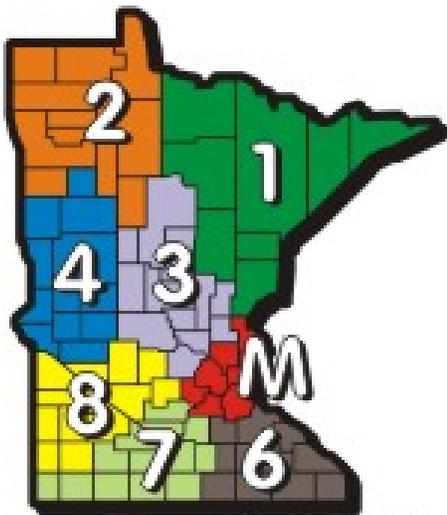


# Transportation Alternatives Program (TAP)

Solicitation  
Fall 2015



Area Transportation Partnership  
**Boundaries**

FULL APPLICATION FORM

# **TRANSPORTATION ALTERNATIVES PROGRAM FULL APPLICATION FORM**

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Note for Metro Area Applicants: TAP solicitation for the seven-county Twin Cities metropolitan area (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington counties) is conducted by the Metropolitan Council and its Transportation Advisory Board. For more information about the Twin Cities TAP solicitation, visit the [Met Council website](#).

## **Related Documents**

### **TAP Application Guidebook**

The document includes information on TAP program requirements, qualifying activities, eligible project sponsors, cost-sharing requirements and general project timeline guidance, as well as key regional contacts.

### **TAP Letter of Intent Worksheet**

The document includes information on the letter of intent review process as well as a worksheet to assist with completing the online letter of intent form.

# **Full Application Form**

**Section 1: General Information**

NOTES: If your overall project contains non-eligible or non-transportation related elements, please mention the entire project in the brief project description, but concentrate the application, budget, etc. on the elements that are eligible and transportation related.

Sponsoring Agencies, if sponsoring for another project applicant, are advised to have dialog with the project applicant to ascertain the level of commitment by the applicant to follow through on delivery of the project – including the potential use of Eminent Domain.

\_\_\_\_\_  
**Name of Project:** \_\_\_\_\_

**Project is located in ATP(s)** \_\_\_\_\_, **In the county(ies) of** \_\_\_\_\_

**Brief Project Description (include location):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Project Applicant:** \_\_\_\_\_

**Contact Person (from project applicant):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**County:** \_\_\_\_\_ **Phone No:** \_\_\_\_\_ **Fax No:** \_\_\_\_\_

**Sponsoring Agency (if different than applicant):** \_\_\_\_\_

**Contact Person (from sponsoring agency, if different than applicant):** \_\_\_\_\_

\_\_\_\_\_  
*(Applicant Signature)*

\_\_\_\_\_  
*(Date)*

\_\_\_\_\_  
*(Sponsoring Agency Engineer Signature)*

\_\_\_\_\_  
*(Date)*

\_\_\_\_\_  
*(Local Unit of Government Signature)*

\_\_\_\_\_  
*(Date)*

\_\_\_\_\_  
*(If in MPO area, signature of MPO Executive Director)*

\_\_\_\_\_  
*(Date)*

**Section 2: Project Budget**

Please identify what costs will be incurred to carry out the proposed project, using the following budget categories as a guideline. Where appropriate, break down your costs by units purchased. For example: number of acres, cubic yards of fill, etc. (Attach additional sheet(s) if necessary.)



\*Cost estimates are to be submitted in current year dollars.

<u>A. Eligible Work/Construction Items</u>	<u>Estimated Quantity</u>	<u>Unit Cost</u>	<u>Total Cost</u>
			<b><u>Line A: Total</u></b>

**B. Non eligible Items (list) \*\***

			<b><u>Line B: Total</u></b>

- 1. Total cost of proposed project: (line A + B) \$ \_\_\_\_\_
- 2. Items not eligible for Alternative funding: (line B) \$ \_\_\_\_\_
- 3. Total eligible costs – recommended range \$100,000 to \$1 million\*\*\* (line A) \$ \_\_\_\_\_
- 4. Applicant’s contribution toward the eligible alternative project costs \$ \_\_\_\_\_
- 5. Total amount requested in alternative funds (# 3 minus # 4) \$ \_\_\_\_\_

\*Grant recipients will need to provide a match based on the year of construction estimate developed when the grant is awarded.

\*\*Includes Right of Way or Land Acquisition (appraisal fees, legal fees, etc.), Administrative Costs (preliminary and construction engineering and contingencies)

\*\*\* See ATP Project Evaluation section of this document for any additional requirements related to project costs





**Section 5: ATP Project Evaluation**

[Each ATP will be responsible for developing this section of the TAP application. This section should include the additional information and questions required in order to implement the specific project selection process and criteria developed by each ATP. The information requested in this section should be above and beyond what is already asked for in the previous pages of this document, not duplicated.]

**Section 6: Application Checklist**

[Each ATP will be responsible for developing a checklist for as a tool for the applicant to ensure all the required information and documentation has been included prior to submittal. The checklist should reflect both the standard application components (pages 10-13 of this document) as well as the information requested specific to each ATP.]