

PROJECT REQUEST FORM

1) Project Name:	SR3011 Spring Creek Bridge (Segment 110)		
2) Project Location:	Houserville Road over Spring Creek near Creekside Drive		
3) Applicant:	College Township		
4) Contact Person:	Kent Baker, Township Engineer		
5) Phone:	(814)231-3021		
6) Fax:	(814)231-3020		
7) Email:	kbaker@collegetownship.org		
8) Mailing Address:	1481 East College Avenue		
9) City:	State College, PA	10) Zip Code:	16801

11) Project Type (please check only one):		
A) Bicycle/Pedestrian Facility		Route #:
B) Bridge – Local System		Route #:
C) Bridge – State System	X	Route #: SR 3011
D) Highway		Route #:
E) Public Transportation		Route:
F) Rail		Line:
G) Other		

12) Please attach a location map and photo(s). <i>*8.5 x 11 maps are preferred and please submit no more than 3 photos*</i>

13) Please provide a brief (one or two sentence) description of the project : Replacement of bridge over Spring Creek near the Spring Creek Estates subdivision

14) Please describe the project being requested, specifically what issues/problems are present and how this project will improve conditions: Bridge is rated as structurally deficient.

SAFETY & SECURITY

Do you believe this project will:

15) Reduce crash rate?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

16) Reduce conflicts between motorized and non-motorized transportation modes (Pedestrian/Bicycle/Buggy)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain and note if a pedestrian/bicycle/buggy amenity will be maintained or added as part of the project:</i>			

17) Improve intersection(s) and/or roadway alignment(s)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain and note the intersection(s) that will be affected:</i>			

18) Improve the security of the traveling public (Ex. Improves upon incident response, establishes detour/evacuation routes, implements security features on public transportation vehicles and facilities)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

PRESERVATION OF THE EXISTING TRANSPORTATION SYSTEM

Do you believe this project will:

19) Prolong the useful life of the transportation system and infrastructure through reconstruction, rehabilitation and preventative maintenance?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

20) Rehabilitate and modernize public transportation facilities or fleet?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

21) Improve ride quality?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain and provide current International Roughness Index:</i>			

EFFICIENT SYSTEM MANAGEMENT & OPERATION

Do you believe this project will:

22) Reduce congestion, improve Level of Service and reduce travel times within the project area?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain and note how this project may impact adjacent routes/travel patterns:</i>			

23) Increase public transportation service frequency and capacity?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

24) Improve system functionality through improvements such as signal upgrades, Intelligent Transportation System applications and access management approaches?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

INTEGRATION & CONNECTIVITY OF THE TRANSPORTATION SYSTEM

Do you believe this project will:

25) Eliminate/overcome barriers (Ex. Closures, detours & delays, weight restrictions) in key corridors?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain and note official detour distances based on factors such as weight restrictions:</i>			

26) Establish/maintain intermodal connections?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

27) Introduce new connections between existing travel patterns (Ex. Street connectivity, linking bicycle/pedestrian routes, connections between transit routes and providers)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

28) Align residents with their destinations?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

ACCESSIBILITY & MOBILITY OPTIONS FOR PEOPLE & FREIGHT

Do you believe this project will:

29) Improve public transportation services: routes, ride share opportunities, vanpools, and park & ride lots?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain and include projected ridership:

30) Improve pedestrian and bicycle facilities?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain:

31) Improve access to airports, freight distribution facilities or major industrial districts?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain:

32) Implement Complete Streets principles?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain:

CONSISTENCY WITH PLANNED GROWTH & DEVELOPMENT AREAS

Do you believe this project will:

33) Be consistent with the following documents?			
A) County Comprehensive Plan	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
B) Regional Comprehensive Plan	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
C) Municipal Comprehensive Plan	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
D) Municipal Zoning Ordinance	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
E) Municipal Official Map	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes to any of the above, please explain:</i>			

34) Improve/support the existing transportation infrastructure in existing & planned growth areas?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

35) Promotes Smart Growth Principles (Ex. walkable communities, fosters distinct communities & sense of place, supports integration of mixed land uses into communities)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

36) Avoid negative impacts on communities and the environment?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

ENVIRONMENT & AIR QUALITY CONFORMITY

Do you believe this project will:

37) Improve air quality	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

38) Promote energy conservation?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

39) Avoid impacts on endangered or threatened species, key natural habitats, agricultural lands and historic & cultural resources?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain:</i>			

40) Avoid impacts upon water resources (Ex. water recharge areas & exceptional value/high quality streams?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
<i>If yes, please explain and note which water resources may be affected:</i>			

ECONOMIC VITALITY

Do you believe this project will:

41) Improve access and/or enhance freight movement to regional & national economic centers?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain:

42) Encourage tourism?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain:

43) Encourage infill development, the redevelopment of brownfield sites within reach of existing infrastructure & the overall redevelopment of core communities?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
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If yes, please explain:

PRIORITY

44) Is this your highest priority (#1) project?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A
<i>Highest priority projects will be granted a half-point (0.5) bonus. Entities requesting projects may submit only one highest priority project.</i>			

45) If this is not your #1 priority, what rank did you assign this project?	MEDIUM
<i>Municipalities may submit as many projects as they wish. The CCMPO requests that you rank all of your candidate projects.</i>	

COST

46) What is the total estimated cost?	\$1.3 Million (rough est.)
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47) What is the cost by project phase, if known?	
A) Preliminary Engineering	
B) Final Design	
C) Utilities	
D) Right of Way	
E) Construction	