

**Black Hawk County Metropolitan Area (MPO) Iowa's Transportation Alternatives Program (TAP)
Project Criteria Form**

*This form **must be filled out** along with the Iowa's TAP Application form*

Sponsor Agency:

Project:

Requested Year:

Please write a brief (one to two sentence) description of how your project relates to each criterion. If there are criteria that your project does not relate to, write "N/A".

PROJECT READINESS

1. Ability to meet federal requirements

2. Ability to meet programming timelines

3. Status of matching funds

4. Amount of matching funds

5. Public acceptance of project

6. Right of way constraints

RELATIONSHIP TO TRANSPORTATION SYSTEM

7. Ability to minimize conflict points

8. Connectivity to existing facilities

9. Enhancement to existing transportation system

10. Relationship to complete streets

11. Inclusion in state, regional, and local plans

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ASSOCIATED BENEFITS

12. Environmental and social impacts

13. Regional economic development impact

14. Regional tourism impact

15. Sustainability elements of project

OTHER

16. Cost in relation to public benefit

17. Involvement of or benefit to multiple jurisdictions

18. Predicted usage relative to population