

# ECONOMICALLY DISADVANTAGED COUNTIES PROGRAM PROJECT INFORMATION SHEET



COUNTY \_\_\_\_\_ APPLICANT \_\_\_\_\_

## District Contact Information

NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

\*If the project is an "OFF-SYSTEM" project, is the project in the Unified Transportation Program (UTP) and have a local funding agreement in place, or in a District Bank Balance Program?

(Mark as appropriate) YES or No or NA

\*If the applicant is a CITY within an eligible county, please answer the two following questions:

#1 Economic Development Sales Tax? (Mark as appropriate) YES or NO

#2 Population (most recent Census)? \_\_\_\_\_

## PROJECT INFORMATION

UTP PRIORITY STATUS:	
CSJ:	
ESTIMATED LETTING DATE	

LOCATION AND LIMITS – Provide highway number with limits to and from.

PROJECT SCOPE – Provide type of work.

ADJUSTMENT RATIONALE – Provide reason why the adjustment is needed.

## ANTICIPATED PROJECT COST BREAKDOWN OF ELIGIBLE COMPONENTS

TOTAL ADJUSTMENT- \_\_\_\_\_

1.	2.	3.	4.	5.
Project Component	Est. Total Cost (\$)	Local Participation (%)	Est. Required Local Match (\$)	Local Participation After Adjustment (\$)
TOTAL				

Approved by: \_\_\_\_\_

District Engineer

Date: \_\_\_\_\_