

**NCDOT Public Transportation Division
Project Funding Request Form**

DATE SUBMITTED:
APPLICANT'S LEGAL NAME:
BUDGET TYPE:
MPO Affiliation:
RPO Affiliation:
NCDOT Division Number:

GENERAL INFORMATION	
Mailing Address:	<input type="text" value="220 Swinburne Street, Raleigh NC 2761"/>
Physical Address:	<input type="text" value="220 Swinburne Street, Raleigh NC 2761"/>
Contact Person:	<input type="text" value="Anita Davis"/>
Phone Number:	<input type="text" value="919-250-3829"/>
FAX Number:	<input type="text" value="919-212-7667"/>
Email Address:	<input type="text" value="anita.davis@wakegov.com"/>

FISCAL YEAR	<input type="text" value="2019"/>
FEDERAL FUNDS	<input type="text"/>
STATE FUNDS	<input type="text" value="\$414,368"/>
LOCAL FUNDS	<input type="text" value="\$46,041"/>
TOTAL REQUEST	<input type="text" value="\$460,409"/>

FOR OFFICE USE ONLY	
PREPARED BY:	<input type="text"/>
REQUEST RECOMMENDATION OR REJECTION	<input type="text" value="Click here"/>

PROJECT LOCATION:	<input type="text" value="Wake County"/>
SMALL URBAN	<input type="text" value="NO"/>
RURAL	<input type="text" value="YES"/>
PREVIOUSLY FUNDED?	<input type="text" value="YES"/>

PROJECT / PROGRAM DESCRIPTION:

PROJECT / PROGRAM BENEFITS:

RESULT OF PROJECT / PROGRAM IF NOT FUNDED:

