

FY 17 MULTIMODAL SAFETY & ACCESS PROJECT PROPOSAL FORM



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Regional Commission: _____

Date: _____

LOCAL GOVERNMENT INFORMATION

Local Government (LG): _____

LG Address: _____

LG Contact Name and Title: _____

LG Contact Phone Number: _____

LG Contact Email: _____

PROPOSED PROJECT INFORMATION

Project Title (include location): _____

The proposed project: is located on the state route system YES NO

closes a gap in the walking and/or biking network YES NO

DESCRIPTION OF PROPOSED PROJECT

- I. **Attach a one-page (8.5"x11" max.) map that shows the location of each project component and other relevant landmarks.**
- II. Describe the physical components of the project.
- III. Describe how the project connects or improves a connection in existing facilities for biking, walking, or connecting by biking or walking to transit. Describe what services will be connected by the project (e.g. residential to education/ residential to park, etc.).

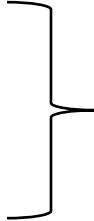

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- IV. Describe the community impacted by the project; are there currently people walking and/or biking? Is the area currently underserved in regards to walking and/or biking infrastructure?
- V. Describe how the project will impact transportation safety, health, and/or economic outcomes in the community impacted by the project.
- VI. Is the project consistent with local and/or regional plans? List all relevant plans and documents.

COST ESTIMATE

Task	Estimated or Actual Cost	
1. Preliminary Engineering	\$ _____	 <i>No.'s 1-4 must be locally funded, even if this cost exceeds 30%. The value of in-house work may be documented.</i>
2. Public Outreach	\$ _____	
3. Utilities (if applicable)	\$ _____	
4. Right of Way (if applicable)	\$ _____	
5. Construction	\$ _____	 <i>GDOT will provide up to 70% of the total project cost to selected projects.</i>
Total Project Cost	\$ _____	