Rural and Tribal Assistance Pilot Program Review copy of Online Application questions for Multi-Community grants

*All fields must be completed.

Additional information on eligibility and the application questions can be found in the NOFO.

1. Grant type*: Confirm you are applying for the following grant type:

☐ Multi-Communit			
Name and contact	t information o	f person for matters involving this	application:
First and last name*:			
Title*:			
Phone*:		Email*:	
Entity name, add		ite:	
Organization/Entity Na	ıme*:		
Address (#, street- no	P.O. Box numbers)*		
	`		
City*:			
State*:		Zip Code*:	
Make the salders of the			
Website address, if ap	pilcable:		
Multi-Community Part	ner #1 Organization/	Entity Name*:	
Address (#, street- no	P O Box numbers)*	•	

Rural and Tribal Assistance Pilot Program, OMB# 2105-0584

State*:	Zip Code*:
Multi-Community Par	tner #2 Organization/Entity Name*:
Address (#, street- no	P.O. Box numbers)*:
City*:	
<u> </u>	
24.4.*	7in Codo*.
State*:	Zip Code*:
Employer/Taxpa	yer Identification Number (EIN/TIN)*:
	tity Unique Entity Identifier (UEI) assigned by SAM.gov*: (Ensur is correct. An incorrect or expired UEI will disqualify the application.)
that the UEI provide	
Entity/Organiza	ion headquarters is in this congressional district(s)*:
Entity/Organiza	I is correct. An incorrect or expired UEI will disqualify the application.)
Entity/Organiza	ion headquarters is in this congressional district(s)*:
Entity/Organiza	ion headquarters is in this congressional district(s)*:
Entity/Organizate Project is in this	ion headquarters is in this congressional district(s)*: congressional district(s)*: y Partner #1: Entity/Organization headquarters is in this
Entity/Organizate Project is in this	ion headquarters is in this congressional district(s)*: congressional district(s)*: y Partner #1: Entity/Organization headquarters is in this
Entity/Organizate Project is in this Multi-Communit congressional cong	ion headquarters is in this congressional district(s)*: congressional district(s)*: y Partner #1: Entity/Organization headquarters is in this
Entity/Organizate Project is in this Multi-Communit congressional cong	ion headquarters is in this congressional district(s)*: congressional district(s)*: y Partner #1: Entity/Organization headquarters is in this istrict(s)*:
Entity/Organizate Project is in this Multi-Communit congressional cong	ion headquarters is in this congressional district(s)*: congressional district(s)*: y Partner #1: Entity/Organization headquarters is in this istrict(s)*:

	Multi-Community Partner #2: Project is in this congressional district(s)*:
7.	Is the applicant delinquent on any federal debt?* ☐ Yes ☐ No
	If yes, explain:
8.	Below is a list of eligible entities for this program. Please select the one option that describes your eligibility*: (For local governments, political subdivisions, or states: Refer to NOFO Section II. A. Eligible Applicants and Section II. E. Definition of Rural Areas for qualification.)
	A unit of local government or political subdivision that is located outside of an urbanized area that has a population of more than 150,000 residents.
	☐ A State seeking to advance a project located outside of an urbanized area with a population of more than 150,000 residents
	☐ A federally recognized Indian Tribe
	☐ The Department of Hawaiian Home Lands
	Please select the one option that describes the eligibility of Multi-Community Partner #1*:
	A unit of local government or political subdivision that is located outside of an urbanized area that has a population of more than 150,000 residents.
	☐ A State seeking to advance a project located outside of an urbanized area with a population of more than 150,000 residents
	☐ A federally recognized Indian Tribe
	☐ The Department of Hawaiian Home Lands
	Please select the one option that describes the eligibility of Multi-Community Partner #2*:
	☐ A unit of local government or political subdivision that is located outside of an urbanized area that has a population of more than 150,000 residents.
	☐ A State seeking to advance a project located outside of an urbanized area with a population of more than 150,000 residents
	☐ A federally recognized Indian Tribe
	☐ The Department of Hawaiian Home Lands
9.	Qualifying Funding or Financing Program*: Select which funding or financing program you expect your project to qualify for: (Information on these programs can be found in the NOFO Appendix.)
	□ TIFIA
	□ RRIF
	□ INFRA
	☐ Mega

tural and Tribal Assistance Pilot Program, OMB# 2105-0584							
□ BUILD							
■ National Culvert Removal, Replacement, and Restoration Grant Program							
10. Project title*: (Descriptive title of project for which you seek funding)							
11. Project location*: Must be described as either a street address complete with city and state, or latitude/longitude coordinates. As an example, coordinates can be obtained by right-clicking on the project location in Google Maps.							
Multi-Community Partner #1 Project location*: Must be described as either a street address complete with city and state, or latitude/longitude coordinates. As an example, coordinates can be obtained by right-clicking on the project location in Google Maps.							
Multi-Community Partner #2 Project location*: Must be described as either a street address complete with city and state, or latitude/longitude coordinates. As an example, coordinates can be obtained by right-clicking on the project location in Google Maps.							
 12. Briefly describe the overall project (no more than 600 words)*: Include: project type (i.e., bridge, new roadway, transit service), features to be constructed, project limits/length, project need, and project schedule. Description should also include information on partner communities' projects. 							

13. Project advancement*: (See Section VI. B. Criterion #1 of the NOFO for review and evaluation information.)

a.	Describe, in detail, the activities to be completed with this program funding, stating how these activities will materially advance the overall project and address an identified transportation challenge. (no more than 600 words)*
	Description should also include information on partner communities' projects.
L	Degreested from de from this programs:
D.	Requested funds from this program*:
C.	Estimated cost of proposed activities*:
d.	Provide evidence of project readiness, including any project-related development activities that have already been completed. Examples would include data or information that has been collected or activities conducted that are necessary for completing the activities funded through this Program. (no more than 400 words)*
	Description should also include information on partner communities' projects.

14. Demonstrated experience and confidence in estimated costs*: (See Section VI. B. Criterion #2 of the NOFO for review and evaluation information.)

a.	State if you intend to either procure advisory services or hire staff to complete the proposed activities, and discuss your procurement or hiring experience and process. (no more than 400 words)*
b.	Funding breakdown*: State the overall project budget and a breakdown by activity, with each funding source shown in dollars and percentages. If applicable, identify other Federal funds your organization is applying for, has been awarded, or intends to use. Group funding sources into three categories: • non-Federal • current application (RTA Program), and • other Federal funding
	Description should also include information on partner communities' projects.
C.	Applicants are encouraged to seek bids or quotes, or to estimate the amount of dedicated staff time for the proposed activities to demonstrate the reasonableness of the requested funding in this application. Have you obtained a bid or quote, or
	estimated the staff time needed for the activities proposed in this application?*
	estimated the staff time needed for the activities proposed in this application?* Yes (to be submitted later if awarded grant)
	·

15. Mobility access*: DOT prioritizes projects that help advance mobility access by increasing reliable transportation for people to get to where they need to go to meet the needs of their daily lives regularly, reliably, and safely either through lowering the cost of transportation, increasing access, or increasing safe transportation options. **Explain**

how the proposed activities will advance at least one of the following aspects of mobility access:

- increase safety,
- lower transportation costs, or
- increase the availability of transportation options.

Fro	m the	list a	abo	ve, i	ide	ntif	fy th	ne are	a of	mobilit	у асс	ess tl	he p	roj	ect is	s ad	vand	ing
and	how t	he p	rop	ose	ed a	acti	viti	es wi	II ac	complis	h this	. (no	moi	re t	han	800	wor	ds)
(See	Section	VI. B	. Crit	erion	#3	of th	e NO	DFO foi	r revie	w and eva	aluation	informa	ation.))				•
_																		

	should also include	e information on	partiner commit	Tillies projects.	
communiti past collab external pa	ps *: Describe h es to deliver the poration between artners. (no mor aluation information.)	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other
communiti past collab external pa	es to deliver the oration between artners. (no mor	e grant activition grant applicant	es for the mເ t and the cor	ultiple projects mmunities, or	. Describe a with other

17. Performance goals and metrics*: Identify, at minimum, 2 metrics for each of the following performance goals:

Rural and Tribal Assistance Pilot Program, OMB# 2105-0584

•	Goal 1: Provide benefits to the community thro	ough transportation projects
•	Goal 2: Increase grant recipient's capacity, kneexecute transportation projects.	owledge, and skills to
•	Goal 3: Engage, educate, and listen to the comproject planning process.	nmunity throughout the
•	Goal 4: Advance the transformational project(s	s) closer to delivery.
statei know resulf fraud	By checking this box and submitting this applicements contained herein are true, complete, and ledge. I also provide the required assurances a ting terms if I accept an award. I am aware that sulent statements or claims may subject me to constrative penalties. (U.S. Code, Title 18, Section	accurate to the best of my nd agree to comply with any any false, fictitious, or criminal, civil, or
Signat	ure (e-signature is sufficient)*	Date*