**AGENCY NAME/DBA (both)**

**DUNS# Congressional District**

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|  | **PAGE #** | **CABINET USE ONLY** |
| 1. **Project Description** |  |  |
| 1. **Project Justification** |  |  |
| 1. **Vehicle/Facility Maintenance Plans** |  |  |
| 1. **Milestone Schedule** |  |  |
| 1. **Proposed Budget(s) and DBE Goal (with detailed backup)** |  |  |
| 1. **Project Financing and Commitment of Local Share** |  |  |
| 1. **Inclusion in MPO’s Transportation Improvement Program (TIP) if Part of Urban Area and/or Inclusion in STIP** |  |  |
| 1. **Labor (see attachment)** |  |  |
| 1. **Statement that No Persons, Families, or Businesses will be Displaced by the Proposed Project (if applicable)** |  |  |
| 1. **Anticipation of NEPA Requirements** |  |  |
| 1. **Protection of the Environment Statement that this Project is a Class 2 Action that has no Significant Impact on the Environment, if applicable, or Planned Environmental Reviews** |  |  |
| 1. **Evaluation of Flood Plain (if applicable)** |  |  |
| 1. **Enclosed Executed Documents** |  |  |
| * **Certifications & Assurances** |  |  |
| * **Authorizing Resolution** |  |  |
| * **Equivalent Service Analysis** |  |  |
| * **Federally Required and Model Contract Clauses** |  |  |
| * **Bid or Quote Specifications with Bid Package and ICE for each Item Requested** |  |  |

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Agency Signature/Title Date

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State/OTD Project Manager Signature/Title Date

\_\_\_\_\_\_\_\_ State/OTD Staff Assistant or Branch Manager Acknowledgement

Initials

**\*\***All elements must be checked or marked N/A, by the Project Manager, for an application to receive State and Federal Approval.