

Rural and Tribal Assistance Pilot Program

Review copy of Online Application questions for

Single Project 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:

Single project

2. **Name and contact information of person for matters involving this application:**

First and last name*:

Title*:

Phone*:

Email*:

3. **Entity name, address, and website:**

Organization/Entity Name*:

Address (#, street- no P.O. Box numbers)*:

City*:

State*:

Zip Code*:

Website address, if applicable:

4. **Employer/Taxpayer Identification Number (EIN/TIN)*:**

5. **Organization/entity Unique Entity Identifier (UEI) assigned by SAM.gov***: (Ensure that the UEI provided is correct. An incorrect or expired UEI will disqualify the application.)

6. Entity/Organization headquarters is in this congressional district(s)*:

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

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
- BUILDRAISE**
- 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.

12. Briefly describe the overall project (no more than 300 words)*: Include:

- project type (i.e., bridge, new roadway, transit service),

- features to be constructed,
- project limits/length,
- project need, and
- project schedule.

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 400 words)***

b. 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 200 words)***

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 250 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

- 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?***

- Yes (to be submitted later if awarded grant)
- No (provide statement of how you determined estimated cost of proposed activities)

15. **Policy alignment**Mobility access*: DOT prioritizes projects that help ~~to~~ address~~advance~~ transportation insecuritymobility access, which is the inability by increasing reliable transportation for people to get to where they need to go to meet the needs of their daily life-lives regularly, reliably, and safely ~~due to~~ either the highthrough lowering the cost of transportation, ~~lack of~~increasing access, or ~~lack of~~increasing safe transportation options. **Explain how the proposed activities will advance at least one of the following aspects of transportation insecuritymobility access:**

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

From the list above, identify the area of transportation insecuritymobility access the project is mitigating or reversingadvancing and how the proposed activities will accomplish this. (no more than 400 words) (See Section VI. B. Criterion #3 of the NOFO for review and evaluation information.)

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

- Goal 1: Provide benefits to the community through transportation projects.

- Goal 2: Increase grant recipient's capacity, knowledge, and skills to execute transportation projects.

- **Goal 3: Engage, educate, and listen to the community throughout the project planning process.**

- **Goal 4: Advance the transformational project(s) closer to delivery.**

17. **By checking this box and submitting this application, I certify that the statements contained herein are true, complete, and accurate to the best of my knowledge. I also provide the required assurances and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)***

Signature (e-signature is sufficient)*

Date*