

Rural Task Force Region Four Road Project Application

Section 1. Applicant Information			
Agency Name	City of Bangor		
Contact Name	Regina Hoover	Title	City Manager
Phone Number	269-427-5831	Email	manager@bangormi.org

Section 2. Project Information			
Project Name/Road Name	E. Arlington Avenue		
Township/City/Village	City of Bangor		
Project Limits (e.g. Napier Ave. to Britain Ave.)	Center Street to E. Monroe Street		
Project Length (nearest hundredth of a mile)	0.51	Proposed Year of Funding	2021
Primary Work Type	<input checked="" type="checkbox"/> Reconstruct <input type="checkbox"/> Restore & Rehabilitate <input type="checkbox"/> Roadside Facility <input type="checkbox"/> Resurface <input type="checkbox"/> Traffic Operations/Safety <input type="checkbox"/> Transit <input type="checkbox"/> Other		
Project Description (Please provide major work items including sidewalks, utility work, ADA upgrades etc.)	0.51 mi of HMA base crushing and shaping, HMA surfacing, ADA ramps, pavement markings, restoration, and permanent signage on E. Arlington Street from Center Street to E. Monroe Street (M-43).		

Section 3. Project Funding	
Federal STBG Requested	\$ 280000
State D	\$
CTF	\$
Local Funds	\$ 70000
Total	\$ 350,000
Match Percentage (match/total cost)	20%
Does your agency have the financial capacity to Advance Construct (AC) all or part of this project if necessary? If yes, what is the maximum dollar amount your agency is willing to Advance Construct (AC)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Maximum Dollar Amount you can AC? \$

Section 4. System Preservation

PASER rating	2
Current state of drainage	<input type="checkbox"/> Adequate <input type="checkbox"/> Minor and tolerable drainage problems <input checked="" type="checkbox"/> Occasional drainage problems with some maintenance required <input type="checkbox"/> Inadequate drainage, frequent flooding, excessive maintenance required
Expected increase in Remaining Service life (RSL)	<input type="checkbox"/> 0-3 years <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-14 <input checked="" type="checkbox"/> 15-20 Use MDOT's Guidelines for Geometrics on Local Projects
What guidelines does the project conform to?	<input checked="" type="checkbox"/> Reconstruction (4R) <input type="checkbox"/> Resurfacing, restoration, and Rehabilitation (3R) <input type="checkbox"/> Preventative Maintenance (PM)

Section 5. Safety

Please list the number and severity of crashes within the proposed project limits over the last 5 yrs. (2013-2017) (see [Michigan Crash Facts](#) for crash data)

Total Crashes	2	Pedestrian & Bicycle Crashes	0
Fatalities	0	Serious Injuries	0
Using the attached Crash Reduction Factors sheet, please check each safety counter measure that will be included in the project			
Describe any other safety improvements this project will provide	N/A		

Section 6. Non-motorized Improvements

Please explain any pedestrian and/or bicycle improvements are included	ADA ramp construction
Does this project connect to an existing pedestrian/bicycle facility or one that is planned to be completed from 2020-2023?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please provide a map of the connecting facilities

Section 7. Regional Connectivity

What is the most current daily traffic count for the limits of this project?	<input checked="" type="checkbox"/> Less than 2000 <input type="checkbox"/> 2000-5000 <input type="checkbox"/> 5000-10,000 <input type="checkbox"/> Above 10,000 Year of count: 2011 Source: TAMC
National Functional Classification (NFC) for this roadway	Major Collector
Is the project on an All Season Road	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure

Section 8. Strategic Planning & Investment

Is the project identified in a Asset Management Plan, or Capital Improvement Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please cite the plan and page number: CIP, page 1
Is the project identified in another planning documents such as a master plan or parks and recreation plan	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please cite the plan and page number:
Does the project cross jurisdictional boundaries?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, will it be bid as a single project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Will this project coordinate with other infrastructure projects (i.e. utility, water, sewer, etc.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please indicate the project type and construction year:
How many water main breaks have you had at this location in the past five years?	1
Is there a completed a utilities assessment that included televising the sewers in the project area?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Will this project require environmental mitigation, purchase of Right of Way (ROW), or railroad permits?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Sure If yes, which items are required:
Does this project perform Resurfacing, Reconstruction, or Preventative Maintenance on a segment adjacent to a segment where a federally-funded project was done during the 2017- https://www.swmpc.org/downloads/rtf_region4_20172020_project_list.pdf RTF cycle?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No What segment was the PREVIOUS project done on?

Section 9. Existing and Proposed Roadway Design

	Existing			Proposed		
Number of Vehicle Lanes	Through Traffic Lanes	Center Turn Lane	On Street Parking	Through Traffic Lanes	Center Turn Lane	On Street Parking
	2	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Shoulder Surface	<input type="checkbox"/> Paved		Width (ft.)	<input type="checkbox"/> Paved		Width (ft.)
	<input type="checkbox"/> Unpaved		None	<input type="checkbox"/> Unpaved		None
Sidewalk/ path information	Placement		Width (ft.)	Placement		Width (ft.)
	<input checked="" type="checkbox"/> One Side <input checked="" type="checkbox"/> Both Sides <input type="checkbox"/> Intermittent <input type="checkbox"/> None		4'	<input checked="" type="checkbox"/> One Side <input checked="" type="checkbox"/> Both Sides <input type="checkbox"/> Intermittent <input type="checkbox"/> None		4'-5'
On road bicycle facilities	<input type="checkbox"/> Bike Lane	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> Bike Lane	<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> Sharrows			<input type="checkbox"/> Sharrows		
	<input type="checkbox"/> Wide Shoulders	<input checked="" type="checkbox"/> None		<input type="checkbox"/> Wide Shoulders	<input checked="" type="checkbox"/> None	
Utilities, Sewer and Water	<input type="checkbox"/> Utilities Upgrades Needed			<input type="checkbox"/> Replaced Utilities		
	<input type="checkbox"/> Sewer and water work needed			<input type="checkbox"/> Relocating Utilities		
				<input type="checkbox"/> Sewer and Water Line Work		
Please describe any improvements being made as part of this project to crosswalks, signage or signals, or streetscape elements not discussed in project description			ADA ramps will be upgraded and crosswalks will be installed.			

Section 10. Estimated Project Schedule

Activity	Estimated Date
Resolution of Support for <input type="checkbox"/> Local Match Submitted to SWMPC	TBD
Project Application Submitted to MOT	07/2020
Grade Inspection Package Submitted to MDOT	09/2020
Grade Inspection Meeting Scheduled	10/2020
Final Plan and Estimate to MDOT	11/2020
Right of Way (ROW) certified*	11/2020
Rail Road Permits*	N/A
Environmental Mitigation*	N/A
Project Obligated	11/2020
Project Letting	02/2021
Construction Start <input type="checkbox"/>	04/2021
Project Completion	08/2021

*Enter NA if these items will not be required.