

## 2022 APPLICATION FORM

### Project Funding for State Road Modifications (SRM)

Project Title

Applicant

#### WHAT DO YOU WANT TO BUILD?

*In no more than 3 sentences, provide a general description of the project and what it will accomplish.*

#### WHO OWNS THE RIGHT-OF-WAY?

*Check whether FDOT and/or another agency owns the right-of-way where the project will be built. If the project is located on a State road, documentation showing FDOT support for the project is required.*

☐ FDOT

☐ Other Entities \_\_\_\_\_

Requires resolution letter from owner allowing project to be built.

#### WHO IS DOING WHAT?

*Check the applicable boxes. All projects on state highways must be administered and constructed by FDOT, unless otherwise indicated by FDOT.*

##### Design (PE)

##### Administered by:

☐ FDOT

☐ Other: \_\_\_\_\_

##### Funded by:

☐ FDOT/TPA

☐ Other: \_\_\_\_\_

##### Construction (CST)

☐ FDOT

☐ Other: \_\_\_\_\_

☐ FDOT/TPA

☐ Other: \_\_\_\_\_

##### Cst Eng & Inspect (CEI)

☐ FDOT

☐ Other: \_\_\_\_\_

☐ FDOT/TPA

☐ Other: \_\_\_\_\_

Please note: the SRM program is intended for projects on the State roadway. Therefore, most of the projects will be designed and constructed by FDOT. The "Other" option should only be checked if either the TPA or FDOT have instructed you to do so.

## APPLICANT CONTACT INFORMATION

Contact Person  
Title  
Email  
Phone Number  
Address

## PROJECT LOCATION

Road Name  
Road Number

Project Limit Begin  
Project Limit End

## QUALIFYING ACTIVITIES FOR FUNDING

*Check the box that represents the majority of the work the proposed project will address. Eligible activities must be consistent with details described under [23 U.S.C. 133\(b\)](#).*

Complete Street projects - Including Lane Narrowing, Lane Elimination, Bicycle Facilities, Pedestrian Facilities, Transit Infrastructure, Intelligent Transportation Systems (ITS), Median Modifications, Signing and lighting, Roadway Lighting, Striping and Marking.

Intersection Improvements - Turn lanes, traffic signals and other intersection modifications.

Freight efficiency - Airport or seaport off-site capacity improvements, Truck movement improvements.

Other eligible activities not specified above

## PROJECT TYPE

*Check whether the project is a Stand-Alone Project or a Modification to Existing Project.*

**Stand-Alone Project:** an application for a new project that has no preexisting project within the same limits. When funded, design will be programmed into the new fifth year of the Transportation Improvement Program, with construction in later years.

**Modification to Existing Project:** an application seeking to modify an already programmed or soon to be programmed project. When funded, the application will follow the timeline of that project, if funding is available.

## PROJECT TYPICAL SECTION INFORMATION

Complete the following information for existing & proposed features, dimensions, & right of way lines. The typical section information provides an understanding of the spacing requirement differences between the existing facilities and the proposed facilities.

	EXISTING	PROPOSED
<b>RIGHT-OF-WAY WIDTH</b>		
<b>Project must fit within current ROW, acquisition is not permitted</b>		
<b>PEDESTRIAN OR MULTIUSE FACILITIES</b>		
Length (miles) for one direction. Do not count both sides of roadway.		
Width on North or West side (feet)*		
Width on South or East side (feet)*		
<b>BICYCLE FACILITIES</b>		
Bike Lane Length (feet) for one direction. Do not count both sides of roadway.		
Width on North or West side (feet)* (not Including Buffer Width)		
Buffer Width on North or West side (feet)*		
Width on South or East side (feet)* (not Including Buffer Width)		
Buffer Width on South or East side (feet)*		
Proposed improvements requires:		
Pavement widening      Sharrows      Restriping		
<b>MOTORIZED VEHICLE FACILITIES</b>		
Number of Through Travel Lanes		
Typical Through Lane Width (feet)		
Total Width* (No. Travel Lanes x Lane Width)		
Posted Speed Limit		
Design Speed (if known)		
<b>MEDIAN/SWALE/CURB</b>		
Median/Center Turning Lane Width (feet)*		
Swale Width (feet)*		
Curb Width (feet)*		
<b>*TOTAL WIDTH OF ALL COMPONENTS</b> (Add all rows with red for total width) Must fit within existing right-of-way.		

## RIGHT-OF-WAY OWNERSHIP DOCUMENTATION

Describe the project's existing right-of-way ownerships. This description shall identify when the right-of-way was acquired and how ownership is documented (i.e. plats, deeds, prescriptions, certified surveys, easements). If right-of-way is an easement, please describe the easement language. Right-of-way ownership verification documents are a required attachment (see submittal checklist).

## PROJECT SCOPE OF WORK

*Describe how the proposed improvements will affect the following:*

### ADA items (crosswalks, sidewalks, ramps, etc.)

All proposed crosswalks, sidewalks, ramps, etc. comply with ADA standards      YES      NO

Access Management revisions (median modifications, impacts to driveways, etc.)      YES      NO

### Pedestrian and/or Roadway Lighting

Pedestrian lighting proposed      YES      NO      Roadway lighting proposed      YES      NO

### Landscape (with Local Funds)

Median landscape proposed      YES      NO      Other landscape proposed      YES      NO  
Irrigation items proposed      YES      NO

### Signalization

Pedestrian signals proposed      YES      NO      Existing signalization to be replaced      YES      NO  
New traffic signalization proposed      YES      NO

### Transit Improvements

Queue jump possible      YES      NO      Transit provider concurrence provided      YES      NO  
Upgrade existing bus bay area      YES      NO

### School Zone Modifications

Existing flashing school zone signal on state road      YES      NO  
High emphasis cross walk at unsignalized crossing      YES      NO

**Utility Modifications**

Sub-surface relocation is required	YES	NO	Utility coordination is required	YES	NO
------------------------------------	-----	----	----------------------------------	-----	----

**Drainage and/or other Permits**

Existing closed drainage system to remain	YES	NO
Existing open drainage system to remain	YES	NO

**Railroad Crossing Modifications**

Rail crossing within limits	YES	NO	Replace railroad signal equipment and gates	YES	NO
-----------------------------	-----	----	---	-----	----

**Bridge Modifications**

Proposed pedestrian bridge	YES	NO	Bridge replacement	YES	NO
Proposed bridge widening	YES	NO			

**Additional Information**

**Other Scope Items**

Summarize any special characteristics of the project.

Identify any upcoming projects or projects currently underway adjacent to the proposed project.

Other specific project information that should be considered.

## **PUBLIC INVOLVEMENT AND SUPPORT**

*Describe the public outreach and support for the project (i.e. petitions, written endorsements, resolutions, etc.). Attach documentation.*

*Projects impacting single family residential lots will require additional documentation of public support. Additional documentation must indicate that all property owners directly affected by the improvement were notified, that at least 25 percent of the property owners showed support for the project, and that no more than 10 percent of the property owners showed lack of support.*

## **PROJECT MAINTENANCE**

*Document ownership and maintenance responsibilities for the project when complete. Applicant's Resolution of Support and commitment to fund operations and maintenance of the project, outside of FDOT's maintenance responsibilities, is required. (See submittal checklist).*

## **TARGET SPEED**

*If the project has a defined Target Speed, please describe why that speed is appropriate for the context classification and what preliminary speed management tools are being utilized. Please note that support for the defined Target Speed from the local governing body must be included in the resolution to receive points. For more information regarding Target Speeds, please see the [Context Based Design section](#) of the FDOT Design Manual.*

## **CRASH MODIFICATION FACTORS (CMF)**

*If the project has identified safety countermeasure, please summarize countermeasures used and the Crash Modification Factors (CMF) for each countermeasure. Please note, to receive points a CMF report must be completed and uploaded to the application submittal tool. A report can be completed on the [Crash Modification Factors Clearinghouse website](#). Please see [FDOT's Roadway Design Tools](#) for additional information regarding Crash Modifications Factors.*

## COST ESTIMATE

The total construction amount of funds requested per project (infrastructure) must be in excess of \$500,000 with a maximum project amount of \$5,000,000.

State Road Modifications Program funds will be used to fund Design, Construction, and Construction Engineering and Inspection Activities (CEI).

Local Funds (LF) will be used for all non-participating items, contingency activities, and any costs in excess of the awarded funding (SRM) allocation.

- (a) Provide detailed project cost estimate using the following form. Estimate shall be broken down to eligible and non-eligible project costs. **Estimates are to be prepared and signed by a Professional Engineer from the Local Agency's Engineering office.**

[On-System \(on State Highway System\) Cost Estimate Sheet](#)

Use the following links to access the basis of estimates manual as well as historical information for the project area.

[Basis of Estimates Manual](#)

[Historical Cost Information](#)



## CERTIFICATION OF PROJECT SPONSOR

I hereby certify that the proposed project herein described is supported by \_\_\_\_\_  
(*municipal, county, state or federal agency, or tribal council*) and that said entity will:

- 1) provide any funding required in addition to the grant amount;
- 2) enter into a maintenance agreement with the Florida Department of Transportation;
- 3) have complied with the Federal Uniform Relocation Assistance and Acquisition Policies Act for any Right of Way actions intended for this project previously performed within the project limits;
- 4) will comply with NEPA process prior to construction, which may involve coordination with the State Historic and Preservation Office (SHPO); and
- 5) support other actions necessary to fully implement the proposed project.

I further certify that the estimated costs included herein are reasonable, and that increases in these costs could cause significant increase to the local agency required participation. I understand failure to follow through on the project once programmed in the Florida Department of Transportation's Work Program is not allowed.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (*please type or print*)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

### FOR FDOT USE ONLY

Application Complete	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Project Eligible	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Implementation Feasible	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Include in Work Program	<input type="checkbox"/> Yes	<input type="checkbox"/> No