**CMAQ/TAP Scope Change Request Form**

**Project Identification**

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| TIP ID |  | Sponsor |  |
| Project Location Description | |  | |

**Revised Project Scope**

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**Changes to Location/Limits (if applicable)**

Map Attached

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| --- | --- | --- |
| Name of Street or Facility to be Improved | Marked Route # | |
| North/West Reference Point/Cross St/Intersection | Marked Route # | Municipality & County |
| South/East Reference Point/Cross St/Intersection | Marked Route # | Municipality & County |
| Other Project Location Information | | |

**Changes to Emissions Benefit Analysis (not required of TAP projects)**

The proposed scope change will not affect the emissions benefits of the project.

The proposed scope change will affect the emissions benefits of the project – continue to next page.

**Cost/Schedule Changes**

The scope change will result in a cost change. A [Cost Change Request](http://www.cmap.illinois.gov/documents/10180/38326/CMAQ+Cost+Change+Request+Form+%285-1-13%29.docx/d41279e7-04de-4386-a610-9905037258d1) form was submitted.

The scope change will result in a schedule change. A [Schedule Change Request](http://www.cmap.illinois.gov/documents/10180/38326/CMAQ+Cost+Change+Request+Form+%285-1-13%29.docx/d41279e7-04de-4386-a610-9905037258d1) form was submitted.

**Additional Comments**

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**Changes to Emissions Benefit Analysis – Bike/Ped and Commuter Parking**

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| **BICYCLE AND PEDESTRIAN FACILITIES** |
| Miles of existing bicycle/pedestrian facilities intersecting the proposed facility:  Identify intersecting facilities: |
| Trip attractors linked directly to the proposed facility. For a pedestrian facility, identify transit service to which direct access is provided. |
| Indicate safety and attractiveness improvements |
| Off-Street Bicycle Facility - Provide traffic volumes, speeds and percent trucks on adjacent roadway. |

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| **BICYCLE PARKING & ENCOURAGEMENT** |
| Number of New Bicycle Spaces  Racks:       Lockers:       Other: |

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| **COMMUTER PARKING** | |
| Project Location:  City Of Chicago  Suburban | |
| Net Number Of New Vehicle Spaces:       Net Number Of New Bicycle Spaces: | |
| Utilization Rate:  New Lot  Existing Lot (Indicate Actual Utilization):       Percent | |
| Existing Parking Spaces And Price: | |
| SPACES at $      PER       (hr/day/mo)       SPACES at $      PER       (hr/day/mo) | SPACES at $      PER       (hr/day/mo)       SPACES at $      PER       (hr/day/mo) |
| Line-Haul Trip Length (One-Way Miles to the Nearest Tenth): | |
| If line haul trip length is not a milepost figure, provide basis for value provided: | |
| **COMMUTER PARKING STRUCTURES** | |
| NET GAIN IN SPACES AVAILABLE TO TRANSIT USERS – deduct spaces removed within 1,800 feet of project site from gain | |
| PROPOSED DAILY FEE TO BE CHARGED | |
| WALKING DISTANCE TO STATION PLATFORM – distance in feet from center of parking facility site to nearest edge of transit staging area. | |
| BUS SERVICE AVAILABILITY – number of bus routes currently serving the transit facility. | |
| BICYCLE PARKING AVAILABILITY – number of bicycle parking spaces built in conjunction with the parking facility, separated by racks vs. lockers or spaces within the parking structure. | |

**Changes to Emissions Benefit Analysis – Interconnects, Traffic Flow & Transit**

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| **SIGNAL INTERCONNECTS** | |
| Project Length (miles): | |
| Distance between the last two signals at both ends of the project (miles):  Show the location of all signals on the map | North/West End:  South/East End: |
| Posted Speed (miles per hour – for each segment): | |
| Current Traffic Volume (ADT – Indicate year for each segment): | |
| If project is part of a transit signal priority (TSP) corridor, give name: | |

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| **TRAFFIC FLOW IMPROVEMENTS**  Attach updated “After Improvement” [Input Module Worksheets](http://www.cmap.illinois.gov/documents/10180/37856/CMAQ-FY-2014-2018-INPUT-MODULE-WORKSHEET.docx/2c55e6a1-0544-437b-86dd-e2419e3b1627) |
| Type of Project (Check One)  Intersection Improvement Bottleneck Elimination |
| Project Length (Miles – Bottleneck Elimination and Multiple Intersections Only): |
| Posted Speeds (Miles Per Hour For Each Street): |
| Current Traffic Volume For Each Street (ADT – Indicate Year): |
| Are pedestrian or bicycle facilities to be added as part of this project?  Yes  No  If “Yes” is checked, and the scope change involves these facilities, complete the section on pedestrian/bicycle facilities. |
| Do queues currently clear on the major street at signalized intersections in the pm peak period?    Yes  No |

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| **TRANSIT PROJECTS** |
| Project Type (Check One):  System Start-Up  Transfer  Service & Equipment  Facility |
| Auto Trips Eliminated Per Day (Round Trips): |
| Length Of Auto Trips Eliminated (One-Way Miles To The Nearest Tenth): |
| Auto Trips Diverted Per Day (Round Trips): |
| Line-Haul Length Of Diverted Trips (One-Way Miles To The Nearest Tenth): |
| Project Life (Years): |
| Provide basis for parameters used to estimate benefits (e.g., ridership, auto occupancy, trip length. See [instructions](http://www.cmap.illinois.gov/documents/10180/37856/cmaq_instrux_12-10-12.pdf/1bd5c926-7517-44c2-ab28-24e970473195)): |

**Changes to Emissions Benefit Analysis – Direct Emissions Reduction**

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| **DIRECT EMISSIONS REDUCTION**  Complete Multiple copies of this table – One for each group of vehicles (type, engine, technology, etc.). | | | | |
| Vehicle Type:  (select one) | School Bus  Transit Bus  Refuse Hauler  Short Haul  Long Haul  Delivery Truck  Emergency Vehicle  On-Highway  City/County Vehicle  Passenger Locomotive  Switch Engine  Other: | | | |
| Vehicle Size:  (check one) | Class 2b (8,501 - 10,000 lbs.)  Class 3 (10,001 - 14,000 lbs.)  Class 4 (14,001 - 16,000 lbs.)  Class 5 (16,001 - 19,500 lbs.)  Class 6 (19,501 - 26,000 lbs.)  Class 7 (26,001 - 33,000 lbs.)  Class 8a (33,001 - 60,000 lbs.)  Class 8b (60,001 and over)  School Bus  Transit Bus | | | |
| Horsepower  0  1  3  6  11  16  25  40  50  75  175  (check one)  300  600  750  1000  1200  2000  3000 | | | | |
| Current Fuel Type:  LPG  LNG  CNG  Biodiesel 100  Biodiesel 20  Biodiesel 10  (check one)  Biodiesel 5  E85  Diesel, 3,400 ppm sulfur  Diesel, 500 ppm sulfur  Diesel, 15 ppm sulfur  Emulsion | | | | |
| Model Year (all vehicles in a group should have the same model year): | | | | |
| Before project: Fuel Consumed (gallons per year of current fuel type for all vehicles in the group combined):       gallons | | | | |
| After project: Fuel Consumed (gallons per year of current fuel type for all vehicles in the group combined):       gallons | | | | |
| Before project Annual Vehicle Miles/vehicle in group:       miles Annual Idling Hours/vehicle in group:       hours | | | | |
| After project Annual Vehicle Miles/vehicle in group:      miles  Annual Idling Hours/vehicle in group:       hours | | | | |
| Technology to be Applied | | # veh | Technology to be Applied | # veh |
| Diesel Oxidation Catalyst | |  | Recalibration |  |
| Diesel Oxidation Catalyst + Closed Crankcase Ventilation | |  | Exhaust Gas Recirculation + Diesel Particulate Filter |  |
| Diesel Particulate Filter | |  | Selective Catalytic Reduction |  |
| Hybrid Electric Replacement with Diesel Particulate Filter | |  | Emissions Control Devices |  |
| Partial Flow Filter | |  | Other |  |
| Compressed Natural Gas (CNG) Replacement | |  | Engine Repower |  |
| Lean NOx Catalyst/Diesel Particulate Filter | |  | Engine Replacement |  |
| Post-Implementation  LPG  LNG  CNG  Biodiesel 100  Biodiesel 20  Biodiesel 10 Fuel Type (select one):  Biodiesel 5  E85  Diesel, 3,400 ppm sulfur  Diesel, 500 ppm sulfur   Diesel, 15 ppm sulfur (non-road only)  Emulsion  Electricity | | | | |
| Diesel Vehicle Replacement Applicants  Expected remaining life of vehicles being replaced (years): | | | | |
| Total Number of Vehicles (all groups combined):       vehicles | | | | |

**Project Identification**

Please provide the project identification exactly as it appears in the CMAQ or TAP programs. The current Program Summary Report can be found on the CMAQ Program Management and Resources page of the CMAP website (<http://www.cmap.illinois.gov/mobility/strategic-investment/cmaq/program-management-resources>).

**Revised Project Scope**

Briefly describe the nature of the scope change requested (for example, “Extend the south limit from 1st St. to 3rd St. to provide connectivity to existing multi-use path on 3rd St.” or “Purchase 2013 model year trucks instead of the requested 2012 model year trucks.”

**Changes to Location/Limits**

If the scope change involves changes to the location and/or limits of the project, complete the following table and attach a map sufficient to accurately locate this project in a GIS system.

**Changes to Emissions Benefit Analysis**

Indicate if the scope change will affect the emissions benefit analysis and if needed, complete the appropriate table for the project type and provide additional attachments if required. For example, if more or fewer spaces will be built in a parking lot, or an intersection will be built with additional turn lanes, or transit service will be operated for more or fewer hours. If in doubt, consult with your Planning Liaison. TAP projects are not evaluated for emissions benefits and do not need to fill out this section.

**Cost/Schedule changes**

Indicate if the scope change will result in a cost or schedule change and complete the appropriate request forms.

**Additional Comments**

Provide any additional information that may assist CMAP staff and the PSC with consideration of this request. Use this space to explain any entries above that were left blank, or to clarify any of your above responses.

**Submit this completed form (page one and any page(s) containing emissions benefit data only) and any requested attachments to your Planning Liaison (PL) for review and submittal to CMAP. For sponsors noted as exceptions to PL review in the** [**CMAQ/TAP Scope and Cost Change Request Procedures**](http://www.cmap.illinois.gov/documents/10180/38326/CMAQ+Scope+and+Cost+Change+Request+Procedures+%285-1-13%29.pdf/039fbfbd-1268-4896-ac2b-9214c84d02de) **document, please submit to the project contact for transmittal to CMAP.**

**Requests should be submitted according to the schedule outlined on the current calendar of** [**Transportation Meetings and Deadlines**](http://www.cmap.illinois.gov/documents/10180/124134/MTS+2016v2.pdf/8723a2da-ff17-4097-97d9-8054ffcd6fc2)**. Requests received after the CMAQ Revision Request deadline for a particular PSC meeting will not be considered until the next scheduled meeting.**