MDOT signal? | | | | | | |
| 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? | | | | | | |
| 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 | | | | | | |

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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 B | · · · · · · · · · · · · · · · · · · · | % | | | |
| Other | * | | % | | | |
| Local Match | V. | | % | | | |
| 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.

If required by the Office of Economic Development, a Registered Professional Engineer, licensed in the State of Michigan, has designed the project and will oversee construction (as per feedback at coordination meeting).

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 statues, (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 (Authorized Person Employed by the Eligible Applicant Agency): | | DATE |
|---|-------|------|
| | | |
| NAME | TITLE | ** |
| | | |

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PROPERTY ACQUISITION CERTIFICATION ☐ I certify that no property acquisition was required for this project. If property acquisition was required for this project: 1. 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. 2. 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. 3. I certify that staff qualified to comply with all applicable State and Federal laws and regulations performed all property acquisition tasks. CERTIFIED BY (Authorized Person Employed by the Eligible Applicant Agency): DATE NAME TITI F 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. has legal and physical possession of all the property necessary for the The _ (Eligible Applicant Agency) construction, operation, and maintenance of this project. CERTIFIED BY (Authorized Person Employed by the Eligible Applicant Agency): 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 has designated as the Project Supervisor (Eligible Applicant Agency) (Name of Project Supervisor) for the following project: **ROUTE NAME PROJECT LIMITS** FROM: TO: In this regard, the Project Supervisor, shall (at a minimum): 1. Be a full time employee of the local agency; 2. Approve for funding all construction documents prepared and signed by the Project Engineer or Architect; 3. Attend the grade inspection meeting and the pre-construction meeting: 4. Be available for meetings with the Michigan Department of Transportation and/or the Project Engineer or Architect; 5. Assure that the project record files are maintained; 6. Be in attendance at the final project review. 7. Be responsible for submitting all requested documents to the MDOT Office of Economic Development. SIGNATURE (Project Supervisor) DATE NAME TITLE **ADDRESS** STATE ZIP CODE CITY

E-MAIL ADDRESS

PHONE NUMBER