



# TRANSPORTATION ALTERNATIVES SET-ASIDE PROGRAM (TA) FUNDING APPLICATION

A continuation of the Surface Transportation Block Grant, TA funding is by contract authority from the Highway Trust Fund, subject to the overall federal-aid obligation limitation determined by the Federal Highway Administration (FHWA). Projects must support surface transportation, be competitively solicited, and comply with the provisions of the FDOT Work Program Instructions and the Bipartisan Infrastructure Law (BIL), enacted as the Infrastructure Investment and Jobs Act (IIJA) [§ 11109; 23 United States Code (U.S.C.) 133(h)]. District representatives may be [contacted](#) for guidance.

## PART 1 – APPLICANT INFORMATION

**1. Applicant Agency Sponsor Type.** Select the box indicating the agency of the person who can answer questions about this project proposal. Then complete applicable text fields. Note: State-recognized non-profit agencies may partner with an eligible governmental entity but are not eligible as a direct grant recipient.

Checkbox next to each of the following types of agencies that do not indicate text field. Document allows one selection.

Local government (e.g., county, city, village, town, etc.).

Regional transportation authority or transit agency.

Natural resource or public land agency.

School district, local education agency, or school (may include any public or nonprofit private school). Projects should benefit the public and not just a private entity.

Recognized Tribal Government.

Other local or regional governmental entity with oversight responsibility for transportation or recreational trails, consistent with the goals of 23 U.S.C. 133(h).

Metropolitan / Transportation Planning Organization / Agency (collectively MPO) (only for urbanized areas with less than 200,000 population).

FDOT (only by request of another eligible entity, then enter the requesting entity). If “checked”, enter the requesting entity in the space provided. (Word limit 5)

**2. Agency name of the applicant.** (Word limit 5).

**3. Agency contact person’s name and title.** (Word limit 5).

**4. Agency contact person’s telephone number and email address.** (Word limit 5).

## PART 2 – LOCAL AGENCY PROGRAM (LAP) CERTIFICATION

LAP is FDOT’s primary mechanism to provide governmental subrecipients with federal funds to develop transportation infrastructure facilities through cost-reimbursement (grant) agreements. This legal instrument (the grant agreement) will describe intergovernmental tasks to be accomplished and the funds to be reimbursed for selected projects. The FDOT Local Programs Manual and FDOT Procedure 525-010-300 provides details for local agencies to complete a certification process that is a risk-based assessment evaluating whether they have sufficient qualifications and abilities “to undertake and satisfactorily complete the work” for infrastructure projects. Non-profit organizations are not eligible for LAP certification, local agencies are not eligible for certification of Project Development and Environment (PD&E) or Right-of-Way (ROW) acquisition phases. FDOT is required to provide oversight on fee-simple and less-than-fee ROW acquisition phases, including license agreements, encroachment agreements, perpetual easements, temporary construction easements, and donations.

### LAP Full Certification

Provide:

Approval Date: \_\_\_\_\_ and Expiration Date: \_\_\_\_\_  
 Responsible Charge Name: \_\_\_\_\_

### LAP Project Specific Certification

Provide:

Approval Date: \_\_\_\_\_ Project FM(s) Number: \_\_\_\_\_  
 Responsible Charge Name: \_\_\_\_\_

### Not LAP Certified – A LAP Certified Agency will deliver the project on behalf of the uncertified Agency.

Provide:

Sponsoring Agency Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### Not LAP Certified - FDOT District will administer the project.

Provide:

FDOT Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Not LAP Certified – the Agency will become LAP certified 1 year prior to the delivery of the LAP project.

### Not Applicable – this is a Non – Infrastructure Project.

## PART 3 – PROJECT INFORMATION

1. **Project Name / Title:** (Word limit 15).
  
2. **Is this a resubmittal of a previously unfunded project?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the year(s) of submittal(s) and include project title(s), if different, in the space provided. (Word limit 5).  
 Yes      No
  
3. **Does this project connect a previously funded project(s)?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the Financial Management (FM) number(s) and provide a brief description of the other related FDOT-funded phases that are complete, underway, or in the FDOT 5-year Work Program. (Word limit 5).  
 Yes      No
  
4. **Is funding requested for this same project from another source administered by FDOT?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate funding source(s) / application(s) submitted. NOTE: Contact your district representative to discuss if this same project is partially funded in the 5-year Work Program or if FDOT has received another application for funding it. (Word limit 5).  
 Yes      No
  
5. **What are you proposing in this application?** In 200 words or less, provide a description of the project and what it will accomplish. The description should allow a person without prior knowledge of the project to clearly understand it. Summarize the purpose, need, project attributes, the relationship to surface transportation, how the project improves safety, and expected benefits.

**REQUIRED UPLOAD: PROJECT INFORMATION SUPPORTING DOCUMENTATION** including 1) Scope of Work clearly describing the purpose and need for this project and the desired outcome; detailed description of the existing conditions; and detailed description of the proposed project and major work item improvements (e.g., project limits (begin / end), width of sidewalks or trails and other components, materials, drainage, lighting, signing and pavement markings, etc.). 2) Intent to enter into a cost reimbursement agreement for delivering the project. 3) Signed PROJECT CERTIFICATION from the maintaining agency confirming the applicant is authorized to submit the proposal, the information is accurate, intent to enter into a Memorandum of Understanding or Interagency Agreement for ongoing operations and maintenance of the improved facility, and compliance with all federal and state requirements.

## PART 4 – PROJECT LOCATION

1. **Indicate the municipality(ies) of the project location.** (Word limit 5).

2. **Indicate the county(ies) of the project location.** (Word limit 5).

### 3. Roadway Classification

Yes      No      State roadway (on-system)

Yes      No      Federal roadway

Yes      No      Local roadway (off-system)

4. **Indicate the roadway name(s) [including applicable state, federal, county road number(s), local roadway name, and roadway identification number (e.g., SR 5 / US 1 / CR 904 / Overseas Highway / ID number: 90040000)].** (Word limit 10).

5. **Indicate the roadway beginning project limits (south or west termini), mile points, and crossroads at each end of each listed segment.** (Word limit 10).

6. **Indicate the roadway ending project limits (north or east termini), mile points, and crossroads at each end of each listed segment.** (Word limit 10).

7. **Indicate the total project length, in miles and linear feet.** (Word limit 10).

8. **Does the project involve the Florida Shared-Use Nonmotorized (SUN) Trail network?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the trailway identification number, beginning and ending mile points. (Word limit 5).

Yes      No

9. **Within the next five years, are non-FDOT funds being expended within the limits or adjacent to the proposed project?** If not, select “no” and indicate N/A in the space provided. If so, select “yes”, and briefly explain. (Word limit 50).

Yes      No

## PART 5 – PROJECT TYPE

NOTE: Certain areas may not be prioritizing Non-infrastructure (NI) proposals or all eligible infrastructure activities (or may recommend bundling activities together). Contact your district representative for guidance.

1. **PROJECT CATEGORY** Select one box that best represents the project proposal. Then, complete either the “Infrastructure” or “NI” selections.

**A. Infrastructure.** If so, select “yes”, then select the most appropriate “infrastructure” eligible activity from listing below. (Pages range 5-6)

**B. Non-infrastructure (NI).** If so, select “yes”, then select the most appropriate NI eligible activity from the listing following the Infrastructure activities. (Page range 7)

### 5-A. INFRASTRUCTURE ELIGIBLE ACTIVITY

Select one box that best represents the project proposal). As applicable, complete infrastructure eligible text fields.

**Pedestrian and / or Bicycle facilities** (Select this box for construction, planning, and design of off-road trail facilities or on-road facilities for pedestrians, bicyclists, and other nonmotorized forms of transportation).

**Safe Routes for Non-Drivers** (Select this box for construction, planning, and design of infrastructure related projects and systems that provide safe routes for non-drivers, including children, older adults, and individuals with disabilities to access daily needs).

**Conversion of Abandoned Railway Corridors to Trails** (Select this box for conversion and use of abandoned railroad corridors into trails for pedestrians, bicyclists, or other nonmotorized transportation users).

**Scenic Turnouts and Overlooks** (Select this box for construction of turnouts, overlooks, and viewing areas). If “yes”, list any Florida Scenic Byways visible from the project or indicate N/A in text field. (Word limit 5).

**Outdoor Advertising Management** (Select this box for inventory, control, or removal of outdoor advertising). If “yes”, list any Florida Scenic Byways within the project limits or indicate N/A in text field. (Word limit 5).

**Historic Preservation and Rehabilitation of Historic Transportation Facilities** (Select this box for historic preservation or rehabilitation of historic transportation facilities). If “yes”, list any locally designated or National Register of Historic Places listed or eligible resources or indicate N/A in the text field. (Word limit 5).

**Vegetation Management** (Select this box for vegetation management in public transportation ROW to improve roadway safety, prevent invasive species, and erosion control). If “yes”, list any Florida Scenic Byways within the project limits, or indicate N/A in text field. (Word limit 5).

**Archaeological Activities** (Select this box for archaeological activities related to impacts from transportation projects funded by FHWA). If “yes”, list the State Site Number (aka Site File Number) for the archaeological site, or indicate N/A in the text field. (Word limit 5).

**Stormwater Mitigation** (Select this box for environmental mitigation activities addressing stormwater management, control, and water pollution prevention or abatement related to transportation projects).

**Wildlife Management** (Select this box for wildlife mitigation and reduction of wildlife mortality, or to restore and maintain connectivity among terrestrial or aquatic habitats).

**Boulevards** (Select this box for boulevards, defined as a walkable, low speed (35 mph or less) divided arterial thoroughfares in urban environments designed to carry both through and local traffic, pedestrians, and bicyclists. These may be high ridership transit corridors; serve as primary goods movement and emergency response routes; and use vehicular and pedestrian access management techniques that promote economic revitalization and follow complete street principles]. If “yes”, list any Florida Main Street communities or Florida Trail Towns within the project limits, or indicate N/A in text field. (Word limit 5).

**Recreational Trails Program** [Select this box for recreational trails compliant with 62-S-2, Florida Administrative Code, and 23 U.S.C. 104 (b)]. If “yes”, list the parks / recreational areas within the project limits, or indicate N/A in the text field. (Word limit 5).

**Safe Routes to Schools (SRTS)** [Select this box for SRTS projects, codified as 23 U.S.C. 208, that substantially improves the ability of kindergarten through 12th grade students (vulnerable road users) to walk and / or bicycle to school]. Traditionally includes sidewalks, traffic calming and speed reduction, traffic diversion improvements, pedestrian and bicycle crossings, on-street bicycle facilities, off-street bicycle facilities, and bicycle parking facilities at public schools. If “yes”, list the benefiting schools that are within two miles of the project limits; total student enrollment; approximate number of students living along the route; and the percentage of students eligible for reduced meal programs, or indicate N/A in the space provided. (Word limit 10).

**Other surface transportation eligible purpose** (Only if within urbanized areas with a population greater than 200,000). If “yes”, list the eligible activity or indicate N/A in the space provided. (Word limit 5).

**5-B. NI ELIGIBLE ACTIVITY** \*\*\* Note: For Infrastructure projects, skip this page.\*\*\*

Select one box that represents the project proposal. Checkbox indicating NI eligible activity. Document allows one selection.

**Vulnerable road user safety assessment as defined by Section 316.027 (b), F.S.**

**Workforce development, training and education activities that are eligible uses of TAP funds.**

**SRTS projects, codified as 23 U.S.C. 208.** This NI activity must be primarily based at the school and benefit students and / or their parents and have documented support from the school(s). If “yes”, list the benefiting schools; total student enrollment and students served by project; approximate number of students living along the route; and the percentage of students eligible for reduced meal programs, or indicate N/A in space provided. (Word limit 10).

**NI COMPONENTS** As applicable, insert the number of each type of proposed activity. Numerical field indicating total number NI program would provide.

Number of walk or bicycle audits.

Number of bicycle skills / safety classes.

Number of pedestrian skills / safety classes.

Number of community demonstration projects.

Number of community encouragement activities.

Number of community challenges.

Number of community workshops / stakeholder meetings.

Number of classroom / educational classes receiving pedestrian / bicycle safety instruction / education.

Number of school assemblies receiving pedestrian / bicycle safety instruction / education.

Number of training sessions to implement the SRTS program (e.g., training for volunteer walking school bus leaders, training for bicycle train leaders, etc.).

Number of after school programs receiving pedestrian / bicycle safety instruction / education.

Number of bicycle rodeos.

Number of pedestrian safety skills events.

Number of schools with walking school bus programs (defined as planned route with meeting points, a timetable, and a schedule of trained volunteers).

Number of schools with bicycle train programs (defined as a planned route with meeting points, a timetable, and a schedule of trained volunteers).

Number of student-led leadership initiatives (e.g., student patrols, peer-led learning, etc.).

Select applicable boxes describing the area and complete applicable text fields. Then, upload supporting documentation.

**1. Select one box that describes the geographic population size of the project area.**

Non-Urban Area with a population of 5,000 or less

Urban Area with a population greater than 5,000 but no more than 50,000

Urban Area with a population greater than 50,000 but no more than 200,000

Urban Area with a population greater than 200,000

**2. Is the project within the boundary of an MPO\*? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the MPO in the space provided. (Word limit 5).**

Yes      No

**3. Is the project within the boundary of a Transportation Management Area (TMA)? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the TMA in the space provided. (Word limit 5).**

Yes      No

**4. Is the project within a Rural Economic Development Initiative (REDI) community or designated as a Rural Area of Opportunity (RAO) as defined pursuant to Section 288.0656, F.S.? If not, select “no”, and indicate N/A in the space provided. If so, select “yes” and indicate the REDI / RAO in the space provided. (Word limit 5)**

Yes      No

**5. Indicate the United States Congressional District number(s) of the project location. (Word limit 5).**

**6. Will the project address equity by providing benefits to traditionally underserved communities as determined by the U.S. Census? These communities could include low-income residents, minorities, those with limited English proficiency, persons with disabilities, children, or older adults. If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and briefly explain how the project improves environmental justice (e.g., disadvantage community access point(s) and destinations the project benefits, median household income, free or reduced priced school meals and how SRTS projects benefit the students, etc.). (Word limit 10).**

Yes      No

**7. Are there transit stops / shelters / support facilities within the project limits? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the identification number. (Word limit 5).**

Yes      No

**8. Is the project within a high-crash pedestrian corridor (or an area with a history of crashes involving pedestrians)?**

Yes      No



**Part 6 - Area Conditions continued...**

**9. Is the project within a high-crash bicycle corridor (or an area with a history of crashes involving bicyclists)?**

Yes      No

**10. Would the project implement a bicycle or pedestrian action plan(s)?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and specify the name of the plan and date of adoption. (Word limit 5).

Yes      No

*\* Metropolitan / Transportation Planning Organization / Agency (MPO)*

**REQUIRED UPLOAD: AREA CONDITIONS SUPPORTING DOCUMENTATION** (e.g., excerpt pages from adopted plans or studies, maps illustrating transit facilities and connectivity to the improvement, short statement of support with a signature of the school official and their contact information for SRTS projects, median household income by census tract for community benefiting, collision heat maps / crash data for area surrounding project limits, etc.).

**PART 7 – PUBLIC INVOLVEMENT**

Public involvement, engagement, and collaboration is a key component of the federal project development process and must be conducted in accordance with applicable rules and regulations in the event the project is selected for funding. Indicate which of the following are applicable (Select all that apply). Complete the text field or indicate N/A in the space provided. Then, upload supporting documentation.

**1. Does the greater community support the project, as demonstrated by recently adopted proclamations or resolutions expressing commitment and public engagement?** If “yes”, explain the engagement and how the concept evolved based on public involvement. Indicate the resolution number, adoption date, and participating parties in the space provided. If “no”, indicate N/A in the space provided. (Word limit 10).

Yes      No

**2. Was the project discussed at a regularly scheduled meeting of an advisory board of an appointed group of citizens, such as bicycle pedestrian advisory groups or similar committee that provides support toward the project?** If “yes”, provide meeting information, including the date and type of advisory board meeting, and the input received. If “no”, indicate N/A in the space provided. (Word limit 10).

Yes      No

**3. Was there an advertised public meeting to discuss the project?** If “yes”, provide a brief description, including the input received, how the concept evolved based on public involvement, date, and type of meeting. If “no”, indicate N/A in the space provided. (Word limit 10).

Yes      No

**4. Do recent community surveys indicate both need and support for the project and stakeholders will continue to be engaged in the implementation of the project?** If “yes”, briefly explain. If “no”, indicate N/A in the space provided. (Word limit 10).

Yes      No

**REQUIRED UPLOAD: PUBLIC INVOLVEMENT SUPPORTING DOCUMENTATION** (e.g., resolution, proclamation, regularly scheduled meeting agenda and minutes, public meeting advertisement, community survey, letters of support, etc.).

Is the project consistent with the applicable comprehensive plan(s), transportation plan(s), capital improvement plan(s), and / or the long-term management plan(s)? [Note: Board of County Commissioners functions as MPO in nonmetropolitan areas (Section 339.135(4)(c)1, F.S.)]. If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and use the text field to explain consistency, include MPO prioritization number. If a modification is required, indicate the meeting date for adoption. (Word limit 10).

Yes No

**REQUIRED UPLOAD: CONCURRENCY / CONSISTENCY SUPPORTING DOCUMENTATION** (e.g., supporting resolution(s), excerpt from comprehensive plan(s), transportation plan(s), capital improvement plan(s), management plan(s), prioritization list, etc.).

PART 9 – ENVIRONMENTAL CONDITIONS

Select the boxes describing the Environmental Conditions. As applicable, complete the text field or indicate N/A in the space provided. Then, upload supporting documentation. Applicants for NI proposals may skip the Environmental Conditions section.

1. Does the project involve lands identified by the Florida Wildlife Corridor Act of 2021 [Section 259.1055, Florida Statutes (F.S.)]?

Yes No

2. Does the project involve state-owned conservation lands? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the state-owned conservation lands. NOTE: Use of state-owned conservation lands is subject to coordination by the managing entity. (Word limit 5).

Yes No

3. Does a railway facility exist within 1,000 feet of the project limits? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate railway facility. (Word limit 5).

Yes No

4. Does the project physically cross a railway facility? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and indicate the crossing’s railway identification number, and beginning and ending mile points. (Word limit 5).

Yes No

5. Would the project provide lighting at locations with nighttime crashes? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe the proposed lighting in the space provided. (Word limit 5).

Yes No

6. Would the project implement an adopted Americans with Disabilities Act (ADA) transition plan? If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe proposed ADA improvements in the space provided. (Word limit 5).

Yes No

**7. Is an Environmental Assessment for the project complete?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe any specific issues in the space provided. (Word limit 10).

Yes      No

**8. Is the project adjacent to locally designated or National Register of Historic Places (NRHP) listed or eligible resources?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and list resources, indicate if the resources have received Florida Department of State Historic Preservation Grant funds, and explain any preservation agreements, covenants, or easements in the space provided. If applicable, select “unknown”. (Word limit 5).

Yes      No      Unknown

**9. Are there any archaeological sites or Native American sites located within or adjacent to the project boundary?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and list State Site Number (aka Site File Number) for the sites. If applicable, select “unknown”. (Word limit 5).

Yes      No      Unknown

**10. Are there any parks, recreation areas, or wildlife / waterfowl refuges within or adjacent to the project boundary?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and list the facilities in the space provided. (Word limit 5).

Yes      No

**11. Are there any navigable waterways adjacent to or within the project boundary?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and list the navigable waterways. (Word limit 5).

Yes      No

**12. Are there any wetlands within or adjacent to the project limits?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe in the space provided. Include permit types required and any obtained for the project. (Word limit 5).

Yes      No

**13. Is it likely that there are protected / endangered / threatened species and / or critical habitat impacts within the project limits?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe in the space provided. If applicable, select “unknown”. (Word limit 5).

Yes      No      Unknown

**14. Are there any potential contamination / hazardous waste areas within or adjacent to the project limits?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe in the space provided. If applicable, select “unknown”. (Word limit 5).

Yes      No      Unknown

**15. Are there any noise-sensitive areas near the project area?** If not, select “no”, and indicate N/A in the space provided. If so, select “yes”, and describe in the space provided. If applicable, select “unknown” (Word limit 5).

Yes      No      Unknown

**REQUIRED UPLOAD for Infrastructure (not applicable for NI): ENVIRONMENTAL CONDITIONS SUPPORTING DOCUMENTATION** (e.g., labeled photographs on maps depicting conditions, permits, copy of the entire study or environmental assessment, excerpt pages from adopted plans, etc.).

## PART 10 – DESIGN / TYPICAL SECTIONS

Select the boxes describing the design status and complete the text fields. Then, upload supporting documentation. Applicants for NI proposals may skip the Design / Typical Section.

**1. Are signed and sealed design plans available for this project?**

Yes      No

**2. If design plans are not at 100 percent, or do not meet current standards and / or reflect existing conditions, select the box identifying the status. (Word limit 100).**

No design plans      30% design plans      60% design plans      90% design plans

Other:

**3. Briefly describe the design status in the space provided. If design is at 100 percent, indicate the date of the plans. (Word limit 100).**

**REQUIRED UPLOAD for Infrastructure (not applicable for NI):** Typical Section(s) depicting existing and proposed features, dimensions, and ROW lines. If there are multiple segments, provide typical sections for each. If available, provide design plans.

Select the boxes describing the Ownership / ROW Status and complete applicable text fields. Then, upload supporting documentation. Applicants for NI proposals may skip the Ownership / ROW Status section.

1. **Is ROW acquisition, defined as obtaining property not currently owned by the Local Agency through any means (e.g., deed, easement, dedication, donation, etc.), necessary to complete this project?**

Yes      No

2. **Explain the ROW status (owned / fee simple, leased / less-than fee, and / or needs) along the project boundary, including when ROW was obtained and how ownership is documented (e.g., plats, deeds, prescriptions, certified surveys, transfers, easements). Provide information for verifying ownership (e.g., book / page number, transfer agreements, dates, etc.). If ROW acquisition is necessary before constructing the proposed project and / or the applicant agency is not the landowner, indicate the necessary coordination with other owners for all fee-simple purchases and / or any less-than fee / lease needs (including temporary construction and / or other easements and / or permits for drainage, railroad, utilities, etc.) necessary to secure ROW certification. Indicate the proposed acquisition timeline, expected funding source, the total number of parcels, type of acquisition, limitations on fund use or availability, and who will acquire and retain ownership of proposed land. (Word limit 150).**

**REQUIRED UPLOAD for Infrastructure (not applicable for NI): OWNERSHIP / ROW STATUS SUPPORTING DOCUMENTATION** including applicable ROW Certification including ownership verification documenting site control and related landowner supporting documentation. Site control documents must include an adequate legal description of the parcel(s) comprising the project site, such that staff can compare it to the boundary map submitted with the application and evaluate whether there is control of the project site (e.g., ROW Certification, ROW maps, plats, warranty deeds, prescriptions, certified surveys, easements, use agreement, etc.). Maps should clearly show the location of each ownership in relation to the project boundary and / or limits. NOTE: provide map documentation on 8.5" x 11" scale. DO NOT provide reduced copies of original plats and or maps that cannot be read at scale. If applicable, an exhibit visually depicting the new ROW anticipated for the project, together with a spreadsheet providing the tax identification number(s) of each impacted parcel and the approximate size of the new acquisition area for each impacted parcel.

## PART 12 – PROJECT IMPLEMENTATION AND COSTS

Complete either the Infrastructure Table Summary with the overall project programming (phases, schedule, and estimated costs for the proposed work) or the NI Cost Narrative Table. Then, upload supporting documentation.

Not all phase types may be eligible for TA funds, and not all areas prioritize all phases. Local agencies are responsible for covering all unanticipated cost increases, including but not limited to price inflation and increases in the cost of construction; account for them using local funds. FDOT does not allow programming TA funds for contingency costs. The local agency must have the ability to pay for non-participating costs (e.g., utility relocation). Chapter 337.14, F.S. prohibits an entity from performing both design services and construction engineering inspection services (CEI) for a project wholly or partially funded by the FDOT and administered by a local government entity.

### REQUIRED UPLOAD: PROJECT IMPLEMENTATION AND COSTS SUPPORTING DOCUMENTATION.

- 1) Either provide a detailed engineer cost estimate if the project is designed or if the project has not been designed or is a NI project, provide a detailed opinion of probable costs (including all pay items and a timeline for deliverable). Utilize the FDOT Basis of Estimates Manual to develop a detailed estimate with FDOT pay items for construction phase estimates.
- 2) As applicable, letter from local agency budget office committing local funds to the project.

**\*\*\* Note: Applications for NI Projects to skip to page 15.\*\*\***

Infrastructure Project Phases / Work Types	Select phase(s) included in this request	INFRASTRUCTURE Table Summary						
		Overall Project Programming (Cost Summary and Schedule)						
		Schedule (Month/Year)		Funding sources and costs (\$)				Total Cost Estimate (\$)
		Start (mm/yy)	End (mm/yy)	Federal Funds		Non-Federal / Local Funds		
TA Program (\$)	Other Federal (\$)			Non-TA/ Local Funds (\$)	Other (\$)			
Planning Development (Corridor or Feasibility)								
PD&E								
Preliminary Engineering / Design (PE)								
Environmental Assessment (associated with PE)								
Permits (associated with PE)								
ROW								
Construction								
CEI								
Other costs (describe)								
<b>Total Infrastructure Project Cost Estimate</b>								

\*\*\* Note: applications for infrastructure projects do not need to fill out this page\*\*\*

**NI Cost Narrative Table**

Below each item, explain how the item will support the program, and other appropriate details.

Budget Item	Requested Funds
<b>Personnel Services</b> (List titles and totals in first boxes below) In Narrative, include numbers of hours, hourly rates, who this person is, and whether it's a new position or new hours and duties added to an existing position.	
Narrative:	
Narrative:	
Narrative:	
<b>Expenses</b>	
Materials and Supplies:	
Educational items:	
Promotional Items:	
Other Expenses:	
<b>Operating Capital Outlay</b>	
Equipment:	
<b>Total NI Project Cost Estimate</b>	

FDOT Transportation Alternatives Program:

<https://www.fdot.gov/planning/systems/systems-management/tap>

FDOT Local Agency Program Manual:

<http://www.fdot.gov/programmanagement/LP/Default.shtm>

FDOT Office of Environmental Management PD&E Manual:

<https://www.fdot.gov/environment/pubs/pdeman/pdeman-current>

FDOT Basis of Estimates Manual:

<https://www.fdot.gov/programmanagement/estimates/documents/basisofestimatesmanual/boemanual>

Florida Safe Routes to School Guidelines:

<https://www.fdot.gov/safety/2A-Programs/Safe-Routes.shtm>





# TRANSPORTATION ALTERNATIVES PROGRAM CERTIFICATION OF PROJECT SPONSOR

**PROJECT NAME:**

**LOCATION:**

**PROJECT LIMITS:** (from south or west limit)

(to north or east limit)

By checking the box you agree to do the following:

Enter into a maintenance agreement with the Florida Department of Transportation (FDOT), as necessary, prior to the design phase.

Comply with the **Federal Uniform Relocation Assistance and Acquisition Policies Act** for any Right of Way actions required for the project.

Provide any required funding match, incur any additional expenses beyond the approved project costs in the LAP agreement, and are responsible for any non-participating items (e.g. utility relocations).

Pursue or retain LAP certification and enter into a LAP agreement with FDOT.

Comply with NEPA process prior to construction, including any necessary involvement with the State Historic Preservation Officer (SHPO), and other State and/or Federal agencies, prior to construction.

I further certify that the estimated costs included herein are reasonable and agree to follow through on the project once programmed in the FDOT's Work Program. I fully understand that significant increases in these costs could cause the project to be removed from the FDOT's Work Program.

\_\_\_\_\_  
\* Signature

\_\_\_\_\_  
Name (please type or print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\* This should be executed by person who has signatory authority for sponsor and is authorized to obligate services and funds for that entity (generally chairman of the board or council).