# A black background with a black square Description automatically generated with medium confidence APPENDIX D

Eligibility Checklist

**Jurisdiction:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Capital Improvement Program (CIP)** | | **YES** | **NO** |
| 1. | Did you submit your draft or adopted M2 seven-year CIP to OCTA by June 30? |  |  |
| a. Did you utilize the required OCTA OCFundtracker CIP database? |  |  |
| b. Have you included projects required to demonstrate compliance with signal synchronization, pavement maintenance, the Congestion Management Program, and  environmental clean-up commitments? |  |  |
| c. Are there any non-transportation related projects included in your M2 CIP?  (Note: Projects funded through ECP are considered transportation-related) |  |  |
| d. Did you include all projects that are partially, fully, or potentially funded by M2 Net Revenues? |  |  |
| e. The City Council/Board of Supervisors approval date\* to adopt the final 7-Year CIP is:  \*Must be prior to July 31 | | |
| **Maintenance of Effort (MOE)** | | **YES** | **NO** |
| 2. | Did you submit the MOE certification form (Appendix I) to OCTA by June 30? |  |  |
| a. Did you provide supporting budget documentation? |  |  |
| b. Has the MOE Reporting form been signed by the Finance Director or appropriate designee? |  |  |
| **Pavement Management Plan (PMP)** | | **YES** | **NO** |
| 3. | Are you required to submit a PMP update to OCTA for this eligibility cycle? Refer to Exhibit 3 for PMP submittal schedule. |  |  |
| a. If yes, did you use the current PMP Submittal Template (Appendix F)? |  |  |
| b. If yes, is the adopted PMP consistent with the OCTA Countywide Pavement Management Plan? |  |  |
| 4. | If you answered "no" to question 3, did you submit a PMP update to OCTA through the previous eligibility cycle by the required deadline? |  |  |
| **Resolution of MPAH Consistency** | | **YES** | **NO** |
| 5. | Did you submit a resolution indicating conformance with the MPAH? |  |  |
| a. Have you enclosed an exhibit showing roadway designations that represent your most current circulation element? |  |  |
|  |  |  |  |
| **Local Signal Synchronization Plan (LSSP)** | | **YES** | **NO** |
| 6. | Did you adopt and submit an update to the LSSP as part of the current cycle? | **N/A** | **N/A** |
| a. Is your LSSP consistent with the Regional Traffic Signal Synchronization Master Plan? | **N/A** | **N/A** |

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| **Time Limits for Use of Net Revenues** | | **YES** | **NO** |
| 7. | Has your jurisdiction complied with the three-year time limit for the use of Net Revenues over the last year per the requirements outlined in the Ordinance? |  |  |
| a. If no, has a time extension been requested through the CTFP semi-annual review process for funds subject to expiration? |  |  |
| **Supplanting of Developer Commitments** | | **YES** | **NO** |
| 8. | Has your jurisdiction ensured they have not supplanted developer commitments for transportation projects and funding with M2 funds? |  |  |
| **Mitigation Fee Program (MFP)** | | **YES** | **NO** |
| 9. | Does your jurisdiction currently have a defined development impact MFP in place? |  |  |
| 10. | Has an update to the MFP occurred since the last reporting period? |  |  |
| 11. | If yes to 10, has your jurisdiction submitted one or more of the supporting documents outlined in chapter 2.7 of the Eligibility Guidelines? |  |  |
| **Planning Strategies** | | **YES** | **NO** |
| 12. | Does your jurisdiction consider as part of its General Plan, land use planning strategies that accommodate transit and non-motorized transportation? |  |  |
| 13. | Have you provided a letter identifying **land use planning strategies** that accommodate transit and non-motorized transportation consideration in the General Plan? |  |  |
| **Traffic Forums** | | **YES** | **NO** |
| 14. | Did representatives of your jurisdiction participate in the regional traffic forum(s)? |  |  |
| a. If you answered yes, provide date(s) of attendance: | | |
| **Congestion Management Program (CMP)** | | **YES** | **NO** |
| 15. | Has your jurisdiction completed the required CMP checklist? (Appendix C) |  |  |

Name (Print) Signature Date