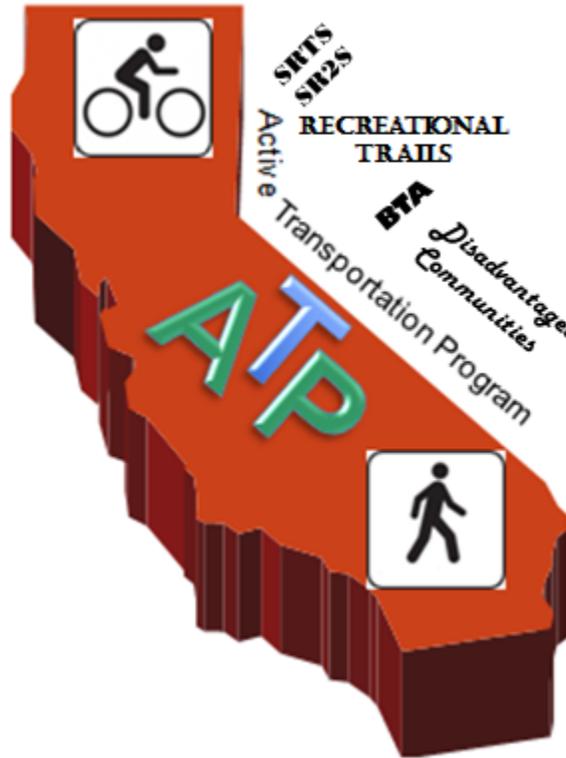


# APPLICATION FOR CYCLE 1 ACTIVE TRANSPORTATION PROGRAM (ATP)

Please read the Application Instructions at  
<http://www.dot.ca.gov/hq/LocalPrograms/atp/index.html>  
prior to filling out this application

Insert link to the actual instructions, once they are posted

Project name:



For Caltrans use only:  TAP  STP  RTP  SRTS  SRTS-NI  SHA  
 DAC  Non-DAC  Plan



**I. GENERAL INFORMATION**

**Project name:**

(fill out all of the blanks below)

1. APPLICANT (Agency name, address and zip code)	2. PROJECT FUNDING ATP funds Requested \$ _____ Matching Funds \$ _____
3. APPLICANT CONTACT (Name, title, e-mail, phone #)	Other Project funds \$ _____ TOTAL PROJECT COST \$ _____
4. APPLICANT CONTACT (Address & zip code)	5. PROJECT COUNTY(S):
6. CALTRANS DISTRICT #- Click Drop down menu below Select District.	7. Application # ____ of ____

**Area Description:**

8. MPO- click drop down menu Select MPO.	9. SELECT 1 OF THE FOLLOWING- click drop down menu Select population size
10. If "Other" was selected from the MPO drop down menu enter your MPO or RTPA	

**Master Agreements (MAs)-**

11.  Yes, the Implementing Agency has a FEDERAL MA with Caltrans.

12.  Yes, the Implementing Agency has a STATE MA with Caltrans.

13. If the Implementing agency does not have an MA. Do you meet the Master Agreement requirements?  
Y/N  The Implementing Agency MUST be able to enter into MAs with Caltrans

**Partner Information:**

14. Partner Name:	15. Partner Type
16. Contact Information (Name, phone # & e-mail)	17. Contact Address & zip code
18. If Partner(s) will be working on the project, a MOU or Interagency Agreement will be required when the fund Allocation is requested	

Click here if the project has more than one partner; attach the remaining partner information on a separate page

**Project Type** (Select only 1)

19. Infrastructure (IF)       20. Non-Infrastructure only (NI)       21. Combined (IF & NI)

**Sub-Project Type** (Select all that apply)

22.  Develop a plan in a Disadvantaged Community  
 Bicycle Plan     Safe Routes to School Plan     Pedestrian Plan



Project name:

I. BASIC INFORMATION-continued

Sub-Project Type continued (Select all that apply)

22. [ ] Develop a plan in a Disadvantaged Community- continued

o Active Transportation Plan

(if applying for an Active Transportation Plan- check any of the following that you already have)

\_Bike plan, \_Ped plan, \_SRTS plan, \_ATP

23. [ ] Bicycle and/or Pedestrian infrastructure

Bikeway :

o Class I

o Class II

o Class III

o Sidewalk

o Multi-use trail

o Recreational Trail\*

Other:

[ ]

\* Recreational Trails Projects require approval/signature on the application signature page, or a signed Letter of Recommendation, from the State Parks RTP Manager.

24. [ ] Safe Routes to School Projects (SRTS)

If Safe Routes to School is selected, provide the following information

Table with 2 columns: School Name/Address and School District Name/Address

[ ] Click here if the project involves more than one school; attach the remaining school information on a separate page

II. PROJECT INFORMATION

(Please read the "ATP instructions" document prior to attaching your responses to all of the following questions- 15 pages max)

1. Project Location

2. Project Coordinates (decimal) Latitude [ ] Longitude [ ]

3. Project Description

4. Project Status



**III. SCREENING CRITERIA**

**1. Demonstrated Needs of the Applicant**

Describe the need for the project and/or funding

**2. Consistency with Regional Transportation Plan**

Explain how this project is consistent with your Regional Transportation Plan, include adoption date of the plan.

**IV. NARRATIVE QUESTIONS**

**1. POTENTIAL FOR INCREASED WALKING AND BICYCLING, ESPECIALLY AMONG STUDENTS, INCLUDING THE IDENTIFICATION OF WALKING AND BICYCLING ROUTES TO AND FROM SCHOOLS, TRANSIT FACILITIES, COMMUNITY CENTERS, EMPLOYMENT CENTERS, AND OTHER DESTINATIONS; AND INCLUDING INCREASING AND IMPROVING CONNECTIVITY AND MOBILITY OF NON-MOTORIZED USERS. (0-30 POINTS)**

- A. Describe how your project encourages increased walking and bicycling, especially among students.
- B. Describe how this project improves walking and bicycling routes to and from, connects to, or is part of a school or school facility, transit facility, community center, employment center, state or national trail system, points of interest, and/or park.
- C. Describe how this project increases and/or improves connectivity, removes a barrier to mobility and/or closes a gap in a non-motorized facility.
- D. Describe the number and type of possible users and their destinations and the percentage increase in users upon completion of your project.

- |  |
|--|
| <ul style="list-style-type: none"> <li>• Projects with significant potential- 21 to 30 points</li> <li>• Projects with moderate potential- 11 to 20 points</li> <li>• Projects with minimal potential- 1 to 10 points</li> <li>• Projects with no potential- 0 points</li> </ul> |
|--|



**IV. NARRATIVE QUESTIONS- continued**

**2. POTENTIAL FOR REDUCING THE NUMBER AND/OR RATE OF PEDESTRIAN AND BICYCLE FATALITIES AND INJURIES, INCLUDING THE IDENTIFICATION OF SAFETY HAZARDS FOR PRDESTRIANS AND BICYCLISTS. (0-25 POINTS)**

- A. Describe how the project will reduce pedestrian and/or serious bicycle injuries or fatalities.
- B. Describe if/how your project will mitigate any of the following safety hazards - bicycle/pedestrian collisions within the project limits (or within 2 miles of target school), inadequate or no crosswalks, bike lanes and/or sidewalks or children walking or biking in the street, low visibility of bicyclists or pedestrians, high speed vehicles, poor sight distances, no traffic control devices, inadequate enforcement of speed limits, or other.
- C. Describe the extent and severity of each safety hazard, how each was determined to be a risk/hazard (e.g. accident reports, community observation, surveys, audits) and how the project will mitigate each?

- Projects with significant potential- 16 to 25 points
- Projects with moderate potential- 8 to 15 points
- Projects with minimal potential- 1 to 7 points
- Projects with no potential- 0 points



**IV. NARRATIVE QUESTIONS- continued**

**3. PUBLIC PARTICIPATION and PLANNING (0-15 POINTS)**

- A. Describe the community based public participation process that culminated in the project proposal or plan, such as noticed meetings/public hearings, consultation with stakeholders, etc.
- B. Describe the local participation process that resulted in the identification and prioritization of the project:
- C. Planning- Is the project cost over \$1 Million? Y/N

If Yes- is the project Prioritized in an adopted city or county bicycle transportation plan, pedestrian plan, safe routes to school plan, active transportation plan, trail plan, circulation element of a general plan, or other publicly approved plan that incorporated elements of an active transportation ? Y/N

- Projects with significant participation- 11 to 15 points
- Projects with moderate participation - 6 to 10 points
- Projects with minimal participation - 1 to 5 points
- Projects with no participation - 0 points



**IV. NARRATIVE QUESTIONS- continued**

**4. COST EFFECTIVENESS (preferred and other alternatives). (0-10 POINTS)**

- A. Describe the alternatives that were considered.
- B. Discuss the relative costs and benefits of the range of all the alternatives.
- C. Quantify the safety for each alternative, in relationship to both the total cost and the funds provided.
- D. Quantify the mobility benefit for each alternative, in relationship to both the total and the funds provided.
- E. Discuss why the preferred alternative was selected over the other alternatives.

- Applicant exceptionally described alternatives and quantified safety and mobility- 7 to 10 points
- Applicant adequately described alternatives and quantified safety and mobility - 4 to 6 points
- Applicant minimally described alternatives and quantified safety and mobility - 1 to 3 points
- Applicant did not describe alternatives or quantify safety or mobility - 0 points



**IV. NARRATIVE QUESTIONS- continued**

**5. IMPROVED PUBLIC HEALTH** (0-10 points)

A. Describe how the project will improve public health, i.e. through the targeting of populations who have a high risk factor for obesity, physical inactivity, asthma, or other health issues.

- Applicant exceptionally described how the project will improve public health- 7 to 10 points
- Applicant adequately described how the project will improve public health - 4 to 6 points
- Applicant minimally described how the project will improve public health - 1 to 3 points
- Applicant did not described how the project will improve public health - 0 points



**IV. NARRATIVE QUESTIONS- continued**

**6. BENEFIT TO DISADVANTAGED COMMUNITIES (0-10 points)**

A. Does the project predominately benefit a disadvantaged community? Y/N

a. Which criteria does the project meet? (Select all that apply)

- median household income < 80% of the statewide median
- among the most disadvantaged 10% in the state
- at least 75% of the public school students are eligible for the NSLP
- CTC approved other

B. Describe the disadvantaged community and their benefit from the project:

- Project only benefits a disadvantaged community- 10 points
- Project partially benefits a disadvantage community- 5 points
- Project does not benefit a disadvantage community- 0 points

**IV. NARRATIVE QUESTIONS- continued****7. USE OF CALIFORNIA CONSERVATION CORPS (CCC) OR A QUALIFIED COMMUNITY CONSERVATION CORPS** *(0 to -5 points)*

- A. The CCCs and/or CALCCs are able to participate on the project, Y/N  
(If No go on the next question)
- B. The agency intends to use the CCCs and/or CALCCs on the project. Y/N  
a. Identify the intended use of the CCC and/or CALCC
- C. The applicant has submitted the project application to CCC, Y/N  
a. Name & contact information of the CCC person contacted
- D. The applicant has submitted the project application to CALCC, Y/N  
a. Name & contact information of the CALCC person contacted

- The applicant has submitted the project application to CCC and CALCC - 0 points
- The applicant has not submitted the project application to CCC and CALCC (-)5 points



**IV. NARRATIVE QUESTIONS- continued**

**8. APPLICANT'S PERFORMANCE ON PAST GRANTS ( 0 to -10 points)**

- A. Explain your agency's grant failures during the past 5 years; and how you intend to keep these issues from happening with an ATP project. This may include :
- a. Project delivery
  - b. Project benefits (anticipated v. actual)
  - c. Use of the California Corps or qualified community conversation corps (planned v. actual)

- The applicant has no past grant experience or has performed satisfactorily on past grants - 0 points
- The applicant has not performed satisfactorily on past grants (-)10 points



Project name: \_\_\_\_\_

**V. PROJECT COST ESTIMATE**

All project costs MUST be accounted for on this form, including elements of the overall project that will be, or has been funded by other sources.

The information in the shaded fields will be calculated automatically. All costs will automatically be rounded up to the next \$1000.

Phase		ATP funds	Other funds	TOTAL FUNDS
<b>Preliminary Engineering (PE)</b>	Environmental	\$	\$	\$
	PS&E	\$	\$	\$
	Matching funds	Type-		\$
	<b>PE subtotal</b>	\$	\$	\$

This application is not requesting funds for the PE phase

<b>Right of Way (ROW)</b>	Right of way Engineering	\$	\$	\$
	Appraisals, Acquisitions & Utilities	\$	\$	\$
	Matching funds	Type-		\$
	<b>ROW subtotal</b>	\$	\$	\$

This application is not requesting funds for the ROW phase

<b>Construction (CON)</b>	Construction Engineering (CE)	\$	\$	\$
	Construction (Con)	\$	\$	\$
	Matching funds	Type-		\$
	<b>CON subtotal</b>	\$	\$	\$

This application is not requesting funds for the CON phase

<b>Non-Infrastructure (NI)</b>	Non-Infrastructure (NI)	\$	\$	\$
	Matching funds	Type-		\$
	<b>NI subtotal</b>	\$	\$	\$

This application is not requesting funds for a NI phase

<b>Grand Total</b>	\$	\$	\$
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**ATP work type (If applicable)**

**Enter Estimated ATP fund amount**

Request for funding a Plan	\$
Request for Safe Routes to Schools Infrastructure work	\$
Request for Safe Routes to Schools Non-Infrastructure work	\$
Request for other Non-Infrastructure work	\$
Request for Disadvantage Community work	\$
Request for Recreational Trails work	\$

**All other fund types**

**fund amount**

	\$
	\$
	\$
	\$
	\$
	\$
	\$



Project name: [ ]

**VI. PROJECT PROGRAMMING INFORMATION**

**Project Approval & Environmental Doc (PA & ED)**

**Proposed Date**

PA & ED Allocation [ ]

PE Authorization

[ ]

Project Initiation document Approved (or Field review/PES submittal)

[ ]

Begin Environmental (PA & ED) Phase

[ ]

Circulate Draft Environmental Document (for EIS or FONSI)

[ ]

Environmental Document Type: **CEQA-** CE  ND/MND  EIR   
**NEPA-** CE  EA/FONSI  EIS

Draft Project Report (for EIS or FONSI)

[ ]

End Environmental Phase (PA&ED Milestone)

[ ]

**PS&E**

CTC PS&E Allocation

[ ]

Begin Design (PS&E) Phase

[ ]

End Design Phase (Ready to List or Advertise)

[ ]

**Right of Way (ROW)**

CTC ROW Allocation [ ]

ROW Authorization

[ ]

Begin ROW Phase

[ ]

End of ROW Phase (ROW Certification Milestone)

[ ]

**Construction (CON)**

CTC CON Allocation [ ]

CON Authorization

[ ]

Begin CON Phase (Contract Award Milestone)

[ ]

End CON Phase (Contract Acceptance Milestone)

[ ]

**Closeout**

Begin Closeout Phase

[ ]

End Closeout Phase (Final Report of Expenditures)

[ ]



Project name:

**VII. APPLICATION SIGNATURES**

**Applicant:** The undersigned affirms that the statements contained in the application package are true and complete to the best of their knowledge.

Signature: Date:  
Name: Phone:  
Title: e-mail:

**Local Agency Official (City Engineer or Public Works Director):** The undersigned affirms that the statements contained in the application package are true and complete to the best of their knowledge.

Signature: Date:  
Name: Phone:  
Title: e-mail:

**School Official:** The undersigned affirms that the school(s) benefited by this application is not on a school closure list.

Signature: Date:  
Name: Phone:  
Title: e-mail:

**Person to contact for questions:**

Name: Phone:  
Title: e-mail:

**Caltrans District Traffic Operations Office Approval**

If the application's project proposes improvements on a freeway or state highway that affects the safety or operations of the facility, it is required that the proposed improvements be reviewed by the district traffic operations office and either a letter of support from the traffic operations office be attached ( ) or the signature of the traffic personnel be secured below.

Signature: Date:  
Name: Phone:  
Title: e-mail:

**California Highway Patrol Approval**

If the application proposes improvements on a freeway, state highway, or county road having California Highway Patrol (CHP) enforcement authority, the proposed project must be reviewed by a CHP officer who either writes a letter of support ( ) or signs below to show support of the project.

Signature: Date:  
Name: Phone:  
Title: e-mail:



Project name:

**VII. APPLICATION SIGNATURES-continued**

**Local Law Enforced Agency Approval**

If the application proposes improvements that are outside of CHP enforcement authority, it is recommended that the proposed project be reviewed by a local law enforcement agency who either writes a letter of support ( ) or signs below to show support of the project.

Signature: Date:  
Name: Phone:  
Title: e-mail:

**State Parks Recreational Trails Manager:** Required for any Recreational Trails project

Signature: Date:  
Name: Phone:  
Title: e-mail:

**VIII. APPLICATION ATTACHMENTS**

Check all attachments included with this application.

- Vicinity/Location Map- **REQUIRED for all IF Projects**
  - North Arrow
  - Label street names and highway route numbers
- Photos and/or Video of Existing Location- **REQUIRED for all IF Projects**
  - Minimum of one labeled color photo of the existing project location
  - Minimum photo size 3 x 5 inches
  - Optional video and/or time-lapse
- Preliminary Plans- **REQUIRED for Construction phase**
  - Must include a north arrow
  - Label the scale of the drawing
  - Typical Cross sections where applicable with property or right-of-way lines
  - Label street names, highway route numbers and easements
- Detailed Engineer's Estimate- **REQUIRED for Construction phase**
  - Estimate must be true and accurate. Applicant is responsible for verifying costs prior to submittal
  - Must show a breakdown of all bid items by unit and cost.
  - Must show all items that are eligible for ATP funding
  - Contingency is limited to 10% of funds being requested
- Proof of application receipt from BOTH the CALCC and CCC
- Letters of Support from Caltrans (Required for projects on the State Highway System(SHS))
- Digital copy of or an online link to an approved plan (bicycle, pedestrian, safe routes to school, active transportation, general, recreation, trails, city/county or regional master plan(s), technical studies, and/or environmental studies (with environmental commitment record or list of mitigation measures), if applicable. Include/highlight portions that are applicable to the proposed project.

2/21/2014

DRAFT



ATP Cycle 1 Application Form

- Additional documentation, letters of support, etc (optional)