

ATTACHMENT C

MTA Use Only: Project #: _____ Category: _____
--

**Metro ExpressLanes Round 2 Net Toll Revenue Reinvestment Grant Program:
System Connectivity/Active Transportation**

Required Documentation:

- **Application Parts A and B**
- **Application Signature Page**
- **Project Location and Map with project limits – 8.5” by 11”**
- **Detailed Cost Estimate**
- **Documentation of Community Support**
- **If partnering with a Non-Profit Agency 501(c)(3) please provide the IRS Determination letter**
- **Include color photos of project site (if applicable)**
- **Data Collection and Methodology**

Submit two (2) copies of each application (Parts 1 & 2) along with the required documentation. Include one (1) CD-R, DVD or USB drive to MTA to the following address:

**LACMTA
Attn: Silva Mardrussian
One Gateway Plaza
Mail Stop 99-9-2
Los Angeles, CA 90012**

I certify that I have reviewed the Project Eligibility Guidelines and that the information submitted in this application is true and correct and in accordance with the Guidelines. If awarded a grant from Metro, I agree that I will adhere to the information and documentation as contained in this grant application.

Name (Print Name):	Title:
Signature: (signature of authorized signatory of applicant)	Date:

Project Name:

--

Lead Agency:	
Address:	
Contact Person/Title:	
Phone:	
Email Address:	

If joint project – include partner agency information below:

Agency:	
Contact Person/Title:	
Phone:	
Email Address:	

If partnering with Non-Profit Agency – include information below:

Non-profit Agency:	
Contact Person/Title:	
Phone:	
Email Address:	

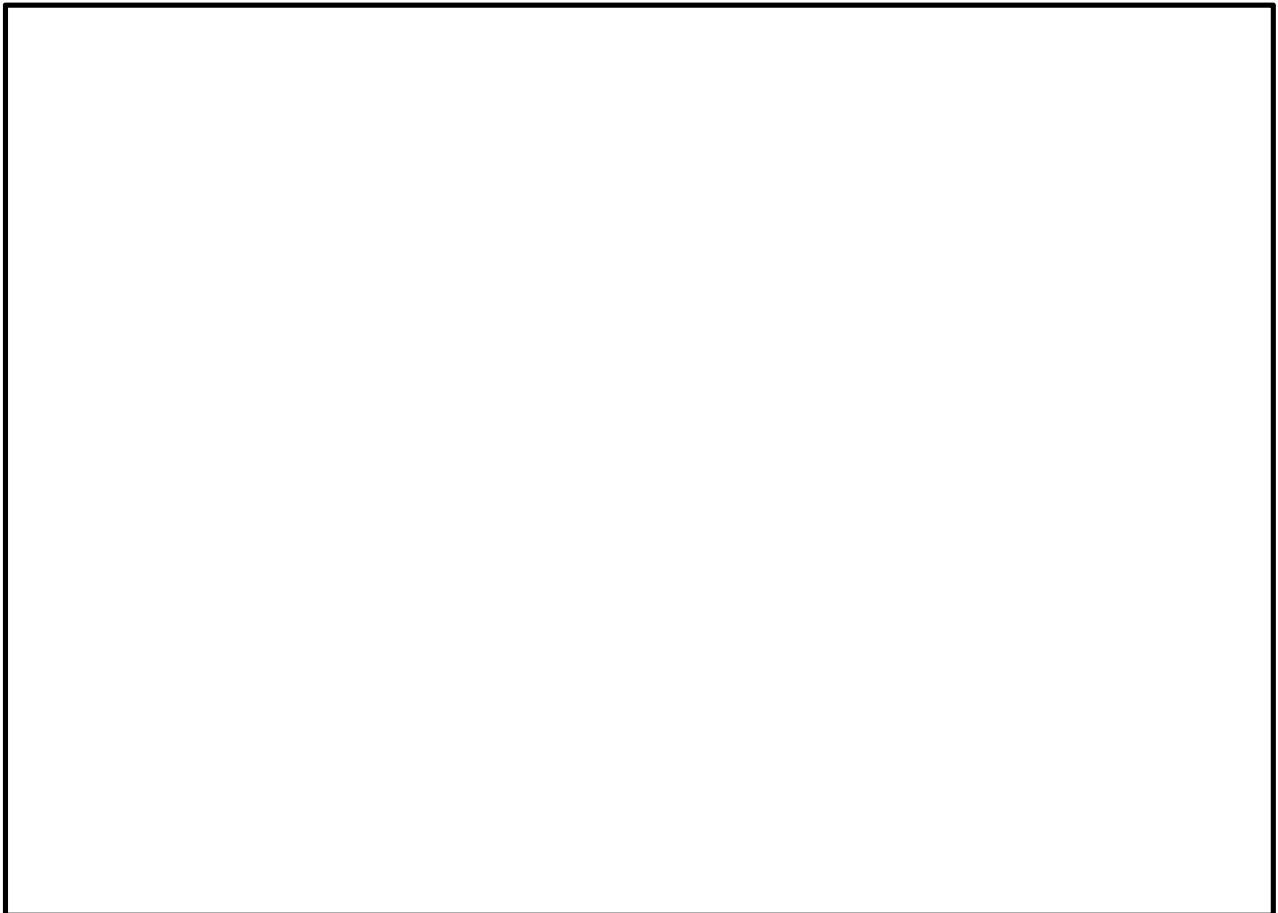
Agency Priority Ranking: <ul style="list-style-type: none">• If submitting more than 1 project	
--	--

PART A

1- PROJECT LOCATION / PROJECT LIMITS:

A large, empty rectangular box with a black border, intended for the user to provide details about the project location and its limits.

2- PROJECT DESCRIPTION: (Summarize the project in a clear & concise manner)

A large, empty rectangular box with a black border, intended for the user to provide a clear and concise summary of the project.

3- PROJECT FUNDING:

Phase/Deliverable	Funds Requested	Local Match – Cash*	Local Match - In-Kind	Sub Total Cost

Total Project Cost	
---------------------------	--

* Specify Source of Local Cash Match _____

4- COMMUNITY SUPPORT:

The council or governing board of the applicant must authorize this grant application. Please attach a copy of the resolution or meeting minutes documenting that action. Or if the project is part of an approved Plan, please list all local, system, regional, and state plans in which this project is included and attach a copy of the section in each plan that includes this project.

5- BEFORE AND AFTER DATA:

Applicants must collect before and after data for all projects. (i.e., pedestrian and bicycle counts, transit ridership, vehicle throughput, speed, and volumes). Please provide the types of data you will collect and a detailed methodology for your collection and analysis. The cost of this task should be included in the project budget.

PART B

1 MOBILITY BENEFITS (Up to 20 points)

All projects will be scored based upon the extent the project or program supports the following goals within the 1-10 or 1-110 ExpressLanes corridors:

- Increases mobility options to support car-free and /or one car living
- Enhances transit coverage, frequency, & reliability within the corridor
- Connects with & complements nearby transit projects
- Provides access to regional trip generators, regional activity centers, fixed guideway & Metrolink services
- Improves access between jurisdictional or community plan area boundaries
- Gives priority to transit & active transportation modes
- Increases the mode share of transit services operating within the corridor
- Provides additional resources for transportation demand management strategies to reduce solo driving
- Maximizes Person Throughput
- Reduces Vehicle Miles Traveled (VMT)

A. Describe the current situation/problem, the need for the project, and how its implementation would resolve the described situation/problem.

B. Describe how your project or program, meets one or more of the above goals. Clearly define the anticipated outcome and how will you measure the impact?

2 INNOVATIVE TRANSPORTATION TECHNOLOGY, PRACTICES AND STRATEGIES (Up to 15 points)

One of the primary objectives of the ExpressLanes is to better utilize existing capacity within the I-10 and I-110 corridors by employing an innovative operational approach utilizing electronic toll collection and new transponder technology. This approach of transportation network optimization through the use of technology and operational efficiency strategies represents the future of transportation policy and planning.

To that end, the concept of network optimization is identified as a key component of sustainability. Projects will be scored based upon their ability to employ innovative technologies or system management tools to reduce emissions and/or optimize the capacity of the existing transportation system.

Describe the extent to which the project/program facilitates the adoption of innovative technology, practices, or strategies. For example, green technology, zero and near-zero emission vehicles, connected cars, traffic signal and new bus technology, innovative transportation system management.

3 IMPLEMENTATION OF REGIONAL AND LOCAL SUSTAINABILITY PLANS AND POLICIES (Up to 10 points)

Metro’s Countywide Sustainability Planning Policy and Implementation Plan (CSPPIP) along with SCAG’S Regional Transportation Plan (RTP) and Sustainable Communities Strategy (SCS) identify principles and priorities to be advanced through a broad range of activities across all modes. Applicants will be scored based upon the extent the project/program supports the sustainability policies and programs identified in the CSPPIP, RTP, or SCS.

A. Describe how the project/program is consistent with the policies included in Metro’s CSPPIP. Reference the page number(s) of the Plan.

B. Describe how the project/program is consistent with the goals and policies included in the 2012 RTP/SCS. Reference the page number(s) of the Plan.

4 LOCAL MATCH (Up to 10 points)

Total Project Cost	\$
Funding Request	\$
Local Match – Cash	\$
Local Match – In-Kind	\$
Local Match – Percentage	

* Please attach an itemized cost estimate for all expenses based on an engineer’s estimate or best information available if not a capital project. Be as accurate as possible to avoid future cost overruns.

Projects will be scored based on the amount of Local Match provided:

46% or more	10 points
41 – 45%	9 points
36 – 40%	8 points
31 – 35%	7 points
26 – 30%	6 points
21 – 25%	5 points
16 – 20%	4 points
11 – 15%	3 points
6 – 10%	2 points
1 – 5%	1 point

5 COST EFFECTIVENESS (Up to 10 points)

Cost effectiveness will be based on the grant amount requested, the total project cost and the estimated useful life of the project (calculated in years). The Estimated Useful Life of the Project is defined as the number of years the capital improvements, bus purchase, transit service, program, or study will last before it has to be replaced or changed.

The cost effectiveness total will be calculated as follows:

Example:

Total Cost of Project - \$1,000,000
Grant Amount Requested - \$800,000 = 1.25

1.25 x 10 (est. useful life of project in years) = 12.5 (cost effectiveness score)

A. Provide your calculations below:

B. What is the expected functional life span of the proposed project (in years)? Please explain.

Points will be awarded based on the following cost effectiveness scores:

17+	10 points
13 - 16	8 points
9 - 12	6 points
5 - 8	4 points
1 - 4	2 points

6 SAFETY (Up to 10 points)

Describe the project's ability to remedy potential safety hazards. For example the number, rate, and consequence of transportation related accidents, serious injuries, and fatalities among operators, drivers, pedestrians and cyclists? Please provide collision data and other safety related data.

7 PROJECT IMPLEMENTATION READINESS (Up to 15 points)

Please provide milestone and actual or estimated completion dates for the various project phases. Include proof of completion of any of the phases below or their equivalents, where applicable.

Capital Projects			
Phase	Start (Month-Year)	End (Month-Year)	Actual (A) or Estimated (E) Schedule
Feasibility Study			
Environmental			
Design - Plans, Specifications & Estimates (PS&E)			
Right of Way (ROW)			
Construction			
Other			
Other			
Other			

Non-Capital Projects			
Task/Deliverables	Start (Month-Year)	End (Month-Year)	Actual (A) or Estimated (E) Schedule

8 NON-PROFIT AGENCY PARTNERSHIP (Up to 10 points)

Metro ExpressLanes believes the non-profit community plays a vital role in helping Los Angeles County become more sustainable. The experience, programs, networks, and commitment Non-profits provide is a basis to maximizing public engagement, positive behavior change, and community commitment.

Partnering with a 501 (c)(3) non-profit entity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	10 points
---	-------------------------------------	------------------------------------	------------------

- **Please provide the Non-Profit's Name and IRS determination letter.**