|  |  |
| --- | --- |
| **Complete Application Checklist for Capital Projects**  ***All Attachment files should be clearly named prior to upload.*** | |
| **✓** | **Application Narrative Responses** |
|  | **Section 1: General Information** |
|  | **Section 2: Project Type and Location/Scope of Work** |
|  | **Section 3: Funding Request and Cost Estimate** |
|  | **Section 4: Planned Project Schedule** |
|  | **Section 5: Eligibility Criteria** |
|  | **Section 6: Local Priorities** |
|  | **Section 7: Non-Scored Considerations** |
|  | **Attachment – One page project fact sheet** |
|  | **Attachment – Clear and High-Quality Project Map** |
|  | **Attachment – GIS Compatible file of project location (kmz, shp, etc.)** |
|  | **Attachment – Engineer’s Estimate** |
|  | **Attachment –** **Air Quality Improvement Quantification and Cost Effectiveness Analysis** |
|  | **Attachment – DAC Areas’ Project Map** |
|  | **Attachment – Safety Documentation** |
|  | **Attachment – Map of project area destinations** |
|  | **Attachment – Map of transit stops or schools in project area** |
|  | **Attachment – Documentation for community engagement, public participation, and outreach** |
|  | **Attachment – Letters of Support** |

**Section 1: General Information**

|  |  |
| --- | --- |
| Project Title |  |
| Implementing Agency |  |
| Project Contact Name |  |
| Project Contact Title |  |
| Project Contact Email |  |
| Project Contact Phone Number |  |
| Application Type  *Please indicate Plan or Capital* | **CAPITAL** |
| Phase of Work that request would support (PA&ED, PS&E, ROW, CON) |  |
| Application Priority to applicant agency | *(For example: Priority 1 of 3)* |
| Applicant Agency Caltrans Master Agreement Number |  |
| PA&ED – Project Approval and Environmental Documents PS&E- Plans, Specifications and Estimates  ROW – Right of Way CON - Construction | |

***ATTACHMENT:*** *For all projects please* ***ATTACH*** *a one page project fact sheet.*

**Section 2: Project Type and Location/Scope of Work**

*For Capital projects, please describe the existing conditions, scope of work, and location including project limits, cross-streets, or other indicators of location.*

|  |
| --- |
| **Type response here.** |

***ATTACHMENT:*** *For all projects please* ***ATTACH:***

* *a clear and high-quality project map*
* *a GIS compatible file of the project location (kmz, shp, etc.)*

**Section 3: Funding Request and Cost Estimate**

*Please fill in the funding request table in $000’s. OCTA encourages cost estimates to be escalated to year of expenditure. As noted in guidelines, “Final eligibility determinations are subject to review and approval by Caltrans and the Federal Highways Administration. OCTA intends to recommend some projects be funded with a combination of CMAQ and STBG funds in an effort to address this issue. However, applicants should also consider exceeding the local match or local funding contingency in order to fully fund the project, where components may be deemed ineligible.”*

***ATTACHMENT:*** *For Capital Project Nominations, please* ***ATTACH*** *an engineer’s estimate that is consistent with the cost estimate below.*

***For Capital Type Projects ($000’s)–***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Phase of work applying for:** | **Federal fund Request** | **Match1** | **Other Funds2** | **Total Project Cost** |
| **(In dollars, $000’s)** | | | | |
| **Preliminary Engineering (PE) – PA&ED** |  |  |  |  |
| **PE - PS&E or Final Design** |  |  |  |  |
| **ROW** |  |  |  |  |
| **CON** |  |  |  |  |
| 1 – Minimum 12% Match of federally participating costs required with Federal Fund Request. 2 - Programming additional local funding over the required match is recommended for items that are not federally eligible. | | | | |

**Section 4: Planned Project Schedule**

*Please fill in schedule below.*

**For Capital Type**

|  |  |  |
| --- | --- | --- |
| **Milestone** | **Start Date/Date** | **Completion Date/Type** |
| **Preliminary Engineering (PE) PA&ED phase** |  |  |
| PE, PA&ED- Request for Authorization (RFA) / Submittal of E76 to Caltrans District 12, if applicable. |  |  |
| Date for CEQA approval and type |  |  |
| Date for NEPA approval and type |  |  |
| **Preliminary Engineering PS&E or Final Design Phase** |  |  |
| Final Design - RFA / Submittal of E76 to Caltrans District 12, if applicable |  |  |
| **ROW Phase** |  |  |
| ROW RFA / Submittal of E76 to Caltrans District 12, if applicable |  |  |
| Row Certification – date and type |  |  |
| **CON Phase** |  |  |
| CON - RFA / Submittal of E76 to Caltrans District 12, if applicable1 |  |  |
| CON Contract Award2 |  |  |
| CON (Contract Acceptance) |  |  |
| CON Close Out |  |  |
| 1 – Local jurisdiction may not advertise for construction until FHWA has approved the E76 and funds are considered obligated for the project phase. 2 – Construction contract award may not proceed using federal funds if E76 was not approved before advertisement for work. | | |

**Section 5: Eligibility Criteria**

Section 5A: Eligibility Criteria - Alignment with the Southern California Association of Governments (SCAG) Connect So Cal Regional Transportation Plan’s (RTP) goals and strategies. *Use the following table to indicate (quantitatively or qualitatively) how the project nomination aligns with SCAG’s RTP Goals and Strategies.* *Please indicate and fill the table for* ***all that apply****.* ***Projects should align with a minimum of two goals and strategies, three or more are recommended.***

|  |  |
| --- | --- |
| **Connect SoCal Goals** | **Explanation** |
| Encourage regional economic prosperity and global competitiveness. | *Type response here.* |
| Improve mobility, accessibility, reliability, and travel safety for people and goods. | *Type response here.* |
| Enhance the preservation, security, and resilience of the regional transportation system. | *Type response here.* |
| Increase person and goods throughput and travel choices within the transportation system. | *Type response here.* |
| Reduce greenhouse gas emissions and improve air quality. | *Type response here.* |
| Support healthy and equitable communities. | *Type response here.* |
| Adapt to a changing climate and support an integrated regional development pattern and transportation network. | *Type response here.* |
| Leverage new transportation technologies and data-driven solutions that result in more efficient travel. | *Type response here.* |
| Encourage development of diverse housing types in areas well supported by multiple transportation options. | *Type response here.* |
| Promote conservation of natural and agricultural lands and restoration of critical habitats. | *Type response here.* |

Section 5B: Eligibility Criteria - Performance Indicators and Measures

*Use the following table to indicate (quantitatively or qualitatively) how the project nomination may contribute to the Southern California Association of Governments Connect So Cal Regional Transportation Plan Performance Measures. Please indicate and fill the table for* ***all that apply****.* ***Projects should support a minimum of four of the Performance Measures, six or more are recommended.*** *Please also refer to “Table 2 Connect So Cal Performance Mesaures” of the Performance Measures Technical Report available here:* <https://scag.ca.gov/sites/main/files/file-attachments/fconnectsocal_performance-measures.pdf>

|  |  |  |
| --- | --- | --- |
| **Outcome** | **Measure and Metric or Quantitative Response** | **Data Source** |
| **Location Efficiency** | *Type response here.* | *Type response here.* |
| *Location Efficiency – Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Mobility and Accessibility** | *Type response here.* | *Type response here.* |
| *Mobility and Accessibility – Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Safety and Public Health** | *Type response here.* | *Type response here.* |
| *Safety and Public Health - Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Environmental Quality** | *Type response here.* | *Type response here.* |
| *Environmental Quality - Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Economic Opportunity** | *Type response here.* | *Type response here.* |
| *Economic Opportunity - Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Investment Effectiveness** | *Type response here.* | *Type response here.* |
| *Investment Effectiveness - Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Transportation System Sustainability** | *Type response here.* | *Type response here.* |
| *Transportation System Sustainability - Please include any supplemental* ***qualitative*** *narrative here.* | | |
| **Environmental Justice** | *Type response here.* | *Type response here.* |
| *Environmental Justice - Please include any supplemental* ***qualitative*** *narrative here.* | | |

Section 5C: Eligibility Criteria – Air Quality Improvement Quantification and Cost Effectiveness

***ATTACHMENT:*** *For Capital Type Project Nominations, please* ***ATTACH*** *an air quality improvement quantification for the project nomination.*

Please include any supplemental qualitative narrative for air quality improvements related to the project nomination in the box below:

|  |
| --- |
| **Type response here.** |

***ATTACHMENT:*** *For Capital Type Project Nominations, please* ***ATTACH*** *a cost effectiveness analysis for the project nomination based on emissions reduction.*

Section 5D: Eligibility Criteria – Impacts to and Benefits for Disadvantaged Communities

*For the OCCSP, disadvantaged communities are defined as geographies designated as SCAG Priority Equity Communities. The Priority Equity Communities data viewer is available here:* <https://hub.scag.ca.gov/datasets/daa7cbaf5b064399800f3426cbb64270_0/about>

*Does the project benefit disadvantaged communities? (Please indicate yes or no)*

Yes

No

***ATTACHMENT:*** *If project provides benefits for disadvantaged communities, please* ***ATTACH*** *map reflecting which geographies identifies benefit from the project in relation to the project area.*

*If yes, please describe or list benefits to disadvantaged communities below:*

|  |
| --- |
| **Type response here.** |

**Section 6: Local Priorities**

Section 6A: Local Priorities – Aligns with Planning Efforts

*Please indicate all planning documents and page number the project is included in. Please add rows to table below if needed.*

*(General Plans, Corridor Plans, Specific Plans, Bicycle/ Pedestrian Plans, Transit Station Area Plans, Local Roadway Safety Plans, Safe Routes to School Plans, etc.)*

|  |  |  |
| --- | --- | --- |
| **Plan Name** | **Page Number** | **Plan Link** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

*Does the project close a gap or provide a connection to a regional bikeway?*

|  |
| --- |
| **Type response here.** |

Section 6B: Local Priorities – Safety

*Please describe design safety treatments to be implemented that will minimize the risk of collisions to cyclists and pedestrians.*

|  |
| --- |
| **Type response here.** |

*Please provide the number of fatalities and serious injuries at project scale and/or network scale that are relevant to the project nomination.*

|  |
| --- |
| **Type response here.** |

***ATTACHMENT:*** *For Capital Type Project Nominations, please* ***ATTACH*** *documentation of the fatalities and/or serious injuries described (Heat maps, summary tables from Transportation Injury Mapping System)*

|  |  |
| --- | --- |
| *Volume of traffic in the project location? (Average Daily Traffic – ADT)*  *(If project is off-street, please use parallel facility that proposed project would provide alternative to)* |  |
| *Posted and prevailing speed in project location (If project is off-street, please use parallel facility that proposed project would provide alternative to)* |  |

*Please describe how the project as proposed is appropriate in relation to the posted and prevailing speed and traffic volume in the project location.*

|  |
| --- |
| **Type response here.** |

Section 6C: Local Priorities – Access

*Please identify destinations in the community that will be served by the project.*

***ATTACHMENT:*** *For Capital Type Project Nominations, please* ***ATTACH*** *a map identifying the destinations described below.*

|  |
| --- |
| **Type response here.** |

*For pedestrian improvements - is the project within a ½ mile of a transit stop or school? (Please indicate yes or no)*

Yes

No

*For bicycle or street improvements - is the project within 3 miles of a transit stop or school? (Please indicate yes or no)*

Yes

No

***ATTACHMENT:*** *For Capital Type Project Nominations, please* ***ATTACH*** *a map identifying the transit stops or schools in the project area if applicable.*

|  |
| --- |
| **Type response here.** |

Section 6D: Local Priorities - Community Engagement, Public Participation/Outreach, Stakeholder Coordination, and Letters of Support

*Please describe the projects community engagement process for the project to date. Please note community engagement conducted with Disadvantaged Communities.*

|  |
| --- |
| **Type response here.** |

***ATTACHMENT:*** *For all projects, please* ***ATTACH*** *supporting documentation for community engagement, public participation, and outreach.*

*How has the project responded to feedback received through the public participation process?*

|  |
| --- |
| **Type response here.** |

*How is the project being coordinated with impacted or stakeholder agencies (Caltrans, OCTA – OC Bus, utilities, railroads, adjacent cities, other state and federal agencies, etc.)?*

|  |
| --- |
| **Type response here.** |

*Please describe the ongoing or upcoming community engagement practices planned for the remainder of project implementation, and how the implementing agency intends to respond to project feedback received through the remainder of project implementation.*

|  |
| --- |
| **Type response here.** |

***ATTACHMENT:*** *For all projects, please* ***ATTACH*** *any Letters of Support for the project*

**Section 7: Non-Scored Considerations**

*Is the project environmentally cleared? Please indicate yes or no.*

*Yes*

*No*

*Please provide the information below.*

|  |  |  |
| --- | --- | --- |
| *Environmental Assessment* | *Document Type* | *Actual or Expected Completion Date* |
| *CEQA* |  |  |
| *NEPA* |  |  |

*Please describe the applicant agency’s experience delivering federal-aid projects.*

|  |
| --- |
| **Type response here.** |

*Please indicate if project implementation would require an amendment to the OCTA Master Plan of Arterial Highways.*

|  |
| --- |
| **Type response here.** |

*Please describe any anticipated conflicts within the project area that could delay implementation and how those conflicts will be addressed.*

|  |
| --- |
| **Type response here.** |