



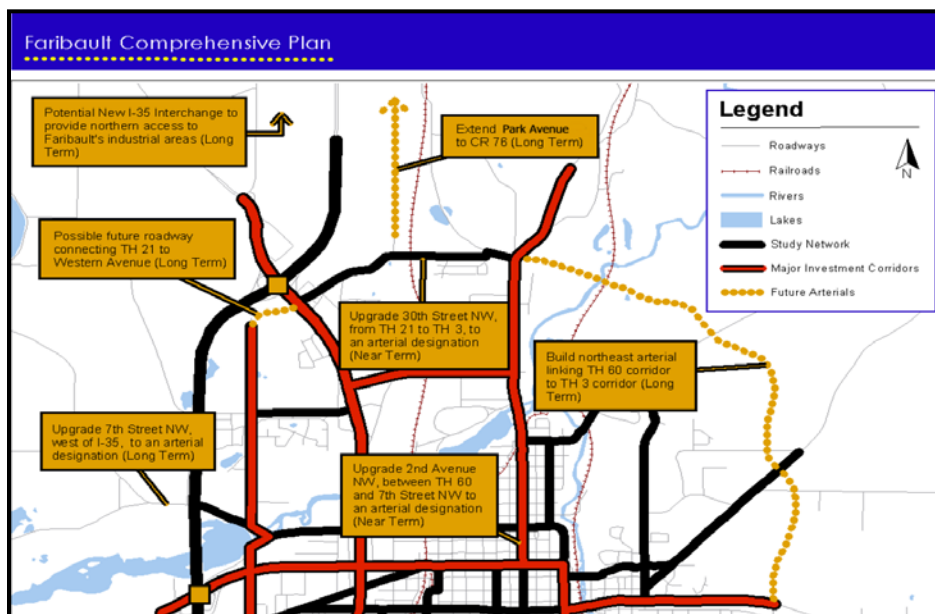
Request for Council Action

TO: Mayor and City Council
THROUGH: Tim Murray, City Administrator
FROM: Mark DuChene, City Engineer
MEETING DATE: January 22, 2019
SUBJECT: Authorize Submittal of MnDOT 2023 State Transportation Improvement Program Grant Application

Background:

The Southeastern Minnesota Area Transportation Partnership (ATP-6) is soliciting road and bridge projects to expand and upgrade the present State Transportation Improvement Program (STIP). These programs utilize federal FHWA funds to support different grant programs depending on project type and eligibility.

The City of Faribault has identified in the 2019-2023 CIP an improvement project at the intersection of TH 3 (2nd Avenue NW) and 30th Street NW to create a 4-legged intersection, extend 30th Street NW to 1st Avenue NW and extend 1st Avenue NW to 30th Street NW. This project not only opens up approximately 40 acres of industrial zoned development land that previously was the site of the Faribault Foods spray fields, but it is also the next phase towards the long range transportation plan of constructing a NE Ring Road ultimately connecting TH 60 with TH 21 as shown here:



The grants require a minimum 20% local match for grant construction eligible items which excludes engineering fees, right-of-way acquisition, permitting etc.

The total estimate project costs for this project is \$1,955,000.00 with \$1,600,000 being grant eligible. The grant request will there for be \$1,280,000 (80%) and the City's share will be budgeted for out of the (401) Street Improvement Fund and/or the MSA Street fund.

Recommendation:

Approve motion authorizing submittal of 2023 STIP Grant Application

Attachments:

- Grant Summary Form



GRANT SUMMARY FORM

Pre-Application Application Award Acceptance Amendment

Department: _____

Contact Person: _____

Grant Name: _____

Grantor: _____

Total Project Cost: _____ Total Award Amount: _____

Total Cash Match: _____ Total In-Kind Match: _____

Application Date: _____ Grant Period From _____ To _____

Funding Type (Federal, State, Other): _____

CFDA Number: _____ Electronic or Hardcopy Submission: _____

Project Description

How is the Match Amount Determined::

Fixed Amount: _____ or % of project cost _____ or Other

Explanation of Other:

For this City fiscal year, how much of the required local cash match amount is:

Already In Department Budget: _____ Not Budgeted: _____

Proposed Source of Match: _____

Director Approval

Administrator Approval
