



DISCRETIONARY FUNDING REQUEST

SECTION 1: REQUESTOR INFORMATION

NAME CONTACT PERSON
MAILING ADDRESS PHONE FAX
EMAIL ADDRESS DATE SUBMITTED

SECTION 2: NATURE OF REQUEST

Type of Request (Mark all that apply.)
Resurfacing Economic Development Emergency
Patching Hazardous Conditions Other:
Those Affected
Number of constituents
Number of local businesses

SECTION 3: JUSTIFICATION

Explain in detail the nature of the funding request, highlighting the impact this project will have on each type of request specified above (i.e., safety, repairs, etc.).

SECTION 4: DETAILS OF REQUEST

Pictures Yes No District Evaluation Yes No
Calculations:
Project estimate
Less:
Public Sector Contribution
Private Sector Contribution
Total Remaining Need/
Contribution Requested

SECTION 5: REQUESTOR SIGNATURE

PRINTED NAME SIGNATURE DATE SIGNED

**DISCRETIONARY FUNDING REQUEST**

<b>Priority No. 1</b>	ROAD NAME	ROAD NO.	LENGTH OF PROJECT (miles)	ESTIMATED COST
	LOCATION OF PROJECT (where project begins & ends)			
	Type of Request <input type="checkbox"/> Resurfacing <input type="checkbox"/> Economic Development <input type="checkbox"/> Emergency <input type="checkbox"/> Patching <input type="checkbox"/> Hazardous Conditions <input type="checkbox"/> Other			
DATE OF LAST WORK COMPLETED ON ROAD _____				

<b>Priority No. 2</b>	ROAD NAME	ROAD NO.	LENGTH OF PROJECT (miles)	ESTIMATED COST
	LOCATION OF PROJECT (where project begins & ends)			
	Type of Request <input type="checkbox"/> Resurfacing <input type="checkbox"/> Economic Development <input type="checkbox"/> Emergency <input type="checkbox"/> Patching <input type="checkbox"/> Hazardous Conditions <input type="checkbox"/> Other			
DATE OF LAST WORK COMPLETED ON ROAD _____				

<b>Priority No. 3</b>	ROAD NAME	ROAD NO.	LENGTH OF PROJECT (miles)	ESTIMATED COST
	LOCATION OF PROJECT (where project begins & ends)			
	Type of Request <input type="checkbox"/> Resurfacing <input type="checkbox"/> Economic Development <input type="checkbox"/> Emergency <input type="checkbox"/> Patching <input type="checkbox"/> Hazardous Conditions <input type="checkbox"/> Other			
DATE OF LAST WORK COMPLETED ON ROAD _____				

<b>Priority No. 4</b>	ROAD NAME	ROAD NO.	LENGTH OF PROJECT (miles)	ESTIMATED COST
	LOCATION OF PROJECT (where project begins & ends)			
	Type of Request <input type="checkbox"/> Resurfacing <input type="checkbox"/> Economic Development <input type="checkbox"/> Emergency <input type="checkbox"/> Patching <input type="checkbox"/> Hazardous Conditions <input type="checkbox"/> Other			
DATE OF LAST WORK COMPLETED ON ROAD _____				

(Attach additional pages if necessary.)