

**Kentuckiana Regional Planning & Development Agency (KIPDA)  
The Louisville (KY-IN) Metropolitan Planning Organization**

**American Recovery & Reinvestment Act (Recovery Act) Transportation Project Progress Form**

Note: Information from this form will be made available in part or in whole to the Transportation Policy Committee and to the public.

Today's Date: 5/22/09

**PROJECT INFORMATION**

KIPDA ID Number: 1620 Federal Aid Project Number: TBA State ID Number: 0900639

TIP Amendment/Administrative Modification Number:

Project Name: State Street

Project Description: Resurface from I-265 to Green Valley Road, including striping, approx. 4,200 feet.

Project Sponsor: City of New Albany DUNS Number: 079651675

Total Project Cost (Plan Cost): \$125,000

Amount of Recovery Act funds programmed for this project: \$125,000

Project Location (City, County, Region, etc.): New Albany, Floyd County, Indiana

**JOB & ECONOMICALLY DISTRESSED AREA INFORMATION**

1. Number of Jobs **sustained** directly attributable to this project:
2. Number of Jobs **created** directly attributable to this project:
3. Total job hours created and/or sustained directly attributable to this project:
4. Total payroll of job hours created and/or sustained by this project:
5. Is this project in an Economically Distressed Area (as defined by section 301 of the Public Works and Economic Development Act of 1965, as amended (42 U.S.C. 3161)? In the Louisville (KY-IN) Metropolitan Planning Area, the only area that meets this description is Bullitt County, Kentucky ([http://hepgis.fhwa.dot.gov/hepgis\\_v2/GeneralInfo/Map.aspx](http://hepgis.fhwa.dot.gov/hepgis_v2/GeneralInfo/Map.aspx)). (YES or NO)

**PROJECT PROGRESS**

6. Has a Project Manager been identified for this project? (**YES** or ~~NO~~)
  - a. If YES to above question, Project Manager's name: Tom Schellenberg, P.E., Jacobi, Toombs and Lanz, Inc.
  - b. Contact Information for Project Manager (email address & phone number): [t.schellenberg@jtleng.com](mailto:t.schellenberg@jtleng.com); 812-288-6646

**DESIGN**

7. Has the Plan, Specifications, and Estimates (PS&E) been reviewed by the State? (~~YES~~ or **NO** or ~~N/A~~)
  - a. If NO, have the PS&E documents been submitted to the State? (~~YES~~ or **NO** or ~~N/A~~)
  - b. IF NO to the above question, when is it anticipated the documents will be submitted? (Provide a date) 6/15/09

**ENVIRONMENTAL**

8. Has the project received an Environmental Certification letter from the State? (~~YES~~ or ~~NO~~ or **N/A**)
  - a. If YES, when: (Provide a date) Project is covered by statewide CE1.
  - b. If NO, have the documents required for an environmental review been submitted to the State? (YES or NO or N/A)
  - c. IF NO to the above question, when will the documents be submitted? (Provide a date)

**RIGHT OF WAY**

9. Has the project received a Notice to Proceed from the State for ROW appraisal & purchase? (~~YES~~ or ~~NO~~ or **N/A**)
10. Has a ROW clearance letter for this project been submitted to the State? (YES or NO or N/A)
11. Has this project received a ROW certification letter from the state? (YES or NO or N/A) No add'l ROW is required.

**PERMITTING**

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12. Has this project received the necessary permitting from KYTC and/or INDOT as well as any other applicable agencies? (~~YES~~ or ~~NO~~ or **N/A**)
- a. If **NO**, when is it expected that the permit or permits will be acquired? (Provide a date)
  - b. What permits are required for this project? Please list all those that are applicable.  
*No permits other than INDOT review and approval is required.*

**FUNDING & FEDERAL OBLIGATION**

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13. Have the Recovery Act funds been Federally Authorized (obligated) for this project? (~~YES~~ or **NO**)
- a. If **YES**, when (Provide a date):
  - b. If **NO**, then when is it anticipated that those funds will be authorized? (Provide a date)
14. Has the project received a Notice to Proceed for construction/purchase from the State? (**YES** or **NO**)
- a. If **YES**, when (Provide a date):

**CONSTRUCTION**

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15. Has the project been put out for bid? (**YES** or **NO**)
- a. If **YES**, when (Provide a date):
  - b. If **NO**, when is it anticipated to go to bid? 10/21/09
16. What is the letting/purchase date for this project? 10/21/09
17. Name of the contracting firm/vendor for the project? N/A
18. The bid amount for the project: N/A
19. Anticipated/actual completion date for the project:
- a. Construction Status (% Complete):
  - b. Contract Cost Status (% Expended):
20. Actual final cost of the project:

**ADMINISTRATIVE INFORMATION**

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Name of person completing this form: *John W. Rosenbarger, Public Works Facilities Supervisor*  
Email address of person completing this form: *JRosenbarger@cityofnewalbany.com*  
Mailing address of person completing this form: *Room 325, City County Bldg., New Albany, IN 47150*  
Telephone Number of person completing this form: *812-948-5333*

**ADDITIONAL INFORMATION**

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Is there any additional information that needs to be included concerning this project? Project is on schedule for an RFC date of August 12, 2009

Do not write below this line – for KIPDA staff use only.

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Staff Notes:

TPC Comments: