

GPN Number: 019-23	Date of Notification:	03/13/2023	
(Completed by Finance Departmen		(MM/DD/YYYY)	
Parent Committee Agenda Date (Completed by Finance Departmen		03/20/2023 (MM/DD/YYYY)	
Name of Grant:	US CFP - (Community Project Fund) - Naperville Rd & Ro	oosevelt Rd	
Name of Grantor:	U.S. Department of Transportation	l	
Originating Entity:	(Name the entity from which the funding originates, if Grantor is a pass-th	nru entity)	
County Department:	Division of Transportation		
Department Contact:	Lee Rivera, Civil Engineer, Ext. 6916 (Name, Title, and Extension)	<u> </u>	
Parent Committee:	Transportation		
Grant Amount Requested:	\$ 800,000.00		
Type of Grant:	Competitive (Competitive, Continuation, Formula, Project, Direct Payment, Other – Ple	ease Specify)	
Is this a new non-recurring Grar	nt:		
Source of Grant:	✓ Federal State Private] Corporate	
If Federal, provide CFDA:	If State, provide CSFA:		

1.	Justify the department's need for this grant.	
	IL Rt 38 (Roosevelt Rd) at CH23 (Naperville Rd) - Intersection improvements that include widening northbound and southbound dual left turn lanes on Naperville Road, lengthening both the eastbound westbound left turn lanes on Roosevelt Road, reconfiguration of the intersection of Roosevelt Road and Washington Street, right of way acquisition for a future shared-use path and traffic sign modernization will reduce traffic delays and reduce rear-end and turning accidents.	ound t
2.	Based on the County's Strategic Plan, which strategic imperative(s) correlate with funding opportunity. Probrief explanation.	vide a
	Quality of Life - The proposed project addresses the specific needs of safety, capacity, and roadway deficiencies. The purpose of the project is to provide safe and efficient vehicular operations at the Illin Route 38 (Roosevelt Road) intersection with Naperville Road (CH 23) for the existing and anticipated demand. By widening the existing pavement and adding the proposed auxiliary turn lanes, the new level-of-service will allow for better and safer traffic flow through the project corridor.	nois
3.	What is the period covered by the grant? to: to: (MM/DD/YYYY) (MM/DI	
	(MM/DD/YYYY) (MM/DI	D/YYYY)
	3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration	n:
	3.1.106/24and12/25(Duration)	
	(MM/YY) (Duration)	No
4.	Will the County provide "seed" or startup funding to initiate grant project? (Yes or No)	No
	4.1. If yes, please identify the Company-Accounting Unit used for the funding	

5. If grant is awarded, how is funding received? (select one):

5.2. After expenditure of costs (reimbursement-based)

6.	Does the grant al	Illow for Personnel Costs? (Yes or No)	No
	•	are the total projected salary and fringe benefit costs of personnel charging time to erm of the grant? Compute County-provided benefits at 40%.	the grant for
	6.1.1. Total sa	salary Percentage covered by grant	
	6.1.2. Total fr	fringe benefits Percentage covered by grant	
	6.1.3. Are any	ny of the County-provided fringe benefits disallowed? (Yes or No):	
	6.1.3.1.	If yes, which ones are disallowed?	
	6.1.3.2.	If the grant does not cover 100% of the personnel costs, from what Company-Ac will the deficit be paid?	counting Unit
	6.2. Will receipt	of this grant require the hiring of additional staff? (Yes or No):	<u> </u>
	6.2.1. If yes, h	how many new positions will be created?	
	6.2.1.1.	Full-time Part-time Temporary	
	6.2.1.2.	Will the headcount of the new position(s) be placed in the grant accounting unit	?(Yes or No
	6.2.1	1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed	•

	6.3. Does the grant award require the positions to be retained beyond the grant term? (Yes or No)			No
	6.3.1. If yes, pl	ease answer the following:		
	6.3.1.1.	How many years beyond the grant term?		
	6.3.1.2.	What Company-Accounting Unit(s) will be used?		
	6.3.1.3.	Total annual salary _		
	6.3.1.4.	Total annual fringe benefits		
7.	Does the grant allo	ow for direct administrative costs? (Yes or No)		No
7.1. If yes, please answer the following:				
	7.1.1. Total est	cimated direct administrative costs for project		
	7.1.2. Percenta	age of direct administrative costs covered by grant		
	7.1.3. What pe	ercentage of the grant total is the portion covered by the grant		
3.	What percentage of	of the grant funding is non-personnel cost / non-direct administr	ative cost?	100
Э.	Are matching fund	s required? (Yes or No):		Yes
	9.1. If yes, please	answer the following:		
	9.1.1. What pe	ercentage of match funding is required by granting entity?		20%
	9.1.2. What is the dollar amount of the County's match?		0.00	
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9.1.3.	What Company-Accounting Unit(s) will provide the matching requirement?	1500-3550-54040	
10. What amo	10. What amount of funding is already allocated for the project?		
10.1.	If allocated, in what Company-Accounting Unit are the funds located?	1500-3550-54040	
10.2.	Will the project proceed if the funding opportunity is not awarded? (Yes or	No): No	
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)?		\$1,000,000.00	