



Grant Proposal Notification

GPN Number: 006-24
(Completed by Finance Department)

Date of Notification: 01/05/2024
(MM/DD/YYYY)

Parent Committee Agenda Date: 01/16/2024
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 12/20/2023
(MM/DD/YYYY)

Name of Grant: Unified Work Program - Competitive Program

Name of Grantor: Chicago Metropolitan Agency for Planning (CMAP)

Originating Entity: Federal Highway Administration (FHWA)
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Division of Transportation

Department Contact: Sidney Kenyon, Senior Planner x6897
(Name, Title, and Extension)

Parent Committee: Transportation

Grant Amount Requested: \$ 100,000.00

Type of Grant: Competitive
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: ☒ Yes ☐ No

Source of Grant: ☒ Federal ☐ State ☐ Private ☐ Corporate

If Federal, provide CFDA: 20.205 If State, provide CSFA: _____



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1. Justify the department's need for this grant.

Division of Transportation is seeking grant funds to support a new bicycle and pedestrian plan. The proposed plan is a complement to the DuPage Mobility Framework, the DuPage Trails Plan, and the ADA Transition Plan. The Plan is proposed to be conducted in phases. In the first phase, grant funds will be used to hire a consultant to manage the public engagement process. All regional plans are to include disadvantaged, disabled, senior and linguistically disparate communities. DuDOT requires assistance to meet the federal requirements.

2. Based on the County's Strategic Plan, which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Quality of Life - DuDOT wishes to improve pedestrian and bicycle access and continuity with accommodations for senior and disabled members of society.

Diversity and Inclusion - DuDOT will uphold the federal requirements under the Justice40 initiative to include disadvantaged communities. The County will focus on overcoming language, economic and social barriers to reach communities that are in need of new or rehabilitated infrastructure.

3. What is the period covered by the grant?

07/01/2024 to: 06/30/2025
(MM/DD/YYYY) (MM/DD/YYYY)

- 3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
(MM/YY) (Duration)

4. Will the County provide "seed" or startup funding to initiate grant project? (Yes or 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):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront) ☐

5.2. After expenditure of costs (reimbursement-based) ☒



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6. Does the grant allow for Personnel Costs? (Yes or No) Yes
- 6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.
- 6.1.1. Total salary _____ Percentage covered by grant 0%
- 6.1.2. Total fringe benefits _____ Percentage covered by grant 0%
- 6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): 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-Accounting Unit will the deficit be paid?
- 6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No
- 6.2.1. If yes, 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)
- 6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?



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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, please 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 allow for direct administrative costs? (Yes or No)	Yes
7.1. If yes, please answer the following:	
7.1.1. Total estimated direct administrative costs for project	\$0.00
7.1.2. Percentage of direct administrative costs covered by grant	0%
7.1.3. What percentage of the grant total is the portion covered by the grant	0%
8. What percentage of the grant funding is non-personnel cost / non-direct administrative cost?	
9. Are matching funds required? (Yes or No):	Yes
9.1. If yes, please answer the following:	
9.1.1. What percentage of match funding is required by granting entity?	20%
9.1.2. What is the dollar amount of the County's match?	\$48,950.00

DuDOT is anticipating an over-match if awarded due to a very limited amount of funding in the region.



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9.1.3. What Company-Accounting Unit(s) will provide the matching requirement?	<u>1500-3500</u>
10. What amount of funding is already allocated for the project?	<u>\$0.00</u>
10.1. If allocated, in what Company-Accounting Unit are the funds located?	<u></u>
10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No):	<u>No</u>
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)?	<u>\$148,490.00</u>