



# Southwest Ohio Regional Transit Authority

## Application for Financial Assistance

IMPORTANT: Please consult "Transit Infrastructure Fund Applicant Guidelines Rules & Regulations" for guidance in completion of this form.

Applicant

Applicant: \_\_\_\_\_ Subdivision Code: \_\_\_\_\_

District Number: \_\_\_\_\_ County: \_\_\_\_\_ Date: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
(The individual who will be available during business hours and who can best answer or coordinate the response to questions)

Email: \_\_\_\_\_ FAX: \_\_\_\_\_

Project

Project Name: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Subdivision Type	Project Type	Funding Request Summary
(Select one)	(Select single largest component by \$)	
<input type="checkbox"/> 1. County	<input type="checkbox"/> 1. Road	Total Project Cost: _____
1. <input type="checkbox"/> 2. City	<input type="checkbox"/> 2. Bridge/Culvert/tunnels	Funding Requested: _____
<input type="checkbox"/> 3. Township	<input type="checkbox"/> 3. Sidewalks	
<input type="checkbox"/> 4. Village	<input type="checkbox"/> 4. Active Transportation	

### District Recommendation (To be completed by the District Committee)

(Select one)

This is a Multi-Jurisdiction Project

This is a Single-Jurisdiction Project

(Select one)

This is a Multi-Year Funding Request

### For Transit Authority Use Only

STATUS: \_\_\_\_\_ Grant Amount: \_\_\_\_\_ .00

Project Number: \_\_\_\_\_ Total Funding: \_\_\_\_\_ .00

Local Participation: \_\_\_\_\_ %

Release Date: \_\_\_\_\_ Transit Authority Participation: \_\_\_\_\_ %

Approval: \_\_\_\_\_ Date Construction End: \_\_\_\_\_

# 1.0 Project Financial Information (All Costs Rounded to Nearest Dollar)

## 1.1 Project Estimated Costs

### Engineering Services

Preliminary Design:	_____	.00	
Final Design:	_____	.00	
Construction Administration:	_____	.00	
Total Engineering Services:	a.) _____	.00	_____
Right of Way:	b.) _____	.00	
Construction:	c.) _____	.00	
Materials Purchased Directly:	d.) _____	.00	
Permits, Advertising, Legal:	e.) _____	.00	
Construction Contingencies:	f.) _____	.00	_____
Total Estimated Costs:	g.) _____	.00	

## 1.2 Project Financial Resources

### Local Resources

Local In-Kind or Force Account:	a.) _____	.00	
Local Revenues:	b.) _____	.00	
Other Public Revenues:	c.) _____	.00	
ODOT / FHWA / FTA PID: _____	d.) _____	.00	
USDA Rural Development:	e.) _____	.00	
OEPA / OWDA:	f.) _____	.00	
CDBG:	g.) _____	.00	
<input type="checkbox"/> County Entitlement or Community Dev. "Formula"			
<input type="checkbox"/> Department of Development			
Other: _____	h.) _____	.00	
Subtotal Local Resources:	i.) _____	.00	_____ %

### Transit Authority Funds (Enter requested Amount)

Grant: <u>    0    </u> % of Transit Authority Funds	j.) _____	.00	
Total Financial Resources:	k.) _____	.00	_____ %

### 1.3 Availability of Local Funds

Attach a statement signed by the Chief Financial Officer listed in section 5.2 certifying all local resources required for the project will be available on or before the earliest date listed in the Project Schedule section. The Transit Authority Agreement will not be released until the local resources are certified. Failure to meet local share may result in termination of the project. Applicant needs to provide written confirmation for funds coming from other funding sources.

### 2.0 Repair / Replacement or New / Expansion

2.1 Total Portion of Project Repair / Replacement: \_\_\_\_\_ .00 \_\_\_\_\_ %  
2.2 Total Portion of Project New / Expansion: \_\_\_\_\_ .00 \_\_\_\_\_ %  
2.3 Total Project: \_\_\_\_\_ .00 100 %

### 3.0 Project Schedule

3.1 Engineering / Design / Right of Way      Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
3.2 Bid Advertisement and Award              Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
3.3 Construction                                      Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Unless this is a project that has been approved by the Transit Authority in a previous year, as a multi-year project, construction cannot begin prior to release of executed Project Agreement and issuance of Notice to Proceed.

Failure to meet project schedule may result in termination of agreement for approved projects. Modification of dates must be requested in writing by project official of record and approved by the Transit Authority once the Project Agreement has been executed.

### 4.0 Project Information

If the project is multi-jurisdictional, information must be consolidated in this section.

#### 4.1 Useful Life / Cost Estimate / Age of Infrastructure

Project Useful Life: \_\_\_\_\_ Years      Age: \_\_\_\_\_ (Year built or year of last major improvement)

*Attach Registered Professional Engineer's statement, with seal or stamp and signature confirming the project's useful life indicated above and detailed cost estimate.*

#### 4.2 User Information

Road or Bridge:      Current ADT \_\_\_\_\_ Year \_\_\_\_\_      Projected ADT \_\_\_\_\_ Year \_\_\_\_\_

Transit Ridership: Average Weekday \_\_\_\_\_ Year \_\_\_\_\_

Number of Weekday Bus Trips \_\_\_\_\_

### 4.3 Project Description

A: SPECIFIC LOCATION (Supply a written location description that includes the project termini; a map does not replace this requirement.) 500 character limit.

B: PROJECT COMPONENTS (Describe the specific work to be completed; the engineer's estimate does not replace this requirement) 1,000 character limit.

C: PHYSICAL DIMENSIONS (Describe the physical dimensions of the existing facility and the proposed facility. Include length, width, quantity and sizes, mgd capacity, etc in detail.) 500 character limit.

## 5.0 Project Officials

Changes in Project Officials must be submitted in writing from an officer of record.

### 5.1 Chief Executive Officer (Person authorized in legislation to sign project agreements)

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### 5.2 Chief Financial Officer (Can not also serve as CEO)

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### 5.3 Project Manager

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

## 6.0 Attachments / Completeness review

Confirm in the boxes below that each item listed is attached (Check each box)

- A certified copy of the legislation by the governing body of the applicant authorizing a designated official to sign and submit this application and execute contracts. This individual should sign under 7.0, Applicant Certification, below.
- A certification signed by the applicant's chief financial officer stating the amount of all local share funds required for the project will be available on or before the dates listed in the Project Schedule section.
- A registered professional engineer's detailed cost estimate and useful life statement, as required in 164-1-13, 164-1-14, and 164-1-16 of the Ohio Administrative Code. Estimates shall contain an engineer's seal or stamp and signature.
- A cooperative agreement (if the project involves more than one subdivision or district) which identifies the fiscal and administrative responsibilities of each participant.
- Farmland Preservation Review - The Governor's Executive Order 98-IV, "Ohio Farmland Protection Policy" requires the Commission to establish guidelines on how it will take protection of productive agricultural and grazing land into account in its funding decision making process. Please include a Farm Land Preservation statement for projects that have an impact on farmland.
- Capital Improvements Report. CIR Required by O.R.C. Chapter 164.06 on standard form.
- Supporting Documentation: Materials such as additional project description, photographs, economic impact (temporary and/or full time jobs likely to be created as a result of the project), accident reports, impact on school zones, and other information to assist your district committee in ranking your project. Be sure to include supplements which may be required by your local District Public Works Integrating Committee.

## 7.0 Applicant Certification

The undersigned certifies: (1) he/she is legally authorized to request and accept financial assistance from the Southwest Ohio Regional Transit Authority; (2) to the best of his/her knowledge and belief, all representations that are part of this application are true and correct; (3) all official documents and commitments of the applicant that are part of this application have been duly authorized by the governing body of the applicant; and, (4) should the requested financial assistance be provided, that in the execution of this project, the applicant will comply with all assurances required by Ohio Law, including those involving Buy Ohio and prevailing wages.

**Unless this is a project that has been approved by the Transit Authority in a previous year, as a multi-year project, the applicant certifies that physical construction on the project as defined in the application has NOT begun, and will not begin until a Project Agreement for this project has been executed with the Southwest Ohio Regional Transit Authority. Action to the contrary will result in termination of the agreement and withdrawal of Southwest Ohio Regional Transit Authority funding from the project.**

---

Certifying Representative (Printed form, Type or Print Name and Title)

---

Original Signature / Date Signed