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| **CMAQ Project Application Form Non-MPO Area**  Project Title: | | Date: | |
| Location: | |  | |
| Air Quality Non-Attainment or Maintenance Area Name : | | | |
| Pollutant Type: PM2.5PM10Other |  | | |
| Project Type: Dust Suppression Road or Alley Paving Shoulder Paving and/or Curb & Gutter  Equipment Purchases (Sweeper/Water Truck) Diesel Retrofit Bike/PedestrianOther | | | |
| **Preliminary Cost Estimate** | | | |
| Attach the [Project Initiation Form](https://azdot.gov/sites/default/files/media/2021/07/Project-Initiation-Form.pdf) | | | |
| Attach the [ADOT Cost Estimate Tool](https://azdot.gov/sites/default/files/2019/06/adot-cost-estimate-form.xls) | | | |
| **Required Supporting Information Checklist** | | | |
| Project Description (road/facility name, and type/classification of roadway, as available)  Project Area and Regional Maps (verify in nonattainment area)  Project Termini (existing/new, phasing, beginning, end, and total length, as available)New Capacity/Equipment/Network   Existing Capacity/Equipment/System/Network  Part of Existing Transportation, Capital Improvement, and/or Air Quality Plan (description need for project scoring)  Project Schedule (with appropriate milestones) Line Item Budget (hours, rate, total for each staff member or consultant per phase/deliverable unit price, and number of units) | | | |
| **Check Applicable Air Quality Analysis Spreadsheet Included** | | | |
| Unpaved Road Dust Suppression Sheet Construction Dust Suppression Calculation Sheet  Baseline Calculation Sheet ( required for sweeping, bike/ped) Road Sweeping Calculation Sheet  Bicycle and Pedestrian Calculation Sheet Paving Roads and Alleys Calculation Sheet  Pave Shoulder and/or Curb & Gutter Calculation Sheet Diesel Retrofit (http://epa.gov/cleandiesel/verification/verif-list.htm)  **(other )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |
| Individual and Organizational Sponsor Name, Address, Phone/Fax/E-Mail (required) | | | |
|  | | | |
| Sponsor Signature (required): | | | Date: |
| ADOT Contact Signature (required): | | | Date: |

***Supplementary Project Information****: Please complete the following supporting information attach more pages as necessary*

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| Project Description:  Project Area and Regional Maps:  Project Termini:  New OR Existing Capacity/Equipment /Network:  If this is part of Existing Transportation, Capital Improvement, and/or Air Quality Plan please include listing of document and description of how the project is described in the document.  Project Schedule:  Line Item Budget:  ATTACH EMISSIONS SPREADSHEETS TO THIS APPLICATION FORM |