



Fresno Council  
of Governments

# **Measure C TOD Program Cycle I**

## **Call for Projects Application Packet**

**January 13, 2012**

**2035 Tulare Street, Suite 201  
Fresno, CA 93721  
Tel: 559-233-4148  
Fax: 559-233-9645**

## **Overview**

The TOD program was created in the 2006 Measure C Extension Plan. As recommended by the Measure C legislation, a TOD Technical Advisory Committee developed guidelines to provide guidance on the implementation of the TOD program. The TOD Guidelines were approved by the Fresno COG Policy Board and the FCTA Board. A scoring committee membership was defined by the TOD Technical Advisory Committee and also approved by both Boards.

The Measure C TOD program will generate \$14.5 million during the 20 years based on the estimation in December 2010. There is approximately \$2.7 million available for the Cycle I call for projects.

Please refer to the TOD program Guidelines for project eligibility and scoring criteria.

## **Timeline**

January 26, 2012	Fresno COG Policy Board initiates Cycle I “Call for Projects”
February 29, 2012	Project submittals due
Early March (TBD)	TOD scoring committee meets
April 13, 2012	TTC/PAC approval of the selected project(s)
April 26, 2012	Fresno COG Policy Board approval of the selected project(s)

## **Contact Information**

Please submit all applications by 5:00 p.m. on February 29, 2012 and mail all correspondence to:

Kristine Cai  
Fresno Council of Governments  
2035 Tulare Street, Suite 201  
Fresno, CA 93721

# Capital Improvement Project Application

Project Title:

Sponsoring Jurisdiction:

Application Checklist:

- Twelve hard copies and 1 CD of the complete application
- Completed application form
- Board/Council resolution authorizing project application
- Vicinity maps showing project locations, entitled land developments related to the project, and local/regional streets, bicycle, transit and highway facilities within and near the project area
- Documentation of support for the project from community groups or individuals (highly encouraged)
- Aerial photo and/or other photographs showing existing conditions in the project area

## Person Authorized to Submit Application:

I certify that I have reviewed the TOD Capital Improvement Projects Program Guidelines and the information submitted in this application is accurate and in accordance with the guidelines.

Name:

Title:

Signature:

Date:

## **Project Summary**

1. Project Title
2. Project description: briefly describe the project goal, scope, and elements to be funded by the Measure C TOD program.
3. Total project cost
4. Total TOD fund request
5. Sponsoring jurisdiction
6. Primary contact person
7. Title
8. Address
9. Phone
10. E-mail
11. Other project partners

# Capital Improvement Project Description

## 1. Introduction

Please provide a description of project objectives, setting, and relationship of the proposed project to existing and planned infrastructures in the project area.

## 2. Nexus to Transit Oriented Development

Describe the nexus of the proposed project to transit oriented development. Through an existing policy or an adopted plan, explain how the project will boost transit ridership, encourage biking & walking and support a livable and viable transit oriented community.

## 3. Land Use Characteristics of the Project Area

Please provide demographic and business profile of the project area. Identify existing and planned residential density, employment intensity and industrial mixes if any in the project area. Please also identify, if applicable, any affordable housing that the project supports.

## 4. Transportation Characteristics of the Project Area

Please identify the distance of the proposed project to the nearest BRT station. Describe the transit, bike and walk environment in the project area, and explain, if applicable, how the proposed project will contribute to providing multi-modal transportation choice to people who live or work in the area.

## 5. Urban Design & Parking Policy

Describe the existing or planned design characteristics or policies in the project area. Explain, if applicable, how the project will contribute to creating a positive image of the surrounding areas.

Describe, if any, existing or planned parking policies that are transit friendly.

## 6. Green Building

Please describe, if applicable, any green building element in the project.

## 7. Quality of Project and Additional Information

Describe the level of community support for this project. Describe how the proposed project will address the issues in the community, how the project will help create a

sense of place, and potential economic impact such as attracting private investment in the project area, etc. Please also identify any potential obstacles to the successful completion of the entire project.

**8. Project Schedule and Scope of Work**

Please outline the scope of work for this project. Please briefly describe deliverables and anticipated completion dates for each deliverables. Please also provide estimates of project expenses funded by the TOD program, and project revenue for the entire project.

Project expenses (TOD fund)

Item	Amount
Engineering	
Environmental Documentation	
Right of Way	
Construction	

Project Revenue (all sources)

Source	Year			
	Year 1 (\$)	Year 2 (\$)	Year 3 (\$)	Year 4 (\$)
TOD				
Local				
State				
Federal				
Private				
Total				

## Planning Program Project Application

Project Title:

Sponsoring Jurisdiction:

Application Checklist:

- Twelve hard copies and 1 CD of the complete application
- Completed application form
- Board/Council resolution authorizing project application
- Vicinity maps showing project locations, and local/regional streets, bicycle, transit and highway facilities within and near the project area
- Documentation of support for the project from community groups or individuals (highly encourage)
- Aerial photo and/or other photographs depicting existing conditions in the project area

### Person Authorized to Submit Application:

I certify that I have reviewed the TOD Planning Program Guidelines and the information submitted in this application is accurate and in accordance with the guidelines.

Name:

Title:

Signature:

Date:

## **Project Summary**

1. Project Title
2. Project description: briefly describe the project goal, scope, and elements to be funded by the Measure C TOD program.
3. Total project cost
4. Total TOD fund request
5. Sponsoring jurisdiction
6. Primary contact person
7. Title
8. Address
9. Phone
10. E-mail
11. Other project partners

# **Planning Project Description**

## **1. Introduction**

Please provide a description of project objectives, setting, and relationship of the proposed project to existing and planned land uses and transportation facilities in the project area.

## **2. Nexus to Transit Oriented Development**

Please describe the nexus of the proposed project to transit oriented development. Explain how the project will boost transit ridership, encourage biking & walking and facilitate a livable and viable transit oriented community.

## **3. Planning Elements**

Please describe how the planning elements (land use, transportation, urban design, affordable housing, green building and parking) as outlined in the planning project evaluation will be addressed in the proposed project. Please outline specific deliverables that will be developed (e.g. market analysis, form-based code, land use alternative, parking strategies, design standards, etc.).

## **4. Plan Implementation**

Please describe the implementation strategies for the proposed planning project. Will this planning project lead to programming of any infrastructure projects, zoning changes, or general plan amendment? Please identify any potential obstacles to successful implementation of the plan.

## **5. Community Support**

Please describe the level of interest from developers, and the extent of community support for the proposed planning efforts, and how the plan will address the issues in the community and help create a sense of place.

## **6. Project Schedule and Scope of Work**

Please outline the scope of work for the proposed planning efforts. Please briefly describe deliverables and anticipated completion dates for each deliverables. Please also provide estimates of project expenses funded by the TOD program by deliverables, and project revenue for the entire project.

Project expenses (TOD fund)

Item	Amount
Deliverable 1	
Deliverable 2	
Deliverable 3	
Deliverable 4	

Project Revenue (all sources)

Source	Year			
	Year 1 (\$)	Year 2 (\$)	Year 3 (\$)	Year 4 (\$)
TOD				
Local				
State				
Federal				
Private				
Total				

## Housing In-fill Incentive Program Project Application

Project Title:

Sponsoring Jurisdiction:

Application Checklist:

- Twelve hard copies and 1 CD of the complete application
- Completed application form
- Board/Council resolution authorizing project application
- Vicinity maps showing project locations, and local/regional streets, bicycle, transit and highway facilities within and near the project area
- Documentation of support for the project from community groups or individuals (highly encouraged)
- Aerial photo and/or other photographs depicting existing conditions in the project area

### Person Authorized to Submit Application:

I certify that I have reviewed the TOD Housing In-fill Incentive Program Guidelines and the information submitted in this application is accurate and in accordance with the guidelines.

Name:

Title:

Signature:

Date:

## **Project Summary**

1. Project Title
2. Project description: briefly describe the project setting, and its relationship to existing and planned land use and transportation facilities in the project area.
3. Total TOD fund request
4. Sponsoring jurisdiction
5. Primary contact person
6. Title
7. Address
8. Phone
9. E-mail
10. Other project partners

# Housing In-fill Project Description

## 1. Introduction

Please provide a description of project objectives, setting, and relationship of the housing project to existing and planned land use and transportation facilities within and near the project area.

## 2. Nexus to Transit Oriented Development

Please provide total housing units and average density of the project. Explain the nexus of the housing project to transit oriented development and identify the project's transit oriented elements such as accessibility to transit, level of mix uses in the project area, design, etc.

## 3. Use of TOD Fund

Please describe how the incentive funding will be expended. Provide details on the project/program the incentive funding will be expended on.

## 4. Affordable Housing

Please identify, if applicable, percentage of affordable housing in the project.

## 5. Green Building

Please describe, if applicable, any green building element in the project.

## 6. Project Schedule and Scope of Work

If the incentive money is to be expended on capital improvement projects, please outline the scope of work for this project. Please briefly describe deliverables and anticipated completion dates for each deliverables. Please also provide estimates of project expenses funded by the TOD program, and project revenue for the entire project.

Project expenses (TOD fund)

Item	Amount
Engineering	
Environmental Documentation	
Right of Way	
Construction	

Project Revenue (all sources)

Source	Year			
	Year 1 (\$)	Year 2 (\$)	Year 3 (\$)	Year 4 (\$)
TOD				
Local				
State				
Federal				
Private				
Total				