STBG - 2025 Bridge Program

Questions  Responses

Section 1 of 17

**FFY 2025 Surface Transportation Block Grant - Bridge Program Application**

Application for Surface Transportation Block Grant Program Funding

**Contact Information**

Description (optional)

**Primary Sponsor** *

1. Altoona
2. Ankeny
3. Bondurant
4. Carlisle
5. Clive
6. Dallas County
7. DART
8. Des Moines
10. Grimes
11. Johnston
12. Madison County
13. Mitchellville
14. Norwalk
15. Pleasant Hill
16. Polk City
17. Polk County
18. Urbandale
19. Warren County
20. Waukee
21. West Des Moines
22. Windsor Heights

Secondary Sponsor
1. Altoona
2. Ankeny
3. Bondurant
4. Carlisle
5. Clive
7. DART
8. Des Moines
9. DOT
10. Grimes
11. Johnston
12. Madison County
13. Mitchellville
14. Norwalk
15. Pleasant Hill
16. Polk City
17. Polk County
18. Urbandale
19. Warren County
20. Waukee
21. West Des Moines
22. Windsor Heights

Contact Person *

Short answer text
Section 2 of 17

Project Description

Description (optional)

Project Title *

Short answer text

Project Description *

Long answer text

Termini Description (i.e. Park Avenue to 19th Street) *

Short answer text
Total Estimated Project Cost *

Short answer text

Federal Fiscal Year 2025 STBG Request *

Short answer text

Total Funding Secured *

Short answer text

Source of additional funds and local match? *

If the proposed improvement has secured funding, please list the sources and FFY of secured funding.

Long answer text

What is the structural rating of the bridge?

See MPO's SD Bridge List

Short answer text

What is this project LRTP number (if applicable)?

Short answer text
Section 3 of 17

Section title (optional)

Description (optional)

How many consecutive years will funding be requested? *

- 2 Years
- 3 Years
- +4 Years

What is the total anticipated STBG funding request over the multiple years? *

Short answer text

After section 3 Continue to next section

Section 4 of 17
Has any part of this project been started or completed? *

- Yes
- No

Has your agency previously applied for STBG funds for this project? *

- Yes
- No

Has this project previously been awarded STBG funds? *

- Yes
- No

After section 4 Continue to next section

Section title (optional)

Description (optional)
Project Need

Description (optional)

The Federal Highway Administration requires STBG funds to be used towards regionally significant projects. Please describe how this project fulfills this requirement.

Long answer text

Describe how this project impacts other city/county goals, plans, and projects.

Long answer text

Describe any work previously completed (or underway) that this project complements or is recommended in other planning studies/construction projects

Long answer text

Expansion is considered an expensive and last resort to address congestion issues. If this is an expansion project please explain what other methods have been used to address congestion.
Design Elements

Description (optional)

Number of travel lanes *

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<td>Existing</td>
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Existing travel lane width (ft) *

Short answer text

https://docs.google.com/forms/d/1dK9cHMwNn033YIX1YM3K71-AEJojURSZWcXIPQdahg/edit
Short answer text

Existing total bridge width (ft) *

Short answer text

Proposed total bridge width (ft) *

Short answer text

Existing posted speed (mph) *

Short answer text

Proposed posted speed (mph) *

Short answer text

After section 7 Continue to next section

Section 8 of 17

Design Elements

Description (optional)
Short answer text

Proposed sidewalk width? *
Short answer text

Number of existing on-street parking spots? *
Short answer text

Number of proposed on-street parking spots? *
Short answer text

After section 8  Continue to next section
Section 10 of 17

Design Elements

Description (optional)

Existing bicycle facility type? *

- Traditional bicycle lane
- Buffered/protected bicycle lane
- Shared-Use path

Existing bicycle facility width? *

Short answer text

After section 10 Continue to next section

Section 11 of 17

Design Elements

Description (optional)
Design Elements

What type of bicycle facility?

- Traditional bicycle lane
- Buffered/protected bicycle lane
- Shared-Use path

What is the width of the bicycle facility? *

Short answer text

After section 12 Continue to next section
Does the project improve a parallel facility or contribute to alternative routing? *

- Yes
- No

Describe how the project improves a parallel facility or contributes to alternative routing? *

Long answer text

After section 13  Continue to next section
Yes

No

After section 15  Continue to next section

Section 16 of 17

Section title (optional)

Description (optional)

Describe how the project address an identified freight impediment?  *

Long answer text

After section 16  Continue to next section

Section 17 of 17

Section title (optional)

Description (optional)

The MPO receives federal funding and may not discriminate against anyone on the basis of race, color, or national origin, according to Title VI of the Civil Rights Act of 1964. By applying to receive these funds the applicant is acknowledging that they understand and adhere to the principles of Title VI when performing activities related to the funding they receive from the Des Moines Area Metropolitan Planning Organization.
To the best of my knowledge all information included in this application is true and accurate, including the commitment of all design features, physical and financial resources. This application has been duly authorized by participating local authority(s). I understand the FORMAL RESOLUTION binds the participating local governments to provide the required matching funds, design features according to those listed in the application and to assume responsibility for adequate maintenance of any new or improved facilities. I understand that, although this information is sufficient to secure a commitment of funds, an executed contract between the applicant and the Iowa Department of Transportation is required prior to the authorization of funds.

☐ Yes

☐ No

A GIS shapefile has been sent to the MPO *

☐ Yes

☐ No

An executed city resolution has been emailed to the MPO *

☐ Yes

☐ No

If proposed project is on an existing or future DART transit line, has a letter of review from DART been emailed to the MPO
No

Additional information you would like to share:

Long answer text

Thank you for submitting

Description (optional)