

## CMAQ/TAP Cost Change Request Form

### Project Identification

TIP ID	13-19-0005	Sponsor	IDOT-D1
Project Location Description	Il 64 from Smith/Kautz to York Rd Contract 62N33		

### Currently Programmed Funding – Before cost change(s)

Phase	Programmed FFY	Programmed Total Cost (\$000's)	Programmed Federal Cost (\$000's)	Programmed Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG1	In-House	0	0	0	NA	State	<input checked="" type="checkbox"/>
ENG 2	FY 2022	2,436,000	1,948,804	80%	CMAQ	State	<input type="checkbox"/>
ROW	FY 2024	1,000,000	0	0	NA	State	<input type="checkbox"/>
CONST	FY 2025	5,889,000	4,711,000	80%	CMAQ	State	<input type="checkbox"/>
CE	FY 2025	701,000	561,000	80%	CMAQ	State	
Total		10,088,000	7,220,804	80%	CMAQ	State	

Phase	Programmed FFY	Programmed Total Cost (\$000's)	Programmed Federal Cost (\$000's)	Programmed Federal Share (%)	Federal Fund Source	Match Fund Source	Phase Accomplished*
ENG							<input type="checkbox"/>
IMP							<input type="checkbox"/>
Total		10,088,000	8,070,000	80%	CMAQ	State	

### Actual/Estimated Costs and Schedule – Including cost change(s)

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated federal authorization date**
ENG1							
ENG 2							
ROW							
CONST	FY 2025	11,232,000	8,985,600	80%	CMAQ	State	
CE	FY 2025	1,350,000	1,080,000	80%	CMAQ	State	
Total		12,582,000	10,065,600	80%	CMAQ	State	

Phase	Starting FFY	Current Total Cost (\$000's)	Current Federal Cost (\$000's)	Current Federal Share (%)	Federal Fund Source	Local Match Fund Source	Actual or Anticipated FTA Grant approval date***
ENG							
IMP							
Total							

## Requested Cost Changes (+/-)

Check all that apply: ☒ Cost Increase ☐ Transfer of Funds ☐ Reinstatement of Deferred Funds

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds(\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG1					
ENG 2					
ROW					
CONST	FY 2025	5,343,000	4,274,600	80%	
CE	FY 2025	649,000	519,000	80%	
<b>Total</b>		<b>5,992,000</b>	<b>4,793,600</b>		

Phase	Starting FFY	Additional Total Cost (\$000's)	Additional Federal CMAQ Funds (\$000's)	Revised Federal Share (%)	Transfer to/from phase(s)
ENG					
IMP					
<b>Total</b>					

## Reason for Request

Check here if the reason is a scope change ☐ and complete a [Scope Change Request](#) form.

- Recent high inflation was never anticipated and not accounted for resulting in the total project cost being much higher. The type of the work and the equipment that is needed for this project is highly specialized with very long lead times resulting in much higher prices.
- Phase I underestimated the cost. Just for comparison, I overlaid some of the big ticket items and how they compare with the initial Phase I estimate. Fiber / Networking is almost triple than what was originally estimated.
- Another big factor in the increase of the cost is the fact that nobody had good understating of what's required for this project. Not until recently, we didn't know exactly the equipment that is needed to make these systems work. Traffic has been refining the scope throughout Phase II plan development. With several similar projects recently let by traffic, we finally know how everything was supposed to work.
- Scope revisions to traffic signal. As indicated below, this section has also seen a big jump from Phase I estimate. This came as a result of higher prices and scope revisions to make the necessary upgrades as requested by Traffic.

## State and Federal Project Information

Select One.

☐ State/Federal Project or Grant Numbers Provided Below

- ☐ Most recently *approved* PPI Form Attached
- ☐ Local Agency Agreement Attached

Phase	State Job Number X-00-000-00	Federal Project Number XXX-0000(000)	FTA Grant Number IL-XX-XXXX-XX
ENG1	P-91-140-17		
ENG 2	D-91-081-21		
ROW	R-90-037-22		
CONST	C-91-108-21	1DXU(858)	
ENG			
IMP			

### Additional Comments

Please see attached Document.

## Project Identification

Provide the project identification exactly as it appears in the CMAQ or TAP programs. The current CMAQ Program Summary Report can be found on the CMAQ Program Management and Resources page of the CMAP website (<http://www.cmap.illinois.gov/mobility/strategic-investment/cmaq/program-management-resources>). Individual project line items are listed alphabetically by sponsor in the year in which they are programmed.

## Currently Programmed Funding – Before cost change(s)

Provide the current programmed funding for all phases, regardless of the fund source used/programmed for that phase. The FFY and costs for CMAQ line items must match the [current CMAQ Program](#), including any previously approved cost changes. For deferred phases, the programmed year should be entered as MYB. All line items funded with other sources should match the [TIP](#), however phases not included in the TIP (for example locally funded engineering) should also be included here. Enter N/A for ROW or CE if no ROW or CE is required for the project.

Complete the table that is appropriate for the type of project. Insert additional rows in the table if more than one fund source is being used for a phase, or if funding is “staged” in multiple federal fiscal years. Each row should include one fund source and one FFY.

\*Definitions of accomplishment can be found in the [CMAQ Programming and Management Policies](#).

## Actual/Estimated Costs and Schedule – Including cost change(s)

Enter the actual costs included in the most recent Engineer’s Estimate for every phase of the project, including phases that are complete and/or authorized, and the current project schedule. For accomplished phases, enter the actual cost and date of federal authorization or grant approval. Enter N/A for ROW or CE if no ROW or CE is required for the project.

Complete the table that is appropriate for the type of project. Insert additional rows in the table if more than one fund source is being used for a phase, or if funding is “staged” in multiple federal fiscal years. Each row should include one fund source and one FFY.

\*\*For the construction phase, enter the letting date. For other phases, the authorization date is typically the date the Local Agency Agreement is executed by IDOT Central Office. For phases not using federal funds, enter the estimated start date of the phase.

\*\*\*Some non-traditional projects (such as the purchase of bicycle racks) may be ENG/IMP projects processed through IDOT. For these projects, enter the federal authorization date.

## Requested Cost Changes (+/-)

Enter the changes (positive and negative) to the total cost of each phase and the CMAQ funding requested (difference between currently programmed funds and actual/estimated cost). If any line is the same as the currently programmed funding, enter zeroes. To request a transfer of funds from one phase to another, enter negative values in the phase funds are being transferred from and enter the phase(s) funds are being transferred to in the “Transfer to/from phase(s)” column. In the row for the phase accepting the transferred funds, enter the amount transferred and the phase it is being transferred from. If you are requesting an increase in addition to a transfer, please use separate rows for the transferred amount and the new funding being requested.

Complete the table that is appropriate for the type of project. Insert additional rows in the table if more than one fund source is being used for a phase, or if funding is “staged” in multiple federal fiscal years.

## **Reason for Request**

Briefly describe the reason for the cost change (this information will be used to develop the PSC agenda).

## **State and Federal Project Information**

State and/or Federal identification must be provided below or via an attached Project Program Information (PPI) Form or Local Agency Agreement for Federal Participation (BLR 5310). Enter TBD if numbers have not yet been assigned by IDOT or the FTA.

## **Additional Comments**

Provide any additional information that may assist CMAP staff and the PSC with consideration of this request. Use this space to explain any entries above that were left blank, or to clarify any of your above responses. There is no need to repeat information supplied elsewhere on the form; information provided only in a cover letter should be repeated, however.

**For the submittal procedures and more detailed instructions that apply to this form, see the [CMAQ Scope and Cost Change Request Procedures](#) document.**

**Submit this completed form and any requested attachments to your Planning Liaison (PL) for review and submittal to CMAP. For sponsors noted as exceptions to PL review in the procedure above, please submit to the project contact for transmittal to CMAP.**

**Requests should be submitted according to the schedule outlined on the current calendar of [Transportation Meetings and Deadlines](#). Requests received after the CMAQ Revision Request deadline for a particular PSC meeting will not be considered until the next scheduled meeting.**