

***COATS FY 2017
TRANSPORTATION
ALTERNATIVES
APPLICATION***

PAGES A-1 THROUGH A-15

**DEADLINE TO RECEIVE APPLICATIONS
IS 2 P.M. ON APRIL 17, 2017**



Columbia Area Transportation Study Transportation Alternatives Application

❖ Applicant Information

APPLICANT: _____ DATE: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP: _____

CONTACT PERSON: _____ TITLE: _____

E-MAIL: _____

❖ Project Information

NAME OF PROJECT: _____

BRIEF PROJECT DESCRIPTION: _____

PROJECT LOCATION: _____

LENGTH & TERMINI (i.e. where does project begin & end) (IF APPLICABLE): _____

COUNTY: _____ COUNTY CODE: _____ HOUSE DISTRICT: _____

SENATE DISTRICT: _____ CONGRESSIONAL DISTRICT: _____

❖ Project Category

(CHECK ONLY THOSE ACTIVITIES THAT ARE APPLICABLE)

- Provisions of facilities for bicycles
- Provisions for pedestrians
- Provisions for pedestrian streetscaping
- In the urbanized area of the MPO with a population *greater than* 50,000
- In the urbanized area of the MPO with a population *less than* 50,000

MAIL ORIGINAL AND EIGHT (8) COPIES OF APPLICATION TO:

Street Address: Attention: Reginald Simmons
 Central Midlands Council of Governments
 236 Stoneridge Drive
 Columbia, SC 29210

A. ELIGIBILITY DEMONSTRATION: “SEE ATTACHED” IS NOT ACCEPTABLE.

1. Does the project meet the requirements outlined in the FAST Act?

YES

NO

2. Does project conform to applicable requirements of Americans with Disabilities Act and any other state or federal laws concurring accessibility?

YES

NO

Explain how the project meets the eligibility requirements:

B. PROJECT DESCRIPTION: “SEE ATTACHED” IS NOT ACCEPTABLE.

Does the applicant intend to apply to SCDOT to perform the administration and management functions of the project through the Local Public Agency (LPA) process?

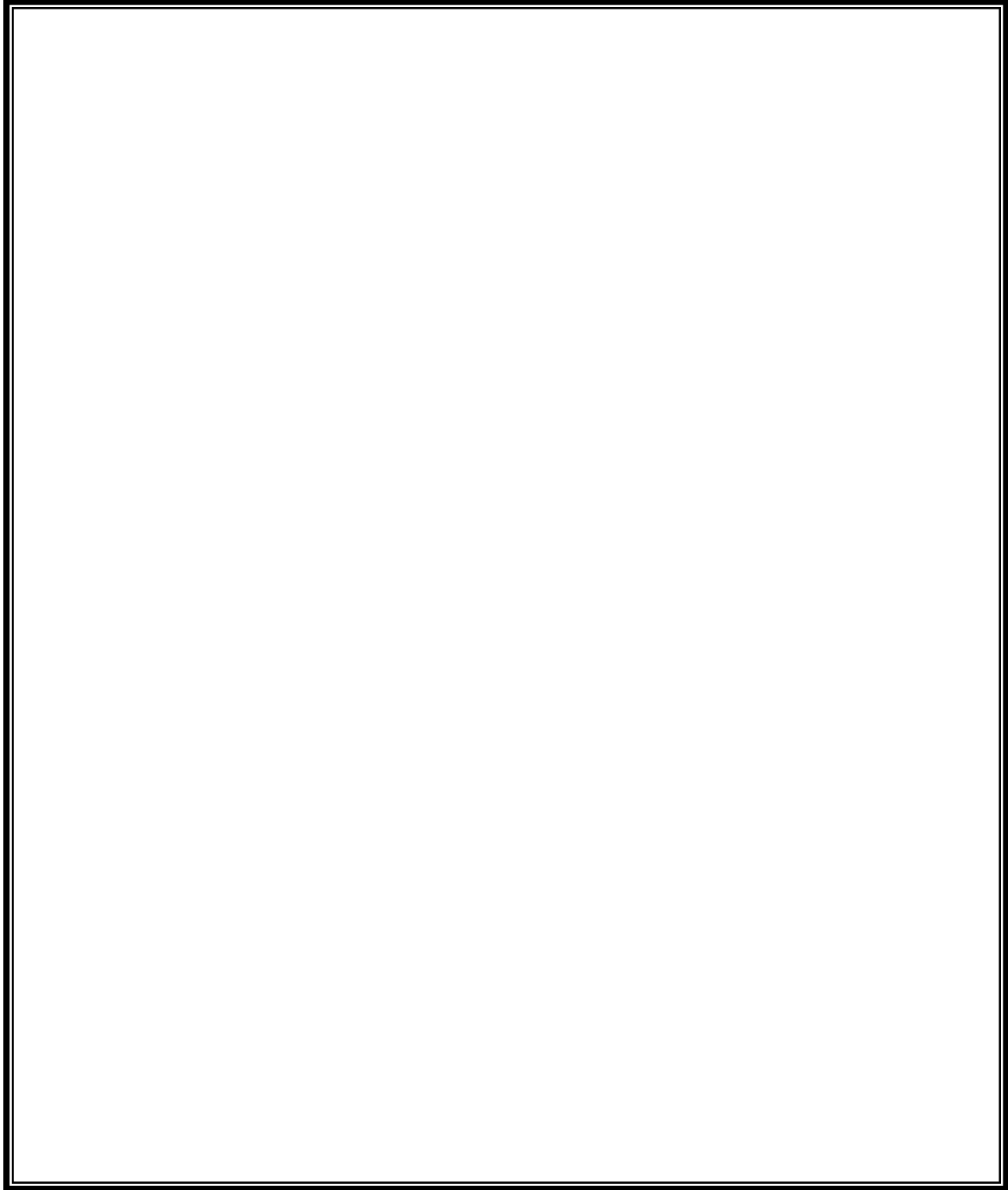
YES

NO

Describe all necessary work needed to complete the proposed project. Description should reflect only activities checked under project category:

C. MAPS, PLANS, & PHOTOGRAPHS:

Attach project location map(s), project boundary map and site plan. Include photographs of the existing site and/or facility if applicable. **COMMENTS:**



D. PROJECT COST: “SEE ATTACHED” IS NOT ACCEPTABLE.

Itemized **all** projects elements and costs. List item, description, quantity, unit price, amount, etc. Ensure cost shown are accurate and sufficient to satisfactorily complete all work anticipated. All budgets item costs for project administration and management to adequately accomplish the work shown must be shown. These expenses are to include engineering, inspection, and testing in accordance with state and federal requirements. (Enter total project cost in Section I – Line 1, Page A-9.) Itemize below:

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E. PROPERTY OWNERSHIP:

Identify ownership of ALL property involved in the project. If additional property must be acquired to complete the project, identify ownership and value of property, either purchased or donated:

(NOTE: For all projects on SCDOT rights of way, include with your application either a copy of the approved SCDOT Encroachment Permit, a letter from your SCDOT County Maintenance Office, or SCDOT District Office indicating your project appears feasible in concept with specific details to be worked out in an Encroachment Permit.

F. LOCAL SUPPORT:

Attach letters from donors or sponsors committing non-federal share of project costs, commitment or support from sponsors, local government officials and regional organizations. Letter of approval from local jurisdiction if other than applicant. Describe local support for the proposal. Document the opportunities for public participation in the development of this project.

G. PROJECT MAINTENANCE & MANAGEMENT PLANS:

Describe maintenance and management details for the project, including the expected yearly amount of funds and the source of funds to support activities:

Provide details for long-term maintenance of the project with projected yearly maintenance costs.

H. ENVIRONMENT ASSESSMENT:

Attach any previously prepared environmental documentation to this application. If no previously approved environmental documentation is available, the applicant must complete necessary studies if any, and have them approved prior to project implementation. This requirement does not apply if the application is for planning or feasibility studies only. Indicate below any impact the project is expected to cause.

	IMPACT	
	YES	NO
Displacement of residences or businesses	<input type="checkbox"/>	<input type="checkbox"/>
Disruption of neighborhoods	<input type="checkbox"/>	<input type="checkbox"/>
Impact agricultural or recreational lands	<input type="checkbox"/>	<input type="checkbox"/>
Impacts historical / archaeological sites	<input type="checkbox"/>	<input type="checkbox"/>
Impacts wetlands, streams / lakes floodplains	<input type="checkbox"/>	<input type="checkbox"/>
Within coastal zone	<input type="checkbox"/>	<input type="checkbox"/>
Endangered species.....	<input type="checkbox"/>	<input type="checkbox"/>
Air / water quality.....	<input type="checkbox"/>	<input type="checkbox"/>
Noise.....	<input type="checkbox"/>	<input type="checkbox"/>
Hazardous waste site	<input type="checkbox"/>	<input type="checkbox"/>

Any county, state, and/or federal permits required will have to be secured by the applicant prior to contract signing. These may include Army Corps of Engineers, Office of Coastal Resource Management, Coast Guard, Federal Energy Regulatory Commission, County Sediment and Erosion Control and Stormwater Management Ordinance, or State Budget and Control Board. Explain any potential environmental issues. **COMMENTS:**



I. FUNDS REQUESTED, LOCAL MATCH AND SOURCE

LINE 1 – Total project cost (From page A-5, Section D) \$ _____

LINE 2 – Funds requested by applicant \$ _____

(Up to 80% of Line 1, not to exceed the \$180,000 federal maximum for COATS MPO Projects)
(80% for jurisdictions with population under 50,000; 60% for jurisdictions with population over 50,000)

LINE 3 – Local Match (Must be at least 20% of Line 1) \$ _____

List source of match and amount from each:

A: _____ \$ _____

B: _____ \$ _____

C: _____ \$ _____

D: _____ \$ _____

E: _____ \$ _____

TOTAL (Should be equal to Line 3) \$ _____

Is project within a Metropolitan Planning Organization (MPO) boundary? YES NO

If yes, is the project in the Transportation Improvement Program (TIP)? YES NO

MPO _____ Amounts in TIP for project \$ _____

J. CERTIFICATION

The undersigned has authority to sign on behalf of the applicant and certifies that the applicant has legal authority to enter into contract to implement this project and that all information provided is complete and accurate to their best knowledge.

SIGNATURE

DATE

TITLE

PHONE NO.

PRINTED NAME

MAIL ORIGINAL AND EIGHT (8) COPIES OF APPLICATION TO:

Street Address: Attention: Reginald Simmons
Central Midlands Council of Governments
236 Stoneridge Drive
Columbia, SC 29210

REQUIRED FORMS

FOR THE

TRANSPORTATION

ALTERNATIVES

PROJECTS

The following completed forms are required to be returned with each application:

- Certificate Of Non-Collusion
- Certification Of Primary Participant Regarding Debarment, Suspension, And Other Responsibility Matters
- Certification Of Restrictions On Lobbying
- Certification Of Applicant
- Disclosure Of Potential Conflict Of Interest Certification



CERTIFICATE OF NON-COLLUSION

By submission of an application, each person signing on behalf of any applicant certifies, and in the case of a joint application, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of knowledge and belief:

- 1) The application is submitted without collusion, consultation, communication, or agreement for the purpose of restricting competition, with any other bidder or with any competitor;
- 2) No attempt has been made or will be made by the applicant to induce any other person, partnership or corporation to submit or not to submit an application for the purpose of restricting competition.

Company Name

Authorized Signature

Date

SWORN AND SUBSCRIBED before me
this _____ day of _____, 201____.

My commission expires _____.

Notary Public



CERTIFICATION OF PRIMARY PARTICIPANT REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

The applicant, _____ certifies to the best of its knowledge and belief, that it and its principals:

- 1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
- 2) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- 3) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (2) of this certification; and
- 4) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or Local) terminated for cause or default.

If the applicant is unable to certify to any of the statements in this certification, the applicant shall attach an explanation to this certification.

The applicant, _____ certifies or affirms the truthfulness and accuracy of the contents of the statements submitted on or with this certification and understands that the provisions of 31 U.S.C. Sections 3801 et seq, are applicable thereto.

Signature and Title of Authorized Official

Date



CERTIFICATION OF RESTRICTIONS ON LOBBYING

The applicant certifies, to the best of its knowledge and belief, that:

1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of a Federal department or agency, a Member of the U.S. Congress, an officer or employee of the U.S. Congress, or an employee of a Member of the U.S. Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification thereof.

2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for making lobbying contacts to an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form--LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions (as amended by "Government wide Guidance for New Restrictions on Lobbying," 61 Fed. Reg. 1413 (1/19/96). Note: Language in paragraph (2) herein has been modified in accordance with Section 10 of the Lobbying Disclosure Act of 1995 (P.L. 104-65, to be codified at 2 U.S.C. 1601, et seq.)).

3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995). Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

THE APPLICANT, _____, CERTIFIES OR AFFIRMS THE TRUTHFULNESS AND ACCURACY OF EACH STATEMENT OF ITS CERTIFICATION AND DISCLOSURE, IF ANY. IN ADDITION, THE APPLICANT UNDERSTANDS AND AGREES THAT THE PROVISIONS OF 31 U.S.C. §§ 3801 ET SEQ. APPLY TO THIS CERTIFICATION AND DISCLOSURE, IF ANY.

_____ Signature of the applicant's Authorized Official

_____ Name and Title of the applicant's Authorized Official

_____ Date



CERTIFICATION OF APPLICANT

I hereby certify that I am the duly authorized representative of the APPLICANT and that neither I nor the above APPLICANT I here represent has:

- a) employed or retained for a commission, percentage, brokerage, contingent fee, or other consideration, any firm or person (other than a bona fide employee working solely for me or the above APPLICANT) to solicit or secure this contract;
- b) agreed, as an express or implied condition for obtaining this contract, to employ or retain the services of any firm or person in connection with carrying out the contract, or
- c) paid, or agreed to pay, to any firm, organization or person (other than a bona fide employee working solely for me or the above APPLICANT) any fee, contribution, donation, or consideration of any kind for, or in connection with, procuring or carrying out the contract except as here expressly stated (if any);
- d) either directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken any action, in restraint of free competitive bidding in connection with the submitted proposal.

By execution of this Agreement, the APPLICANT certifies the APPLICANT and all contractors, employees and agents will comply with South Carolina’s Ethics, Government Accountability, and Campaign Reform Act of 1991, as amended. The following statutes require special attention: (a) Offering, giving, soliciting, or receiving anything of value to influence action of public employee - §8-13-790, 8-13-705, 8-13-720; (b) Recovery of kickbacks - §8-13-790, (c) Offering, soliciting, or receiving money for advice or assistance of public official - §8-13-720, (d) Use or disclosure of confidential information - §8-13-725, (e) Persons hired to assist in the preparation of specifications or evaluation of bids - §8-13-1150, (f) Solicitation of state employees - §8-13-755, §8-13-760 and §8-13-725. The state may rescind any contract and recover all amounts expended as a result of any action taken in violation of this provision.

I acknowledge that this certificate is to be furnished to the Department, the Federal Highway Administration, and the U. S. Department of Transportation, and is subject to applicable State and Federal laws, both criminal and civil.

APPLICANT

Name of APPLICANT

By: _____

Date: _____

Its: _____



DISCLOSURE OF POTENTIAL CONFLICT OF INTEREST CERTIFICATION

Applicant hereby indicates that it has, to the best of its knowledge and belief has:

_____ Determined that no potential organizational conflict of interest exists.

_____ Determined a potential organizational conflict of interest as follows:

Attach additional sheets as necessary.

1. Describe nature of the potential conflict(s):

2. Describe measures proposed to mitigate the potential conflict(s):

Signature

Date

Print Name

Company

If a potential conflict has been identified, please provide name and phone number for a contact person authorized to discuss this disclosure certification with Department of Transportation contract personnel.

Name

Phone

Company