** Supplemental Information**

*for Non-Capacity Project Applications*

 [ ]  Transportation Alternative [ ]  Congestion Management

|  |  |
| --- | --- |
| **Name of Project:**  | Click or tap here to enter text. |
| **Brief Description of Project:**  | Click or tap here to enter text. |

**The following elements are included in the project application:**

[ ]  The name and a brief description (including from / to) of the project being submitted (from FDOT Application, Page 1 & 2)

[ ]  A project map clearly indicating the location and limits of the proposed project. If the project includes a connection to an existing network, please indicate on map.

|  |
| --- |
| **School Zone Safety** |
| **The closest public (K-12) school to the project:** | Click or tap here to enter text. |
| **Address of school:** | Click or tap here to enter text. |
| **Approximate distance from school to project (Feet or Miles):** | Click or tap here to enter text. |
| **Project Linkage** |
| **Yes** [ ]  | **No** [ ]  | **N/A** [ ]  | The project is identified in the [HRTPO Bicycle and Pedestrian Safety Plan](https://www.heartlandregionaltpo.org/_files/ugd/d439d1_96c8f84a72ec4ebcb903ca9bdffdc156.pdf) |
| **Yes** [ ]  | **No** [ ]  | **N/A** [ ]  | The project provides linkage to the existing or programed sidewalk or trail system.  |
| Location of connection from existing sidewalk to project: | Click or tap here to enter text. |
| **Yes** [ ]  | **No** [ ]  | **N/A** [ ]  | The project completes connection/closes gaps in the existing sidewalk or trail system.  |
| **Yes** [ ]  | **No** [ ]  | **N/A** [ ]  | The project is an isolated improvement.  |
| Please briefly discuss how the project adds to, or enhances the existing sidewalk or trail network, or completes connections in the existing network by completing gaps.  | Click or tap here to enter text. |
| **Project Status** |
| **Yes** [ ]  | **No** [ ]  | **Project demonstrates support through funding of the project at the local level.** |
| **Local or Private Funding Provided for:** [ ]  Planning Study [ ]  PD&E [ ]  PE [ ]  ROW [ ]  CST [ ]  CEI |
| **Local support is demonstrated through:** |
| **Yes** [ ]  | **No** [ ]  | **Programming of the project for funding (or match) in local CIE / CIP** |
|  |  | Amount Funded: Click or tap here to enter text. |
| **Yes** [ ]  | **No** [ ]  | **In kind services from local government** |
|  |  | Amount Funded: Click or tap here to enter text. |
| **Yes** [ ]  | **No** [ ]  | **Public / private sector funding partnership** |
|  |  | Amount Funded: Click or tap here to enter text. |
| **Please provide the following support documentation:** |
|[ ]  **Capital Improvement Element** |
|  | Plan Name: Click or tap here to enter text. | Plan Submission or Adoption Date: Click or tap to enter a date. | Page project(s) is referenced in Plan: Click or tap here to enter text. |
|[ ]  **Capital Improvement Plan** |
|  | Plan Name: Click or tap here to enter text. | Plan Submission or Adoption Date: Click or tap to enter a date. | Page project(s) is referenced in Plan: Click or tap here to enter text. |
|[ ]  **Other Local Plan** |
|  | Plan Name: Click or tap here to enter text. | Plan Submission or Adoption Date: Click or tap to enter a date. | Page project(s) is referenced in Plan: Click or tap here to enter text. |
|[ ]  **Public Private participation agreement** |
|  | Agreement Between: Click or tap here to enter text. | Agreement Effective: Click or tap to enter a date. |
| **Yes** [ ]  | **No** [ ]  | **Any phases currently programmed in a 5 Year FDOT Adopted Work Program?** |
| If “Yes” is marked above, please provide citation and/or FPN from Work Program: | Click or tap here to enter text. |
| **Yes** [ ]  | **No** [ ]  | **Does this project connect to a project in a 5 Year FDOT Adopted Work Program?** |
| If “Yes” is marked above, please provide citation and/or FPN from Work Program: | Click or tap here to enter text. |
| [ ] Please attach a PDF of all documents cited (above) |
| **Community and/or Environmental Impact** |
| **Yes** [ ]  | **No** [ ]  | **This project has no impact on the community or environment.** |
| **Yes** [ ]  | **No** [ ]  | **This project has a potential negative impact on the community or environment.** |
| If “Yes”, discuss how this project has a negative impact on the surrounding area: | Click or tap here to enter text. |
| **Yes** [ ]  | **No** [ ]  | **This project has a potential positive impact on the community or environment.** |
| If “Yes”, discuss how this project has a positive impact on the surrounding area: | Click or tap here to enter text. |
| **Please attach a PDF of any additional documentation or documents such as local sidewalk, trail, or pedestrian plans you feel could be helpful to FDOT and / or HRTPO Staff in reviewing this project.** |
| **HRTPO Staff Use Only:** |
| **Safety** |
| **Yes** [ ]  | **No** [ ]  | Serious/fatal crashes in past 5 years (depending on data availability) based on information provided by the FDOT Safety Office. |
| **Operational performance** |
|  | FDOT LOS on road or intersecting state road |
|  | FDOT Truck factor on road or intersecting state road |
|  | Person miles traveled on Non-Interstate NHS of road or intersecting state road not reliable (<50% on FDOT scale) |

*For questions regarding this form or the application process, please contact Marybeth Soderstrom at msoderstrom@cfrpc.org. For questions regarding the FDOT project applications, please contact Edith Perez, Florida Department of Transportation, District One at edith.perez@dot.state.fl.us*