



**TRANSPORTATION DEVELOPMENT ACT ARTICLE 3 PEDESTRIAN
AND BICYCLE PROGRAM CALL FOR PROJECTS
FOR FISCAL YEAR 2022/23
PLANNING PROJECT APPLICATION**

I. Project Name and Funding Request

- a. Applicant Agency:

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- b. Funds Requested:

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- c. Project Title:

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- d. Brief Project Summary:

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- e. Are you partnering with another agency? Yes No
- f. Partnering Agency Name:

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- g. Project Type:

<input type="checkbox"/> Comprehensive Pedestrian/Bicycle Plan <input type="checkbox"/> Comprehensive Pedestrian Plan Only <input type="checkbox"/> Comprehensive Bicycle Plan Only

If YES, please provide Partnering Agency information and describe the roles of both the lead agency and partners:

II. Project Screening

- a. Is the project sponsor the County of San Mateo, a City within San Mateo County or a Joint Powers Agency operating in San Mateo County? Answer must be “Yes” to continue.

<input type="checkbox"/> Yes <input type="checkbox"/> No
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- e. Does the project adhere to [MTC qualifications](#)? Yes No

III. Project Description

a. Describe the project elements.

b. Check one: New Plan

Update to existing plan

Date of previous plan:

IV. No Section IV for Planning Application

V. Community Support

a. Bicycle and Pedestrian Advisory Committee (BPAC): Applicant agency has a designated BPAC that is a standing committee and has approved the proposed project.
(Note: a BPAC is required prior to award of TDA3 funds)

Yes No

If the agency does not have a BPAC, please describe the equivalent committee that has reviewed and approved the proposed project:

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: (letters, resolution, minutes,

If you are partnering with another agency, please confirm you have attached a letter of support from the partnering agency.

Yes, it is attached. N/A

c. Describe the public outreach that has been conducted for the project and include relevant attachments:

VI. Meets Program Objectives:

a. Describe the need for the project and how the project addresses an identified problem. Specifically, describe how the project achieves or demonstrates the following:

- Vision/Mission Statement
- Budget and Tasks
- Schedule
- Outreach methods
- Data collection/evaluation
- Specific Improvements
- Programs/initiatives
- Multi-modal/complete streets concepts
- Equity
- Consistency with local, regional, state and or federal policies and plans

VII. Funding and Local Match:

Enter total project cost, totaling funds from all sources here: \$ _____

TDA Funds requested:	\$
Local Funds provided:	\$
Local match percentage:	%



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

$$\frac{\text{Local Matching Funds}^*}{\text{Total Project Cost}} = \text{Local Match \%}$$

**Local Cash Match only. Planning Projects are required to provide at least a 10% match to qualify for TDA Article 3 grant funding.*

b. Can this project be partially funded? Yes No

c. Have you received funding from the TDA Article 3 Grant Program in the past 10 years?
 Yes No

d. Do you currently have an active TDA Article 3 Grant from a previous funding cycle?
 Yes No

If yes, when do you expect to complete the project? Do you anticipate conflicts with staff capacity to administer the TDA Article 3 FY 2022/23 project in time?

VIII. Is there any additional information you would like to include?

IX. Single Point of Project Contact Information

Name: _____

Title: _____

Agency: _____

Telephone: _____

Email: _____

X. Confirmation

Data Collection Confirmation

_____ (Name of jurisdiction), agrees to submit data collected upon project completion, including but not limited to, bike and pedestrian counts, collision data, speed data, and photos.”

X _____

Title: _____

Date: _____

MTC Guideline Confirmation

_____ (Name of jurisdiction), confirms that the proposed project meets and adheres to MTC TDA Article 3 guidelines. (seen here: [MTC qualifications](#))

X _____

Title: _____

Date: _____

Project Application Checklist

Attachments		Application Question	Content Description
<input type="checkbox"/>	Project Location Maps	VI (a)	Provide a vicinity and a site map indicating project location*.
<input type="checkbox"/>	Policy Consistency Documentation	VI (h)	Documentation of the Plans and Policies with which the project is consistent.
<input type="checkbox"/>	Local Cash Match	VII(a)	Documentation or resolutions which detail responsibilities and contributions towards the project.
<input type="checkbox"/>	Letters of Support	V (b)	Letters indicating stakeholder support.

* The maps provided should show the project’s relationship to local transit services including Caltrain, BART, SamTrans, or other local operators.