

# Application

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## Connecticut Community Connectivity Grant Program (CCGP) Application

*Please read this information before completing the application.*

The Community Connectivity Program, part of Governor Dannel P. Malloy's Let'sGoCT! transportation initiative, seeks to improve accommodations for bicyclists and pedestrians in urban, suburban and rural community centers. These community centers serve as a place where people can meet for social, educational, employment and recreational activities. The goal of the Program is to make conditions safer and more accommodating for pedestrians and cyclists, thereby encouraging more people to use these healthy and environmentally sustainable modes of travel.

Grants will be awarded by the Connecticut Department of Transportation in accordance with the CCGP guidelines.

*THIS APPLICATION, ITS RECEIPT, AND/OR ANY SUBSEQUENT ANNOUNCEMENT OR NOTIFICATION OF AN AWARD ASSOCIATED WITH THIS APPLICATION, DOES NOT CONSTITUTE A CONTRACT. A CONTRACT EXISTS ONLY WHEN ALL REQUIRED CONTRACTUAL DOCUMENTS ARE SUBMITTED AND APPROVED BY THE ADMINISTERING STATE AGENCY, AND THE MUNICIPALITY IS NOTIFIED THAT THE CONTRACT IS FULLY EXECUTED.*

State of Connecticut  
Connecticut Department of Transportation  
**APPLICATION FOR FY 2018 COMMUNITY CONNECTIVITY GRANT PROGRAM FUNDING**

## Section 1 – Identification and Documentation

Each Municipality is eligible to submit one (1) application per solicitation for this program. **Please submit your completed CCGP application and required documents electronically to: [CTDOT.CCGP@ct.gov](mailto:CTDOT.CCGP@ct.gov)**

### Applicant Municipality:

\_\_\_\_\_

Tax ID (FEIN) No.: \_\_\_\_\_

### Authorized Signatory Information: (Note: Authorized Signatory must be the Chief Municipal Official or a designee of)

Full Legal Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Street Address / PO Box: \_\_\_\_\_

Zip Code: \_\_\_\_\_

### Applicant Information:

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Ext: \_\_\_\_\_

Email Address: \_\_\_\_\_

### Proposed Project Information:

Project Name:

**Proposed Project Information (continued):**

Project location (street address, GPS coordinates, etc.):

Street Name (and State Route number if applicable):

Closest intersecting street(s):

Does this project impact state-owned property (i.e.: state facilities, state roads and/or bridges, state parks, forests or other state-owned land.) If yes, please provide the location and a brief explanation.

Refer to the “Primary Eligible Project Types” Table under the “Activities Eligible for Funding Under the CCGP” section of the Guidelines, and categorize (as close as possible) the type of improvement(s) that CCGP funds will be used for:

Project type code(s):

Other:

**What type(s) of facilities does this project propose to improve the connectivity of:**

- |  |  |
|--|--|
| <input type="checkbox"/> Community/Central Business Centers    | <input type="checkbox"/> Education Centers (Schools) |
| <input type="checkbox"/> Commercial District (Shopping/Dining) | <input type="checkbox"/> Tourist Sites               |
| <input type="checkbox"/> Employment Centers                    | <input type="checkbox"/> Transit Facilities          |
| <input type="checkbox"/> Religious Facilities                  | <input type="checkbox"/> Other _____                 |
| <input type="checkbox"/> Residential                           |  |

**Project Cost / Funding Requested**

Requested amount of funding for this project (cannot exceed \$400,000):

\$ \_\_\_\_\_

**Please submit the following additional information, as applicable:**

- Site Location Map
- Property Boundary Map
- Project Plans / Concept Plans (if available)
- Proposed project schedule and duration of project
- Environmental site assessments

**Please Answer the Following Additional Questions:**

Should this project be awarded a CCGP grant, approximately how soon after the contract is fully executed, would construction activities begin?

- 30 - 60 days
- 60 – 90 days
- 90 - 120 days
- 120+ days

Please include any other relevant information you feel may be helpful:

**Endorsement and Recommendation of Project**

The following page titled “Endorsement and Recommendation of Project by the Municipality” must be completed and signed to certify that the project is endorsed by the Municipality.

### Endorsement and Recommendation of Project by the Municipality

***This page must be read and signed by the Authorized Signatory of the Municipality in order for the municipality/project to be considered for CCGP funding.***

My signature below, as Authorized Signatory of the Municipality of, the Town of Canton, Connecticut indicates acceptance of the following and further certifies that:

1. I understand that should this grant application be approved, I will be required to sign an assistance agreement/contract with the assigned administering agency delineating the terms and conditions of this grant;
2. I will comply with any grant terms and conditions required by the administering agency;
3. I understand that various permits may be required by the administering agency as required by either the Connecticut General Statutes or Connecticut regulations;
4. I understand that funding associated with this grant application is one-time in nature and that there is no obligation for additional funding from the Connecticut Department of Transportation;
5. I understand that if this project warrants a Connecticut Environmental Policy Act (CEPA) review pursuant to Sections 22a-1 through 22a-1h of the Connecticut General Statutes that I will comply with such an environmental assessment. Further, if a CEPA is required, I understand that there are costs associated with such a review and that the Municipality is in a position to continue with the proposed project despite this cost;
6. I understand that this application will be examined by the Connecticut Department of Transportation for consistency with the State Plan of Conservation and Development and that I may be contacted if additional information is required for that review;
7. I understand that projects which convert twenty-five or more acres of prime farmland to a nonagricultural use will be reviewed by the Commissioner of Agriculture, in accordance with Section 22-6 of the Connecticut General Statutes; and
8. I will supply the Connecticut Department of Transportation with all documentation supporting my authority to enter into an assistance agreement, including but not limited to applicable certified minutes and by-laws from the Municipality denoting my authority to apply for the grant and the authority to enter into such an agreement should a grant be awarded.
9. I understand that if this application leads to the award of a CCGP funding for this project, that no payment will be made for project expenses incurred prior to the start date or after the end date (as set forth in the fully executed contract), without advance written approval by the administering state agency.
10. I have read, in full, the Connecticut Community Connectivity Grant Program (CCGP) Guidelines and Application.

Authorized Signatory's Name (Please Print) Lester B Hill

Title First Selectman

Signature Lester B Hill Date 7/27/17

## Section 2 – Description of Project Purpose and Need

Provide a description of the proposed project which includes the purpose and need of the project. Please be as comprehensive as possible in the description. **Note: only capital projects will be considered:** new construction, expansion, renovation, or replacement projects for an existing facility or facilities. Maintenance type projects are not eligible.

### **Section 3 – Relation to Program Goal and Strategic Objectives**

How does this project in my Municipality relate to the overall objective of the Community Connectivity Program? This section should clearly outline and describe the immediate and long term impact on connectivity within the community. Data should be provided to demonstrate how the program objective will be achieved through this project. Direct, positive, and immediate impact on community connectivity is the most highly desired outcome of the program.

## **Section 4 – Community Context and Benefits**

How does this project fit into adopted strategic plans and/or stimulate additional investment, leverage other resources, and/or fit into regional initiatives? Clearly showing how the proposed project fits into a strategic approach to community connectivity is important in this criterion.



## Section 5 – Cost Estimate

This information should answer the question of whether the project can be realistically completed within the proposed grant amount. Cost estimates are the primary form of providing this information and will be evaluated for their demonstrated ability to achieve the Program objective. For example, an infrastructure project application with evidence of scoping and/or engineering work can be expected to increase confidence in the resulting estimate.

A detailed cost estimate shall be submitted with this application. A blank cost estimate form can be found on the Community Connectivity Program webpage at: <http://ctconnectivity.com/ccgp/>