

NOTICE OF INTENT TO APPLY: 2020-21 MULTIMODAL ACCESS GRANT

Please read the FY20-21 Guidance for the MMAG Program prior to completing the NOI

	Applicant Information							
	City/County							
	Distressed & At-	Is the prop	osed project located	V / N				
	Risk Counties	county?						
	Contact Information	Name:						
		Title:						
		E-mail:						
		Phone:						
	Carbon Copy Please identify anyone to be copied on NOI-related correspondence	Name:			E-mail:			
				Project Scope				
	Scope of	o Co	Control of the state of the sta					
	Improvement	Reconstruct/upgrade existing multimodal facilities						
_	Mark all that apply	Rehabilitate/maintain existing multimodal facilities						
ior	Improvement		ewalks					
ipt	Type Mark all that apply	 Pedestrian crossing improvements, including high-visibility crosswalks, curb ramps, 						
Project Description		signs & pavement markings, signalization, and median refuge islands						
		 Bicycle facilities (including on-road bike lanes/cycle tracks) 						
		Multi-use paths (pedestrian plus bicycle traffic)						
		 Transit stop amenities (shelters, benches, sidewalks, curb ramps, lighting) 						
		o Co	g ,					
			icycle, pedestrian, or transit-related improvements that address requirements of the					
			Americans with Disabilities Act (ADA)					
			destrian-scale lightir	ng 				
		o Otl	ner:					
			Р	roject Locatior				
	State Route							
	Termini							
	Route Adjacency	Will the project include any improvements not directly along Y / N				Y / N		
		the State Route?						
		If yes, approximately what percentage of the proposed project improvements are along the State Route (by length)?						
		Project Map						
	Applicants are required to submit an annotated aerial map(s) of the project location, including notation showing any							
	potential phasing, with the Notice of Intent to Apply. Please either merge a map to this PDF document before							
	submission, or submit this map as a secondary attachment in your submission to TDOT.MultimodalPlanning@tn.gov							



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	Purpose and Need						
	Project Purpose Please describe the intent						
	of the proposed project						
	Connectivity Need Please identify trip generators or multimodal infrastructure connected by the project Safety Need Please list any known safety needs within the proposed project area						
Collection	Prior Planning Please list any planning documents that describe						
8	a need for the project						
		Scope Considerations					
Data	Phase Identification						
Preliminary D	If possible, please identify						
	potential phasing within						
	the proposed termini						
elir							
Pr	Engineering /	Impact to existing bridge/structure					
	ROW	Modification of existing roadway/lane configuration					
	Considerations Please mark all elements	 Construction of bicycle or pedestrian bridge Impact to a rail line 					
	that may be included in	 Impact to a rail line Modification of adjacent slopes, drainage, or buildings 					
	the final project scope	Right of Way Acquisition					
		Utility Relocation					
		 Utilities to be moved, such as power poles or stormwater drainage, are in the 					
		public ROW					
		 If so, does the community have an urban revitalization plan that describes a need to move the utility? 					
		Multimodal Access Grant History					
	Award History	Has the community received a MMAG award before?	Y/N				
	Project Status	,	,				
	If yes, what is the status						
	of the previously awarded project?						



















