



TRANSPORTATION LOAN REQUEST

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APPLICANT INFORMATION

LOAN TYPE	APPLICANT		
SIB/FEDERAL AID	City		
STBGP ADVANCE	County/Township		
STATE HIGHWAY FUND LOAN	Other (Specify)		
APPLICANT NAME		DATE SUBMITTED	
PROJECT NAME		PROJECT ZIP CODE	
APPLICANT MAILING ADDRESS	CITY	STATE	ZIP CODE
CONTACT PERSON	TITLE		PHONE NO
CONTACT PERSON'S ADDRESS	CITY	STATE	ZIP CODE
E-MAIL ADDRESS			

PROJECT DESCRIPTION

ROUTE NAME/FACILITY		
LOCATION		
SDDOT REGION	COUNTY	CITY
TYPE OF PROJECT	HIGHWAY	OTHER (Specify): _____
IS THIS PROJECT ELIGIBLE FOR FEDERAL AID?	Yes	No

PROJECT DESCRIPTION (Provide brief description here and more detail in [Attachment A.](#))

PROJECT BENEFITS (Provide brief description here and more detail in [Attachment B.](#) i.e., Importance of project to community, how it promotes economic development.)

APPLICANT RISK ASSESSMENT (What impact will it have on the applicant or community if agency does not receive loan, it may not (what?))

DOES THE PROJECT HAVE THE SUPPORT OF THE LOCAL GOVERNMENT UNIT(S) THAT ARE IMPACTED BY THE PROJECT? (Please include Resolution/Letters of Support)	Yes	No
DOES THE PROJECT HAVE THE SUPPORT OF THE TRANSPORTATION AGENCY (e.g. County Road Commission, City Street Administration, etc.) WITH JURISDICTION OVER THE FACILITY?	Yes	No
IS THE PROJECT WITHIN A METROPOLITAN PLANNING ORGANIZATION (MPO) BOUNDARY?	Yes	No
If yes, is the Project on an approved MPO Transportation Improvement Plan (TIP)?	Yes	No
If No, is the Project on an approved State Transportation Improvement Plan (STIP)?	Yes	No
IS THE PROJECT ON A STATE HIGHWAY?	Yes	No
If yes, is it on the STIP?	Yes	No

PROJECT FINANCING

PROJECT STATUS (Please explain current status of the project, e.g. planning, design, environmental, project start and completion dates.)

ESTIMATE PROJECT CONSTRUCTION TIMELINE	START DATE	END DATE
TOTAL PROJECT COST	AMOUNT REQUESTED	

DESCRIBE ANY COSTS THAT MAY NOT BE ELIGIBLE

PROPOSED PROJECT FINANCING SOURCES

REQUESTED AMOUNT	\$ _____
OTHER FEDERAL AID	\$ _____
ASSESSMENTS	\$ _____
USER PAYMENTS/FEEES	\$ _____
LOCAL FUNDS	\$ _____
OTHER (Specify) _____	\$ _____
TOTAL \$	_____

PROPOSED PROJECT FINANCING USES

PRELIMINARY ENGINEERING	\$ _____
DESIGN	\$ _____
RIGHT-OF-WAY ACQUISITION	\$ _____
CONSTRUCTION	\$ _____
ENVIRONMENTAL	\$ _____
OTHER	\$ _____
TOTAL \$	_____

PROPOSED
REPAYMENT TERMS

START DATE

(e.g. 2 year loan amortized over 5 years)

REPAYMENT SOURCE FOR REQUEST

_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL \$	_____

CHECKLIST

CHECK ALL OF THE FOLLOWING ITEMS THAT ARE ATTACHED:

A ATTACHMENT A - Description of Proposed Project

ATTACHMENT B - Benefits of Proposed Project

CERTIFICATION

SIGNATURE	TITLE	DATE
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Completed Initial Project Application and all applicable attachments may be submitted for initiation of the review process to:

Transportation Loan Request
 South Dakota Department of Transportation
 Division of Planning and Engineering
 Joanne Hight, Administration Program Manager
 Becker-Hansen Building
 700 E. Broadway Ave.
 Pierre, SD 57501

ATTACHMENT A: DESCRIPTION OF PROPOSED PROJECT

In your description, include an explanation of the problem that this project is designed to address, other funding alternatives you've explored, and how your application meets the requirement of "funding of last resort". Please include a map. Attach additional pages if necessary.

ATTACHMENT B: BENEFITS OF PROPOSED PROJECT

Discuss how Transportation Loan financing will help attract new public/private investment, reduce project costs and accelerate project completion. Identify other project benefits, e.g. access, mobility, economic, preservation, environmental. Attach additional pages if necessary.
