



Fairbanks North Star Borough

DEPARTMENT OF PUBLIC WORKS
Rural Services Division

ruralservices@fnsb.us
Main: (907)459-1223
Fax: (907) 459-1499

Project Request Form

Service Areas are encouraged to breakup projects having an estimated cost in excess of \$500,000 into multiple projects (Phase 1, Phase 2) with costs below the grant limit.

Service Areas are also encouraged to combine small projects with similar improvements into larger projects. Projects with an estimated cost of less than \$20,000 will not be considered.

If necessary, attach additional pages to explain important details and the Service Area Commissions priority selection for this project request.

All areas of information are necessary for project submittals. Please complete all sections of this form to the best of your ability.

1. Service Area: _____

2. Road(s): _____

3. Provide a brief, but adequate description of what the Service Area Commission believes this project should entail:

4. Has this project been discussed at a publicly noticed service area meeting? ____ Yes ____ No

5. Do the minutes of the meeting above reflect an understanding of this project by residents in attendance that is consistent with the project description above? ___ Yes ___ No
6. Length of improvement is entire road, or portion of road with approximate length of _____ feet **or** _____ miles.
7. Funds for individual projects are limited to \$500,000. If this project is selected and exceeds this amount, is the service area willing to provide the additional funds? ___ Yes ___ No
8. If this project is selected and exceeds the \$500,000 amount, is the service area willing to modify scope of the project to reduce the project amount? ___ Yes ___ No
- | | |
|---------------------------------|---|
| 9. Existing Road(s) Conditions: | 10. Existing Road(s) Concerns |
| ___ paved, drivable year round | ___ steep approach to intersection |
| ___ gravel, drivable year round | ___ poor sight visibility at intersection |
| ___ dirt, drivable year round | ___ bus route |
| ___ 4wd/Awd only year round | ___ dust control |
| ___ 4wd/Awd only during breakup | ___ accessibility |
| ___ not drivable during breakup | ___ spring breakup |
| ___ no existing road | ___ other _____ |
| ___ other _____ | |

11. Priority of this project compared to other projects the service area submitted for this program: first (1st) priority second (2nd) priority

12. Ranking Criteria:

- a. Safety Deficiency: Provide pertinent data on safety issues. Is there a history of accidents involving life, injury, or property damage? Are there design or condition deficiencies,

such as improper construction, insufficient base material, incorrect road width, limited sight distance or acute alignment of intersection? Is there a history of resident complaints?

b. Accessibility: What accessibility issues exist for this road? Are there problems with year-round or seasonal accessibility? Are there problems with emergency response or school bus services?

c. Maintenance and Operational Cost Reduction: Will this project reduce the maintenance and operations costs? If so, explain and estimate the reduction.

d. Traffic Volume / Road Designation: Estimate the average daily traffic (ADT) volume on this road. Is there “cut through” traffic (traffic originating from outside the service area) on this road? If so, what percentage of the ADT does this represent? Is there heavy use by commercial vehicles, gravel trucks, recreational vehicles, etc.?

13. How will this project benefit the service area? _____

14. Please explain any other details pertinent to this request: _____

15. Commissioner Signatures:

Signature

Date

Signature

Date

Signature

Date