

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
 PROJECT PROGRAMMING REQUEST  
 DTP-0001 (Revised Mar, 1 2018 v7.08)

General Instructions

Amendment (Existing Project) Y/N				Date:	11/14/19
District	EA	Project ID	PPNO	MPO ID	Alt Proj. ID / prg.
01		0119000089	2002P		
County	Route/Corridor	PM Bk	PM Ahd	Project Sponsor/Lead Agency	
HUM				Humboldt County Association of Governments	
				MPO	Element
				Non-MPO	LA
Project Manager/Contact		Phone		E-mail Address	
Marcella Clem		(707)444-8208		marcella.clem@hcaog.net	
<b>Project Title</b>					
Planning, Programming and Monitoring					
<b>Location (Project Limits), Description ( Scope of Work)</b>					
Planning, programming and monitoring					
<b>Component</b>					
Implementing Agency					
PA&ED					
PS&E					
Right of Way					
Construction Humboldt County Association of Governments					
<b>Legislative Districts</b>					
Assembly:	2	Senate:	2	Congressional:	2
<b>Project Benefits</b>					
<b>Purpose and Need</b>					
<b>Category</b>		<b>Outputs/Outcomes</b>		<b>Unit</b>	<b>Total</b>
ADA Improvements N		Bike/Ped Improvements N		Reversible Lane analysis N	
Inc. Sustainable Communities Strategy Goals N		Reduces Greenhouse Gas Emissions N			
<b>Project Milestone</b>				<b>Existing</b>	<b>Proposed</b>
Project Study Report Approved					
Begin Environmental (PA&ED) Phase					
Circulate Draft Environmental Document					
Draft Project Report					
End Environmental Phase (PA&ED Milestone)					
Begin Design (PS&E) Phase					
End Design Phase (Ready to List for Advertisement Milestone)					
Begin Right of Way Phase					
End Right of Way Phase (Right of Way Certification Milestone)					
Begin Construction Phase (Contract Award Milestone)					
End Construction Phase (Construction Contract Acceptance Milestone)					
Begin Closeout Phase					
End Closeout Phase (Closeout Report)					

ADA Notice

For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 654-6410 or TDD (916) 654-3880 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento,

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**Additional Information**

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District	County	Route	EA	Project ID	PPNO	Alt. ID
01	HUM, ,	, ,		0119000089	2002P	
Project Title: Planning, Programming and Monitoring						

Existing Total Project Cost (\$1,000s)									Implementing Agency
Component	Prior	20-21	21-22	22-23	23-24	24-25	25-26+	Total	
E&P (PA&ED)									
PS&E									
R/W SUP (CT)									
CON SUP (CT)									Humboldt County Association of
R/W									
CON	3,349	103	150	150				3,752	Humboldt County Association of
TOTAL	3,349	103	150	150				3,752	
Proposed Total Project Cost (\$1,000s)									Notes
Component	Prior	20-21	21-22	22-23	23-24	24-25	25-26+	Total	
E&P (PA&ED)									
PS&E									
R/W SUP (CT)									
CON SUP (CT)									
R/W									
CON	3,349	155	100	100	100	114		3,918	
TOTAL	3,349	155	100	100	100	114		3,918	

Fund No. 1:	RIP - State Cash (ST-CASH)								Program Code
	Existing Funding (\$1,000s)								20.30.600.670
Component	Prior	20-21	21-22	22-23	23-24	24-25	25-26+	Total	Funding Agency
E&P (PA&ED)									Humboldt County Association of G
PS&E									\$98 CON voted 07/16/98
R/W SUP (CT)									\$131 CON voted 08/31/99
CON SUP (CT)									\$104 CON voted 07/01/00
R/W									\$107 CON voted 07/02/01
CON	3,349	103	150	150				3,752	\$110 CON voted 06/26/03
TOTAL	3,349	103	150	150				3,752	\$100 CON voted 02/26/04
									\$110 CON voted 11/03/05
Proposed Funding (\$1,000s)									Notes
Component	Prior	20-21	21-22	22-23	23-24	24-25	25-26+	Total	
E&P (PA&ED)									
PS&E									
R/W SUP (CT)									
CON SUP (CT)									
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CON	3,349	155	100	100	100	114		3,918	
TOTAL	3,349	155	100	100	100	114		3,918	



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*Complete this page for amendments only*




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**SECTION 1 - All Projects**

<b>Project Background</b>
<b>Programming Change Requested</b>
<b>Reason for Proposed Change</b>
<b>If proposed change will delay one or more components, clearly explain 1) reason the delay, 2) cost increase related to the delay, and 3) how cost increase will be funded</b>
<b>Other Significant Information</b>

<b>SECTION 2 - For SB1 Projects Only</b>
Project Amendment Request (Please follow the individual SB1 program guidelines for specific criteria)

<b>SECTION 3 - All Projects</b>								
<b>Approvals</b>								
I hereby certify that the above information is complete and accurate and all approvals have been obtained for the processing of this amendment request.*								
<table border="1"> <thead> <tr> <th>Name (Print or Type)</th> <th>Signature</th> <th>Title</th> <th>Date</th> </tr> </thead> <tbody> <tr> <td>Marcella Clem</td> <td></td> <td>EXECUTIVE DIRECTOR</td> <td>11/14/19</td> </tr> </tbody> </table>	Name (Print or Type)	Signature	Title	Date	Marcella Clem		EXECUTIVE DIRECTOR	11/14/19
Name (Print or Type)	Signature	Title	Date					
Marcella Clem		EXECUTIVE DIRECTOR	11/14/19					

- Attachments**
- 1) Concurrence from Implementing Agency and/or Regional Transportation Planning Agency
  - 2) Project Location Map