

TIP Amendment Request - Revise An Existing Project

Amendment Request Details



TIP Amendment
(change in funding
greater than \$1M)



TIP Modification
(change in funding
less than \$1M)



There are previous
amendments to
this project.

Date: 8-13-18

Amendment Requested By: DCHC MPO

Existing Project Details

Project Name: GoDurham Purchase of Service

STIP/TIP #: TG-6178A

Jurisdiction/Agency: GoDurham

WBS or Local ID or Federal Aid #:

MUNIS #:

Existing Project Schedule and Funding: Enter the most current project information.

Use the MPO database: bitly.com/mpoprojects

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
Prior Year	Capital	5310	\$100,000	\$0	\$25,000	\$125,000
2018	Capital	5310	\$100,000	\$0	\$25,000	\$125,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$200,000	\$0	\$50,000	\$250,000

Total Project
Cost

Proposed Project Schedule and Funding: Enter the full proposed project schedule & funding.

In many cases, the current project information from the above table will be re-entered at the top of the Proposed Table to represent FULL project information.

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
Prior Year	Capital	5310	\$100,000	\$0	\$25,000	\$125,000
2018	Capital	5310	\$100,000	\$0	\$25,000	\$125,000
2019	Capital	5310	\$100,000	\$0	\$25,000	\$125,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$300,000	\$0	\$75,000	\$375,000

Total Project
Cost

TIP Amendment Request - Revise An Existing Project

Project Details - Continued

Please provide previous STIP/TIP # or new STIP/TIP # (if applicable):

If this amendment has already been reflected in the NCDOT STIP,
please provide date of STIP action and attach supporting information:

Project Description/Details/Termini/etc. to be amended (if applicable):

Please provide additional details or explanation related to this amendment request such as explanation for schedule delays, project cost changes, or other supporting information (if applicable). For example, why is this amendment being requested?

The project will purchase service for passengers who are eligible for ADA services but reside outside the 3/4 mile ADA service area of GoDurham. This amendment adds 5310 funds to the project for the upcoming fiscal year.

Please email completed form and any supporting documents to DCHC MPO TIP manager. Please follow-up with TIP manager to confirm receipt of form.

TIP Amendment Request - Add or Create a New Project

Amendment Request Details

Date: 8-13-18

Amendment Requested By: DCHC MPO

Existing Project Details

Project Name: ADA Bus Stop Review and Design

STIP/TIP #: TP-5157

Jurisdiction/Agency: Chapel Hill Transit

WBS # or Federal Aid #:

Munis Grant #:

Proposed Project Schedule and Funding: Enter the full proposed project schedule and funding.

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
2019	Operations	5310	\$20,000	\$0	\$20,000	\$40,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$20,000	\$0	\$20,000	\$40,000

Total Project
Cost

Please provide previous STIP/TIP # (if applicable):

If this project has been added to the NCDOT STIP, please provide date of STIP action, or Split Letter, etc. and attach supporting information:

Please provide Project Description/Details/Termini/etc.:

Please provide any additional details or explanation related to this project (if applicable):

The project will review existing bus stops in Chapel Hill and Carrboro for compliance with ADA and provide all necessary design work to make stops more accessible for seniors and persons with disabilities.

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TIP Amendment Request - Revise An Existing Project

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Date: 8-13-18

Amendment Requested By: DCHC MPO

Existing Project Details

Project Name: Durham County Access Onboard Access

STIP/TIP #: TQ-3001

Jurisdiction/Agency: Durham County

WBS or Local ID or Federal Aid #:

MUNIS #:

Existing Project Schedule and Funding: Enter the most current project information.

Use the MPO database: bitly.com/mpoprojects

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$0	\$0	\$0	\$0

Total Project
Cost

Proposed Project Schedule and Funding: Enter the full proposed project schedule & funding.

In many cases, the current project information from the above table will be re-entered at the top of the Proposed Table to represent FULL project information.

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
2019	Capital	5310	\$100,000	\$0	\$25,000	\$125,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$100,000	\$0	\$25,000	\$125,000

Total Project
Cost

TIP Amendment Request - Revise An Existing Project

Project Details - Continued

Please provide previous STIP/TIP # or new STIP/TIP # (if applicable):

If this amendment has already been reflected in the NCDOT STIP, please provide date of STIP action and attach supporting information:

Project Description/Details/Termini/etc. to be amended (if applicable):

Please provide additional details or explanation related to this amendment request such as explanation for schedule delays, project cost changes, or other supporting information (if applicable). For example, why is this amendment being requested?

The project will purchase demand-response service for residents of Durham County to destinations for health and health-related, work and personal needs. This amendment adds 5310 funds to the project for the upcoming fiscal year.

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Date: 8-13-18

Amendment Requested By: DCHC MPO

Existing Project Details

Project Name: Orange County STEAMM

STIP/TIP #: TQ-3002

Jurisdiction/Agency: Orange County

WBS or Local ID or Federal Aid #:

MUNIS #:

Existing Project Schedule and Funding: Enter the most current project information.

Use the MPO database: bitly.com/mpoprojects

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
Prior Year	Capital	5310	\$240,800	\$0	\$60,200	\$301,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$240,800	\$0	\$60,200	\$301,000

Total Project
Cost

Proposed Project Schedule and Funding: Enter the full proposed project schedule & funding.

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FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
Prior Year	Capital	5310	\$240,800	\$0	\$60,200	\$301,000
2019	Capital	5310	\$110,000	\$0	\$27,500	\$137,500
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$350,800	\$0	\$87,700	\$438,500

Total Project
Cost

TIP Amendment Request - Revise An Existing Project

Project Details - Continued

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please provide date of STIP action and attach supporting information:

Project Description/Details/Termini/etc. to be amended (if applicable):

Please provide additional details or explanation related to this amendment request such as explanation for schedule delays, project cost changes, or other supporting information (if applicable). For example, why is this amendment being requested?

The project supports an aging-related mobility manager responsible for educating older adults about public transit, expand and manage a volunteer driver program, and purchase service from transportation operators to provide access to community services. This amendment adds 5310 funds to the project for the upcoming fiscal year



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Date: 8-13-18

Amendment Requested By: DCHC MPO

Existing Project Details

Project Name: EZ Rider Senior Shuttle

STIP/TIP #: TQ-6104

Jurisdiction/Agency: Chapel Hill Transit

WBS or Local ID or Federal Aid #:

MUNIS #:

Existing Project Schedule and Funding: Enter the most current project information.

Use the MPO database: bitly.com/mpoprojects

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
2018	Operations	5310	\$120,000	\$0	\$120,000	\$240,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$120,000	\$0	\$120,000	\$240,000

Total Project
Cost

Proposed Project Schedule and Funding: Enter the full proposed project schedule & funding.

In many cases, the current project information from the above table will be re-entered at the top of the Proposed Table to represent FULL project information.

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
2018	Operations	5310	\$120,000	\$0	\$120,000	\$240,000
2019	Operations	5310	\$120,000	\$0	\$120,000	\$240,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$240,000	\$0	\$240,000	\$480,000

Total Project
Cost

TIP Amendment Request - Revise An Existing Project

Project Details - Continued

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Project Description/Details/Termini/etc. to be amended (if applicable):

Please provide additional details or explanation related to this amendment request such as explanation for schedule delays, project cost changes, or other supporting information (if applicable). For example, why is this amendment being requested?

Chapel Hill Transit (CHT) will provide feeder service to the elderly and disabled population in the Chapel Hill/Carrboro area with the CHT EZ Rider Senior Shuttle service. This amendment adds 5310 funds to the project for the upcoming fiscal year.

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There are previous
amendments to
this project.

Date: 8-13-18

Amendment Requested By: DCHC MPO

Existing Project Details

Project Name: DCHC MPO 5310 Admin

STIP/TIP #: TQ-7002

Jurisdiction/Agency: DCHC MPO

WBS or Local ID or Federal Aid #:

MUNIS #:

Existing Project Schedule and Funding: Enter the most current project information.

Use the MPO database: bitly.com/mpoprojects

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
Prior Year	Admin	5310	\$28,390	\$0	\$0	\$28,390
2018	Admin	5310	\$48,000	\$0	\$0	\$48,000
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$76,390	\$0	\$0	\$76,390

Total Project
Cost

Proposed Project Schedule and Funding: Enter the full proposed project schedule & funding.

In many cases, the current project information from the above table will be re-entered at the top of the Proposed Table to represent FULL project information.

FY	Phase/Work	Funding Source	Federal Share	State Share	Local Share	Total
Prior Year	Admin	5310	\$28,000	\$0	\$0	\$28,000
2018	Admin	5310	\$48,000	\$0	\$0	\$48,000
2019	Admin	5310	\$42,958	\$0	\$0	\$42,958
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
Funding Totals:			\$118,958	\$0	\$0	\$118,958

Total Project
Cost

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Project Details - Continued

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If this amendment has already been reflected in the NCDOT STIP,
please provide date of STIP action and attach supporting information:

Project Description/Details/Termini/etc. to be amended (if applicable):

Please provide additional details or explanation related to this amendment request such as explanation for schedule delays, project cost changes, or other supporting information (if applicable). For example, why is this amendment being requested?

Provides DCHC MPO with funds to administer the 5310 program. This amendment adds 5310 funds to the project for the upcoming fiscal year.

Please email completed form and any supporting documents to DCHC MPO TIP manager. Please follow-up with TIP manager to confirm receipt of form.