



Greater Minnesota
JOINT APPLICATION FOR FEDERAL FUNDS

Minnesota Department of Transportation
 Office of Traffic, Safety and Technology
 in partnership with State Aid for Transportation

Due Date: November 10, 2016

Project Name

Agency Contact: name, address, phone number, and e-mail (you will receive an electronic confirmation that your application was received):

ATP County of

Municipality of Township of Other

Requested Year of Funding (State Fiscal Year):
 Must be 2018 Must be 2020 Any Year*
 Must be 2019 Must be 2021

*Projects will be assigned a funding year by OTST

If this project is funded, do you agree to maintain it for the life of the project?
 (See Appendix C* for FHWA Recommended Service Life Criteria) Yes

Roadway type: <input type="checkbox"/> CSAH <input type="checkbox"/> MSAH <input type="checkbox"/> County Road <input type="checkbox"/> City Street <input type="checkbox"/> Other <input style="width: 180px;" type="text"/>	Road Number or Street Name: <input style="width: 180px;" type="text"/>
---	--

Attach detailed project description and map

Is this a single or multiple agency application? Single Agency Multiple Agencies

Lead Agency Other Agency (Agencies) Involved

Funding Source	Estimated Cost	
Federal Funds	<input style="width: 230px; height: 30px;" type="text"/>	Applicants are advised that local labor, materials, and equipment are NOT reimbursable with Federal funds, or to be included in the local match, but may be used in the total project cost.
State Aid Funds	<input style="width: 230px; height: 30px;" type="text"/>	
Local Match (10% of Total project cost required)	<input style="width: 230px; height: 30px;" type="text"/>	
Local labor, materials and equipment	<input style="width: 230px; height: 30px;" type="text"/>	
Total Project Cost	<input style="width: 230px; height: 30px;" type="text"/>	

<input type="checkbox"/> Systemic Project Identified in Road Safety Plan (ATTACH PROJECT SHEET FROM SAFETY PLAN TO THIS SHEET AND SUBMIT)	<input type="checkbox"/> Systemic Project NOT in Road Safety Plan (GO TO PAGE 2)	<input type="checkbox"/> Reactive Project (B/C > 1) (GO TO PAGE 4)
--	--	---

QUALIFYING INFORMATION

Systemic Projects

Type of Project: Lane Departure (**COMPLETE PAGE 2**)

Systematic Intersection Improvements (**COMPLETE PAGE 3**)

Other (Please specify)

Lane Departure Projects

Required Attachments:

Attach Location sheet

Attach spreadsheet listing the following for each segment:

Proposed Strategy

Abbreviated verbal description of segment (IE: Mississippi River to Main Street)

Beginning and ending reference points

ADT (list source of data)

Miles to be upgraded

Fatal and A injury crashes (10 years, 2006-2015)

K+A Crashes per mile

Summary Information

Enter the following **TOTALS** from the spreadsheet described above:

Total Miles to be upgraded

Fatal Crashes A Injury Crashes K+A crashes per mile

Cost per Mile Amount should include federal funding only (not total project cost)

Proposed project is a recommendation from a Road Safety Plan or a Road Safety Audit (must provide excerpt from existing plan)

E-mail application and attachments in **ONE** PDF formatted document to:
SafetyProject.DOT@state.mn.us
(must print at 11x17 or smaller)

SYSTEMIC LANE DEPARTURE PRIORITIZING INFORMATION

Systemic Projects

Intersection Projects

Required Attachments:

- Attach Location sheet

- Attach spreadsheet listing the following for each intersection:**
 - Verbal description of intersection
 - ADT for each leg of the intersection (list source of data)
 - Fatal and A injury crashes (10 years, 2006-2015) Include only crashes within 500 feet on either side of the intersection or that are coded "intersection related."
 - K+A Crashes per intersection

Summary Information

Enter the following **TOTALS** from the spreadsheet described above:

Total number of intersections to be upgraded

Fatal Crashes A Injury Crashes K+A crashes per intersection

Cost per Intersection

Additional Considerations

- Proposed project is a recommendation from a Road Safety Plan or a Road Safety Audit (must provide link to or excerpt from existing plan)

E-mail application and attachments in **ONE** PDF formatted document to:
SafetyProject.DOT@state.mn.us
(must print at 11x17 or smaller)

Reactive Projects

Required Attachments:

- Attach Location sheet
- Verbal description of project
- Plan sheets
- All crashes (3 years, 2013-2015)
- Attach critical crash rate calculations
- Attach HSIP Worksheet B/C Ratio

Summary Information

- Attach a discussion of the rationale used in the selection of Crash Reduction factors
- Service Life

E-mail application and attachments in **ONE** PDF formatted document to:
SafetyProject.DOT@state.mn.us
(must print at 11x17 or smaller)

REACTIVE PRIORITIZING INFORMATION