

**DRAFT Complete Streets & Main Street Highways  
Grant Application Form**



**Washington State  
Department of Transportation**

**Project Title, Location and Date:**

**Lead Agency and Project Manager** (Name, address, phone & fax number, email address)

**Total Grant Request Amount:** (Provide the total grant request amount and identify how the funds will be divided for each of the project components: project development, right-of-way acquisition, engineering)

**Legislative District**

**Project Summary** (Describe the project specifically in 4 to 5 sentences, be sure to address each element included in the project.)

**Recent Progress** (Describe any efforts or portions of the project that have been completed or are underway)

**PROJECT SCHEDULE AND COST SUMMARY SECTION**

<b>Project Milestones</b>		<b>Funds Administered by WSDOT (WSDOT use only)</b> Source: _____ Source: _____ Amount: _____ Amount: _____  Source: _____ Source: _____ Amount: _____ Amount: _____	
<b>Project Element</b>	<b>Scheduled</b>	<b>Amount</b>	
Project Development	Mo/Yr		
Project Definition (agreement signed)	Mo/Yr		
Begin PE	Mo/Yr		
Environmental Docs Approved	Mo/Yr		
ROW Complete (certification)	Mo/Yr		
Contract Advertised	Mo/Yr		
Open to Public (operationally complete)	Mo/Yr		
<b>Project Cost Summary</b> Note applicable costs	<b>Dollars in thousands</b>	<b>2013-15 Cash Flow (expenditures billed to WSDOT):</b>	
Project Development	\$0		<u>Date</u> <u>Planned</u>
			9/13 \$ _____
			12/13 \$ _____
<b>Engineering:</b>			3/14 \$ _____
Preliminary Engineering	\$0		6/14 \$ _____
Right-of-Way	\$0		9/14 \$ _____
Construction	\$0		12/14 \$ _____
Operations/Services	\$0		3/15 \$ _____
			6/15 \$ _____
<b>Evaluation</b>	\$0		<b>Total 13-15</b> \$ _____
<b>Total Grant Request:</b>	\$0		<i>Est. Re-appropriation</i> \$ _____
			Future Biennium \$ _____
<b>Total Project Cost:</b>	\$0		TOTAL \$ _____

## **PROJECT DESCRIPTION SECTION**

Current Conditions. Describe the current conditions (e.g., existing roadway conditions, speed, risk factors).

Project Impact. How will the project meet the four legislated goals...

- (a) Promoting healthy communities by encouraging walking, bicycling and using public transportation – How
- (b) Improving safety by designing major arterials to include features such as wider sidewalks, dedicated bicycle facilities, medians, and pedestrian streetscape features, including trees where appropriate.
- (c) Protecting the environment and reducing congestion by providing safe alternatives to single occupancy driving –
- (d) Preserving community character by involving local citizens and stakeholders to participate in planning and design decisions. –

<b>PROJECT DESCRIPTION SECTION (continued)</b>		
Distance from major housing, commercial attraction, transit station or other bicycle or pedestrian generator. (Please check): Less than ¼ mile _____ ¼ to ¾ mile _____ Greater than ¾ mile _____ Comments: _____	Nationally designated Main Street Community _____ National Main Street Affiliate _____ National Historic District _____	Posted Travel Speed. (Please check): 35-45 mph _____ 25-35 mph _____ Less than 25 mph _____ If operating speed differs, please provide operating speed: _____
Prior traffic collision involving bicyclist/pedestrian at location within past three years. (Please check):  Number of crashes _____ Comments: _____	Signalized Intersection Spacing or Distance to Alternate Crossing Facility. (Please check): Greater than 1,320 feet _____ 1,319 - 660 feet. _____ Less than 660 feet _____ Comments: _____	
Width of Roadway (Please check): 4 or more lanes (w/ two way left turn lane) _____ 4 lanes _____ 2 or 3 lanes _____  Comments: _____	Existing Traffic Volumes. (Please check): Greater than 15,000 ADT _____ 10,000 to 15,000 ADT _____ 5,000 to 10,000 ADT _____ Less than 5,000 ADT _____ Comments: _____	
Describe existing Complete Streets Policy or Demonstrated Equivalent:		
<b>Implementation.</b> Discuss the factors that ensure this project is ready to proceed (i.e., Project delivery status (planning, environmental review, right of way acquisition, construction plans), Matching funds or services, consistency with community plans)		

<b>APPLICATION CONCURRENCE</b>	
Transportation Agency Engineer, Traffic Engineer, or Director	
Name: Title: Address: Email: Phone:	Date
WSDOT Official (if project is on a State Highway)	
Name: Title: Address: Email: Phone:	Date