

**North Carolina Department of Transportation  
Application for Bicycle and Pedestrian Planning Grant  
Funds 2017 Call for Proposals**

*Updated: Submittal Deadline is Friday November 10, 2016*

<b>Applicant Information</b>			FOR NCDOT USE ONLY Proposal eligible <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Municipality:	Population	County	NCDOT Division	
Municipality agrees to enter into a reimbursement agreement with NCDOT: <input type="checkbox"/> Yes <input type="checkbox"/> No		Municipality is member of: <input type="checkbox"/> MPO <input type="checkbox"/> RPO <input type="checkbox"/> Neither		
Department applying for grant:				
Contact Person:	Title:	Work Phone Number:		
Work Fax Number:	E-mail Address:			
Mailing Address:	City:	State:	Zip Code:	

I certify that the City/Town of \_\_\_\_\_, in applying for Bicycle or Pedestrian Planning Grant funds, attests a commitment to the plan's development, management, financing and completion, and that the completed plan will be submitted to the City/Town Council or other approving authority for adoption.

\_\_\_\_\_  
Signature\*

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Date

<b>Eligibility Criteria</b>	
<b>Plan Category:</b> <input type="checkbox"/> Bicycle Plan <input type="checkbox"/> Pedestrian Plan <input type="checkbox"/> Bicycle & Pedestrian Plan <input type="checkbox"/> Corridor/Small Area Plan	
Municipalities may apply for funding to undertake <b>either</b> a bicycle plan, pedestrian plan or Corridor/Small Area Plan in any given fiscal year. Smaller municipalities (below 5,000 population) are eligible to apply for a joint bicycle and pedestrian plan. Please indicate the type of plan for which you are submitting <u>this</u> application. Counties with population less than 35,000 applying on behalf of incorporated or unincorporated communities within their jurisdiction call Nick Scheuer at (919) 707-2608 or email <a href="mailto:nrscheuer@ncdot.gov">nrscheuer@ncdot.gov</a> for further instructions on preparing the application.	
Has the City/Town Council passed a resolution supporting this application?	<input type="checkbox"/> Yes, attached <input type="checkbox"/> Pending** _____ Date anticipated
For municipalities within a Metropolitan Planning Organization (MPO), has the MPO passed a resolution supporting this application?	<input type="checkbox"/> Yes, attached <input type="checkbox"/> Pending** _____ Date anticipated
For municipalities within a Rural Planning Organization (RPO), has the RPO passed a resolution supporting this application?	<input type="checkbox"/> Yes, attached <input type="checkbox"/> Pending** _____ Date anticipated

\*THE SIGNATURE OF AN AUTHORIZED STAFF PERSON (I.E. CITY/TOWN MANAGER, ADMINISTRATOR, ETC.) IS REQUIRED. AFTER COMPLETING THE APPLICATION, PRINT THIS PAGE, OBTAIN THE APPROPRIATE SIGNATURE, SCAN AND SEND AS A SEPARATE ATTACHEMENT.

\*\*A RESOLUTION BY THE APPROPRIATE MUNICIPALGOVERNING BODY AND BY THE MPO, IF APPLICABLE, MUST ACCOMPANY THE APPLICATION, OR MUST BE SUBMITTED PRIOR TO DECEMBER31, 2016 TO BE ELIGIBLE FOR FUNDING. RPO RESOLUTION, IF APPLICABLE, IS HIGHLY ENCOURAGED. PLEASE INDICATE THE DATE YOU ANTICIPATE RECEIVING A PENDING RESOLUTION.

Municipality Name: \_\_\_\_\_

## Narrative Description

In a few short sentences, please provide some general information about your community (unscored question).

1) Please describe the community's vision for improving bicycle AND/OR pedestrian transportation and the realistic and measurable goals that have been set to achieve this vision.

2) What are the reasons the community needs this plan? Consider including discussion and data regarding safety, land use, connectivity, demographics, diverse and special user groups, etc. Additionally, identify high-use bicycle and/or pedestrian areas within and around the community.

3) Provide an overview of the current bicycling AND/OR pedestrian transportation system, briefly discussing strengths and weaknesses. Describe facilities currently in place or planned for completion in the next five years (designated bicycle route system, miles of off-road paths, extent of sidewalk network, etc.) as well as potential barriers that inhibit developing the system. Please provide links to relevant documents or maps, or provide as attachments if not available online.

4) How will having a bicycle and/or pedestrian plan help with developing and/or expanding the community's education, enforcement or encouragement programs?

**5)** How will having a bicycle and/or pedestrian plan contribute to improving the overall health of the community? Describe any existing or proposed health programs, initiatives or goals in the community. If applicable, please provide links to relevant documents or provide as attachments if not available online.

**6)** How has the community implemented other locally adopted plans and how have these documents guided local decision-making? Have these planning efforts improved bicycle and/or pedestrian connectivity, accessibility, and/or safety? If applicable, please indicate any related municipal, county and/or regional bicycle planning and/or pedestrian planning activities currently underway or undertaken in the past, including bicycle/pedestrian/greenway elements in broader municipal planning documents (list years and provide links to this information).

**7)** List the name and title/position of the full-time, permanent municipal staff person responsible for project oversight, as well as any others who will have involvement in plan development (include resumes as attachments). Describe any prior experience these individuals may have in the management, preparation and/or implementation of a bicycle and/or pedestrian plan or other transportation/community planning efforts (provide links where appropriate).

**8)** How will the municipality manage the process of working with a consultant? Does local staff have any prior experience with working with a consultant on plan development or similar projects? Please describe the local staff's anticipated role in the plan development process.

**9)** Describe what elected officials and other stakeholders have done to support bicycle and/or pedestrian programs and projects in the past. Additionally, list existing bicycle, pedestrian, greenway, open space or other relevant committees and task forces in the surrounding area that are charged with addressing bicycle issues and/or pedestrian issues and explain how (or if) they will be integrated in the planning process.

**10)** What individuals, groups and/or represented interests will be included on the steering committee and what will be the role of the steering committee in plan development. Describe how citizen participation in plan development will be sought.

**11) How does your community intend to facilitate the implementation your bike and/or pedestrian plan? Indicate any available and unique resources (funding and other) that may be sought to contribute toward plan implementation, and identify any departments, agencies, organizations or other partners that may be involved.**

**12) What do you expect this plan to do for the municipality or local area? Are there any unique outcomes that you anticipate?**

### Project Cost Information

<b>Project Cost Range*:</b> \$	<b>Local Match Percentage*:</b> %	<b>Source(s) of Local Matching Funds (list all applicable):</b>
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\*SEE BICYCLE AND PEDESTRIAN PLANNING GRANT INITIATIVE OVERVIEW DOCUMENT FOR TABLES ON COST RANGE AND LOCAL MATCH PERCENTAGES:  
[HTTPS://CONNECT.NCDOT.GOV/MUNICIPALITIES/PLANNINGGRANT/PAGES/DEFAULT.ASPX.](https://connect.ncdot.gov/municipalities/planninggrant/pages/default.aspx)

### Attachments (via email)

<b>Required:</b>	<b>Optional</b> (if information is available on-line, please list link):
<input type="checkbox"/> Municipal Resolution <input type="checkbox"/> MPO Resolution (if applicable) <input type="checkbox"/> RPO Resolution (if applicable) <input type="checkbox"/> Resume(s) of overseeing staff and other individuals ____ attached <input type="checkbox"/> Map of Municipality <input type="checkbox"/> Letters of Support ____ attached or were sent	<input type="checkbox"/> Copies of previous plans (summaries and/or web links preferred) <input type="checkbox"/> Other Maps <input type="checkbox"/> Other (please identify):

### Preparer Information\*\*

Please provide information on the primary person who prepared this application and indicate the municipal department, local agency, consulting firm, or other organization with which they are affiliated.

Agency/Consulting Firm/Organization:

Name of Preparer:	Title:	Work Phone Number:
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Work Fax Number:	E-mail Address:
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Mailing Address:	City:	State:	Zip Code:
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\*\* WE ENCOURAGE MUNICIPALITIES TO USE LOCAL STAFF MEMBERS TO COMPLETE THE APPLICATION.

### Digital Submittal Information

For more detailed information on completing the application please see the *Application Instructions* document online at <https://connect.ncdot.gov/municipalities/PlanningGrants/Pages/Planning-Grant-Initiative.aspx>.

Application form and relevant documents will be accepted in digital format only and should be emailed to the NCDOT, Division of Bicycle Pedestrian Transportation through Nick Scheuer at [nrscheuer@ncdot.gov](mailto:nrscheuer@ncdot.gov).

**Updated Deadline: Applications will be accepted no later than 5:00 pm on November 10, 2016.**

**Application Packet will be accepted via email ONLY**  
**Emailing Address:**

**Contact:** Nick Scheuer at [nrscheuer@ncdot.gov](mailto:nrscheuer@ncdot.gov)

**Subject Title:** 2017 Planning Grant Initiative Application – Your Municipality Name

**Format:** Every effort should be made to convert the completed application form and all scanned files to PDF format

**Application Package:** There is a maximum 25 megabyte application packet size for emailing per municipality