Appendix A Project Number:	0134-114-	350	UPC:	115419		CFDA#	N/A	Localitv:	City of Hampton	<b>Date:</b> 8/12/2019
Project Location ZIP+4: 23666-1471			Locality DUNS # N/A			<u> </u>		Locality A	ddress (incl ZIP+4): D Lincoln Street, VA 236	•
					Project Na	rrative				
Work Description: Magruder	Blvd									
From: York Coun										
To: Command  Locality Project Manager C	er Shepard		o Phone:	757-209-12	15	email: aı	ngela rico@	hampton.g	101/	
Department Project Coordi				illiams, Pho					@vdot.virginia.gov	
					Project Est	timates				
	Preliminary	Engineering	Right of Way	v and Utilities Construction		struction	Total Estimated Cost			
Estimated Locality Project Expenses		\$3,000			60	\$8			\$91,000	
Estimated VDOT Project E		\$0			60	ψ.	\$0		\$0	
Estimated Total Project Co	, ,			,000 \$		\$88,000			\$91,000	
				Proiect	Cost and R	Reimburse	ement			
Phase	Phase Estimated Project Costs		Funds type		Local % Participation		Local Share Amount		Maximum Reimbursement (Estimated Cost - Local Share)	Estimated Reimbursement to Locality (Max. Reimbursement - Est. VDOT Expenses)
Preliminary Engineering \$3,0		\$3,000 State		Funds 0		, 0	\$0 \$0		\$3,000	-
								60 60	\$0 \$0	
						\$0			\$0	
<b>Total PE</b> \$3,000		000					\$0		\$3,000	\$3,000
Construction	onstruction \$88,0		\$88,000 State		0%	0%		0	\$88,000	
								60 60	\$0 \$0	
								50	\$0	
Total CN	Total CN \$88,000		+			\$ \$		03	\$0 \$88,000	\$88,000
Total Estimated Cost	\$91,000							§0 §0	\$91,000	\$91,000
Total Maximum Reimbursement by VDOT to Locality (Less Local Share) Estimated Total Reimbursement by VDOT to Locality (Less Local Share and VDOT Expenses)										\$91,000 \$91,000
					Project Fin	ancing				
CTB Formula State Funds										Aggregate Allocations
\$91,000										\$91,000
This Project shall be adm This Project shall be adm This Project shall be adm This is a limited funds pro This Project shall meet at This Project must be adv The LOCALITY will conting without approval of the DEF	inistered in ac iject. The LOC I applicable Al ertised within iue to operate	ccordance with CALITY shall b DA requirement six months of and maintain	NVDOT'S Local NVDOT'S Urbase responsible onts. award funding the facility as	an Manual. for any addition g or be subject constructed. S	ed Projects Monal funding in to deallocation	anual.  excess of S  n. sign feature	\$91,000. s of the Projec	ct be altered b	y the LOCALITY subsequer sically or monetarily, as rec	
Authorized Locality	Official and Da	ate	=						Authorized VDOT	Official and Date

Typed or printed name of person signing

Typed or printed name of person signing