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| **SECTION 1: PROJECT OVERVIEW** |
| **APPLICANT NAME** | **DOT CROSSING #** | **APPLICATION****YEAR** |
|       |       |      |
| **ROAD NAME** | **ROAD MILE POINT** | **CROSSING LOCATION** |
| **CITY** | **COUNTY** |
|       |       |       |       |
| **PROJECT TYPE** |
|  [ ]  Crossing Rehab  | [ ]  Crossing Safety |  [ ]  Obstructive Vegetation Removal |
| **TOTAL PROJECT COST** | **KRCI FUNDING REQUESTED** | **APPLICANT MATCH** | **APPLICANT MATCH %***(20% Minimum)* |
| **$** |       | **$** |       | **$** |       |     |  **%** |
| Does applicant plan to use their own manpower, equipment, or materials on the project (Force Account) or competitively bid out all work related to the project?  |
| **PROJECT DESCRIPTION** *(Provide a brief project description. Include why the crossing was selected, project purpose and benefits, and the proposed work to be completed. Text is limited to the space provided below.)* |
|        |
| **FOR KYTC USE ONLY** |
| **Date Received:** |  |  | **FRA WBAPS Score:** |  |  | **Secretary Approval:** |  |  |
| [ ]  | **Y** | [ ]  | **N** |
|  |  |  |
|  | **Y** |  **N** | **Match %:** |  | **KRCI Award Amount:** |  |
| **Application Complete** | [ ]  | [ ]  |
| **603 KAR 7:090 Compliant** | [ ]  | [ ]  | **Road ADT:** |  | **KRCI Award** **Date:** |  |
| **Eligible Applicant** | [ ]  | [ ]  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **SECTION 2: APPLICANT INFORMATION** |
| Is the applicant a railroad? [ ]  NO [ ]  YES *(Provide KY Secretary of State information.)*  |
| **KY SECRETARY OF STATE (KY SOS) ORGANIZATION ID OR #** | **KY SOS STATUS** | **KY SOS STANDING** |
|       |   |   |
| **PRIMARY CONTACT INFORMATION** |
| **NAME & TITLE** | **PHONE** | **EMAIL** |
|       |       |       |
| **MAILING ADDRESS** | **CITY** | **STATE** | **ZIP** |
|       |       |    |       |
| If awarded, will signatory be different from the Primary Contact? [ ]  NO [ ]  YES *(Provide signatory information.)*  |
| **SIGNATORY NAME & TITLE** | **PHONE** | **EMAIL** |
|       |       |       |
| **MAILING ADDRESS** | **CITY** | **STATE** | **ZIP** |
|       |       |    |       |
| **SECTION 3: PERMITS AND APPROVALS** |
| A. | Have consultations with state or federal agencies (US Army Corps of Engineers, US Coast Guard, US Fish and Wildlife Service, Kentucky Division of Water, Kentucky Heritage Council, or others) determined the need for permits?  |
| B. | Have all required permits been obtained?  |
| **SECTION 4: CURRENT RAILROAD CROSSING INFORMATION** *(Section 4 must be completed for* ***ALL*** *projects.)* |
| **# OF TRAFFIC LANES** | **ROAD SPEED LIMIT** | **AVERAGE DAILY TRAFFIC (ADT) AT CROSSING** | **RAILROAD DIVISION** |
|       |       |       |        |
| **TYPICAL TRAIN SPEED AT CROSSING** | **# OF TRACKS AT CROSSING** | **RAIL MILE POINT** | **BRANCH/LINE NAME** |
|       |       |       |        |
| **AVERAGE DAILY TRAIN MOVEMENTS AT CROSSING** | **FRA TRACK CLASS AT CROSSING** | **TOTALS FROM PREVIOUS 5 YEARS AT CROSSING** |
|       |  | **CRASHES** | **FATALITIES** | **INJURIES** |
|       |       |       |

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| **SECTION 5: CROSSING RECONSTRUCTION** *(Required* ***ONLY*** *for Crossing Reconstruction projects.)* |
| **CURRENT CROSSING**  |
| **DATE INSTALLED** | **WIDTH OF ROAD**  | **SURFACE MATERIAL** | **WEIGHT OF RAIL** |
|       |       **feet** |       |       |
| **SURFACE CONDITION** | **VISIBLE TIE CONDITION** | **APPROACH CONDITION** | **DRAINAGE CONDITION** |
|  |  |  |  |
| **PROPOSED RECONSTRUCTION** |
| **PROJECT IMPACT ON SIDEWALK, MULTI-USE PATH, OR RECREATIONAL TRAIL** | **MAXIMUM CHANGE IN TRACK ELEVATION ABOVE/BELOW EXISTING ROADWAY** | **LENGTH OF ASPHALT APPROACH** |
|  |       **inches** | **Taper 1** | **Taper 2** |
|  |  |       **feet** |       **feet** |
| **REPLACEMENT CROSSING SURFACE:** |   |
| **SECTION 6: CROSSING SAFETY EQUIPMENT IMPROVEMENT** *(Required* ***ONLY*** *for Crossing Safety Equipment Improvement projects.)* |
|  | **INSTALL** | **UPGRADE EXISTING** |
| A. | Project Signage Work: Crossing Signs and Markings | [ ]  | [ ]  |
|  | 1. Describe in detail signs and markings currently used at crossing.  *(Text is limited.)* |
|  |       |
|  | 2. Describe in detail signs and markings proposed at crossing as part of the project.  *(Text is limited.)* |
|  |       |
|  | **INSTALL** | **UPGRADE EXISTING** |
| B. | Project Signal Work: Active Traffic Control Devices | [ ]  | [ ]  |
|  | 1. Describe in detail active traffic control devices currently used at crossing.  |
|  |       |
|  | 2. Describe in detail active traffic control devices proposed at crossing as part of the project. |
|  |       |

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| **SECTION 7: SUBMISSION CHECKLIST** *(See KRCI Guidance Document, Section V, for details.)* |
|  | [ ]  | Kentucky Railroad Crossing Improvement Application (TC 59-13) |
|  | [ ]  | Statement of Work |
|  | [ ]  | Scope of Work |
|  | [ ]  | Project Schedule/Timeline |
|  | [ ]  | Detailed engineering assessment report (as applicable) |
|  | [ ]  | Aerial Photographs and photographic documentation of crossing location and condition (especially for Obstructive Vegetation removal projects) |
|  | [ ]  | Plans, schematics, details, drawings of the proposed project (as applicable) |
|  | [ ]  | Photographic documentation of the project location and condition |
|  | [ ]  | Detailed estimate |
|  | [ ]  | Road authority consultation letter (if applicant is a railroad) |
|  | [ ]  | Railroad consultation letters (if applicant is a government entity) |
|  | [ ]  | Public Interest Finding (as applicable) |
| **SECTION 8: RAILROAD COMPLIANCE CERTIFICATION** *(Required* ***ONLY*** *if applicant is a railroad.)* |
| I hereby certify that as an applicant defined as a railroad in 603 KAR 7:090(1), my company has completed and submitted the TC 59-102 in compliance with the provisions of 603 KAR 7:090 at the time of this application. If it is determined I am not an eligible applicant at the time of this submission, I agree that this application shall be immediately rejected without consideration and returned to me without review. |
| **PRINTED NAME AND TITLE** | **SIGNATURE** | **DATE** |
|       |  |       |
| **SECTION 9: APPLICANT CERTIFICATION** *(The certification below applies to all applicants.)* |
| I have read the Kentucky Railroad Crossing Improvement guidance document, and I understand and agree to abide by what is stated therein. I also hereby certify, subject to the provisions of KRS 523.100 (unsworn falsification to authorities), that the above information is true and correct to the best of my knowledge. |
| **PRINTED NAME AND TITLE** | **SIGNATURE** | **DATE** |
|       |  |       |
|  |
|  | ***Submission Directions:*** Applicants must combine their completed application and all required attachments into a single PDF and submit it electronically via email to KYTC.ModalPrograms@ky.gov. It is the responsibility of the applicant to ensure delivery of the emailed submission.  |  |
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