

## CMAQ/TAP Cost Change Request Form

### Project Identification

TIP ID	02-19-0008	Sponsor	Village of Lincolnwood
Project Location Description		Touhy Avenue and Cicero Avenue Intersection	

### Currently Programmed Funding – Before cost change(s)

Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG1							
ENG 2	2020	160	128	80	CMAQ	STATE	
ROW	2020	410	328	80	CMAQ	STATE	
CONST	2021	2000	1600	80	CMAQ	STATE	
CE	2021	220	176	80	CMAQ	STATE	
<b>Total</b>		<b>2790</b>	<b>2232</b>	<b>80</b>			
Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG							
IMP							
<b>Total</b>							

### Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated federal authorization date**
ENG1							
ENG 2	2020	210	168	80	CMAQ	STATE	9/2020
ROW	2020	410	328	80	CMAQ	STATE	9/2020
CONST	2021	2000	1600	80	CMAQ	STATE	9/2021
CE	2021	220	176	80	CMAQ	STATE	9/2021
<b>Total</b>		<b>2840</b>	<b>2272</b>	<b>80</b>			

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated FTA Grant approval date***
ENG							
IMP							
<b>Total</b>							

### Requested Cost Changes (+/-)

Check all that apply: Cost Increase    Transfer of Funds    Reinstatement of Deferred Funds

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds(\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1					
ENG 2	2020	50	40	0	
ROW	2020	0	0	0	
CONST	2021	0	0	0	
CE	2021	0	0	0	
<b>Total</b>		<b>50</b>	<b>40</b>	<b>0</b>	

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
<b>Total</b>					

### Reason for Request

Check here if the reason is a scope change and complete a [Scope Change Request form](#).

The ENG 2 estimate did not account for the required effort to prepare street lighting studies and plans, traffic signal plans, and geotechnical studies due to the minor widening.

### State and Federal Project Information

Select One.

State/Federal Project or Grant Numbers Provided Below

Most recently *approved* PPI Form Attached

Local Agency Agreement Attached

Phase	State Job Number X-00-000-00	Federal Project Number XXX-0000(000)	FTA Grant Number IL-XX-XXXX-XX
ENG1	P-91-017-18		
ENG 2	D-91-017-18		
ROW	R-91-017-18		
CONST	C-91-017-18		
ENG			
IMP			

**Additional Comments**

## CMAQ/TAP Cost Change Request Form

### Project Identification

TIP ID	<b>03-13-0010</b>	Sponsor	<b>Village of Niles</b>
Project Location Description		Howard Street from Milwaukee Avenue (IL 21) to Lehigh Avenue	

### Currently Programmed Funding – Before cost change(s)

Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG1	2017	20.0	0	0	N/A	Local	
ENG 2	2019	407.3	0	0	N/A	Local	
ROW	2019	331.9	0	0	N/A	Local	
CONST	2020	4,968.75	3,975.0	80	STP-L	Local	
CONST	2020	1,316.875	1,053.5	80	TAP-L	Local	
CE	2020	650.121	480.0	74	TAP-L	Local	
<b>Total</b>		<b>7,694.946</b>	<b>5,508.5</b>				
Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG							
IMP							
<b>Total</b>							

### Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated federal authorization date**
ENG1	2017	20.0	0	0	N/A	Local	12/12/2018
ENG 2	2019	407.3	0	0	N/A	Local	06/10/2019
ROW	2019	331.9	0	0	N/A	Local	11/21/2019

CONST	2020	4,968.75	3,975.0	80	STP-L	Local	01/17/2020
CONST	2020	2,008.125	1,606.5	80	TAP-L	Local	01/17/2020
CE	2020	650.121	480.0	80	TAP-L	Local	
<b>Total</b>		<b>8,386.196</b>	<b>6,061.5</b>				
<b>Phase</b>	<b>Starting FFY</b>	<b>Current Total Cost (\$000's)</b>	<b>Current Federal Cost (\$000's)</b>	<b>Current Federal Share (%)</b>	<b>Federal Fund Source</b>	<b>Local Match Fund Source</b>	<b>Actual or Anticipated FTA Grant approval date***</b>
ENG							
IMP							
<b>Total</b>							

### Requested Cost Changes (+/-)

Check all that apply: Cost Increase    Transfer of Funds    Reinstatement of Deferred Funds

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1					
ENG 2					
ROW					
CONST		691.25	553.0	80	
CE					
<b>Total</b>		<b>691.25</b>	<b>553.0</b>		

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
<b>Total</b>					

### Reason for Request

Check here if the reason is a scope change and complete a [Scope Change Request form](#).

The low bid exceeded the construction cost estimate. The additional \$691,250 (\$553,000 TAP-L and \$138,250 local) will provide the additional funding necessary to match the construction bid of \$6,976,099.33.

### State and Federal Project Information

Select One.

State/Federal Project or Grant Numbers Provided Below  
 Most recently *approved* PPI Form Attached  
 Local Agency Agreement Attached

Phase	State Job Number X-00-000-00	Federal Project Number XXX-0000(000)	FTA Grant Number IL-XX-XXXX-XX
ENG1	P-		
ENG 2	D-		
ROW	R-		
CONST	C-91-379-13	3IQQ(242)	
ENG			
IMP			

**Additional Comments**

## CMAQ/TAP Schedule Change Request Form

### Project Identification

TIP ID	04-20-0003	Sponsor	Village of Rosemont
Project Location Description		Pedestrian bridge over the Des Plaines River at Bryn Mawr Avenue, Rosemont, IL	

### Currently Programmed Schedule

Phase	Programmed FFY
ENG1	2020
ENG2	2020
ROW	
CONST	2021

Phase	Programmed FFY
ENG	
IMP	

### Requested Schedule

Phase	Starting FFY	Actual or Anticipated Authorization Date
ENG1	2019	8/30/19
ENG2	2020	4/30/20
ROW		
CONST	2020	6/12/20
20		

Phase	Starting FFY	Actual or Anticipated Authorization Date
ENG		
IMP		

### Reason for Request

Check here if the reason is a scope change and complete a [Scope Change Request form](#).

Plans will be completed sooner than originally expected.

## **Additional Comments**



## CMAQ/TAP Cost Change Request Form

### Project Identification

TIP ID	05-16-0002	Sponsor	RIVERSIDE
Project Location Description		RIVERSIDE CENTRAL BUSINESS DISTRICT	

### Currently Programmed Funding – Before cost change(s)

Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG1							0
ENG 2							
ROW							
CONST	2020	\$38,500	\$30,800	80%	CMAQ	LOCAL	
CE							
<b>Total</b>							

  

Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG							
IMP							
<b>Total</b>							

### Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated federal authorization date**
ENG1							
ENG 2							
ROW							
CONST	2020	\$46,000	\$36,800	80%	CMAQ	LOCAL	
CE							
<b>Total</b>							

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated FTA Grant approval date***
ENG							
IMP							
<b>Total</b>							

### Requested Cost Changes (+/-)

Check all that apply: Cost Increase    Transfer of Funds    Reinstatement of Deferred Funds

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds(\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1					
ENG 2					
ROW					
CONST		\$7,500	\$6,000	N/A	N/A
CE					
<b>Total</b>					

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
<b>Total</b>					

### Reason for Request

Check here if the reason is a scope change and complete a [Scope Change Request form](#).

COST OF THE CHOSEN BIKE RACKS HAS INCREASED SINCE INITIAL ESTIMATES INCREASING THE PROJECT COST BY \$7,500.

### State and Federal Project Information

Select One.

State/Federal Project or Grant Numbers Provided Below

Most recently *approved* PPI Form Attached

Local Agency Agreement Attached

Phase	State Job Number X-00-000-00	Federal Project Number XXX-0000(000)	FTA Grant Number IL-XX-XXXX-XX
ENG1	P-		
ENG 2	D-		
ROW	R-		
CONST	C-91-149-20	E40V(511)	
ENG			
IMP			

**Additional Comments**

## CMAQ/TAP Cost Change Request Form

### Project Identification

TIP ID	08-12-0004	Sponsor	DuPage County Division of Transportation
Project Location Description		55 <sup>th</sup> Street from Dunham Road to Clarendon Hills Road; Sec. 11-00302-04-CH	

### Currently Programmed Funding – Before cost change(s)

Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplis hed*
ENG1	2013	240	0	0	N/A	MFT	
ENG 2	2015	458	366	80%	CMAQ	MFT	
ROW	2015	931	745	80%	CMAQ	MFT	
CONST	2017	3,432	2,746	80%	CMAQ	MFT	
CE	2017	430	344	80%	CMAQ	MFT	
<b>Total</b>		<b>5,116</b>	<b>3,901</b>	<b>76%</b>			
Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplis hed*
ENG							
IMP							
<b>Total</b>							

### Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipate d federal authorizat ion date**
ENG1	2013	240	0	0	N/A	MFT	
ENG 2	2015	458	366	80%	CMAQ	MFT	
ROW	2015	931	745	80%	CMAQ	MFT	
CONST	2019	3,432	2,746	80%	CMAQ	MFT	

CE	2019	1,324	536	40%	CMAQ	MFT	
<b>Total</b>		<b>6,385</b>	<b>4,393</b>	<b>69%</b>			
<b>Phase</b>	<b>Starting FFY</b>	<b>Current Total Cost (\$000's)</b>	<b>Current Federal Cost (\$000's)</b>	<b>Current Federal Share (%)</b>	<b>Federal Fund Source</b>	<b>Local Match Fund Source</b>	<b>Actual or Anticipated FTA Grant approval date***</b>
ENG							
IMP							
<b>Total</b>							

### Requested Cost Changes (+/-)

Check all that apply: Cost Increase    Transfer of Funds    Reinstatement of Deferred Funds

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1		0	0		
ENG 2		0	0		
ROW			0		
CONST		0	0		
CE	2019	464	192	41%	
<b>Total</b>		<b>464</b>	<b>192</b>	<b>41%</b>	

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
<b>Total</b>					

### Reason for Request

Check here if the reason is a scope change and complete a [Scope Change Request form](#).

Additional funds are requested for CMAQ segments of the TIP project based on updated Construction Engineering costs (Supplement #1) due to delays in project for utility relocation.

### State and Federal Project Information

Select One.

State/Federal Project or Grant Numbers Provided Below

Most recently *approved* PPI Form Attached

Local Agency Agreement Attached

Phase	State Job Number X-00-000-00	Federal Project Number XXX-0000(000)	FTA Grant Number IL-XX-XXXX-XX
ENG1	P-		
ENG 2	D-91-197-15	CMM-4003(478)	
ROW	R-91-007-15	CMM-4003(479)	
CONST	C-91-197-15	K9HE(081)	
ENG	C-91-197-15	K9HE(081)	
IMP			

**Additional Comments**

## CMAQ/TAP Cost Change Request Form

### Project Identification

TIP ID	12-18-0005	Sponsor	City of Joliet
Project Location Description		Black Road Traffic Signal Interconnection Improvements Project	

### Currently Programmed Funding – Before cost change(s)

Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG1		\$82	\$0	0%		LOCAL	
ENG 2							
ROW							
CONST	2020	\$1,028	\$822	80%	CMAQ	LOCAL	
CE	2020	\$103	\$82	80%	CMAQ	LOCAL	
<b>Total</b>		<b>\$1,213</b>	<b>\$904</b>				
Phase	Program med FFY	Program med Total Cost (\$000's)	Program med Federal Cost (\$000's)	Program med Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG							
IMP							
<b>Total</b>							

### Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated federal authorization date**
ENG1		\$82				LOCAL	
ENG 2							
ROW							
CONST	2020	\$1,028	\$822	80%	CMAQ	LOCAL	
CE	2020	\$150	\$119	80%	CMAQ	LOCAL	
<b>Total</b>		<b>\$1,260</b>	<b>\$941</b>				

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated FTA Grant approval date***
ENG							
IMP							
Total							

### Requested Cost Changes (+/-)

Check all that apply: Cost Increase    Transfer of Funds    Reinstatement of Deferred Funds

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1					
ENG 2					
ROW					
CONST					
CE	2020	\$47	\$37	80%	
Total					

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
Total					

### Reason for Request

Check here if the reason is a scope change and complete a [Scope Change Request form](#).

THE INITIAL ESTIMATE OF COST FOR CONSTRUCTION ENGINEERING WAS 10% OF THE CONSTRUCTION COST. THIS VALUE IS LOW FOR THIS PROJECT SCOPE AND HAS BEEN INCREASED TO 15%.

### State and Federal Project Information

Select One.

State/Federal Project or Grant Numbers Provided Below

Most recently *approved* PPI Form Attached

Local Agency Agreement Attached



Phase	State Job Number X-00-000-00	Federal Project Number XXX-0000(000)	FTA Grant Number IL-XX-XXXX-XX
ENG1	P-		
ENG 2	D-		
ROW	R-		
CONST	C-		
ENG			
IMP			

**Additional Comments**