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| **Project Title** |  |
| **Sponsoring Agency** |  |
| **Federal**  **Amount Requested** |  |
| **Local Match Amount** |  |
| **Total Project Cost** (Local Match Amount must be at least 20% of Total Project Cost. |  |
| **UWP Eligibility Timeframe** (Estimated Date of Completion) |  |

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| **Description and Justification** |
| **Brief Description** - Please provide information so that all relevant Committee, CMAP/MPO Policy Board members, and the public are able to understand the general scope and goals of the project. This information will showcase your project in future documentation, including the UWP Document. |
| **Statement of Work, Objectives, and Goals** - Please provide a statement of work proposed to be completed with project. The narrative should include key objectives and goals expected to be met throughout the duration of the project. |
| **Competitive Justification** - Please provide detail on how the project aligns with the State’s Long Range Transportation Plan |
| **Competitive Justification** - Please identify at least one principal of the regional priorities associated with this project and/or the required MPO activities. If there is more than one, please state which you consider to be the main regional priority |
| **Competitive Justification** - How does the project benefit disadvantaged/economically disconnected communities as defined in ON TO 2050? Please explain.) |
| **Competitive Justification** (which particular GO TO 2050 recommendation(s) will this project contribute to or implement?) |
| Is this project a continuation of previous work? If so, please explain. |
| What is the source of funds for the local match portion of this project? |

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| **Project Performance**  **(Project Timeline, Product Completion Schedule, and Spend Plan)** | | | |
| **Key Objectives, Goals, Milestones, and Deliverables** | **Type** | **Completion Date\* (Provide actual dates or quarter in which competed)** | **Spend Estimate** |
| *e.g Project Start* | *Goal* | *7/1/2022* | *$0* |
| *e.g. Existing Conditions Report* | *Deliverable* | *Q3 2022* | *5000* |
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**\*Please include key procurement dates in this timeline, including if they occur before the start of the project**

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| **Expense Breakdown** | |
| **Staff Cost associated with this Project** | $ |
| **Overhead Cost associated with this Project** | $ |
| **Total Person Months** |  |
| **Consultant Cost** | $ |
| **Other Costs (provide details below)** | $ |
| **Total Project Cost** | $ |
| **Please specify the purpose of consultant costs** | |
| **Please specify the purpose of other costs** | |
| **Feel free to provide additional information regarding this project plan as an attachment to your application. BOBs 2832 requires agencies to report quarterly on the performance of their project or budget to actual expenditures.** | |