

FY 20__ PROJECT SUMMARY – FERRY BOAT FORMULA PROGRAM

INSTRUCTIONS: Complete and return it to the Michigan Department of Transportation

NAME OF APPLICANT (Legal Organization Name)

CONTACT INFORMATION (Applicant's Name, Address, Telephone Number and Email)

PROJECT DESCRIPTIONS

CAPITAL BUDGET (Estimated \$ amounts) 80% Federal/ 20% Local (*only enter dollar amount in the Total area*)

Project # 1	Federal:	Local:	Total:
Project # 2	Federal:	Local:	Total:
Project #3	Federal:	Local:	Total:
Total:			

PROJECT MILESTONE SCHEDULE: Identify the **estimated** dates (mm/dd/yyyy) for work to be accomplished with these funds assuming funds are available 5/1/2015. If you have more than one project with different milestone schedules, please list the milestone for each project.

Projects	RFP Issued	Contract Awarded	Construction/Purchase Complete	Contract Complete
Project #1				
Project #2				
Project #3				

CERTIFICATIONS

- | | |
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| <input type="checkbox"/> Capital equipment will be used over its useful life

<input type="checkbox"/> Ferry boat or terminal is publicly owned or operated

<input type="checkbox"/> Fares are applied to necessary costs of operation, maintenance, and repair, debt service, negotiated management fee, and, in the case of a privately operated toll ferry, for a reasonable rate of return | <input type="checkbox"/> Grant funds will be used solely to implement the specific project

<input type="checkbox"/> Operating authority and amount of fares charged are under control of public entity |
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