



City/County Association of Governments

of San Mateo County

TRANSPORTATION DEVELOPMENT ACT ARTICLE 3 PEDESTRIAN AND BICYCLE PROGRAM
CALL FOR PROJECTS FOR FISCAL YEAR 2019/20
CAPITAL PROJECT APPLICATION

I. Project Name and Funding Request

a. Applicant Agency:

[Empty text box for Applicant Agency]

b. Funds Requested:

\$ [Empty text box for Funds Requested]

c. Project Title:

[Empty text box for Project Title]

d. Brief Project Summary:

[Large empty text box for Brief Project Summary]

e. Project Type:

- Capital: Pedestrian and Bicycle Facility
Capital: Bicycle Facility Only
Capital: Pedestrian Facility Only

II. Project Screening

a. Is the project sponsor the County of San Mateo, a City in San Mateo County or a Joint powers agency operating in San Mateo County? Answer must be "Yes" to continue.

- Yes No

b. Project meets Caltrans Standards: Yes No

Brief description of project elements meeting Caltrans Standards:

[Empty text box for Brief description of project elements meeting Caltrans Standards]

c. Received California Environmental Quality Act (CEQA) approval?

- Yes No Not Applicable

Date of CEQA Approval:

[Empty text box for Date of CEQA Approval]

Note: CEQA document must be submitted as an attachment to the application.

- d. City /Town BAC established as a standing committee? Yes No In progress

III. Clear and Complete Proposal

Describe the project elements (indicate location, length, scope, size or extent)

IV. State of Readiness

- a. Right-of-Way certification required? Yes No Not Required
- b. Permits/Agreements approved? Yes No N/A

List all required permits and/or agreements. Clearly indicate the date it was approved. Also list the required permit that are still pending, indicate the expected date of approval.

Name of Permit/Agreement	Date approved/obtained

- c. Describe the degree to which design is complete (0% - 35% - 65% - 95% - 100% ready to bid)
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- d. Describe the project's anticipated schedule including major milestones, and construction start and end dates.
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V. Community Support and Local Match

- a. Bicycle Advisory Committee (BAC): Applicant agency has a designated BAC that meets the requirements established by the Metropolitan Transportation Commission and is a standing committee. (Note: a BAC that includes members representing pedestrians is required prior to award of TDA3 funds)

Yes No In progress (expected date: _____)

Project has been approved by the agency BAC:

Yes No

Project has been approved by other organized group(s) with demonstrated knowledge of walking and bicycling needs (see *instructions*):

Yes No

Names of other group(s):

Type of support: (e.g., letters, resolutions)

- b. Indicate Local Cash Match and percentage of project cost. (Also see Section VII)

Amount of Local Cash Match:	Percentage: (Local Match/total project cost)

VI. Meets Program Objectives

- a. Describe the need for the project and how the project addresses an identified problem, need and issue. How was the need determined? Cite relevant data or observations regarding existing walking/bicycling demand, or results of similar projects in other communities. Include a vicinity map and a site map.

- b. Describe how the project reduces the risk of collision injury to people walking or cycling. Cite relevant crash history data within the last five years (2011-2015, or more recent if available) from the Statewide Integrated Traffic Records System (SWITRS).

- c. Access to high-use activity centers: List the destinations the project serves and estimate the number and frequency of people accessing these locations. For projects that serve both walking and bicycling, identify the features that serve walking transportation. Estimate the proportion of the project cost going toward pedestrian facilities. (See *instructions*) Describe if the project serves low income/transit dependent population and its proximity to Priority Development Areas (PDAs).

- d. This project includes facilities that serve walking trips: Yes No
Describe parallel pedestrian amenities (if applicable):

- e. Degree to which this project improves conditions for bicycling and/or walking for transportation purposes:

- Primarily Transportation
- Transportation & Recreation
- Primarily Recreation

Estimate the typical distances of walking and/or bicycling trips that will use this facility and, if available, demographic characteristics:

- f. What is the relationship of the project to the existing or regional bicycle or pedestrian routes? Is the project in coordination with neighboring jurisdictions? Explain.

- g. Project is consistent with local and/or regional plans (add lines, if necessary)

Type of Plan:	Name of Plan and Page No. (if applicable)
Circulation element of general plan	
San Mateo County Comprehensive Bicycle & Pedestrian Plan	
Other bicycle, pedestrian, or complete streets plan(s):	

VII. Funding and Local Match

- a. Enter total Project cost, totaling funds from all sources here: \$ _____

TDA Funds requested:	\$ _____
Local Cash Match:	\$ _____
Match Percentage:	_____ %

To calculate % Local Cash Match Percentage, use the following equation:

$$\frac{\text{Local Cash Matching Funds}}{\text{Total Project Cost}} = \text{Local Match Percentage}$$

Note: Local Match must be in the form of cash only and cannot include prior funding sources received from other grants.

- b. Can the project be partially funded or divided into phases? Yes No
- c. If applicable, are there any other funds (i.e., grant) as part of the project? Yes No
 IF yes, please list the funding source and the grant amount:

VIII. Optional Field Video (Highly Recommended)

Is a video being submitted as part of this application? Yes No

XI. Single Point of Contact Information

Name: _____

Title: _____

Agency: _____

Telephone: _____

Email: _____