

DIRT, GRAVEL AND LOW VOLUME ROAD MAINTENANCE GRANT APPLICATION

			District Use Only	
Project Location: County _____	Project Location: Municipality _____		Application Type: ☐ DGR ☐ LVR	
ESM Certified Person _____	Position _____	Certification Date _____	Work Site ID: _____	
Official Name of Applying Agency _____			Date Received: _____	
Mailing Address _____				
Contact Person _____	Phone _____	Fax _____	E-Mail _____	

Road Name / ID Number _____	Affected Stream or Tributary _____		
Existing Road Surface Type: ☐ Unpaved ☐ Paved		Is project considered an emergency? ☐ Yes ☐ No	
Proposed Project Start Date _____	Proposed Project Completion Date _____		

1. The applicant is required to identify and obtain all necessary permits before starting the project.
2. Identify the proposed work elements: ☐ Ditches Improved ☐ Ditch Outlets Added ☐ Off Right-of-Way Improvements
☐ Road Banks Improved ☐ Road Base Improved ☐ Road Surface Stabilized
☐ Stream Crossings Improved ☐ Storm Water Improvements ☐ Vegetative Management ☐ Other _____
3. The applicant is required to obtain the DSA Specification and Certification form prior to DSA placement.
4. Complete Attachment B "Project Work Plan" including a sketch of proposed project. Attach a locational map with the project highlighted.
5. Project cost estimate: (summarize costs here and attach detailed documentation if needed)

Grant Requested Funds			In-Kind Contributions		
Materials	Equipment	Labor	Materials	Equipment	Labor
See Attachment A1			See Attachment A2		

Grant Requested..... \$ _____
In-Kind Contributions..... \$ _____
Total Project Value..... \$ _____

Applicant Signature	Date
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DIRT, GRAVEL AND LOW VOLUME ROAD MAINTENANCE PROJECT WORK PLAN

Applicant

Road Name / ID Numb

Date

Instructions:

- Draw a sketch of the proposed project that includes:
 - All Proposed Work (i.e., Cross Pipes, Stream Crossings, Other ESM Practices)
 - Project Road Length in Feet or Miles
 - Nearest Intersection and/or Reference Landmarks
 - Known Utilities
 - North Arrow
- Attach a copy of a locational map with the project highlighted
- Attach additional project details as necessary



Dial 8-1-1 or 1-800-242-1776 not less than 3 business days nor more than 10 business days prior to the start of excavation.

Project Length = _____ feet / miles (circle one)

North Arrow

Attachment A1
to Contract
(optional)

SECTION 9106 OF THE PENNSYLVANIA VEHICLE CODE
DIRT, GRAVEL AND LOW VOLUME ROAD MAINTENANCE
DETAILED ESTIMATED PROJECT EXPENDITURES
GRANT REQUESTED FUNDS

Use best estimates and complete as much info as possible.

Materials				Equipment				Labor			
Type	Unit Cost	Qty	Cost \$	Type	Hours	FEMA* Rate/Hr	Cost \$	Type	Rate/Hr	Hours	Cost \$
Total Materials \$				Total Equipment \$				Total Labor \$			

* FEMA rates are only applicable where municipality-owned equipment is used otherwise use contracted rates.

*Prevailing wage may apply to projects over \$25,000 when a contractor is involved.

Total Grant Requested: \$ (materials + equipment + labor)

Applicant

County

Road Name / ID Number

Date

SECTION 9106 OF THE PENNSYLVANIA VEHICLE CODE
DIRT, GRAVEL AND LOW VOLUME ROAD MAINTENANCE
DETAILED ESTIMATED PROJECT EXPENDITURES
IN-KIND FUNDS

Use best estimates and complete as much info as possible.

Materials							
Type	Unit Cost	Qty	Cost \$	Type	Hours	FEMA * Rate/Hr	Cost \$
Total Materials \$							

Equipment							
Type	Hours	FEMA * Rate/Hr	Cost \$	Type	Rate/Hr	Hours	Cost \$
Total Equipment \$							

Labor							
Type	Rate/Hr	Hours	Cost \$	Type	Rate/Hr	Hours	Cost \$
Total Labor \$							

* FEMA rates are only applicable where municipality-owned equipment is used otherwise use contracted rates.

*Prevailing wage may apply to projects over \$25,000 when a contractor is involved.

Total In-Kind Contributions: \$ (materials + equipment + labor)