PROJECT INITIATION CHECKLIST

Project Name: _____

Requested Dept: **_____**   **DPW File #**: _____

Division (e.g., Engineering, Traffic, Operations, etc.): _____

Project Manager: _____

Project Description: _____

Is this project included in current CIP Report done by PW?   Yes / **N**o   If Yes, what page #:_____

Category (e.g., Traffic, Streets, Drainage, City-Owned Property, etc.): _____

Does the project **R**epair an existing structure or **A**dd/**P**rolong useful life?   Circle One: **R** or **A/P**

Estimated Council Report Date to Appropriate Design Funds **(Required)**:   _____

Estimated Council Report Date to Appropriate Construction Funds **(Required)**:   _____

FINANCIAL BUDGET:

  Design Cost Estimate: $ _____

  Construction Cost: $ _____

Funding Source (e.g., Gas Tax, Stormwater Fees, Traffic Mitigation Fees, etc.): _____

Grant Funded? **Y**es/ **N**o   Grant Amount (**Required *Grant Document***): $ _____

Grantor (e.g., Caltrans, MTC, Measure A, Prop 42, Federal, State, etc.):   _____

City Match Amount: $ **_____**

City Match Source (e.g., Gas Tax, Stormwater Fees, Traffic Mitigation Fees, etc.): _____