

NDOT Support Checklist – Grants & Earmarks

When preparing federal grant applications for transportation improvement projects requesting that NDOT (a) provide a signed Letter of Support, (b) become a project funding partner, or (c) act as the lead grant applicant agency for the project, please fill out the following tables of information: 1. Project Information, 2. Grant/Earmark Information, 3. Funding Information, 4. Project Readiness, and 5. Project Benefits.

All checklist materials must be received at least 3 weeks prior to the grant due date to be considered.

Nature of Request :

- Earmark: Signed Letter of Support from Department** *Please include a Letter of Support template for your project.*
- Grant*: Signed Letter of Support from Department** *Please include a Letter of Support template for your project.*
- Grant*: Add Department as a Project Funding Partner**
- Grant: Request Department act as Lead Grant Applicant Agency**

*Applicants of federal grant opportunities must inform the [Nevada Governor’s Office of Federal Assistance \(OFA\)](#), by filling out a simple [Federal Assistance Notification Form](#) to provide Notice of Intent to Apply, Notice of Change in Award, Notice of Close Out of Award, Notice of Non-Award, and Notice of Award for each federal grant application. The Nevada Governor’s Office of Federal Assistance tracks federal grant applications and awards to increase the number of grant dollars Nevada receives, through various activities, including coordinating with Nevada’s federal delegation on grant-related initiatives. *Applicants that request the Department act as the Lead Grant Applicant Agency may skip this step.*

Executive Order 12372 Certification for Grants *(not required for Earmarks)*

- We certify that the Office of Federal Assistance (OFA) was notified of our Intent to Apply and that we will provide the Department with the State Application Identifier (SAI) Number when received.
- or-
- We request the Department act as the Lead Grant Applicant Agency *(as requested above.)*

Requestor Info

Requestor Agency	
Agency Project Manager	
Email	
Phone	

Consultant Info

Consultant Firm	
Consultant Project Manager	
Email	
Phone	

Please provide this completed form and required attachments to:

Melissa Chandler
 775-888-7170
 DOT Planning | Multimodal Program Development
mchandler@dot.nv.gov

1 Project Information		
Table cells expand with text entry. All fields required for Grants or Earmarks.		
1A	Lead Agency	
1B	Project Name	
1C	Project Type	
1D	Project Limits ¹	
1E	Project Description	
1F	Project Cost	

¹Please include a project location map with this checklist.

2 Grant/Earmark Information		
Table cells expand with text entry. All fields required, enter N/A as needed.		
2A	Grant Opportunity Number	
2B	Grant Opportunity Name	
2C	Submission Due Date	
2D	Grant Funding Statutory Deadline	
2E	Project Eligibility	
2F	Urban or Rural	
2G	Project Size ²	
2H	Grant Match Requirement	

²For Multimodal Project Discretionary Grant Opportunity only.

3 Funding Information		
Table cells expand with text entry. All fields required, enter N/A as needed.		
3A	Total Project Cost	
3B	Federal Request Dollars	
3C	Local Match Dollars Provided	
3D	Approved NDOT Match Funding ³	
3E	Requested NDOT Match Funding ⁴	
3F	Contingency Percentage	
3G	Funding Commitment ⁵	

³Previously approved NDOT match funding for project. In addition to the amount, provide your Department point-of-contact.

⁴Amount you are requesting from NDOT for project.

⁵Provide Commitment Letter or RTP/STIP number.

4 Project Readiness		
Table cells expand with text entry. All fields required, enter N/A as needed.		
4A	Project Documentation ⁶	
4B	Design Status	

4C	EA/NEPA Status	
4D	Right-of-Way Status	
4E	Construction Start Date	
4F	Potential Risks	

⁶ Identify the plan or study that provides the basis of the project.

5 Project Benefits⁷		
Table cells expand with text entry. All fields required for Grants or Earmarks		
5A	Enhance Safety	
5B	Preserve Infrastructure	
5C	Optimize Mobility	
5D	Transform Economies	
5E	Foster Sustainability	
5F	Connect Communities	

⁷ Describe how this project meets/serves NDOT’s One Nevada Transportation Plan (ONTP) goal areas. [One Nevada Goal Areas & Criteria](#) Use data justification where possible. Project is not required to meet all goal areas; state N/A if a particular goal area does not apply.

