

**LOCAL SURFACE TRANSPORTATION BLOCK GRANT PROGRAM FUNDING APPLICATION  
Central Minnesota Area Transportation Partnership**

**FY 2029**

**1. APPLICANT INFORMATION**

Local Agency: \_\_\_\_\_ Project Manager: \_\_\_\_\_  
 Address: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 Project Contact (If different from Proj. Mgr.): \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**2. PROJECT IDENTIFICATION**

RDC/MPO Region: \_\_\_\_\_ Congressional District: \_\_\_\_\_ Legislative District: \_\_\_\_\_ Length: \_\_\_\_\_ Mi.  
 Route # \_\_\_\_\_ &/or Street Name: \_\_\_\_\_  
 Beginning Termini: \_\_\_\_\_  
 Ending Termini: \_\_\_\_\_

**3. TECHNICAL INFORMATION**

A. Functional Classification of Roadway/Highway <i>(Check all that apply)</i>		B. Pavement Condition	
<p align="center"><b>Urban</b></p> <input type="checkbox"/> Urban Principal Arterial <input type="checkbox"/> Urban Minor Arterial <input type="checkbox"/> Urban Collector	<p align="center"><b>Rural</b></p> <input type="checkbox"/> Rural Principal Arterial <input type="checkbox"/> Rural Minor Arterial <input type="checkbox"/> Rural Major Collector	Age of Surface:	Rating:
C. Traffic Volume		D. Bridge Condition	
Current AADT:	20-Year AADT:	SR:	

**4. PROJECT TYPE** *(Check all that apply)*

<input type="checkbox"/> New Alignment	<input type="checkbox"/> Roadway Reclamation, Reconditioning & Resurfacing
<input type="checkbox"/> Roadway Expansion	<input type="checkbox"/> Bridge
<input type="checkbox"/> Roadway Reconstruction	<input type="checkbox"/> Other: <i>(specify)</i>

**5. SHORT TITLE STIP DESCRIPTION** *(Limited to 120 characters)*

\_\_\_\_\_

**6. PURPOSE AND NEED** *(Summary)*

\_\_\_\_\_

## 7. PROJECT QUALIFICATIONS

### A. Access and Mobility

Explain how the project increases the accessibility and mobility options for people and freight.

### B. System Connectivity

Explain how the project enhances the integration and connectivity of the transportation system for people and freight.

### C. Multimodal

Explain how the project promotes walking, bicycling, transit, and other modes as an integral component of the transportation system.

### D. System Condition

Explain the current system conditions and how this project will preserve or enhance the transportation infrastructure and/or operations.

**E. Safety**

Explain how the project or elements of the project may improve safety.

**F. Economic Vitality**

Explain how the project supports the economic development and job retention/creation goals in the community and region.

**G. Equity**

What was the last year your jurisdiction received federal aid for a construction project?

**8. COST SUMMARY**

Item	Amount	% of Total
Federal Funds Requested <i>(Maximum 80% / Minimum 30%)</i>		
Local Matching Funds <i>(Minimum 20%)</i>		
<b>Total Eligible Costs</b>		

**9. RIGHT OF WAY NEEDS** *(Check all that apply)*

Property to be purchased?     Yes    No                      Easement(s) needed?     Yes    No  
 Donated property?             Yes    No                      Relocations anticipated?    Yes    No

**10. PROJECT TIMELINE**

Phase	Estimated Month / Year Completed
Environmental Document Completed	/
Construction Plan Prepared	/
Right of Way Acquired	/
Construction Start	/
Estimated Project Duration	Months

**11. SUPPORTING PROJECT DETAILS**

- A. Is the project identified in an approved or adopted statewide, regional, or local plan?  Yes  No  
If yes, please list all relevant plans: \_\_\_\_\_
- B. Has your agency developed a financial strategy to match the federal funds and any additional funding necessary to complete your proposed project?  Yes  No  
If no, please explain: \_\_\_\_\_
- C. If successfully funded, is your agency considering accelerating the project development and construction using Advance Construction?  Yes  No If yes, please list planned year of construction: \_\_\_\_\_
- D. Which environmental document path will the project likely follow? *(If unsure, consult with the District State Aid Engineer.)*  Project Memo  Environmental Assessment  Environmental Impact Statement

**12. ADDITIONAL PROJECT DETAILS (Optional)**

The applicant recommends that this project be selected for federal funding and attests a commitment to the project's development, implementation, construction, maintenance, management, and financing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

The sponsor will also be responsible for assuring future maintenance of the completed project by resolution and any additional costs associated with the project not covered by its request.