Print Form

# Municipal Road and Bridge Revolving Loan Fund Project Loan Application For 2016

**Rhode Island Infrastructure Bank**

*Formerly*

*RI Clean Water Finance Agency*

## CONTACT

**Contact Information**

Municipality _____

Contact Person _____

Address _____

City _____ Rhode Island Zip Code _____

Phone _____ Email _____

## PROJECT INFORMATION

**Project Information**

Project Title _____

Location by Street Name _____

Project Limits - From _____ To _____

Location Maps - ☐ 8 1/2" x 11" Attach Map of Site Indicating Project Limits

Brief Description of Proposed Project (Include project's anticipated useful life)
(Use additional sheet if necessary)

Does the municipality have borrowing authority for the full amount of this project? ☐
If no, please explain how you intend to get the authority. If yes, please attach proof of authority.

**Project Estimates**

| | ROW | Study | Design | Construction | Total |
|---|---|---|---|---|---|
| Estimated Project Costs | | | | | |
| | | | | Total Cost | |
| | | | | Amount of Loan Requested | |

Funding from other sources committed to this project - ☐ Yes ☐ No

| Source | Amount |
|---|---|
| | |
| | |
| Total | |

## Legislative Criteria

Explain how the project meets the legislative criteria listed below. Use this form or provide the explanation on a separate sheet. Submissions must not exceed 2 pages, single spaced, 12-point font.

1. The extent to which the project generates economic benefits:

2. The extent to which the project would be able to proceed at an earlier date:

3. The likelihood the project would provide mobility benefits:

4. The cost effectivenes of the project:

5. The likelihood that the project would increase safety:

6. The project's readiness to proceed within the forthcoming calendar year:

SIGNATURE

## Certification/Signature

Attest: The information provided on this application is true and accurate

Applicant's Signature _____ Date _____

Chief Executive Official's Signature _____ Date _____

ADMINISTRATIVE

**Application Checklist** - received by ***October 15, 2015*** at 3:00 p.m.

- ☐ 5 Collated Copies of Completed Application
  - Forms - Project Application
  - Attached 2-page narrative (if used)
  - Location Maps
- ☐ **Mail to:**
  **Rhode Island Department of Transportation**
  **ATTN: Meredith Brady**
  **Two Capitol Hill, Room 214A**
  **Providence, RI 02908**

Official Use Only

Submission Date _____

Accepted by _____