## STIC INCENTIVE FUNDS

Return via email to awtamer@ncdot.gov and edward.parker@dot.gov Project Title: Requesting Unit: **Project Contact:** EDC Innovation: (if applicable) **Project Abstract:** Briefly describe project work that is to be completed under this request, the project purpose and benefit to the state, and whether this is a complete project or part of a larger project with prior investment. It is important that your project abstract succinctly describes how this specific request for STIC Incentive funds will be used to complete your project.

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Project Title:	Requesting Unit:
roject Contact:	EDC Innovation: (if applicable)
Description of Proposed Work:	
	to be completed with this funding request, whether this
	r phased project, how it will have a statewide impact in e in your state. Only include work that is eligible for STIC
ncentive funding.	

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#### STIC Incentive Funds Requested:

Provide a cost estimate that is reflective of the total cost of the proposed work by line item. Each line item should be associated with a completed task, deliverable, or outcome that contributes to the completed funding request.

TASK	ESTIMATED COST
TOTAL:	
*STIC INVENTIVE FUNDS REQUESTED:  *Because of the requirement for state match, the total must be no more than 80% of the project cost.	

In the event partial funding is available, this information will aid in the development of funding recommendations and provide the applicant the opportunity to fully complete individual components of the funding request.

Will the project be able to advance if partial funding of the request is awarded?



Yes



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#### **Project Schedule:**

The anticipated project schedule (assuming the requested STIC Incentive is provided) is required. The schedule should show how the work will be advanced in the fiscal year for which the funds are being requested, and the anticipated completion date of the work. This should directly reference each line item in the cost estimate. Applications should only be submitted for projects that are ready to advance if the minimum partial funding request is met.

DATE:	TASK:
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Project Title:	Requesting Unit:
Duningt Court at	
Project Contact:	EDC Innovation: (if applicable)
party in-kind services being provided	quires a 20% fund match.  any private or other public funding and/or thir as part of this project. Only indicate amounts ted commitments from the entity controlling t
ranas.	

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Project Title:	Requesting Unit:
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planning organization, local governmen needed to determine to whom to alloca If the project is to be allocated to other t indicate coordination with State Depart behalf of the applicant jurisdiction, and	Aministered by the Department, metropolitant or tribal government. This information is steet the funds if the project is selected for fund than the State Department of Transportation, ment of Transportation, the ability to act on ability to meet Federal funding requirements pplication, the project will not be considered
Additional Questions:	
	ursaabla work parformed within six
Will Funds be obligated and reimbo months of the date the funds are m	