CORE CAPACITY PROJECT DESCRIPTION TEMPLATE		
PROJECT NAME:		
Participating Agencies		
Lead Agency	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	
Metropolitan Planning Organization	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	
Transit Agency	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	
State Department of Transportation	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	
Other Relevant Agencies	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	
Other Relevant Agencies	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	
Other Relevant Agencies	**Name**	
	Contact Person	
	Address	
	Telephone Number	
	Fax Number	
	Email	

CORE CAPACITY PROJECT DESCRIPTION TEMPLATE (Page 2)

Project Definition	Length (miles)	
	Mode/Technology	<Select Mode>
	Total Number of Stations	
	Number of New Stations (if any)	
	List each new station (if any) separately, including the number of park and ride spaces at each and whether structured or surface parking	
	List each station with major transfer facilities to other modes	
	Number of vehicles/ rolling stock to be included as part of the project	
Type of Alignment by Segment (Number of Miles)	Above grade	
	Below grade	
	At grade	
	Exclusive	
	Mixed Traffic	
Status of Existing Right of Way	Ownership – who owns the right of way?	
	Current Use: active freight or passenger service?	

Project Planning Dates	Existing Year	Opening Year

Capital Cost Estimate		
	2025 constant dollars	$ -
	Year of Expenditure	$ -

Estimated Number of U.S. Jobs Related to Design, Construction, Operation and Maintenance of the Project	

Project Planning and Development Schedule	*Project Schedule*
	Insert anticipated or actual date
Anticipated NEPA Class of Action	(Select…)
Entry into Project Development	
(Select NEPA class of action above)	
LPA selected	
LPA included in the financially constrained long range plan	
Approval into Engineering	
Anticipated FFGA Award	
Construction Duration (enter start and end dates)	
Substantial Completion - (Normal Revenue Service Begins)	

CORE CAPACITY PROJECT DESCRIPTION TEMPLATE (Page 3)

Detail of Existing Operations				Heavy Rail/Light Rail								Commuter Rail	
Train #	Train Line Reference (e.g. Name/Color/Number)	Departure Time	Number of Cars	Car Length (ft) (in)	Car Width (ft) (in)	Car Space (sqft)	Driver Cab Length (ft) (in)	Driver Cab Width (ft) (in)	Driver Cab Space (sqft)	Total Usable Space (sqft)		Seats per Car	Seats Per Train
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
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35													
36													
37													
38													
39													
40													
41													
42													
43													
Total	During the Peak Hour					-			-	-			-

Detail of Operations At Project Opening				Heavy Rail/Light Rail								Commuter Rail	
Train #	Line Reference	Departure Time	Number of Cars	Car Length (ft) (in)	Car Width (ft) (in)	Car Space (sqft)	Driver Cab Length (ft) (in)	Driver Cab Width (ft) (in)	Driver Cab Space (sqft)	Total Usable Space (sqft)		Seats per Car	Seats Per Train
1													
2													
3													
4													
5													
6													
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8													
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35													
36													
37													
38													
39													
40													
41													
42													
43													
Total	During the Peak Hour					-			-	-			-

CORE CAPACITY PROJECT DESCRIPTION TEMPLATE (Page 4)		
Project Management		
Project Manager	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Agency CEO	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Key Agency Staff: Overall Core Capacity Criteria	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Key Agency Staff: Ridership Statistics and Data	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Key Agency Staff: Cost Estimates	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Key Agency Staff: Environmental Documentation	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Key Agency Staff: Financial Assessment	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Key Agency Staff: Project Maps	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Contractors		
Current Prime Contractor	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Prime Contractor: Project Manager	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Contractor Responsible for Ridership Data	**Name**	
	Address	
	Phone	
	Fax	
	Email	
Contractor Responsible for Capital Cost Estimates	**Name**	
	Address	
	Phone	
	Fax	
	Email	

CORE CAPACITY MOBILITY IMPROVEMENT AND COST-EFFECTIVENESS TEMPLATE

PROJECT NAME:	

Mobility Improvements

Line	Item		Daily	Annualization Factor*	Annualized (annualization factor x daily)	Source/Calculation
1a	***Existing Daily*** **Linked Trips on the existing line(s) as defined in the project definition**	Non-transit-dependent			0	**Average Weekday On/Off Counts, see** *Reporting Instructions*
1b		Transit-dependent			0	**<select source of transit-dependent data>**
1c	**Overall percentage of transit-dependent trips**		-			**Line 1b / (Line 1a+Line 1b)**
2	**Total trips with five times weight given to transit dependent trips (value used in rating)**		**0**			**Line 1a annualized + 5*(Line 1b annualized)**
			-			

**Attach documentation describing annualization factor assumed.*

Cost Effectiveness

Line	Item	Values	Source/Calculation
3	**Annualized Core Capacity capital cost (constant 2025 dollars)**		**Source: SCC Build Annualized worksheet**
4	**Annual linked trips on the existing line(s) as defined in the project definition (no extra weight given for transit dependent trips)**	0	**Line 1a + Line 1b (unweighted annualized sum)**
5	**Annualized Core Capacity cost per annual linked trip (value used in rating)**	**$0.00**	**Line 3 / Line 4**
		-	

CORE CAPACITY NEEDS AND CONGESTION RELIEF TEMPLATE

PROJECT NAME:

Vehicle and Service Characteristics

Line	Item	Existing	At Opening	Increase	Source/Calculation
1	Total usable space per peak hour, in the peak direction	0	0	0	From Project Description Template, Page 3
2	Total available seats per peak hour, in the peak direction	-	-	-	From Project Description Template, Page 3

Capacity Needs

Line	Item	Existing			Source/Calculation
3	Existing Ridership per peak hour, in the peak direction				Peak hour average load from counts, see *Reporting Instructions*
4	Total Usable space per passenger per peak hour, in the peak direction				Line 1 / Line 3 ***(Light Rail/Heavy Rail only)***
5	Percent Seated Load per peak hour, in the peak direction	-			Line 3 / Line 2 ***(Commuter Rail only)***
6	Existing Capacity Needs (Value used in Rating)				Line 4 ***(Light Rail/Heavy Rail)*** or Line 5 ***(Commuter Rail)***
		-			

Congestion Relief

Line	Item	Existing	At Opening	Increase	Source/Calculation
7	Total usable space per passenger, in the peak hour, in the peak direction				Line 1 /Line 3 ***(Light Rail/Heavy Rail only)***
8	Percent Seated Load per peak hour, in the peak direction	-	-	-	Line 3/ Line 2 (***Commuter Rail Only)***
9	Congestion Relief (Value used in Rating)				Line 7 ***(Light Rail/Heavy Rail)*** or Line 8 ***(Commuter Rail)***
		-			

CORE CAPACITY FINANCE TEMPLATE

PROJECT NAME:			
Core Capacity Capital Cost of Project in Constant 2025 Dollars (from the SCC Main Worksheet)		**Total Capital Cost of Project in YOE dollars (including finance charges, costs of Project Development and Engineering, and construction):** (from SCC Main Worksheet)	
Section CIG Funding Anticipated (YOE $):		**FTA CIG Share of Project Cost:**	0.0%
Estimated Cost of Project Development (YOE $):		**Estimated Cost of Engineering (YOE $):**	
Total Finance Charges Included in Capital Cost (include finance charges that are expected prior to either the revenue operations date or the fulfillment of the CIG funding commitment, whichever is later in time): (from SCC Main Worksheet)			

Other Federal Capital Funding Sources **(Non-CIG Funds such as FTA Section 5307, Surface Transportation Program (STP), Congestion Mitigation and Air Quality (CMAQ), etc.)**	**Type of Funds**	**Dollar Amount (YOE)**	**% of Total Capital Cost**
1. (Example: CMAQ)			0.0%
2.			0.0%
3.			0.0%
4.			0.0%
State Capital Funding Sources **(Funds provided by state agencies or legislatures such as bonds, dedicated sales tax, annual legislative appropriation, transportation trust funds, etc.)**	**Type of Funds**	**Dollar Amount (YOE)**	**% of Total Capital Cost**
1. (Example: State Transportation Fund)			0.0%
2.			0.0%
3.			0.0%
4.			0.0%
5.			0.0%
6.			0.0%
Local Capital Funding Sources **(Municipal, City, County, Township, or Regional funding such as bonds, sales tax, legislative appropriation, transportation trust funds, etc.)**	**Type of Funds**	**Dollar Amount (YOE)**	**% of Total Capital Cost**
1.			0.0%
2.			0.0%
3.			0.0%
4.			0.0%
5.			0.0%
6.			0.0%
7.			0.0%
8.			0.0%
9.			0.0%
10.			0.0%
11.			0.0%
12.			0.0%
Private Sector/In-kind match/Other **(Donations of right-of-way, construction of stations or parking, or funding for the project from a non-governmental entity, business, or business assoc.)**	**Type of Funds**	**Dollar Amount (YOE)**	**% of Total Capital Cost**
1.			0.0%
2.			0.0%
3.			0.0%
4.			0.0%
5.			0.0%
TOTAL NON-CIG FUNDING (YOE dollars)		$0	0.0%
QA/QC CHECK: TOTAL CAPITAL COSTS LESS CIG FUNDING LESS NON-CIG FUNDING (SHOULD EQUAL $0)		$0	---

CORE CAPACITY FINANCE TEMPLATE (Section 2)				
Core Capacity Project Financial Commitment				
Other Federal Sources (Linked from Section 1)	**Are the funds obligated in an existing grant?**	**Are the funds programmed in the current TIP/STIP?**	**If funds are beyond the current TIP/STIP period, are they programmed to the project via MPO Board resolution or other official action?**	**For discretionary or competitive grant funds, has the selection been announced or funds allocated?**
1. (Example: CMAQ)	(Select…)	(Select…)	(Select…)	(Select…)
2.	(Select…)	(Select…)	(Select…)	(Select…)
3.	(Select…)	(Select…)	(Select…)	(Select…)
4.	(Select…)	(Select…)	(Select…)	(Select…)
State Sources (Linked from Section 1)	**Are the funds authorized by existing state law?**	**Do the funds require annual/biennial appropriation by state legislature?**	**Do the funds require approval via competitive or discretionary state grant process?**	**Are the funds allocated by formula?**
1. (Example: State Transportation Fund)	(Select….)	(Select….)	(Select….)	(Select….)
2.	(Select….)	(Select….)	(Select….)	(Select….)
3.	(Select….)	(Select….)	(Select….)	(Select….)
4.	(Select….)	(Select….)	(Select….)	(Select….)
5.	(Select….)	(Select….)	(Select….)	(Select….)
6.	(Select….)	(Select….)	(Select….)	(Select….)
Local Sources (Linked from Section 1)	**Are the funds authorized by existing state/local law?**	**Are the funds approved for the project in a Board-approved Capital Improvement Program, budget, or resolution?**	**Are the funds committed to the project by a signed, final and completed third-party agreement?**	**Are the funds contingent on a voter referendum?**
1.	(Select….)	(Select…)	(Select…)	(Select…)
2.	(Select….)	(Select…)	(Select…)	(Select…)
3.	(Select….)	(Select…)	(Select…)	(Select…)
4.	(Select….)	(Select…)	(Select…)	(Select…)
5.	(Select….)	(Select…)	(Select…)	(Select…)
6.	(Select….)	(Select…)	(Select…)	(Select…)
7.	(Select….)	(Select…)	(Select…)	(Select…)
8.	(Select….)	(Select…)	(Select…)	(Select…)
9.	(Select….)	(Select…)	(Select…)	(Select…)
10.	(Select….)	(Select…)	(Select…)	(Select…)
11.	(Select….)	(Select…)	(Select…)	(Select…)
12.	(Select….)	(Select…)	(Select…)	(Select…)
Private Sector/In-kind Match/Other (Linked from Section 1)	**Are the funds committed to the project by a signed, final, and completed third-party agreement?**	**If in-kind contribution, has the value been approved by FTA per requirements of FTA Circular 5010?**		
1.	(Select….)	(Select….)		
2.	(Select….)	(Select….)		
3.	(Select….)	(Select….)		
4.	(Select….)	(Select….)		
5.	(Select….)	(Select….)		

CORE CAPACITY FINANCE TEMPLATE (Section 3)			
Core Capacity Project Financial Commitment			
Other Federal Sources (Linked from section 1)	**Name of entity with ultimate programming authority for source of funds**	**Describe all remaining actions needed to make the funds available to the project**	**Identify and Describe Supporting Documentation Submitted to Verify Commitment Status of Funding Source**
1. (Example: CMAQ)			(Example: Relevant pages from TIP/STIP)
2.			
3.			
4.			
State Sources (Linked from section 1)	**Name of entity with ultimate programming authority for source of funds**	**Describe all remaining actions needed to make the funds available to the project**	**Identify and Describe Supporting Documentation Submitted to Verify Commitment Status of Funding Source**
1. (Example: State Transportation Fund)			(Example: Relevant pages of authorizing legislation with applicable sections identified, official allocation notice from State agency)
2.			
3.			
4.			
5.			
6.			
Local Sources (Linked from section 1)	**Name of entity with ultimate programming authority for source of funds**	**Describe all remaining actions needed to make the funds available to the project**	**Identify and Describe Supporting Documentation Submitted to Verify Commitment Status of Funding Source**
1.			(Example: Relevant pages from Board-approved CIP; official Board resolution; final, complete third-party agreement with relevant sections/clauses identified)
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
Private Sector/In-kind Match/Other (Linked from section 1)	**Name of entity with ultimate programming authority for source of funds**	**Describe all remaining actions needed to make the funds available to the project**	**Identify and Describe Supporting Documentation Submitted to Verify Commitment Status of Funding Source**
1.			(Example: Final, complete third-party agreement with relevant sections/clauses identified)
2.			
3.			
4.			
5.			

Reference Notes: The following categories and definitions are applied to funding sources:

Committed: Committed sources are programmed capital funds that **have all the necessary approvals** to be used to fund the proposed project **without any additional action**. These funds have all legislative and/or voter approvals needed, and been formally programmed in the MPO's TIP and/or any related local, regional, or state documents such as an approved annual budget or multi-year CIP. Examples include dedicated or approved tax revenues, state capital grants that have been approved by all required legislative bodies, cash reserves that have been dedicated to the proposed project, and debt capacity that requires no further approvals and has been dedicated to the proposed project.

Budgeted: This category is for funds that have been budgeted and/or programmed for use on the proposed project but are not yet fully committed, i.e., the funds have not yet received statutory approval. Examples include debt financing in an agency-adopted CIP that has yet to receive final legislative approval, or state capital grants that have been included in the state budget, but are still awaiting final legislative appropriations. These funds are almost certain to be committed in the near future. Funds will be classified as budgeted where available funding cannot be committed until the FFGA is executed, or due to local practices outside of the project sponsor's control (e.g., the project development schedule extends beyond the TIP or CIP period).

Planned: This category is for funds that are identified and have a reasonable chance of being committed, but are neither committed nor budgeted. Examples include proposed sources that require a scheduled referendum, reasonable requests for state/local capital grants that are not yet approved, and proposed debt financing that has not yet been fully approved.

Uncertain: This category is applied when it is unclear from the agency's submission whether or not a funding source is committed, budgeted, or unavailable. Instances where the plan to secure committed funds is deemed to be unreasonable may be classified as uncertain. This category applies to funding sources that the project sponsor may describe as committed or budgeted but for which no supporting documentation is provided to FTA. Also, funding proposals that have repeatedly failed (more than once), such as failed local referendums or repeated denial of state grants, will be classified as uncertain.

Unspecified: This category is applied when the proposed non-CIG funding sources are not sufficient or have not been clearly identified.

CORE CAPACITY FINANCE TEMPLATE (Section 4)

Innovative Financing Methods

(Unconventional funding/financing arrangements such as USDOT credit instruments (RRIF/TIFIA loans, PABs), State Infrastructure Banks, Public/Private partnerships, Toll Credits, Joint Development revenues, etc.)

Innovative Funding Source	Anticipated Funding Amount ($)	Name of entity with final approving authority	Describe all actions needed to make the funds available to the project	Identify and Describe Supporting Documentation Submitted

Summary Information from the Operating Finance Plan

Core Capacity Project Annual Operating Cost in the Opening Year (YOE$):		Total Transit System (including Core Capacity Project) Annual Operating Cost in the Opening Year (YOE$)		
Proposed Sources of Operating Funds (Proposed sources of operating funds that are anticipated to support operating expenses of the transit system including the Core Capacity project in the opening year.)	**Dollar Amount ($)**	**Type of Funding Source**	**Committed, Budgeted or Planned**	**Specify Whether New or Existing Funding Source**
Farebox Revenues		---	---	---
(Example: State Revenue Source A)				
(Example: State Revenue Source B)				
(Example: State Revenue Source C)				
(Example: Local Revenue Source A)				
(Example: Local Revenue Source B)				
(Example: Local Revenue Source C)				
(Example: Private/Value Capture Funding Source)				
Other				
Total	$0			

Transit System Operating Characteristics

Current Systemwide Characteristics (Can be the same data as reported to the FTA for the National Transit Database)	**Number/Value**	**Future Transit System with Core Capacity Project** (Systemwide characteristics at completion of the Core Capacity Project)	**Number/Value**
Farebox Recovery Percent		**Farebox Recovery Percent**	
Number of Buses		**Number of Buses**	
Number of Rail Vehicles		**Number of Rail Vehicles**	
Average Fare		**Average Fare**	
Average Age of Buses			
Average Age of Rail Vehicles			
Revenue Miles of Service Provided		**Revenue Miles of Service**	
Revenue Hours of Service Provided		**Revenue Hours of Service**	

CORE

PROJECT NAME:

Use this tool to calculate potential ratings for your Core Capacity project. Complete yellow cells with the ratings you anticipate for local financial commitment.

Project Justification			
Criterion	**Weight**	**Estimated Rating**	**Source/Calculation**
Mobility Improvements	16.66%	-	Mobility & Cost-Effectiveness Template
Cost Effectiveness	16.66%	-	
Congestion Relief	16.66%	-	Capacity Need & Congestion Relief Template
Capacity Needs	16.66%	-	
Environmental Benefits	16.66%	MEDIUM	Automatic MEDIUM for Core Capacity projects
Economic Development	16.66%	MEDIUM	Automatic MEDIUM for Core Capacity projects
Summary Rating		-	Ratings are assigned to each criterion on a five-point scale, with Low = 1, Medium-Low =2, Medium = 3, Medium-High = 4, and High = 5. Individual criterion ratings are then weighted 16.66% each to develop the summary Project Justification rating.

Estimated Overall Project Rating:

(The Project Justification and Local Financial Commitment summary ratings are each weighted equally at 50%. However, both must be at least Medium to obtain a Medium or better overall rating.)

Link to CIG Program Guida

*** FTA is providing this tool solely to help project sponsors understand how their projects may rate. Any anticipated ratings entered into this sprea ratings according to the evaluation and rating framework described in the Capital Investment Grants Policy Guidance.**

CAPACITY RATING ESTIMATION

. *

Local Financial Commitment			
Do you anticipate that your project will qualify for the simplified financial assessment? (See the Local Financial Commitment section of the Core Capacity portion of the CIG Policy Guidance for the qualifying criteria.)			-
Criterion	**Weight**	**Estimated Rating**	**Source/Calculation**
Current Financial Condition	25%	<select>	Enter your estimations of these ratings. See the Local Financial Commitment section in the New Starts chapter of the CIG Policy Guidance for information on how FTA rates these factors.
Commitment of Capital and Operating Funds	25%	<select>	
Reasonableness of Financial Plan	50%	<select>	
CIG Share (Please complete the Finance Template)	-	-	Finance Template
Summary Rating		-	Ratings are assigned to each subfactor on a five-point scale, with Low = 1, Medium-Low=2, Medium=3, Medium-High =4, and High = 5. Individual subfactror ratings are then weighted as shown to develop the summary Local Financial Commitment rating. If the summary rating is at least Medium and Core Capacity share is less than 50%, the summary rating is increased one level. If project qualifies for the simplified financial evaluation, the rating is High if the Core Capacity share is 50 percent or less; otherwise it is Medium.

Complete all templates and the highlighted cells in this worksheet to see the estimated overall rating.

nce on the FTA Website

dsheet will not inform the ratings that FTA assigns, and any ratings computed in the templates are subject to verification by FTA. FTA has sole responsibility for assigning project