

**PROGRAMMING DATA FOR NON-INFRASTRUCTURE**

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Local Agency:	Local Aid Program:
Federal Project Number:	Location:
TIP Number:	Date:
Proposed Project Description:	

Cost Estimate Breakdown (In \$1,000):

	Human Surveys	Topographical Surveying	Planning	Design	Material/ Exhibits	Outreach	Additional Costs*	Total
Cost Estimate								

\*Describe additional costs:

Source of Pro Rata Match – **(Circle one of the following):** County/City/Other

**(Circle one of the following):** Cash/In-kind services

**PROJECT SPECIFICATIONS**

Will the project identify future infrastructure improvements: Yes / No
If yes, what kind?
Does the project involve Human Subjects? Yes / No
Describe scope of project:

**MISCELLANEOUS:**

Work done by: (Consultant/Local Agency/Other)	
Expected final product submittals: (Feasibility Study, Summary Report, Estimate, Outreach Efforts Documented)	
Responsible individual who completed this form?	Phone #
Address:	

Note 1: Attach details of scope of services, if applicable.

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