



PROJECT INFORMATION

1. Project Description		
1A. Length		
1B. Scope of Work		
2. Implementing Agency		
3. Primary Contact for the Implementation Agency	Name/Title: Phone: e-mail:	
4. Form Preparer	Name/Title: Phone: e-mail:	
5. Date Form was Prepared		
6. Project Costs:	Total Amount (\$)	Amount Requested (\$)
• Engineering		
• Right-of-Way		
• Utility Relocation		
• Construction		
• Total		
7. Date of Cost Estimate		
8. TIP Number		
9. Project Location Map Attached	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No	
10. Briefly describe the problems/issues and how the project will eliminate or help solve them. Include any information concerning other alternatives considered during project development.		

LOCAL SUPPORT AND COORDINATION

11. List the local planning document(s) that include this project (e.g., comprehensive plan, thoroughfare plan, long-range plan, CIP). Include the plan name, date, program year, project numbers, etc. are associated with it.	
12. Is the project consistent with other transportation, infrastructure, or community projects or plans? If yes, list the plan/project name and agency/authority. If no, list the plan/project and why this project is not consistent.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
13. Is the project ADA compliant?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No



LOCAL SUPPORT AND COORDINATION

- | | |
|--|--|
| 14. Is the project along a transit, pedestrian, bicycle, or haul route? If no, go to 15. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 14A. Will the project interfere, restrict, or otherwise permanently impact these routes? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 14B. Has the proper authority/agency been contacted? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 15. Does the project cross or involve a railroad crossing (at-grade or grade-separated)? If no, go to 16. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 15A. Will the project change the number of at-grade roadway/railroad crossings? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 15B. Has an agreement with the railroad been executed? If yes, attach to form. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 16. List any local governmental approvals (e.g., Board/Council/Commission) or permits that have been obtained (with dates) or will be needed for the project (with anticipated dates). | |

17. List the dates of meetings and any other efforts to inform the community about this project.

17A. In general, describe any comments received by the public.

17B. List the outreach efforts taken to engage environmental justice and the LEP communities.

RIGHT-OF-WAY INFORMATION

- | | |
|--|--|
| 18. Will additional right-of-way be needed? If no, go to 20. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 18A. How much (total acres) is needed? | |
| 18B. How many parcels will be affected? | |
| 18C. Briefly describe the existing land use of the area(s) to be acquired. | |
| | |
| 18D. Will the right-of-way be acquired using fair market value? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |



RIGHT-OF-WAY INFORMATION

19. Will any buildings and/or structures be displaced? If no, go to 20. ☐ Yes ☐ No

19A. How many structures will be displaced?

19B. Indicate the number for each type:

- Single-Family
- Multi-Family Buildings and Units
- Commercial
- Industrial
- Places of Worship
- Public Facilities
- Other

19C. Will relocation assistance be provided?

☐ Yes ☐ No

20. Will utilities need to be relocated? If no, go to 21.

☐ Yes ☐ No

20A. List the type of utilities to be relocated and any special considerations that need to be known.

20B. Have utility conflicts been resolved? If no, what are the procedures to resolve the conflicts and anticipated schedule for resolution?

☐ Yes ☐ No

20C. Have the required utility permits been obtained?

If yes, list the types and dates. If no, list the types and anticipate dates.

☐ Yes ☐ No

21. Will the project affect the location or view of existing billboards?

If yes, describe the location of the billboard(s) and effects.

☐ Yes ☐ No



ENVIRONMENTAL INFORMATION

CULTURAL RESOURCES

22. Will the project affect dedicated publicly owned parkland, wildlife refuges, or recreation areas? If yes, describe the property affected, type (e.g., use, number of acreage affected), and impact. ☐ Yes ☐ No

23. Will the project disturb archaeological resources? If yes, describe the resource and impact and attach the THC Antiquities Permit. ☐ Yes ☐ No

24. Will the project impact or disturb of any property listed as a SAL and/or RTHL and/or listed on the NRHP? If yes, describe the resource (e.g., list address) and impact and attach the THC Antiquities Permit. ☐ Yes ☐ No

25. Has this project been coordinated with the THC? If yes, attach all relevant correspondence. ☐ Yes ☐ No

26. Have you coordinated with your local historic preservation organization? ☐ Yes ☐ No

27. Will the construction plans include a specification that requires all work in the area to cease and contacted THC immediately if a suspected archeological object/artifact is found or uncovered during construction operations? ☐ Yes ☐ No

THREATENED AND ENDANGERED SPECIES

28. Are there any federal threatened or endangered species and/or their habitat located within the project area? If no, go to 28C. ☐ Yes ☐ No

28A. Has coordination been initiated with USFWS and has a presence/absence survey been conducted? ☐ Yes ☐ No

28B. If yes, explain the results of the coordination and survey efforts and attach all relevant correspondence. If no, when will the coordination be initiated?

28C. Will the construction plans include a specification that requires all work in the area to cease and contact USFWS immediately if a suspected federally-listed threatened or endangered species is encountered during construction operations? ☐ Yes ☐ No



ENVIRONMENTAL INFORMATION

29. Are there any state threatened or endangered species and/or their habitat located within the proposed project area? If no, go to 30.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
29A. Has coordination been initiated with TPWD?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
29B. If yes, explain the results of the coordination efforts and attach all relevant correspondence. If no, when will coordination be initiated?	

MIGRATORY BIRD TREATY ACT

30. Based on field observations, are migratory birds located in the proposed project area?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
31. Are old or abandoned migratory bird nest located in the proposed project area? State the type of nest and abundance.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
32. Will the construction plans include specifications that will require compliance with the Migratory Bird Treaty Act?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No

FARMLAND

33. Does the proposed project area cross any prime or unique farmlands that is not already in or committed to urban development? If yes, fill out form CPA-106 and submit to the NRCS and attach a copy to this form.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
---	--

WETLANDS/WATERS OF THE US

34. Will the project impact any USACE wetlands, water bodies, or streams? If no, go to 35.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
34A. Will the impacts be authorized under a NWP? If no, go to 34B.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
34A.i Will a PCN be required?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
34A.ii Specify what NWP will be used and the include date (or anticipated date) of permit.	NWP: _____ Date: _____
34B. Has the USACE issued the IP? List the date (or anticipated date) of permit. Attach all relevant correspondence.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No Date: _____

WATER QUALITY

35. Will the project require a USACE permit? If no, go to 36.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
35A. Are the impacts covered under the USACE permit equal to or greater than three acres of water bodies or wetlands or equal to or greater than 1,500 linear feet of stream? If no, go to 35B.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
35A.i. Has a Tier II Section 401 water quality certification been submitted to the TCEQ?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
35A.ii Have BMPs been included in the construction plans? Go to 36.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
35B. Has a Tier I Section 401 water quality certification checklist been completed for the permit and sent to the USACE with the PCN or IP (if applicable)?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No (<input type="checkbox"/>) Not Applicable
36. Will the project disturb more than one acre but less than five acres? If no, go to 37.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
36A. Do the construction plans comply with the TPDES General Permit for Construction Activity and include a SW3P?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
37. Will the proposed project disturb more than five acres? If no, go to 38.	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No
37A. If yes, has a NOI been filed with the TCEQ detailing the SW3P for the project?	(<input type="checkbox"/>) Yes (<input type="checkbox"/>) No



ENVIRONMENTAL INFORMATION

- | | |
|---|--|
| 38. Will the project occur within, encroach upon, or occur five miles upstream of a listed impaired water of the TCEQ Section 303(d) list? If no, go to 39. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 38A. Has the project been coordinated with TCEQ for maximum daily loads? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 38B. Have BMPs been included in the construction plans? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 39. Does the implementing agency possess an MS4 permit? If no, go to 40. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 39A. Will the project impact the MS4 permit? If no, go to 40. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 39B. Explain how and what mitigation is proposed. | |

FLOODPLAINS

- | | |
|---|--|
| 40. Will the project require work in the Trinity River Regulatory Zone? If no, go to 41. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 40A. Has a CDC been completed and sent to the local CDC/floodplain administrator? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 41. Could the project change the 100-year water surface elevation, induce erosive velocities, or result in conveyance changes? If no, go to 42. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 41A. Has the project been coordinated with the local floodplain administrator and USACE to address potential impacts. Attach approval correspondence. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |

VEGETATION

- | | |
|--|--|
| 42. Will the project disturb existing vegetation or remove trees? If no, go to 43. | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 42A. Will revegetation be included in the construction plans? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 42B. Check all statements that apply | |
| • Natural vegetation will be preserved whenever practicable | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| • Mitigation/vegetation will comply with local tree ordinances | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| • Native plants will be used whenever practicable | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| • Xeriscaped plants will be used to help with water conservation | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| • Landscaping will be in accordance with any local aesthetic requirements | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |

AIR QUALITY

- | | |
|--|--|
| 43. Will the project improve air quality? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 44. Are there any air quality sensitive receivers immediately adjacent to the project? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 45. Will the construction plans include specifications require making reasonable effort to comply with local, state, and federal regulations, pertaining to construction equipment emissions and/or construction equipment work hour restrictions? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |

REGULATED MATERIALS

- | | |
|--|--|
| 46. Has a regulated/hazardous materials on-site visual inspection been conducted? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 47. Will the project require additional right-of-way from or be located near a known potential regulated materials site? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 48. Does the implementing agency have a spill prevention/response plan in place for construction projects? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |
| 49. Will the construction plans include specifications require compliance with local, state, and federal regulations, pertaining to regulated materials on construction sites? | (<input type="checkbox"/>) Yes (<input type="checkbox"/>) No |



ENVIRONMENTAL INFORMATION

SPECIAL PERMITS

50. Are any special permits or clearances (e.g., Section 408, Section 9, Section 10, FAA airway clearance) required? If yes, please list those needed and status of obtaining the required permits and/or clearances. ☐ Yes ☐ No

CONSTRUCTION IMPACTS

51. What is the estimated time of construction? _____ Years _____ Months

52. Will the construction of the project limit access and/or require detours? If yes, describe the impacts and how they will be minimized or mitigated during construction. ☐ Yes ☐ No

53. What types of facilities or services could be impacted during construction and how will they be notified of the construction project, changes in access during construction, or detours?

<u>Facility/Service</u>	<u>Affected?</u>	<u>Notification Method</u>	<u>Who will be/was Notified?</u>
• Residences	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Businesses	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Hospitals, Fire, Police Stations	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Emergency Services	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Public Facilities (e.g., libraries, schools)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Transit Routes	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Bicycle Routes	<input type="checkbox"/> Yes <input type="checkbox"/> No		
• Haul Routes	<input type="checkbox"/> Yes <input type="checkbox"/> No		

54. Are there any noise sensitive receivers near construction area or along the detour routes? ☐ Yes ☐ No

55. Will the construction plans include specification requiring the contractor to make reasonable effort to minimize construction noise through abatement measures, such as work-hour controls and proper maintenance of muffler systems. ☐ Yes ☐ No

CERTIFICATION BY AUTHORIZED REPRESENTATIVE

I certify the information provided in this form accurately reflects the status of compliance with applicable laws and regulations for the project.

Signature: _____ Date: _____

Name: _____ Title: _____



FORM ATTACHMENTS

<input type="checkbox"/>	Location Map (Question 9)
<input type="checkbox"/>	Railroad Agreement (Question 15B)
<input type="checkbox"/>	THC Antiquities Permit (Question 23, 24)
<input type="checkbox"/>	THC Coordination Letters (Question 25)
<input type="checkbox"/>	USFWS Coordination Letters (Question 28B)
<input type="checkbox"/>	USACE IP Coordination Letters (Question 34B)
<input type="checkbox"/>	Floodplain Coordination Letters (Question 41B)
<input type="checkbox"/>	Other