

CSJ:

Project Information Form

Date awarded:

Project Sponsor (Local Government):

Unique Entity ID (UEID):

Address:

Include 9-digit zip-code XXXXX-XXXX

Contact Person:

Email Address:

Project Name:

Estimated Letting Date:

County:

Let by:

Project Limits

From:

To

Scope of Work:

Estimated project cost:

ESTIMATED BUDGET

Description	Funding Source	Project Cost			Reimbursement to LG
	Category or Local	Total	Federal	Local	Yes or No
Preliminary Engineering					
Environmental					
ROW					
Utilities					
Construction					
Direct State Costs					No

* The Local Government is responsible for 100% of the costs exceeding the approved federal funding.

Prepared by:

Date:

Reviewed by MPO: