***FLORIDA DEPARTMENT OF TRANSPORTATION DISTRICT VI***

# TRANSPORTATION ALTERNATIVES PROGRAM APPLICATION FOR FISCAL YEAR 2023/2024

**2018 Application Cycle**

## **A. APPLICANT INFORMATION**

**PROJECT SPONSOR:** *Click here to enter the name of the applying municipality.*

**CONTACT PERSON**: *Click here to enter text.* **TITLE:** *Click here to enter text.*

**ADDRESS**: *Click here to enter text.* **CITY / STATE / ZIP:** *Click here to enter text.*

**PHONE:**  *Click here to enter text.* **EMAIL:** *Click here to enter text.*

**AGENCY LAP RESPONSIBLE CHARGE**: *Click here to enter text.*

**TITLE:** *Click here to enter text.* **EMAIL:** *Click here to enter text.*

**PHONE:** *Click here to enter text.*

**PROJECT SPONSOR’S LOCAL AGENCY PROGRAM (LAP) CERTIFICATION STATUS [[1]](#footnote-1)**

Not LAP certified, but will seek certification

Currently LAP Certified / LAP certification date: *Click here to enter text.*

## **B. PROJECT INFORMATION**

**PROJECT TITLE**: *Click here to enter text.*

**PROJECT LOCATION:** *Click here to enter text.*

**ROADWAY NAME AND/OR NUMBER**: *Click here to enter text.*

**PROJECT BRIEF DESCRIPTION:** *Click here to enter text.*

|  |  |  |
| --- | --- | --- |
| FOR FDOT USE ONLY | | |
| Application Complete | YES | NO |
| Project Eligible | YES | NO |
| Implementation Feasible | YES | NO |
| Include in Work Program | YES | NO |

**C. TAP QUALIFYING ACTIVITIES - PROJECT CRITERIA**

**Select the Transportation Alternative activity that the proposed project will address. Please select one activity that represents most of the work proposed. Eligible activities must be consistent with details described under 23 U.S.C. 101(a) (29) and 213(b). (*Note: selecting more than one activity does not ensure or increase eligibility*.)**

1. Construction of on-road and off-road trail facilities for pedestrians, bicyclists, and other non-motorized forms of transportation, including sidewalks, bicycle infrastructure, pedestrian and bicycle signals, traffic calming techniques, lighting and other safety - related infrastructure, and transportation projects to achieve compliance with the Americans with Disabilities Act of 1990
2. Construction, planning, and design of infrastructure-related projects and systems that will provide safe routes or for non-drivers, including children, older adults, and individuals with disabilities to access daily needs
3. Conversion and use of abandoned railroad corridors for trails for pedestrians, bicyclists, or other non-motorized Transportation users
4. Construction of turnouts, overlooks, and viewing areas
5. Community improvement activities, which include but are not limited to:
6. Inventory, control, or removal of outdoor advertising
7. Historic preservation and rehabilitation of historic transportation facilities
8. Vegetation management practices in transportation rights-of-way to improve roadway safety, prevent against invasive species, and provide erosion control
9. Archaeological activities relating to impacts from implementation of a transportation project eligible under Title 23
10. Any environmental mitigation activity, including pollution prevention and pollution abatement activities and mitigation to**:**
11. Address storm water management, control, and water pollution prevention or abatement related to highway construction or due to highway runoff, including activities described in sections 133(b)(11), 328(a), and 329 of Title 23; or
12. Reduce vehicle-caused wildlife mortality or restore and maintain connectivity among terrestrial or aquatic habitats
13. SRTS program-eligible projects and activities listed in section 1404(f) of the SAFETEA-LU:
14. Infrastructure-related projects
15. Non-infrastructure-related projects
16. Safe Routes to School Coordinator
17. An SRTS application is attached this application - mandatory
18. Planning, designing, and constructing boulevards[[2]](#footnote-2) and other roadways largely in the Right-of-Way of former Interstate System routes or other divided highways
19. Recreational trails program[[3]](#footnote-3)

**D. PROJECT DETAILS**

1. **Roadway Classification**

State Roadway  Federal Aid Roadway

Local Roadway  Other

1. **Project Termini**

**Begin:** *Click here to enter text.*  **End:** *Click here to enter text.* **Project Length:** *Click here to enter text.*

1. **Are the location maps and aerials attached (required)?** Yes  No
2. **Provide the Scope of Work and identify any items attached:** *Click here to enter text.*

A more detailed scope of work is attached Yes  No

Conceptual plans are attached to this application Yes  No

Typical section drawings are attached Yes  No

1. **Are there any Design Plans for the project?** Yes  No

If yes, are Design Plans updated to Current Standards and Existing Conditions? Yes ☐ No

1. What are the dates of the Design Plans? *Click here to enter text.*
2. Who is the Engineer of Record? Provide contact information: Click here to enter text.
3. **Provide a Project Schedule.** *Click here to enter text.*

The schedule should include, at a minimum: consultant acquisition, plan preparation, environmental analysis and report preparations, plans submittal, FDOT review of project documents and permit acquisitions. *Click here to enter text.*

A detailed project schedule is attached Yes ☐ No

1. **Describe the project's existing Right-of-Way ownerships. Identify when the Right-of-Way was acquired and how ownership is documented (i.e. plats, deeds, prescriptions, certified surveys, easements)** *Click here to enter text.*

Attached is documentation of any Right-of-Way ownership documentation Yes ☐ No

1. **Is Right-of-Way acquisition proposed?** Yes  No

If yes, describe the proposed acquisition, including expected fund sources, limitations on fund use or availability, and who will acquire and retain ownership of proposed Right- of-Way[[4]](#footnote-4): *Click here to enter text.*

Will temporary construction easements be required? Yes  No

If yes, please describe: *Click here to enter text.*

1. **Identify any permits that might be required:** *Click here to enter text.*

Copies of obtained permits are attachedto this applicationYes  No

## **E. ENVIRONMENTAL EVALUATION**

***Coordination with the Federal Highway Administration and the State Historic Preservation Officer will be required by Section 106 of the National Historic Preservation Act.***

1. **Did your Agency perform an environmental assessment for the project?** Yes  No
2. **Does your Agency have a historic preservation planner?** Yes  No

If yes, provide contact information: *Click here to enter text.*

1. **Is your proposed project located within or adjacent to a locally designated historic property or a National Register of Historic places-listed historic site?** Yes  No

If yes, have any historic properties/places received Florida Department of State Historic Preservation Grant funds? Attach any preservation agreements, covenants, or easements related to these properties.

Yes  No

1. **Are any archeological sites or Native American sensitive sites or areas located within or adjacent to the project?** Yes  No

If yes, provide a brief description: *Click here to enter text.*

1. **Has there been outside coordination with any Federal or State Agencies for this project?** Yes  No

If yes, provide a brief description and documentation: *Click here to enter text.*

1. **Are there any parks, recreation areas or wildlife or waterfowl refuges?** Yes  No

If yes, provide a brief description: *Click here to enter text.*

1. **Are there any navigable waterways?** Yes  No

If yes, provide a brief description: *Click here to enter text.*

1. **Does the project have any wetland impacts ?** Yes  No

If yes, will wetlands mitigation be needed?  Yes  No

If yes provide a brief description: *Click here to enter text.*

1. **Has your agency reviewed the project for potential protected species/ critical habitat impacts?** Yes  No

If yes, provide a brief description: *Click here to enter text.*

1. **Has your agency reviewed the project for potential contamination that could affect the area?** Yes  No

If yes provide a brief description: *Click here to enter text.*

1. **Are there noise sensitive areas?** Yes  No

If yes, provide a brief description: *Click here to enter text.*

**F. PROJECT IMPLEMENTATION INFORMATION**

**Attach documentation requested below as Exhibits to this application. List Exhibits here**: Click here to enter text.

1. **Which project phases are included in this funding request?**

Planning Activities  Project Development & Environment

Study Preliminary Engineering/Final Design Plans  Construction

Construction Engineering & Inspection (CEI)

**Who is proposed to execute the following tasks of the project? Check all applicable boxes:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PLANNING**  Applicant’s Staff | **PD&E**  Applicant’s Staff | **DESIGN**  Applicant’s Staff | **ROW**  Applicant’s Staff | **CEI**  Applicant’s Staff |
| Consultant | Consultant | Consultant | Consultant | Consultant |
|  | FDOT |  | FDOT | FDOT |

***Note: The Design consultant and Construction Engineering & Inspection (CEI) consultant shall not be the same if Federal funds are granted and used for either phase -*** Refer to Chapter 18 of the LAP Manual requirements regarding the use of consultants.[[5]](#footnote-5)

1. **Are there any related project work phases that are already complete or currently underway?** Please describe:*Click here to enter text.*

If previous segments of this project were constructed as LAP projects or JPA’s, provide the associated Financial Management numbers: *Click here to enter text.*

1. **Have any public awareness activities or community meetings been held?** Yes  No

If yes, provide a brief description and supporting documentation: *Click here to enter text.*

1. **Is there public and/or private support for the project, for example: petitions, written endorsements, resolutions, letters of support, etc.)?** Yes  No

If yes, provide a brief describe and supporting documentation: *Click here to enter text.*

1. **Is there a proposed maintenance plan for when the project is complete?**  Yes  No

If yes, provide a brief description and supporting documentation: *Click here to enter text.*

1. **Is there any other specific implementation information that should be considered?** Yes  No

If yes, provide a brief description and supporting documentation: *Click here to enter text.*

## 

## **G. COST ESTIMATE**

1. **Attach a detailed cost estimate, broken down into FDOT typical pay items, to allow for verification of eligible project costs. Provide an engineer’s estimate using FDOT’s Basis of Estimates Manual[[6]](#footnote-6). The engineer’s estimate applies to the cost estimate for construction projects. Include your basis/ reasoning justifying your cost estimate.**

A detailed cost estimate is attached Yes  No

1. **Provide a summary of estimated costs for the work being proposed**

A detailed project cost estimate must be attached to this application **[[7]](#footnote-7)**

|  |  |
| --- | --- |
| Planning Activities | $*Click here to enter text.* |
| Project Development & Environment Study (including environmental assessment for minor improvements, including Programmatic & Type 1 Categorical Exclusions) | $*Click here to enter text.* |
| Design Costs/ Plans Preparation | $*Click here to enter text.* |
| Permits (including application fees, mitigation and permit acquisition work) | $*Click here to enter text.* |
| Construction | $*Click here to enter text.* |
| Construction Engineering and Inspection activities (CEI) | $*Click here to enter text.* |
| Other Costs (describe)[[8]](#footnote-8) *Click here to enter text.* | $*Click here to enter text.* |
| **Total Estimated Project Cost** | **$*Click here to enter text.*** |

1. **PROJECT FUNDING**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| TAP FUNDS REQUESTED | $ *Click here to enter text.* |  | PERCENT TAP FUND | *Click here to enter text.*% |
| LOCAL FUNDS ALLOCATED | $ *Click here to enter text.* |  | PERCENT LOCAL FUND | *Click here to enter text.* % |
| **TOTAL AM0UNT REQUESTED** | $ *Click here to enter text.* |  | **TOTAL % ALLOCATION** | *Click here to enter text.* % |

## 

## **H. Certification of Project Sponsor**

I hereby certify that the proposed project herein described is supported by *Click here to enter text.*

(municipal, county, state or federal agency, or tribal council) and that said entity will: (1) provide any required funding match; (2) enter into a maintenance agreement with the Florida Department of Transportation; (3) comply with the Federal Uniform Relocation Assistance and Acquisition Policies Act for any Right of Way actions required for the project, (4) Comply with Local Agency Program Manual during all phases of the project, (5) comply with NEPA process prior to construction, this may involve coordination with the State Historic and Preservation Office (SHPO) prior to construction. (Not at time of application) and (6) support other actions necessary to fully implement the proposed project.

I further certify that the estimated costs and/or failure to follow through on the project once programmed in the Florida Department of Transportation’s Work program included herein are reasonable. I understand that significant increases in these costs could cause the project to be removed from the Work Program.

**Name (please type or print):** *Click here to enter text.*

**Title**: *Click here to enter text.*

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

**Date**: *Click here to enter text.*

If you have any questions about this application or need assistance, please contact:

**David Henderson**

Miami-Dade Transportation Planning Organization

Phone: (305) 375-4507

[david.henderson@mdtpo.org](mailto:david.henderson@mdtpo.org)

**Mayte Santamaria**

Monroe County

Phone: (305) 289-2500

Email: [Santamaria-Mayte@MonroeCounty-FL.Gov](mailto:Santamaria-Mayte@MonroeCounty-FL.Gov)

**Xiomara Nunez**

Florida Department of Transportation District Six

Phone: (305) 470-5404

[xiomara.nunez@dot.state.fl.us](mailto:xiomara.nunez@dot.state.fl.us)

**RESOURCES**

FDOT Local Agency Program Manual

<http://www.dot.state.fl.us/programmanagement/LAP/LAP_TOC.shtm>

FDOT PD&E Manual

<http://www.dot.state.fl.us/emo/pubs/pdeman/pdeman1.shtm>

Basis of Estimates Manual

<http://www.fdot.gov/programmanagement/Estimates/BasisofEstimates/BOEManual/BOEOnline.shtm>

1. All Agencies shall be certified according to the Local Agency Program Manual Chapter 2, for more details <http://www.dot.state.fl.us/programmanagement/LAP/Current/CHAPTER%202_2015.pdf> [↑](#footnote-ref-1)
2. A boulevard is defined as a walkable, low speed (35 mph or less) divided arterial thoroughfare in urban environments designed to carry both through and local traffic, pedestrians and bicyclists. Boulevards may be long corridors, typically four lanes but sometimes wider, serve longer trips, provide pedestrian access to land, may be high ridership transit corridors, are primary emergency response routes and use vehicular and pedestrian access management techniques. Curb parking is encouraged. [↑](#footnote-ref-2)
3. https://www.fhwa.dot.gov/environment/transportation\_alternatives/guidance/guidance\_2016.cfm#RecreationalTrails [↑](#footnote-ref-3)
4. All right-of-way acquisitions must comply with State and Federal rules, regulations and procedures. [↑](#footnote-ref-4)
5. Refer to LAP manual at <http://www.dot.state.fl.us/programmanagement/LAP/LAP_TOC.shtm> [↑](#footnote-ref-5)
6. Use the following links to access the Basis of Estimates Manual as well as historical cost information for your area: <http://www.fdot.gov/programmanagement/Estimates/BasisofEstimates/BOEManual/BOEOnline.shtm>

   <http://www.fdot.gov/programmanagement/Estimates/HistoricalCostInformation/HistoricalCost.shtm> [↑](#footnote-ref-6)
7. Please use FDOT Basis of Estimates Manual for your proposed project Basis of Estimates Manual

   <http://www.dot.state.fl.us/programmanagement/Estimates/BasisofEstimates/BOEManual/BOEOnline2016DRAFT.shtm> [↑](#footnote-ref-7)
8. FDOT does not allow programming for contingency costs. Any contingency costs should be accounted for using local funds. [↑](#footnote-ref-8)