

**North County Safe Routes to School,**

**Bicycle and Pedestrian Program**

Cycle 4 Funding Application

APPLICATIONS ARE DUE BY 5PM ON

**Friday, February 16, 2024**

APPLICANTS MUST SUBMIT
1 PAPER COPY *OR* 1 ELECTRONIC COPY
OF THE APPLICATION TO:

**Maya Kulkarni, Transportation Planner**

**260 N. San Antonio Road, Suite B**

**Santa Barbara, CA 93110**

**mkulkarni@sbcag.org**

**805-961-8915**

**Application Notice**

\*Eligible applicants may remove sections of the Cycle 4 Measure A North County Safe Routes to School, Bicycle and Pedestrian Program Funding Application that are not relevant to their respective project. This is at the discretion of the project applicant.

Project Title:

**Section I - Applicant Information**

Applicant Agency:

Agency Address:

Contact Person/Title:

Contact Telephone:       Contact Email:

Co-Sponsor Agency\* (if any):

Co-Sponsor Contact Person:

Co-Sponsor Telephone:       Co-Sponsor Email:

*\*Projects proposed by Cities and the County may include projects in coordination with school districts, universities, colleges, transit agencies, and Caltrans.*

Pre-Application

Was a pre-application submitted for the requested project?\*\* Yes [ ]  No [ ]

*\*\*Project sponsors must submit a pre-application for each project requesting funding. If pre-application was not submitted, stop here; project is not eligible for funding.*

Priority

Total number of applications being submitted/co-sponsored by local agency:

If submitting/co-sponsoring more than one application, priority number of this application:

Funding

Amount of Measure A funds requested for project: $

Will other sources of funding be used to help deliver the project? Yes [ ]  No [ ]

If yes, please indicate the other fund source(s), amounts, and percentage of total project cost that the fund source(s) will represent:

Measure A:       Amount $      Percentage:      %

Fund Source 1:       Amount $      Percentage:      %

Fund Source 2:       Amount $      Percentage:      %

Fund Source 3:       Amount $      Percentage:      %

Total Project Cost: Amount $

Will the requested Measure A funds be used as a local match or additional funding source for other Federal and State programs? Yes [ ]  No [ ]

If yes, which program(s)?

**Section II – Project Information**

Project Title:

Project Category/Implementation Activity

*Planning*

[ ]  Development of Bicycle, Pedestrian or Safe Routes to SchoolMaster Plan

*Capital Projects*

[ ]  Project Development

[ ]  Preliminary Engineering/Feasibility Studies

[ ]  Environmental Clearance

[ ]  Final Plans, Specifications, and Estimate (PS&E)

[ ]  Right of Way

[ ]  Engineering

[ ]  Appraisals and Acquisition

[ ]  Utilities

[ ]  Construction

[ ]  Construction Costs

[ ]  Construction Engineering

[ ]  Construction Management

[ ]  Maintenance

 [ ]  Education/Awareness/Outreach

*Programs*

[ ]  Education/Awareness/Outreach

[ ]  Encouragement/Marketing

[ ]  Safety Programs

Project Description: Provide a description of the proposed project improvements, e.g., develop bikeway plan; conduct outreach to local schools; construct new sidewalks; construct bicycle path; install lighted pedestrian crossing, etc.

Project Location: Provide a description of the general location(s) of the proposed project, e.g., the intersection of Main Street and 1st Street.

Please identify the name(s) of school(s) in the target area, the total student enrollment in each of the schools, and approximate number of children who currently walk/bicycle to school:

Name(s) of school(s):

Total student enrollment:

Approximate number of children who currently walk/bicycle to school:

Bikeway Master Plan Adoption:

For bicycle capital improvement projects, is the project included in a locally or regionally adopted Bicycle Master Plan that has been approved in the last five years?

Yes [ ]  No [ ]

If yes, please indicate the date the plan was adopted by applicant’s governing body:

\_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_ (Attach related project documentation from adopted plan)

Local Support: Attach documentation demonstrating local support for the project including letters of support from schools and/or organizations. **(Applicants are not limited to a certain number of supporting attachments).**

**Please list types of local support received for the requested project below:**

**Section III - Project Cost Estimate** (Complete fields as applicable.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Requested Measure A Funds** | **Local Funds**(1) | **Other Funds** | **Total Cost** |
| **Development of Bike/Ped/SRTS Plan** |        |       |       |  |
| **Planning/Feasibility Studies** |        |       |       |  |
| **Capital Projects** |  |  |  |  |
| ***Planning and Project Development*** |        |       |       |  |
| ***Preliminary Engineering*** |  |  |  |  |
|  Environmental Clearance |       |       |       |  |
|  PS&E |       |       |       |  |
| ***Right of Way*** |  |  |  |  |
|  Engineering |       |       |       |  |
|  Appraisals, Acquisitions, and Utilities |       |       |       |  |
| ***Construction*** |  |  |  |  |
|  Construction Engineering |       |       |       |  |
|  Construction(2) |       |       |       |  |
| ***Maintenance*** |       |       |       |  |
| ***Education/Awareness/Outreach*** |       |       |       |  |
| **Programs** |  |  |  |  |
| ***Education/Awareness/Outreach*** |       |       |       |  |
| ***Encouragement/Marketing*** |       |       |       |  |
| ***Safety Programs*** |       |       |       |  |
|  |  |  |  |  |
| **Subtotal** |  |  |  |  |
|  |  |  |  |  |
| **Contingency**(3) |       |       |       |  |
|  |  |  |  |  |
| **Total Project Cost** |  |  |  |  |
| 1. *Local funds may include Measure A Local Street and Transportation Improvement (LSTI) funds, General funds, Block Grant funds, etc.*
2. *For construction cost, provide a detailed Engineer’s Estimate. (See the RFP/Grants Opportunities section of the MeasureA.net website to download the Engineers Estimate Worksheet.)*

*Contingency "Total Cost" may not exceed 10% of the "Subtotal".* |  |  |  |  |
|  |

In some cases, the scoring committee may recommend that a project be funded providing certain components are removed from the project scope. Will your agency be able to proceed with the project if its scope and cost are reduced? Yes [ ]  No [ ]

Comments:

**Section IV – Project Schedule**

Estimate dates of completion for the major milestones shown below, assuming the project is approved for funding.

Capital Projects

Request allocation of Measure A funds:

Complete environmental document:

Obtain right-of-way clearance:

Award construction contract:

Complete construction:

Project close-out:

For education and outreach programs, please provide the implementation and completion dates:

Education/Outreach Implementation:

Education/Outreach Completion:

Programs

For education and outreach programs, please provide the implementation and completion dates:

Implementation:

Completion:

Please indicate if there is any flexibility with your project schedule in case funds are not available in the year you are requesting for your project.

Yes [ ]  No [ ]

Comments:

**Section V – Evaluation Criteria – Applicant only needs to be provide information for their specific application type.**

The applicant’s responses to the following questions will be used to evaluate the proposed project. The scoring committee will evaluate applications according to the criteria specific to the identified project categories. Project scoring will be based on a one-hundred (100) point system with available points adjacent to the corresponding question. Feel free to include additional, relevant information as appropriate. Responses for all questions must be limited to a total of seven (7) pages. **Relevant attachments will not count toward the seven-page limit.**

**Capital Projects (100 points)**

* 1. Safety (30 points)

How will the project improve safety of pedestrians, students and/or bicyclists? Priority will be given to projects/programs that directly address demonstrated safety needs. Provide any quantitative data to help describe will improve safety; i.e. accident data, traffic or pedestrian counts, etc.

* 1. Outside Funding (10 points)

Indicate if the project has secured funding from other sources including, but not limited to, Measure A Local Streets and Transportation Improvement Funds, local funds and private funds.

* 1. Local Support (20 points)
		+ 1. Indicate if the project is in a locally adopted bicycle, pedestrian or general plan or is included in a regional bikeway or transportation plan.

* + - 1. Indicate if community outreach has been completed or is being completed and describe the outreach efforts.

c) Describe other demonstrated community support for the project.

* 1. Demand (15 points)

Indicate the percentage of existing or potential pedestrians, students and bicycle riders served by the project relative to the size of the community.

* 1. Access and Connectivity (15 points)
		+ 1. How will the project provide or improve bikeway continuity to activity centers such as public buildings, transit terminals, business districts, shopping centers, schools, etc.

b)   How will project provide interface with other modes of transportation.

c)   Indicate how your project eliminates a gap or overcomes an obstacle in a bicycle or pedestrian facility, allowing more convenient and safer travel.

* 1. Project Readiness & Schedule (10 points)
		+ 1. Indicate funding sources secured for project and if project will be fully funded if awarded Measure A funding.

* + - 1. Indicate the status of the project and describe the schedule associated with delivering the project.

c) Indicate if the project will need right-of-way and/or need utility relocations in order to be constructed.

**Local Bicycle, Pedestrian and Safe Routes To School Master Plans Criteria**

1)    Safety (40 points)

Describe how the plan will focus on the safety of pedestrians, students and/or bicyclists.

2)    Outside Funding (10 points)

Indicate if the plan has secured funding from other sources including, but not limited to, Measure A Local Streets and Transportation Improvement Funds, local funds and private funds.

3) Local Support (10 points)

Indicate coordination with regional or other locally adopted plans and support received for development of your agency’s plan.

4)    Plan Status (40 points)

 Indicate if a bicycle or pedestrian master plan currently exists for your agency, if so when was the plan adopted by your agency’s local governing board or council?

**Education and Awareness Programs Criteria**

1)    Safety (40 points)

Describe how the program will address the safety of pedestrians and/or bicyclists.

2)    Outside Funding (10points)

Indicate if the program has secured funding from other sources including, but not limited to, Measure A Local Streets and Transportation Improvement Funds, local funds and private funds.

3)    Local Support (10 points)

Describe community support for the program.

4)    Demand (15 points)

Indicate the number of North County residents served by the program

5)    Effectiveness (15 points)

Describe how the program (or similar programs) has been shown to be effective at encouraging bicycling and/or walking, or improving bicycle and/or pedestrian safety.

6)    Implementation/Readiness (10 points)

Describe the status of the program and any coordination necessary with implementing the program.

Additional Attachments

The following attachments are required for all projects, *as applicable*:

1. A general map showing:
	1. the location of all proposed improvements or projects, or
	2. the geographic area or facility the program will serve
2. A site plan for each improvement location showing existing and proposed conditions
3. Detailed engineer’s estimate (use form provided on Measure A web site)
4. Applicable ‘warrants’ for projects with traffic control devices

Photographs supplementing “A” and “B” above and letters of support from partners and advocacy groups are highly recommended.

Scoring and Awarding of Funding

Applicants will be notified of scores for each application after the scoring committee has reviewed all applications. Once applicants have been notified, the scoring committee will recommend applications for available funding to the North County Subregional Planning Committee of the SBCAG Board. The Subregional Committee shall recommend projects for funding to the full SBCAG board for inclusion in the Measure A Program of Projects.

Sponsors awarded funding will be required to sign a cooperative agreement with SBCAG for the project defining items such as the scope, estimated cost, schedule for the project, progress reporting requirements, reimbursement process, timely use of funds deadlines, etc.

**Section VI – Applicant Signatures**

The undersigned affirm that the statements contained in the application package are true and complete to the best of their knowledge.

**Local Agency Official (as applicant or co-sponsor):**

Name:       Signature: \_\_\_\_\_

Title:       Date:

**Applicant (if other than local agency)**

Name:       Signature: \_\_\_\_\_

Title:       Date:

**School Official:** The undersigned affirms that the school(s) benefited by this application is (are) not on a school closure list that has been identified by the School District.

Name:       Signature: \_\_\_\_\_

Title:       Date:

School(s):