CALIFORNIA TRANSPORTATION COMMISSION

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| 2025 Active Transportation ProgramList of All Application QuestionsSmall Infrastructure/Non-Infrastructure Combination Application  |   |

**Part A: General Application Questions**

**Part A1: Applicant Information**

* Implementing Agency Name *(short text field)*
* Local Agency Code (LOCODE) *(dropdown list)*
	+ If not listed: Other LOCODE *(short text field)*
* Implementing Agency's Address *(short text field)*
* Implementing Agency's Primary Contact Person *(short text field)*
* Primary Contact Person's Title *(short text field)*
* Primary Contact Person's Phone Number *(phone number field)*
* Primary Contact Person's Email Address *(email address field)*
* Implementing Agency's Secondary Contact Person *(short text field)*
* Secondary Contact Person's Title *(short text field)*
* Secondary Contact Person's Phone Number *(phone number field)*
* Secondary Contact Person's Email Address *(short text field)*
* Does the implementing agency currently have a Master Agreement with Caltrans? *(yes/no checkbox)*
	+ If yes:
		- Implementing Agency's Federal Caltrans Master Agreement Number *(short text field)*
		- Implementing Agency's State Caltrans Master Agreement Number *(short text field)*
* Does this project have a Project Partnering Agency? *(yes/no checkbox)*
	+ If yes:
		- Project Partnering Agency Name *(short text field)*
		- Project Partnering Agency's Contact Person *(short text field)*
		- Contact Person's Title *(short text field)*
		- Contact Person's Phone Number *(phone number field)*
		- Contact Person's Email Address *(email address field)*
		- Attachment: Letter of intent with partnering agency *(attachment field)*

**Part A2: General Project Information**

* Project Name *(short text field, 10-word limit)*
* Summary of Project Scope *(narrative field, 300-word limit)*
* Summary of Outcomes/Outputs *(narrative field, 35-word limit)*
* Federal Transportation Improvement Program (FTIP) Project Description *(narrative field, 180-character limit)*
* Project Location *(narrative field, 180-character limit)*
* Table: List all cities that the project will affect *(table field)*
* Infrastructure Project Coordinates – Latitude *(number field)*
* Infrastructure Project Coordinates – Longitude *(number field)*
* Non-Infrastructure Project Coordinates – Latitude *(number field)*
* Non-Infrastructure Project Coordinates – Longitude *(number field)*
* Is this project located within 500 feet of a freeway or roadway with a traffic volume over 125,000 annual average daily traffic (AADT)? *(yes/no checkbox)*
	+ If yes:
		- Please describe any project design elements intended to minimize exposure to air pollution and circumstances that make locating project components in close proximity to heavily travelled freeways or roadways unavoidable and explain why this project location was chosen. *(narrative field, 300-word limit)*
* Table: Enter the 2020 Census 11-digit census tract Geographic Identifier (i.e., 06XXXXXXXXX) for each census tract that the project benefits *(table field)*
* Table: Enter the 2010 Census 11-digit census tract Geographic Identifier (i.e., 06XXXXXXXXX) for each census tract that the project benefits *(table field)*
* Caltrans District *(dropdown list)*
* Congressional Districts *(multiple selection checkbox)*
* State Senate Districts *(multiple selection checkbox)*
* State Assembly Districts *(multiple selection checkbox)*
* County (*dropdown list)*
* Metropolitan Planning Organization (MPO) *(dropdown list)*
* Regional Transportation Planning Agency (RTPA) *(dropdown list)*
* Urbanized Zone Area (UZA) Population (*dropdown list)*
* Within the last ten years, have there been any previous State or Federal ATP, SRTS, SR2S, BTA, or other ped/bike funding awards for a project(s) that are adjacent to or overlap the limits of the project scope of this application? *(yes/no checkbox)*
	+ If yes:
		- Table: List all projects *(table field)*

**Part A3: Project Type**

* Select the plans your agency currently has (select all that apply) *(multiple selection checkbox)*
* List other plans that include bicycle and/or pedestrian improvements *(short text field, 100-word limit)*
* Is the proposed project in a current plan? *(yes/no checkbox)*
* Select project sub-types (select all that apply) *(multiple selection checkbox)*
	+ If bicycle transportation, percentage of project *(number field)*
	+ If pedestrian transportation, percentage of project *(number field)*
	+ If trail project:
		- Do you feel a portion of your project is eligible for federal Recreational Trail funding? *(yes/no checkbox)*
			* If yes:
				+ Estimate total project costs that are eligible for Recreational Trail funding *(number field)*
				+ Estimate the percentage of total project costs that serve transportation uses *(number field)*
	+ If Safe Routes to School Project:
		- Table: Complete table for all schools the project benefits *(table field)*
		- Attachment: Attach school documentation *(attachment field)*

**Part A4: Project Details**

* Indicate the project improvement types included in the project/program/plan *(multiple selection checkbox)*
	+ If bicycle improvements:
		- Percentage of bicycle-related improvements going towards closing a gap *(number field)*
		- Table: Complete bicycle improvements table *(table field)*
	+ If pedestrian improvements:
		- Percentage of pedestrian-related improvements going towards closing a gap *(number field)*
		- Table: Complete pedestrian improvements table *(table field)*
	+ If multi-use trail improvements:
		- Table: Complete multi-use trail improvements table *(table field)*
	+ If crossing and intersection improvements:
		- Table: Complete crossing and intersection improvements table *(table field)*
	+ If other amenities:
		- Table: Complete other amenities table *(table field)*
	+ If traffic calming improvements
		- Table: Complete traffic calming improvements table *(table field)*
	+ If non-infrastructure components:
		- Complete non-infrastructure component fields *(number and short text fields)*
* Is 100% of the project within the Implementing Agency’s right-of-way (R/W) and/or is within their control at the time of application? *(yes/no checkbox)*
	+ If no, select all that apply *(multiple selection checkbox)*
		- If project will likely require R/W in fee ownership, permanent easements, and/or temporary construction easements from private owners and/or will require utility relocations from utility companies outside that implementing agency's governmental control:
			* Total number of private R/W parcels expected to be impacted *(number field)*
			* Total number of utility companies expected to be impacted *(number field)*
			* Total additional months needed (all project phases) for the expected R/W acquisitions and/or utility relocations *(number field)*
			* Has the project schedule been developed to account for this time? *(yes/no checkbox)*
				+ If no, why did you not account for the special R/W needs listed above in the project schedule? *(narrative field, 100-word limit)*
		- If project will likely encroach into Caltrans R/W, requiring easements, encroachment permits, and/or other approvals:
			* Is Caltrans the implementing agency? *(yes/no checkbox)*
				+ If no:

Attachment: State Highway Project Impact Assessment Form *(attachment field)*

Percentage of the project (by area) within Caltrans R/W *(number field)*

Total construction costs within Caltrans R/W *(number field)*

Level of Caltrans project development oversite has been determined to be needed by Caltrans *(dropdown list)*

Is the project expected to be tracked by Caltrans as a "Local Assistance" or "Capital" project? *(dropdown list)*

Has the project schedule been developed to account for the additional time needed for Caltrans to complete its required oversight responsibilities? *(yes/no checkbox)*

If no, why did you not account for the special R/W needs listed above in the project schedule? *(narrative field, 100-word limit)*

* + - If project will likely require R/W, easements, encroachment and/or approval involving governmental agencies (excluding Caltrans), environmental, or railroad owner's property:
			* Attachment: Attach a letter of support or neutrality from each separate agency *(dropdown list)*
			* Number of additional months needed (all project phases) for all of these agencies to complete their required oversite responsibilities and to complete any required actions that are necessary based on the expected R/W impacts? *(number field)*
			* Has the project schedule been developed to account for the additional time needed for Caltrans to complete its required oversight responsibilities? *(yes/no checkbox)*
				+ If no, why did you not account for the special R/W needs listed above in the project schedule? *(narrative field, 100-word limit)*

**Part A5: Project Schedule**

* Will ATP funds be used in the PA&ED phase of the project? *(yes/no checkbox)*
	+ If yes:
		- Proposed CTC PA&ED allocation date *(date field)*
		- Notice to Proceed with Federally Reimbursable ATP Work *(date field)*
	+ Expected or past start date for PA&ED activities *(date field)*
	+ Number of months to complete CEQA and NEPA studies and approval *(number field)*
	+ Expected or past completion date for the PA&ED phase *(date field)*
	+ Attachment: Applications showing the PA&ED phase as complete must attach the signature pages for the CEQA and NEPA documents, including project descriptions covering the full scope *(attachment field)*
* Will ATP funds be used in the PS&E phase of the project? *(yes/no checkbox)*
	+ If yes:
		- Proposed CTC PS&E allocation date *(date field)*
		- Notice to Proceed with Federally Reimbursable ATP Work *(date field)*
	+ Expected or Past Start Date for PS&E Activities *(date field)*
	+ Number of months to complete PS&E *(number field)*
	+ Expected or past completion date for the PS&E phase *(date field)*
* Will ATP funds be used in the R/W phase of the project? *(yes/no checkbox)*
	+ If yes:
		- Proposed CTC R/W allocation date *(date field)*
		- Notice to Proceed with Federally Reimbursable ATP Work *(date field)*
	+ Expected or past start date for R/W activities *(date field)*
	+ Number of months to complete the R/W engineering, acquisition, and utilities *(number field)*
	+ Expected or past completion date for the R/W phase *(date field)*
	+ Attachment: Applications showing the R/W phase as complete must attach the Caltrans approved R/W Certification *(attachment field)*
* Will ATP funds be used in the CON phase of the project? **Note:** *You MUST request construction funds (yes/no checkbox)*
	+ If yes:
		- Proposed CTC CON allocation date *(date field)*
		- Notice to Proceed with Federally Reimbursable ATP Work *(date field)*
	+ Expected start date for construction activities *(date field)*
	+ Number of months needed to complete construction activities *(number field)*
	+ Expected completion date for the CON phase *(date field)*
* Will ATP funds be used in the CON-NI phase of the project?
	+ If yes:
		- Proposed CTC CON-NI allocation date *(date field)*
		- Notice to Proceed with Federally Reimbursable ATP Work *(date field)*
	+ Expected start date for non-infrastructure activities *(date field)*
	+ Number of months needed to complete non-infrastructure activities *(number field)*
	+ Expected completion date for the CON-NI phase *(date field)*

**Part A6: Project Funding**

* Total Project Cost *(currency field)*
* Total ATP Request *(currency field)*
* Table: Complete the funding table *(table field)*
* Do you believe your project warrants receiving state-only funding? *(yes/no checkbox)*
	+ If yes:
	+ Provide a brief explanation *(narrative field, 50-word limit)*
	+ Attachment: Attach a completed Exhibit 25-F State-Only Funds Request *(attachment field)*
* Attachment: Attached a completed Project Programming Request (Exhibit 25-I)

**Part A7: Screening Criteria**

* Is all or part of the project currently (or has it ever been) formally programmed in an RTPA, MPO, and/or Caltrans funding program? *(yes/no checkbox)*
	+ If yes, why the project is not considered fully funded? *(narrative field, 200-word limit)*
* Are any elements of the proposed project directly or indirectly related to the intended improvements of a past or future development or capital improvement project? *(yes/no checkbox)*
	+ If yes, why can the other project not fund the proposed project? *(narrative field, 200-word limit)*
* Are adjacent properties undeveloped or under-developed where standard “conditions of development” could be placed on future adjacent redevelopment to construct the proposed project improvements? *(yes/no checkbox)*
	+ If yes, explain why the development cannot fund the proposed project. *(narrative field, 200-word limit)*
* Is the project consistent with the relevant adopted regional transportation plan that has been developed and updated pursuant to Government Code Section 65080? *(yes/no checkbox)*
	+ If yes:
		- Attachment: Provide relevant pages of the Regional Transportation Plan showing that the proposed project is consistent. *(attachment field)*
	+ If no:
		- Document why the project should still be considered as being "consistent with the Regional Plan." *(narrative field, 200-word limit)*
* Is the implementing agency Caltrans? *(yes/no checkbox)*
	+ If yes:
		- Attachment: Per the CTC Guidelines, Caltrans must document the need to address this project with ATP funds, versus other funding streams available for complete streets through existing Caltrans funding. Attach the necessary documentation. *(attachment field)*
		- Attachment: Per the CTC Guidelines, Caltrans nominated projects must illustrate coordination with the corresponding local and regional agencies. Caltrans is required to show assurance that local communities are supportive of and have provided feedback on the proposed Caltrans ATP project. Attach the necessary documentation. *(attachment field)*

**Part B: Application Narrative Questions**

**1. Disadvantaged Communities (DAC)**

* Does this project qualify as benefitting a Disadvantaged Community? *(yes/no checkbox)*
	+ If yes:
		- **Part A**
			* Attachment: Attach a map of the project boundaries, disadvantaged community access points, and destinations *(attachment field)*
		- **Part B**
			* Select one of the following tools to identify the DAC *(multiple selection checkbox)*
				+ If Median Household Income is selected:

Complete DAC table *(table field)*

Lowest median household income from table *(short text field)*

MHI for census tract(s) that the project benefits (cell B38 from table) *(short text field)*

Attachment: Attach copies of Tables B19013 and B01003 for all census tracts listed above *(attachment field)*

* + - * + If CalEnviroScreen is selected:

Complete DAC table *(table field)*

Highest CES Score from table *(short text field)*

CES Score for census tract(s) that the project benefits (cell B38 from table) *(short text field)*

Attachment: Attach a copy of CalEnviroScreen page for each census tract listed above *(attachment field)*

* + - * + If Climate and Economic Justice Screening Tool (CEJST) is selected:

Complete DAC table *(table field)*

Highest CEJST count from table *(short text field)*

CES Score for census tract(s) that the project benefits (cell B38 from table) *(short text field)*

Attachment: Attach a screenshot of the CEJST profile for each census tract listed above *(attachment field)*

* + - * + If USDOT Equitable Transportation Community (ETC) Explorer is selected:

Complete DAC table *(table field)*

Highest ETC State Results Final Index Score from table *(short text field)*

Final Index Score for census tract(s) that the project benefits (cell B38 from table) *(short text field)*

Attachment: Attach a screenshot of the ETC Explorer State Results profile for each census tract listed above *(attachment field)*

* + - * + If Healthy Places Index (HPI) is selected:

Complete DAC table *(table field)*

Lowest HPI Percentile from table *(short text field)*

HPI percentile for the census tract(s) that the project benefits (cell B38 from table) *(short text field)*

Attachment: Attach a copy of the HPI page for each census tract listed above *(attachment field)*

* + - * + If Free or Reduced Price Meals (FRPM) is selected:

Complete DAC table *(table field)*

Highest percentage of students eligible from table *(short text field)*

Percentage of students eligible (cell B38 from table) *(short text field)*

* + - * + If Tribal Project is selected:

Is this project located within Federally-Recognized Tribal Lands (typically within the boundaries of a Reservation or Rancheria)? The project can be submitted by a federally-recognized Tribal Government or another agency on the Tribe's behalf. *(yes/no checkbox)*

* + - * + If Regional Definition is selected:

For the statewide and small urban & rural competitive portions of the Active Transportation Program, a regional definition of disadvantaged communities must be adopted as part of a regular four-year cycle adoption of a Regional Transportation Plan (RTP)/Sustainable Communities Strategy (SGS) by an MPO or RTPA per obligations with Title VI of the Federal Civil Rights Act of 1964. Any regional definition, such as "environmental justice communities" or "communities of concern," must document a robust public outreach process that includes the input of community stakeholders, and be stratified based on severity. If the applicant believes a project benefits a disadvantaged community based on an adopted regional definition, the applicant must submit for consideration the regional definition, as well as how their specific community qualifies under that definition. *(narrative field, 300-word limit)*

Attachment: Attach documentation showing how the project meets the regional definition *(attachment field)*

* + - * + If Other Category is selected:

If a project applicant believes a project benefits a disadvantaged community but the project does not meet the aforementioned criteria due to a lack of accurate Census data or CalEnviroScreen data that represents a small neighborhood or unincorporated area, the applicant must submit for consideration a quantitative assessment to demonstrate that the community's median household income is at or below 80% of that state median household income. *(narrative field, 100-word limit)*

Attachment: Attach documentation showing how the project meets the “other” DAC criteria. *(attachment field)*

* + - **Part C**
			* Explain how the project closes a gap, provides connections to, and/or addresses a deficiency in an active transportation network and how the improvements meet an important need of the disadvantaged community. Address any issues of displacement that may occur as a result of this project, if applicable. If displacement is not an issue, explain why it is not a concern for the community. *(narrative field, 500-word limit)*
			* Describe how non-infrastructure events and programs will be targeted towards the disadvantaged community whom the project benefits. *(narrative field, 200-word limit)*
		- **Part D**
			* Select the option that best describes the project location *(dropdown list)*
		- **Part E**
			* *No application questions*

**2. Potential to Increase Walking and Biking**

* **Part A**
	+ If Safe Routes to School Project:
		- Table: Enter STRS summary data *(table field)*
	+ Describe the community and the issue(s) that this project will address. How will the proposed project benefit the non-motorized users of all ages and varying abilities, including students, older adults, and persons with disabilities? What is the project's desired outcome and how will the project best deliver that outcome? *(narrative field, 900-word limit)*
* **Part B**
	+ How will the project address the active transportation need? Select all that apply *(multiple selection checkbox)*
	+ Referencing the needs selected above, discuss how the project will address the identified need *(narrative field, 400-word limit)*
	+ Attachment: Please provide a map of each gap closure, new route location, barrier, and/or new improvement. For projects with non-infrastructure elements, applicants must include the NI program boundaries, and if it's a SRTS NI program, identify the school locations. *(attachment field)*
	+ Referencing this map, describe the existing route(s) that currently connect the affected transportation related and community identified destinations and why the route(s) are not adequate. *(narrative field, 200-word limit)*
	+ Referencing the map, describe how the project links, connects to, or encourages the use of existing routes to transportation-related and community-identified destinations where an increase in active transportation modes can be realized, including but not limited to: schools, school facilities, transit facilities, community, social service or medical centers, employment centers, high density or affordable housing, regional, state, or national trail systems, recreational and visitor destinations or other community-identified destinations. Specific destinations must be identified. *(narrative field, 400-word limit)*
	+ Describe the non-infrastructure program, the population it will serve, and how the program will use education and encouragement to address the needs identified in Part A. *(narrative field, 500-word limit)*

**3. Potential for Reducing the Number and/or Rate of Pedestrian and Bicyclist Fatalities and Injuries**

* **Part A**
	+ Attachment: For applicants using the TIMS ATP tool to provide collision data, attach TIMS documentation *(attachment field)*
	+ Attachment: For applicants using a different safety data source, attach documentation *(attachment field)*
	+ Data and corresponding methodologies in written form can be included here (optional) *(narrative field, 200-word limit)*
	+ Table: Complete collision summary table *(table field)*
	+ Referencing the project-area collision summaries/data provided in questions 1 and/or 2, discuss the extent to which the proposed project limits represents one of the agency's top priorities for addressing ongoing safety and discuss how the proposed safety improvements correspond to the types and locations of the past collisions. Consider the safety concerns of students, older adults, and persons with disabilities in your response. *(narrative field, 900-word limit)*
* **Part B**
	+ Referencing the information provided in Part A, demonstrate how the proposed countermeasures directly address (one or more) of the following underlying factors that are contributing to the occurrence (or potential occurrence) of pedestrian and/or bicyclist collisions. *(narrative field, 1500-word limit)*
	+ Does this project propose new or improved bike facilities? *(yes/no checkbox)*
		- If yes:
			* Describe the issues that were considered when evaluating and selecting the project’s bikeway facility type (i.e., Class I, II, III, and/or IV). *(narrative field, 500-word limit)*
	+ How will the non-infrastructure encouragement and education programs address the safety issues identified in Part A? *(narrative field, 300-word limit)*

**4. Public Participation and Planning**

* Describe the community-based public participation process that culminated in the project? *(narrative field, 1200-word limit)*
* Attachment: Attach any applicable public participation & planning documents *(attachment field)*

**5. Scope and Plan Layout Consistency**

* *No application questions*

**6. Use of California Conservation Corps (CCC) or Certified Local Community Conservation Corps (CALCC)**

* Please select one of the following *(single selection checkbox)*
	+ If the applicant has requested Corps participation:
		- Attachment: Response from CCC *(attachment field)*
		- Attachment: Response from CALCC *(attachment field)*
		- Attachment: Response from Tribal Corps (if applicable) *(attachment field)*
* The applicant has coordinated with the CCC AND CALCC, or Tribal Corps if applicable, and determined the following *(single selection checkbox)*
	+ If a Corps will participate in the project:
		- How will the Corps participate? *(narrative field, 100-word limit)*
	+ If a Corps has not responded:
		- Which Corps has not responded? (select all that apply) *(multiple selection checkbox)*

**7. Performance on Past ATP Projects**

* *No application questions*

**Part C: Application Attachments**

* Attachment: Signature Page
* Attachment: Engineer’s Checklist
* Attachment: Project Location Map
* Attachment: Project Layouts/Plans with Existing and Proposed Conditions
* Attachment: Photos of Existing Conditions
* Attachment: Project Estimate
* Attachment: Non-Infrastructure Work Plan (Exhibit 25-R)
* Attachment: Letters of Support
* Attachment: State-Only Funds Request (if applicable)
* Attachment: Other Attachments (Optional)