

**KENTUCKY TRANSPORTATION CABINET  
OFFICE OF TRANSPORTATION DELIVERY  
SECTION 5339 (CFDA #20.526) BUS AND BUS FACILITIES APPLICATION GUIDELINES  
SFY 2022 APPLICATION CHECKLIST  
\*\*Due April 1, 2021\*\***

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**AGENCY NAME/DBA (both)**

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**DUNS#** **Congressional District**

	<u>PAGE #</u>	<u>CABINET USE ONLY</u>
<b>1. Project Description</b>		
<b>2. Project Justification</b>		
<b>3. Vehicle/Facility Maintenance Plans</b>		
<b>4. Milestone Schedule</b>		
<b>5. Proposed Budget(s) and DBE Goal (with detailed backup)</b>		
<b>6. Project Financing and Commitment of Local Share</b>		
<b>7. Inclusion in MPO's Transportation Improvement Program (TIP) if Part of Urban Area and/or Inclusion in STIP</b>		
<b>8. Labor (see attachment)</b>		
<b>9. Statement that No Persons, Families, or Businesses will be Displaced by the Proposed Project (if applicable)</b>		
<b>10. Anticipation of NEPA Requirements</b>		
<b>11. 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</b>		
<b>12. Evaluation of Flood Plain (if applicable)</b>		
<b>13. Enclosed Executed Documents</b>		
– <b>Certifications &amp; Assurances</b>		
– <b>Local Share &amp; Authorizing Resolution</b>		
– <b>Equivalent Service Analysis</b>		
– <b>Federally Required and Model Contract Clauses</b>		
– <b>Bid or Quote Specifications with Bid Package and ICE for each Item Requested</b>		

\_\_\_\_\_  
Agency Signature/Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
State/OTD Project Manager Signature/Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
State/OTD Public Branch Manager

Initials

\*\*All elements must be checked or marked N/A, by the Project Manager.