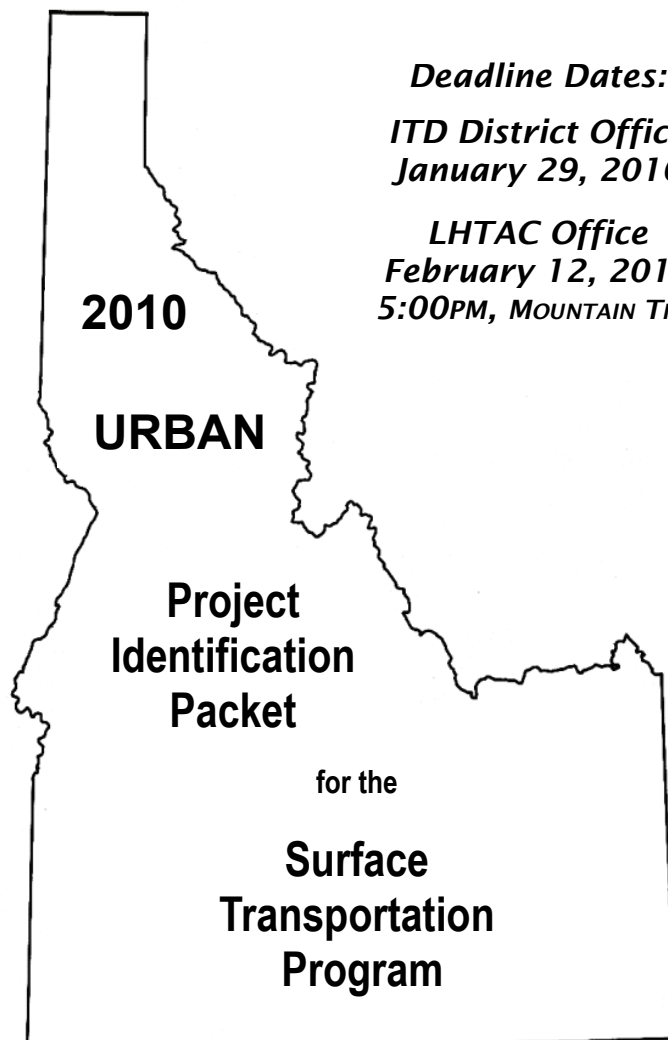


Local Federal-aid Incentive Program For Idaho Local Highway Jurisdictions

*“A partnering process between the
Idaho Transportation Department
and the Local Highway Jurisdictions”*



Deadline Dates:

***ITD District Office
January 29, 2010***

***LHTAC Office
February 12, 2010
5:00PM, MOUNTAIN TIME***



L H T A C

Local Highway Technical Assistance Council (LHTAC)
3330 Grace St., Boise, ID 83703
Telephone 1-800-259-6841, 208-344-0565
FAX 208-344-0789
www.lhtac.org

LOCAL FEDERAL-AID INCENTIVE PROGRAM FOR IDAHO LOCAL HIGHWAY JURISDICTIONS

This program has been developed to address concerns the Local Highway Jurisdictions have about the use of Federal-aid Highway Funds on the local highway system. It embodies the direction of the Legislative Transportation Planning Task Force, the Idaho Transportation Board, and the Local Highway Technical Assistance Council, to improve the coordinated efforts by all transportation jurisdictions, to better formulate the process to use Federal-aid Highway Funds on the Federal-aid system, and to use the Local Federal-aid Funds on the Local Federal-aid system.

The overall intent of this program is to promote the continuing, cooperative, comprehensive, multi-jurisdictional transportation planning, and achievable capital improvement programs within the Local Highway Jurisdictions. It is meant to be an incentive program as a partnering process between the Idaho Transportation Department and the Local Highway Jurisdictions. It is hoped the incentive program, through making transportation planning an eligible item for expenditures, will foster the development of multi jurisdictional transportation planning groups, whose members may then identify projects, establish local priorities, select projects and apply for funding under these programs.

Regional multi-jurisdiction transportation planning can be as small as a single county-wide area, but more appropriately should be areas and counties included in the six district areas of ITD. The more entities involved in the transportation planning process, the higher rating an application for funds will receive. Regional multi-jurisdiction transportation planning should look at the long term needs (20-year horizon) as well as, the short-term (5-year) needs. Membership could include Cities, Counties, Highway Districts, United States Forest Service, Legislators, Bureau of Land Management, Tribes, Department of Lands, etc. The ITD district transportation planners or the six Councils of Government can be used to facilitate the development of multi jurisdictional transportation planning groups.

It is recognized that the Metropolitan Planning Organizations, (MPOs) have developed a process of prioritizing projects within the MPO areas, and their prioritizing process works well. It is readily recognized by the Idaho Transportation Board and is assured by the Federal Highway Act.

This program is an attempt to utilize the best working parts of the MPO process, and use it in the rural areas of Idaho. In addition, it attempts to allow those communities of less than 5,000 population, to have a direct access to the Federal-aid Highway Funds, rather than having to process a project through the County or Highway District Commissioners.



This program encompasses the STP Urban and STP Rural funding, and places the prioritization process for projects within those two programs under the jurisdiction of LHTAC, in accordance with the intent of Chapter 24, Title 40, Idaho Code.

The application process will emphasize the needs of the Local Highway Jurisdictions, as depicted in the *1995 Idaho Highway Needs Assessment Study Update*, and will be used specifically for the Federal-aid routes and in some cases minor collectors, as allowed by Federal regulation.

The attached 2010 Project Rating Criteria sheets reveal the importance of several elements of your application as determined by the Local Highway Technical Assistance Council. LHTAC has assigned a range of potential points to each of the listed items on the rating criteria. These values may change, year to year, depending upon the priorities of the Council. The selection of projects has become increasingly competitive; review the rating criteria critically and take each honest opportunity for points with your application. After all applications have been rated by the Council, the points are totaled and the projects are set in order, highest to lowest. Each point has value; only the top few projects are recommended for funding to the Idaho Transportation Board.

The typical schedule for receiving applications will be a December thru early March time frame (see cover letter for exact time and date), with March being used by LHTAC to rate the applications and for submitting a preliminary project selection list to the Idaho Transportation Board, for inclusion in the draft Statewide Transportation Improvement Program (STIP) in June.

Public input will be taken during July and August through the STIP process, with final approval by the Idaho Transportation Board in September. The process for project prioritization by LHTAC will coordinate with the schedule of the six (6) MPOs, so that both priority lists are received by the Idaho Transportation Board in unison.

The project identification process will also emphasize the need for local jurisdictions to continue land use and transportation planning on a regional basis. Some regions may reach the size of the present ITD district boundaries, but others may be as small as two or three entities within a county. Updating the transportation elements in comprehensive plans will also be emphasized, and funds will be made available for those activities, as well as highway and bridge design and construction. It is important that the Local Highway Jurisdictions work closely with the Senior Transportation Planners in each of the ITD District Offices, to coordinate ITD projects with the needs of the local system as depicted in their comprehensive plans and their capital improvement programs.

LHTAC understands that knowledgeable and well-trained personnel are important to the maintenance of the local highway system. If your highway jurisdiction has staff that has graduated from the Idaho Technology Transfer (T2) Center's "Road Scholars" program, additional points are available for your project application. The T2 Center can be reached at 1-800-259-6841 or at their website www.idahot2.org for further information about the Roads Scholar program.



Instructions For Completing The Project Identification Form For The Local Federal-Aid Incentive Program (Construction Projects)

Please refer to the Project Identification Form:

The **Project Title** is that title which you, as a sponsor, give the project. It can be the name of a street or roadway, or it can be a commonly used name of the project location. The **Requested Construction Date** is the date that you are requesting this project to be constructed. The **Entity's Priority** is the priority that you have set for this project in relation to other projects similar to it that you have in your capital improvement program, (CIP).

The following sections mirror the numbering sequence on the Project Identification Form:

1. GENERAL INFORMATION:

The name of the City, County or Highway District should be included on the first line. The person to contact for answering questions about this form should be shown on the second line. The phone number of that contact person on the next line, and the address of the City, County or Highway District should be shown on the fourth line.

2. PROJECT TYPE:

You should check the appropriate type of project. If it falls under *other*, then please list what type of project you believe it to be.

3. FUNCTIONAL CLASSIFICATION OF ROADWAY:

It is important that the classification of this project be determined at this particular time, because the federal regulations allow for the funding to be spent on arterials and collectors with only a portion of the funds being allowed on minor collectors. Each county has a functional classification map approved by ITD, and you should refer to that map for determining the roadway's classification. If you do not have the map or can not locate it, please contact your Idaho Transportation Department, District Office for clarification of the proper functional classification, or go to www.itd.idaho.gov/planning/gis/Map/Library/. **(Not needed for a Transportation Plan Application.)**

4. REQUESTED PROJECT CATEGORY:

Please mark the appropriate category of project you are proposing.

Chip sealing is again this year eligible on existing pavements within Federal-aid projects. The pavement must be in reasonably good condition and meet the following criteria:



Instructions For Completing The Project Identification Form

- Existing pavement must be not more than 12 years old;
- Existing pavement must be at least 24' wide and placed as a minimum 2" hot mix pavement;
- Must have at least 2' of shoulder on each side; (paved or unpaved)
- Existing pavement must not show more than 20% fatigue cracking;
- Road must be classified as a major collector or arterial route; and
- The work must be contracted out to a private contractor.

5. PROJECT DESCRIPTION:

- A. The road associated with this project must be a collector or arterial. The functional class number should be used in this blank. If there is no STC or SMA number on your map, please contact ITD or go to www.itd.idaho.gov/planning/gis/Map/Library/ to locate this number. **(Not needed for a Transportation Plan Application.)**
- B. The Project Termini should be the common ends of the project whether it is at the intersection of crossroads or, for instance a bridge, the common termini beginning and ending should be listed. If the milepost can be determined it should be shown as well. And finally, the length of the project should be listed on the third line in miles. **(Not needed for a Transportation Plan Application.)**
- C. Please provide a brief description of the project such as "reconstruction of Main Street between First Street and Forth Street, including new curbs, gutters, sidewalk, storm drain and lighting". Also attach an 8½" X 11" vicinity map of the project. This can merely be a copy of your City, County or Highway District map with the project highlighted on it. It does not need to be of great detail. A sample map is attached to the back of this application.
- D. Please list the number of participants and their names in your Regional-multi Jurisdiction Transportation Planning Organization. As noted in the narrative of this packet, that can be the adjacent entities to you, or significantly expanded to include entities in other countywide areas. If you do not participate in a multi-jurisdictional transportation planning group, please state as such.
- E. A justification for the project can be as you see fit to enter. It could be because of funding restrictions, political pressures, safety issues, expedited deterioration of a facility, or any other item you wish to use for justifying the need for this project.

6. TECHNICAL INFORMATION: (ITD FORM 2435)

The technical information should be self-explanatory. If this application is for a



Instructions For Completing The Project Identification Form

Transportation Plan, then indicate this on the form. LHTAC is trying to see what the existing facility encompasses and also what you are proposing to provide in the final project. The horizontal and vertical alignment changes should be substantial in order to be checked as “yes”. If you are merely improving the drainage of a city street, then it would be “no” as the proper answer.

The pavement condition is important to compare with other projects being submitted for consideration. It is not critical that you have a pavement management program to determine this, but if you do, that would be helpful and the information should be included with this form. Otherwise, a visual inspection should be used to answer this question. Check all that apply.

The pavement age, to the best of your knowledge, should be shown. If it is old, with significant patching, just enter the oldest age known for the pavement in place.

The traffic and crash information should be shown for the present and projected information requested. AADT is the average annual daily traffic for the year in which you are making this request, and you should project it for 20 years. If you need help in this regard, please contact your Idaho Transportation Department, District Office. The DHV or the design hour volume should be shown, and if known, the level of service (LOS) for the roadway. Finally, the percentage of trucks, both present and projected should be shown.

The final item in this segment asks for the crash information over a three (3) year period. This should be included for the entire length of the project. The Idaho Transportation Department, police, and sheriff departments should be able to provide this information for you.

If this identification is for a project that includes a bridge, the information requested should be shown.

- A. The name of the crossing should be the common name used.
- B. The existing bridge number is that shown from the bridge inspection form that you are supplied with by the Idaho Transportation Department on an annual or biannual basis. Remember that a bridge for this particular program must have a span of greater than 20 feet.
- C. The sufficiency rating is also shown on the inspection form you are supplied by the Idaho Transportation Department.
- D. If you do not know whether the bridge is on LHTAC’s priority list, leave this item blank, and LHTAC will complete it when we receive the application.

Finally, this section requests information as it relates to other projects in the area; particularly if yours is tying in with another state project or another Local Highway Jurisdiction. Mark the appropriate square. If you know the name of the other project and the year to be constructed, that would be important information as well.

Because the National Environmental Policy Act, (NEPA) is such an important part of each Federal-aid Project, it is important that, up-front, the consequences of probable environmental issues are known. Please check all areas that are appropriate and add any others that are not listed. ***(Not needed for a Transportation Plan Application.)***

Right-of-way acquisition is a time consuming process. Please answer the questions as best you can. Remember, construction easements and maintenance easements can be considered a right-of-way activity. ***(Not needed for a Transportation Plan Application.)***

7. PRELIMINARY COST ESTIMATE: ***(Please use ITD Form 1150, Attached)***

Enter the amount of each of the items shown. If it is strictly a planning project, then that is the only line needed to be filled-in. If it is a design and construction project, the remainder of the items will need to be shown. A realistic cost estimate is important to LHTAC's program balancing activities. If your project application is accepted, this number will be used in budgeting. Ask for assistance of an engineer, if needed.

8. PUBLIC SUPPORT

Simply answer the questions shown under this item 8A and 8B. A copy of a sample resolution is included at the back of this package.

ITD forms 2435 and 1150 must also be included along with your application to satisfy ITD/FHWA requirements. Much of this information can be obtained from your completed application.

This form must be signed by the Chairman, Mayor or President of the organization sponsoring the project. **It must also be signed by the appropriate ITD District representative.** This is why they need to be included early in the preparation of this packet.

Local Federal-aid Incentive Program

Application checklist:

- Is the roadway officially classified as a Collector or Arterial on the County Functional Classification Map? (**Note: Your project will not qualify for federal funds without being a Collector or Arterial. This Collector or Arterial roadway must be outside an Urban Area to qualify for STP-Rural Funds.**)

Have you included:

- Project description,
- ITD Form 2435,
- Preliminary Cost estimate (ITD-1150)
- LHTAC Project Identification Form, signed,
- LHTAC Project Rating Criteria,
- Location Map,
- Letters of Support, and
- The Resolution, signed by the proper authority.

All these items must be included, or the application will be considered incomplete and rejected.

A good idea:

The LHTAC Staff and Council review your application, so please make sure it is well organized and clear. Check the vicinity map to see if it clearly shows the project location. Have someone unfamiliar with the project review the application.

- - - - - IMPORTANT DEADLINE DATES - - - - -

- 1) Submit application to ITD District Planner for review and signature by 1/29/10.
- 2) Submit application (include 14 copies) to LHTAC by 2/12/10, 5:00 p.m. (mst). (**Note: The applicant must submit the application to LHTAC; the ITD District office will not make this submittal.**)



**PROJECT
IDENTIFICATION
FORMS**



**LOCAL FEDERAL-AID INCENTIVE PROGRAM
 PROJECT IDENTIFICATION FORM**

* **Project Title:** _____

* Requested Construction Date: _____ Entity's Priority: _____ of _____

*** 1. GENERAL INFORMATION: (Name of requesting or sponsoring entity)**

City, County or Highway District: _____
 Contact Person: _____
 Phone #: _____
 Address: _____

*** 2. PROJECT TYPE: (Check all that applies)**

- Roadway reconstruction or rehabilitation
- Safety improvements
- Bridge - span over 20'
- Railroad crossing
- Planning
- Other

3. FUNCTIONAL CLASSIFICATION OF ROAD/HIGHWAY: (Check all that apply.)

- Urban arterial
- Urban collector
- Rural major collector
- Minor collector

*** 4. REQUESTED PROJECT CATEGORY:**

- New construction - Paving, Bridge, Railroad Crossing.
- Upgrade existing facility (add lanes, add shoulders, improve geometric factors)
- Pavement surface improvements (overlay, seal coat*)
- Transportation Planning

NOTE: Chip seals are eligible — see the instruction for restrictions!

5. PROJECT DESCRIPTION:

A. Route # _____, STC # (Surface Transportation Collector) _____,
 and/or Street Name: _____

*** Required information for a Transportation Planning project.**



LHTAC PROJECT IDENTIFICATION FORM

PROJECT TITLE: _____

PROJECT SPONSOR: _____

B. Project Termini: _____
Beginning/Ending Mileposts: _____
Project Length: _____

* C. Short description of project (Attach an 8-1/2" x 11" vicinity map): _____

* D. List of Participants in your multi jurisdictional transportation planning group:

* E. Justification: _____

6. TECHNICAL INFORMATION: (Complete form ITD-2435).

Horizontal alignment changes anticipated? Yes No Unknown
Vertical alignment changes anticipated? Yes No Unknown

Existing Pavement Condition Information: (visual inspection)

rutting potholes drop-offs broken edges
 poor striping cracking shoving other _____
Pavement age? _____

Traffic and Crash Information:

Current	Date:	Projected (20 years)
AADT _____		AADT _____/20_____
DHV _____		DHV _____
LOS _____		LOS _____
% TK _____		% TK _____

Total number of crashes (property damage/injuries/fatalities) over a 3 year period: _____

Bridge Information: (Complete if a bridge is included in the project.)

- A. Name of crossing, i.e., over what roadway or waterway does the structure cross?

- B. Existing bridge #: _____
- C. Sufficiency rating: _____
- D. Is the bridge on the LHTAC prioritization list? Yes No

*** Required information for a Transportation Planning project.**

Possible relationship to other projects:



LHTAC PROJECT IDENTIFICATION FORM

PROJECT TITLE: _____

PROJECT SPONSOR: _____

Phased: Yes (If yes, indicate the name and year/s of the related project: _____ / _____).
 No

Project Year

Stand alone: Yes No

*** 7. PRELIMINARY COST ESTIMATE: (Include ITD form 1150)**

*** 8. Public support: (NOTE: Matching funds must be available for project implementation.)**

- A. Has a resolution supporting the concept of the proposal been approved by the Local Highway Jurisdiction sponsoring the project? (See attached sample resolution), (attached a copy of your resolution)
 Yes No Unknown
- B. Was the proposal previously identified in local infrastructure or comprehensive plans? (If so, please cite the name of the document and attach) _____
 Yes No Unknown

*** Required information for a Transportation Planning project.**

Signature of authorized elected official of Local Highway Jurisdiction.

Chairman, Mayor, President Date

Idaho Transportation Department District Representative Date

APPLICATIONS MUST BE SUMITTED WITH AN ITD FORM-2435 AND ITD FORM-1150.

TO BE COMPLETED BY LHTAC

Planning Activities: Begin: _____ Completed: _____ Scheduled date of construction: _____ Date of bid opening: _____ Date of project completion: _____ Total of local funds used: \$ _____ Equity factor for 200_ = _____ Reviewed by the LHTAC Administrator: _____ <div style="text-align: right; margin-top: 10px;">Administrator</div>
--



Local Federal-Aid Project Request



Instructions

1. Under Character of Proposed Work, mark appropriate boxes when work includes Bridge Approaches in addition to a Bridge.
2. Attach a Vicinity Map showing the extent of the project limits.
3. Attach an ITD 1150, Project Cost Summary Sheet.
4. Signature of an appropriate local official is the only kind recognized.

Note: In Applying for a Federal-Aid Project, You are Agreeing to Follow all of the Federal Requirements Which Can Add Substantial Time and Costs to the Development of the Project.

Sponsor (City, County, Highway District, State/Federal Agency)			Date
Project Title (Name of Street or Road)	F.A. Route Number	Project Length	Bridge Length

Project Limits (Local Landmarks at Each End of the Project)

Character of Proposed Work (Mark Appropriate Items)

<input type="checkbox"/> Excavation	<input type="checkbox"/> Bicycle Facilities	<input type="checkbox"/> Utilities	<input type="checkbox"/> Sidewalk
<input type="checkbox"/> Drainage	<input type="checkbox"/> Traffic Control	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Seal Coat
<input type="checkbox"/> Base	<input type="checkbox"/> Bridge(s)	<input type="checkbox"/> Guardrail	<input type="checkbox"/> _____
<input type="checkbox"/> Bit. Surface	<input type="checkbox"/> Curb & Gutter	<input type="checkbox"/> Lighting	

Estimated Costs (Attach ITD 1150, Project Cost Summary Sheet)

Preliminary Engineering (ITD 1150, Line 1)	\$	
Right-of-Way (ITD 1150, Line 2)	\$	
Construction (ITD 1150, Line 16)	\$	

Preliminary Engineering By: Sponsor Forces Consultant

Checklist (Provide Names, Locations, and Type of Facilities)

Railroad Crossing	
Within 2 miles of an Airport	
Parks (City, County, State or Federal)	
Environmentally Sensitive Areas	
Federal Lands (Indian, BLM, etc.)	
Historical Sites	
Schools	
Other	

Additional Right-of-Way Required: None Minor (1-3 Parcels) Extensive (4 or More Parcels)

Will any Person or Business be Displaced: Yes No Possibly

Standards	Existing	Proposed	Standards	Existing	Proposed
Number of Lanes			Roadway Width (Shoulder to Shoulder)	ft	ft
Pavement Type			Right-of-Way Width	ft	ft

Sponsor's Signature	Title
---------------------	-------

Additional Information to be Furnished by the District

Functional Classification	Terrain Type	20	ADT/DHV
---------------------------	--------------	----	---------

Project Cost Summary Sheet



Round Estimates to Nearest \$1,000

Date	Project Number	Key Number
Location		District
Segment Code	Begin Mile Post	End Mile Post
Length in Miles		

	Previous ITD 1150	Initial or Revise To
1. Preliminary Engineering		
2. Right-of-Way: Number of Parcels Number of Relocations		
3. Utility Adjustments: <input type="checkbox"/> Work <input type="checkbox"/> Materials <input type="checkbox"/> By State <input type="checkbox"/> By Others		
4. Earthwork		
5. Drainage and Minor Structures		
6. Pavement and Base		
7. Railroad Crossing: Grade/Separation Structure _____ At-Grade Signals <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. Bridges/Grade Separation Structures: <input type="checkbox"/> New Structure Location _____ Length/Width _____ <input type="checkbox"/> Repair/Widening/Rehabilitation Location _____ Length/Width _____		
9. Traffic Items (Delineators, Signing, Channelization, Lighting, and Signals)		
10. Construction Traffic Control (Sign, Pavement Markings, Flagging, and Traffic Separation)		
11. Detours		
12. Landscaping		
13. Mitigation Measures		
14. Other Items (Roadside Development, Guardrail, Fencing, Sidewalks, Curb and Gutter, C.S.S. Items)		
15. Cost of Constructions (Items 3 through 14)		
16. Mobilization % of Item 15		
17. Construction Engineer and Contingencies % of Items 15 and 16		
18. Total Construction Cost (15 + 16 + 17)		
19. Total Project Cost (1 + 2 + 18)		
20. Project Cost Per Mile		

Prepared By:

2010 PROJECT RATING CRITERIA (CONSTRUCTION PROJECT)

Sponsor: _____

Project Name: _____

Total Project Cost \$: _____

Preferred Year of Construction: _____

For LHTAC Use

		YES	NO	Points Available	LHTAC Use Only
1.	Have you completed a comprehensive plan with a transportation element included in it, or if you are a Highway District, did you participate with the County in the transportation planning process? _____ (Date of Completion) (Attach a copy of the transportation element) List year of last update _____			0-10	
2.	As the sponsoring entity, are you part of a multi-jurisdictional transportation planning group? How many entities are members? _____ (Include a list of members)			0-15	
3.	Has the project been prioritized and is it supported by your Multi-Jurisdictional Planning Organization? If so, list the project ranking. No. ____ of ____ projects. Is so, attach priority list.			0-10	
4.	Do you now have a Pavement Management Program in place? <input type="checkbox"/> Pending _____ (Date of Completion) (List year of last update _____)			0-10	
5.	Is this a multi-jurisdictional project? Is so, please include the name(s) of other Jurisdictions(s) participating financially and amount(s) per Jurisdiction: _____ _____			0-5	
6.	Is the project included in your 5-year Transportation Capital Improvement Plan (CIP)? (Include a copy of relevant portions of your CIP)			0-10	
7.	Has the project been reviewed with the Public Transit Provider in your area? (Transit Provider can be School or Elderly Bus) (List who and include evidence) _____			0-5	
8.	Has this project been considered by other funding sources? If so, which ones? _____			0-10	
9.	Have you included a realistic schedule for the Plan or a schedule for the design and construction of the project? (Include copy of schedule.)			0-5	
10.	Has your Highway Jurisdiction received Federal-aid Highway funds for a construction project within the last five years? _____ (list last year of funding)			0-5	
11.	Is the average daily traffic volume on the roadway over 400 vehicles per day? (list ADT and date taken) _____			0-10	
12.	Does your highway maintenance crew include any members who have completed the Idaho T ² Center's "Road Scholar" program? (list who attended and completed)			0-5	
TOTAL POINTS					



2010 PROJECT RATING CRITERIA (TRANSPORTATION PLAN)

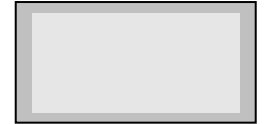
Sponsor: _____

For LHTAC Use

Project Name: _____

Total Project Cost \$: _____

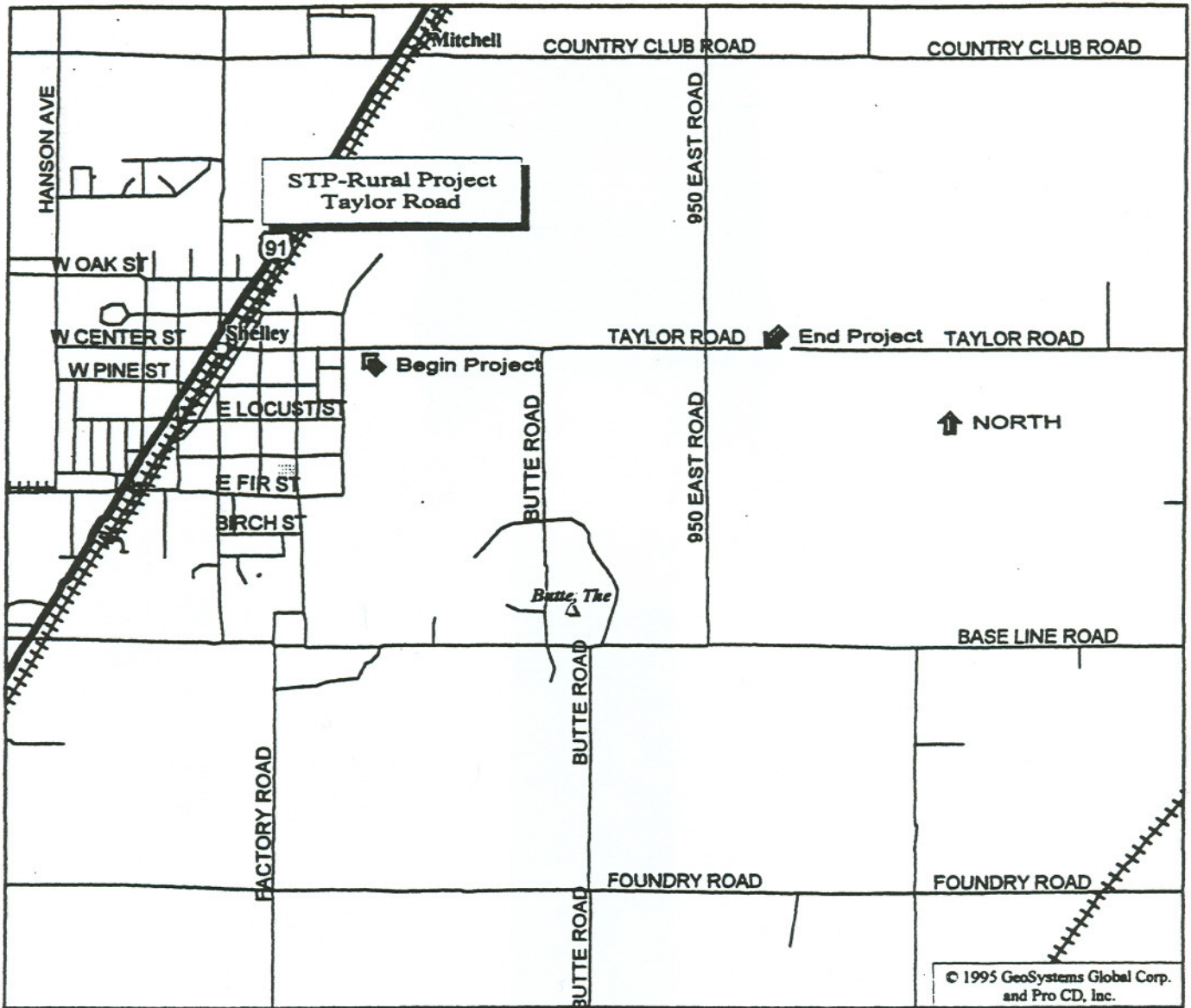
Preferred Year of Construction: _____



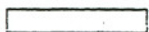






		YES	NO	Points Available	LHTAC Use
1.	Is your Highway Jurisdiction currently operating under a Comprehensive Plan (City or County) with a transportation element? _____ <i>(Date of Completion, and attached a copy of your transportation element)</i>			0-10	
2.	Will this Transportation Plan be adopted as an element of the Comprehensive Plan? _____ <i>(Date of Completion)</i>			0-10	
3.	As the sponsoring entity, are you part of a multi jurisdictional transportation planning group? How many entities are members? _____ <i>(Include a list of members)</i>			0-15	
4.	Has the project been prioritized and is it supported by your Multi-Jurisdictional Planning Organization? If so, list the project ranking. No. ____ of ____ projects. Is so, attach priority list.			0-10	
5.	Is this a multi-jurisdictional project? Is so, please include the name(s) of other Jurisdictions(s) participating financially and amount(s) per Jurisdiction: _____ _____			0-10	
6.	Has the project been reviewed with the Public Transit Provider in your area? <i>(Transit Provider can be School or Elderly Bus)</i>			0-5	
7.	Has this project been considered by other funding sources? If so, which ones? _____			0-5	
8.	How do you plan to involve the Public in the development of the Plan? <i>(Attached a short description)</i>			0-10	
9.	What elements do you intend this Transportation Plan to include? <i>(Attached a short description).</i>			0-15	
10.	Have you included a realistic schedule for this Transportation Plan? <i>(Include a copy of the schedule)</i>			0-5	
11.	When was the last time you used Federal-aid Highway funds on a project? _____ <i>(year)</i>			0-5	
TOTAL POINTS					



Sample Map for STP Project Application



© 1995 GeoSystems Global Corp.
and Pro CD, Inc.

-  Populated Area
-  Park
-  Water
-  Railroad
-  Minor Road
-  Secondary Road
-  Point of Interest

0.5 mile

SAMPLE RESOLUTION

CITY, COUNTY, OR HIGHWAY DISTRICT RESOLUTION

EXTRACT FROM THE MINUTES OF A REGULAR OR SPECIAL
MEETING OF THE _____ OF THE
COUNCIL OR COMMISSION

_____ OF _____, IDAHO
CITY, COUNTY, OR HIGHWAY DISTRICT LOCATION

HELD ON _____, 20__

The following Resolution was introduced by _____, read in full, considered and adopted:
COUNCILPERSON OR COMMISSIONER

RESOLUTION NO. _____ OF THE _____, IDAHO, SUPPORTING THE PROJECT
CITY, COUNTY, OR HIGHWAY DISTRICT

IDENTIFICATION SUBMITTAL FOR THE CONSTRUCTION OF _____
PROJECT NAME

TO THE LOCAL HIGHWAY TECHNICAL ASSISTANCE COUNCIL, (LHTAC). TOTAL PROJECT COST
ESTIMATE IS \$ _____, WHICH WILL REQUIRE \$ _____ OF LOCAL
MATCHING FUNDS AVAILABLE FROM _____.
CITY, COUNTY, OR HIGHWAY DISTRICT

BE IT RESOLVED THAT THE _____ IS HEREBY AUTHORIZED AND DIRECTED TO
MAYOR OR CHAIRMAN OF THE COMMISSION
SIGN THE PROJECT IDENTIFICATION PACKET AND SUBMIT TO LHTAC FOR PRIORITIZATION.

PASSED BY THE _____ AND APPROVED BY THE _____
COUNCIL OR COMMISSION COUNCIL OR COMMISSION

THIS _____ DAY OF _____, 20__.

MAYOR OR CHAIRMAN OF THE COMMISSION

ATTEST:

_____, Clerk

CERTIFICATE

I, _____, _____, do hereby certify that the
NAME CITY, COUNTY, OR HIGHWAY DISTRICT

foregoing is a full, true, and correct copy of Resolution No. _____ adopted at a regular or special
meeting of the _____ held on the ___ day of _____, 20__, and that
the same is now in full force and effect. IN WITNESS WHEREOF, I have hereunto set my hand
and impressed the official seal of the _____, this ___ day of
_____, 20__.
CITY, COUNTY, OR HIGHWAY DISTRICT

SIGNATURE

_____, Clerk
NAME

