



Downtown Transportation Fund

2026 Application



AGENCY OF COMMERCE & COMMUNITY DEVELOPMENT
DEPARTMENT OF HOUSING & COMMUNITY DEVELOPMENT

Downtown Transportation Fund Grant

2026 Grant Application

Please submit one electronic copy of the complete application to accd.cpr@vermont.gov.
The application is limited to 50 pages.

Project Overview:

Municipality Name: _____

Project Name: _____

Total Project Cost: _____

Amount of Downtown Transportation Funds Requested: _____

Match Amount: _____

Primary Contact:

Name: _____ Title: _____

Mailing address: _____ Zip code: _____

Email address: _____ Phone number: _____

Project Location:

Describe the project's location with address, ownership and site control, site conditions, and why this location was selected. Please include site maps or site plans, illustrations, and images to illustrate the project's location in the appendices to the application.

1. Is the project located on municipally owned property?	☐ Yes ☐ No
2. Is the project located within or serving a state designated downtown center?	☐ Yes ☐ No
3. Does this project involve State Right of Way? If so, has the regional District Transportation Administrator been contacted?	☐ Yes ☐ No ☐ Yes ☐ No
4. Has this project received Downtown Transportation Fund (DTF) funding in the past? If so, provide the grant number and a summary of work completed to date:	☐ Yes ☐ No
5. Is this a repeat application for this project? If yes, indicate if there has been progress or changes since prior application:	☐ Yes ☐ No
6. Does this project include wayfinding signage? Please note, there is a provision in the Downtown Transportation Fund grant agreement pertaining to wayfinding signage projects. All wayfinding signage projects need approval from the Travel Information Council per State statute (10 VSA 494(17)). Language pertaining to this will be found in Attachment D, of the forthcoming grant agreement if awarded.	☐ Yes ☐ No
7. Is the project part of a larger project, plan, or multi-phase effort? If yes, please describe the project phasing and where this project fits in:	☐ Yes ☐ No

--	--

Project Description (*check all that apply*)

- ☐ **Implementation (Note: All DTF applications must include implementation)**
- ☐ **Planning**
- ☐ **Design**
- ☐ **Engineering**

Concisely describe the Downtown Transportation Fund project and explain the projects expected outcomes.

If this Downtown Transportation Fund project is part of a larger project, explain the project (overall goals of the larger plan, major phases, where the DTF funded work fits in contributes, and overall timeline).

Competitive Scoring Criteria

Project Scope, Budget, and Project Readiness (25 points total)

Project Scope (15 points)

This project includes:

- ☐ **ADA modifications**
- ☐ **Beautification**
- ☐ **Bike/ pedestrian amenities**
- ☐ **Lighting**
- ☐ **Safety**
- ☐ **Signage (including wayfinding)**
- ☐ **Transportation amenities (ex: bus shelters, parking)**
- ☐ **Other:**

Describe the scope of your project.

(What changes or improvements will be made to improve existing conditions such as safety enhancements, improved access to pedestrians and cyclists, fill missing links in transportation networks, expand or improve multi-modal infrastructure, create new streetscape amenities, etc.?)

What need or problem is this project addressing, and why is the proposed work necessary at this time?

(What specific issue or challenge is this project aiming to resolve, who is affected, what data supports the need (if available)?)

Budget (5 points)

Provide a budget narrative below and **complete the detailed budget sheet in Attachment A** that includes all funding sources for the project and expected expenses and costs including labor, material, contingencies, design, engineering and other eligible project expenses. Explain how you developed the costs in your budget and any relevant sources that informed the budgeting process. Applicants must use the budget template included in this application.

Project Readiness (5 points)

Provide a brief narrative of the project schedule demonstrating readiness and ability to start and complete the project within the grant terms. If you are managing multiple projects, please describe how you intend to manage the project to ensure project quality and completion within the grant period. **Please complete the project schedule in Attachment B** and provide a list of tasks with dates for key project activities like securing funding, public outreach, partner organization activities, permitting, design, construction, and other timeline details.

Public Benefit (25 points)

Please describe how this project addresses an identified need in your community and will have a long-lasting positive impact on the downtown center. Explain how the project will improve the downtown experience for residents and visitors to the downtown area and have a positive economic impact on businesses and the community. Competitive applications will demonstrate how the project will have a greater community impact beyond a singular transportation investment and help further local revitalization efforts.

Prior Planning, Public Outreach & Project Partnerships (25 points total)

Downtown transportation projects are more successful when there is thoughtful planning and public outreach demonstrating strong community support, and when they are done in partnership with organizations outside the municipal government when appropriate.

Competitive applications will demonstrate how prior planning and public outreach demonstrated support of the project leading to recommendations for implementation.

Prior Planning (15 points)

Please describe how this project will implement the ideas and actions identified in other planning efforts or how it will build on previous planning efforts and/or complimentary efforts or activities. Include excerpts from planning documents such as downtown master plans or other planning documents and studies that clearly identifies the project as a community priority.

Public Outreach (5 points)

Please describe public outreach efforts to engage with and serve community members in an equitable and inclusive process. Explain how you have or will connect with diverse socioeconomic groups, under-served, and under-represented populations in the community.

Partnerships (5 points)

Please describe project partner involvement and/or support of the project. Describe the involvement of other partners in the project both public and private who are either directly involved or in support of the project and describe what role they are playing.

Attachment Checklist

- ☐ **Attachment A: Budget Worksheet and Funding Sources**
- ☐ **Attachment B: Project Schedule**
- ☐ **Attachment C: List of Required Permits**
- ☐ **Attachment D: Municipal Resolution**
- ☐ **Attachment E: Good Standing Certificate**
- ☐ **Attachment F: DTF Historic Preservation Project Review Form**

Date Submitted: _____ VDHP Review Received: _____

- ☐ **Attachment G: ANR Permit Navigator Results**
- ☐ **Attachment H: Project Site Plan**
- ☐ **Attachment I: Conceptual Design(s)**
- ☐ **Attachment J: Color Photographs**
- ☐ **Attachment K: Quotes Received (optional)**
- ☐ **Attachment L: Letters of Support (optional)**

Appendices: Refer to the program guidance for samples

Appendix A: Sample Site Map

Appendix B: Sample Concept Designs

Appendix C: Sample Project Schedule

Appendix D: Sample Budget

Financial Management

Please note that responses to the following questions will not impact the competitiveness of your application and will be used for grant administration purposes only.

Does your municipality have an accounting system that will allow you to completely and accurately track the receipt and disbursements of funds related to the award?

- ☐ **Yes** ☐ **No**

What type of accounting system does your municipality use?

- ☐ **Automated** ☐ **Manual** ☐ **Combination of both**

Required Attachments

The application must contain the following attachments:

Budget and Schedule

☐ **Attachment A: Budget Worksheet and Funding Sources**

Complete the detailed budget worksheet itemizing the scope of work and the sources and amounts of all project funds. Indicate the unit cost and total cost of each item in the budget. Applicants must use the budget template included in this application.

☐ **Attachment B: Project Schedule**

Complete the detailed project schedule that demonstrates that the project will be under construction within 24 months of the date of award and completed within 36 months of the date of award. (See Appendix C for a sample project schedule.)

- For more information see [Vermont Agency of Transportation's Bicycle & Pedestrian Design Resources specifically the section "Cost Estimating Resources"](#).

Permits, Good Standing Certificate, Project Review Sheet, Historic Preservation Project Review Form and Municipal Resolution

☐ **Attachment C: List of Required Permits**

Provide a complete list of all required permits and the status of each.

☐ **Attachment D: Municipal Resolution**

Attach a copy of the municipal resolution showing the project and application are authorized by the municipality.

☐ **Attachment E: Good Standing Certificate**

Provide a completed Good Standing Certificate.

☐ **Attachment F: DTF Historic Preservation Project Review Form**

Provide an approved DTF Historic Preservation Project Review Form.

☐ **Attachment G: ANR Permit Navigator**

Provide a completed ANR Permit Navigator. The form can be filled out online by visiting <https://vermont.force.com/permitnavigator/s/>. Please note that the Project Review Sheet is for Agency of Natural Resources (ANR) related permits only.

Site Map, Design and Photographs

☐ **Attachment H: Project Site Plan/ Map**

Attach a project site map that includes the [boundary of the downtown district](#), buildings, streets, and the location of the project clearly marked. You can search your designated area boundary here. (See Appendix C for sample site map).

☐ **Attachment I: Conceptual Design(s)**

Attach conceptual design(s) that details the scope of work. The conceptual design must be created using CAD or other professional design tool that shows specific details pertinent to the project and must be to scale. (See Appendix B for sample conceptual designs.)

- Note: If you are proposing bicycle or pedestrian facilities, please make sure the concept plan includes dimensions.
- The conceptual design must provide enough detail to ensure that state and national design standards (e.g. sidewalk width, bike lane width) are complied with. (Note that projects proposed in VTrans Right of Way require a State Highway Access and Work Permit and more detailed design plans may be required by the VTrans Permitting section. For additional information please see: <https://vtrans.vermont.gov/planning/permitting>).
- For more information see Vermont Agency of Transportation’s Bicycle & Pedestrian Design Resources specifically the sections “Engineering Instructions, Standard Drawings and Accessibility Guidance.”

☐ **Attachment J: Color Photographs**

Attach labeled, color photographs of the project site and surroundings, especially adjacent or nearby buildings impacted by the project. If the project involves or impacts historic resources (buildings and sites), include photos of elements or materials that will be removed, altered, or repaired. Photographs should be labeled with the project name or description, location/address, and the view (e.g. Streetscape Extension Project, Main Street, SW.jpg).

Attachment A:

Budget Worksheet and Funding Sources

Complete the budget form, itemizing the scope of work and the sources and amounts of all project funds. Indicate the unit cost and total cost of each item in the budget. Please indicate the status of each funding source. For larger projects, clearly identify the portion of work that this grant will be applied to.

Match Calculation:

The amount requested may not exceed 80% of the total project cost. There is a required 20% match. Federal, state, local and in-kind costs may be used as part of the match requirement. Match funds as part of the DTF project, cannot be used as match for any other projects.

You must provide 20% of total project costs, so that 20% of the total project costs come from the grantee and 80% from the State.

Example: If the Downtown Transportation Fund project cost is: \$100,000.00

The match required is: \$20,000.00

The State grant is: \$80,000.00

Allowable Matching Funds Contributions:

Matching funds (20% of the project) are funds that are set to be paid from other sources. Matching funds may consist of local, federal, and in-kind costs (up to 20%).

In-kind contributions are non-cash and may consist of municipal goods and/or services. Allowable in-kind contributions from the grantee include municipal machinery hours, staff hours, and material costs.

- REMINDER: Documentation of all project costs, matching funds, and in-kind contributions must be submitted at close-out.

Project Cost Breakdown			
		% of Project	Uses
Total Project Cost (100%)	State Grant	80% of the Project Costs Paid to the Grantee	Of the 80%, 20% can be used for Grantee in-kind work (with appropriate documentation). The remaining 60% must be documented with invoices to vendors.
	Match	20% of the Project Costs Absorbed by Grantee	Matching funds (which are not reimbursed) and can be either cash match (federal, state, town dollars) or in-kind (machinery or staff hours, material costs).

Itemized Project Budget Worksheet

[illegible]

Itemized Project Budget Worksheet Continued

[illegible]

Funding Sources

Include funding sources for the Downtown Transportation Fund Project and where funding is coming from. ***Please only include the DTF portion, not the total project.***

Funding Source <i>Examples: DTF funds, other grants, in kind services, etc.</i>	Status of Funding <i>Applied, received, awaiting update, etc.</i>	Amount
Total		

Attachment B:

Project Schedule

Complete the project schedule form with dates of completion for items such as permits, funding decisions, design, RFP, construction, and other important project details. (See Appendix E for a sample project schedule.)

[illegible]

Attachment C:

List of Required Permits

Provide a complete list of all required permits and the status of each.

[illegible]

Attachment D:

Municipal Resolution for Downtown Transportation Fund

WHEREAS, the Municipality of _____ is applying for funding as provided for in the State of Vermont FY 2026 Budget Act and may receive an award of funds under said provisions; and

WHEREAS, the Department of Housing and Community Development may offer a Grant Agreement to this Municipality for said funding; and

WHEREAS, the municipality has agreed to provide local funds for a downtown transportation grant.

Now, THEREFORE, BE IT RESOLVED

1. That the Legislative Body of this Municipality enters into and agrees to the requirements and obligations of this grant program including a commitment to match funds of 20% of total project cost;
2. That the Municipal Planning Commission recommends applying for said Grant;

(Name of Planning Commission Chair)

(Signature)

Passed this _____ day of _____, _____.

LEGISLATIVE BODY*

(name)		(signature)

INSTRUCTIONS FOR RESOLUTION FORM

1. The Legislative Body of the Municipality must adopt this resolution or one that will have the same effect. This Form may be filled in or the adopted Resolution may be typed on municipal letterhead, filling in the name of the municipality and the Legislative Body (e.g., Board of Selectmen).
2. Following formal adoption, the Resolution must be signed by a majority of the legislative body. The Chair of the Planning Commission must also sign upon endorsement by vote of the Planning Commission.
3. This form must be included in the grant application e-mailed to accd.cpr@vermont.gov.

Appendix E

Good Standing Certificate

Act 154 Good Standing Certification

Applicant Name _____
Address _____

As an authorized representative of the grant applicant and in accordance with Act 154 of 2016, Section 13*, I hereby certify on behalf of the Applicant that

(check one):

The Applicant is currently in “good standing” with the Agency of Natural Resources and the Agency of Agriculture, Food and Markets. The Applicant is not a named party in any administrative order, consent decree, or judicial order relating to Vermont water quality standards issued by the State or any of its agencies or departments and is in compliance with all federal and State water quality laws and regulations.

Further, the Applicant will notify the State agency or department administering this State-funded grant if no longer in good standing with the Agency of Natural Resources or the Agency of Agriculture, Food and Markets at any time prior to or during implementation of this State-funded award.

I am not able to certify that the Applicant is in “good standing” with the Agency of Natural Resources and the Agency of Agriculture, Food and Markets for the following reasons:

--

*A copy of Section 13 is on the opposite side of this Certificate or can be found at http://finance.vermont.gov/sites/finance/files/documents/Forms/Grant_Recipients/FIN-Act_154_Section_13.pdf. Any person should first review and understand applicable terms, instructions and potential consequences in Section 13, including the definition of “Applicant” for purposes of this Certificate.

Name	Title	
Signature		Date

This form must be completed and signed by an authorized official of the grant applicant organization.

Section 13 of Act 154 of 2016 – Certification for Grants

SECRETARY OF ADMINISTRATION; WATER QUALITY STANDARDS CERTIFICATION FOR STATE-FUNDED GRANTS; REPORT

(a) As used in this section:

(1) “Applicant” shall include all entities, including businesses in which the applicant has a greater than 10 percent interest, or land owned or controlled by the applicant.

(2) “Good standing” means the applicant:

(A) is not a named party in any administrative order, consent decree, or judicial order relating to Vermont water quality standards issued by the State or any of its agencies or departments; and

(B) is in compliance with all federal and State water quality laws and regulations.

(b) (1) The Secretary of Administration shall amend the Standard State Provisions for Contracts and Grants, referred to as Attachment C to Administrative Bulletin 5, to require an applicant for a State-funded grant to certify, under penalty of perjury, that the applicant is in good standing with the Agency of Natural Resources and the Agency of Agriculture, Food and Markets.

(2) The requirement under this subsection shall allow for an attachment or include space for an applicant who cannot certify under subdivision (1) of this subsection to explain the circumstances surrounding the applicant’s inability to certify under subdivision (1) of this subsection.

(3) At any time prior to the award of a State-funded grant or during implementation of a State-funded grant, an applicant shall notify the State agency or department administering the State-funded grant if the applicant is no longer in good standing with the Agency of Natural Resources or the Agency of Agriculture, Food and Markets.

(c) A State agency or department may consider an applicant’s certification or explanation under subsection (b) of this section in determining whether or not to award a State-funded grant to the applicant.

(d) (1) If a State-funded grant applicant knowingly provides a false certification or explanation under subsection (b) of this section or fails to

notify the State agency or department administering the State-funded grant if the applicant is no longer in good standing with the Agency of Natural Resources or the Agency of Agriculture, Food and Markets as required in subdivision (b)(3) of this section, the State or its agencies or departments may:

(A) seek to recover the grant award; and

(B) deny any future grant award to the applicant, based on the false certification or explanation or failure to notify, for up to five years.

2) In recovering a grant award under this section, the State or its agencies or departments shall be entitled to costs and expenses, including attorney’s fees.

(e) This section shall not apply to federally funded grants, contracts, or tax credits or federal or State loan programs.

(f) On or before January 15, 2021, the Secretary of Administration shall submit a report to the House Committees on Fish, Wildlife and Water Resources and on Commerce and Economic Development and the Senate Committees on Natural Resources and Energy and on Economic Development, Housing and General Affairs regarding methods to require all economic development assistance applications to include a certification that the applicant is not in violation of the requirements of programs enforced by the Agency of Natural Resources under 10 V.S.A. § 8003(a). The report shall also include information regarding any enforcement action taken by the State or its agencies or departments under subsection (d) of this section.

Attachment F

DTF HISTORIC PRESERVATION PROJECT REVIEW FORM

Vermont Division for Historic Preservation Downtown Transportation Fund – Community Planning & Revitalization Division

The Vermont Historic Preservation Act (22 VSA chapter 14) directs any agency, department, division, or commission to consult with the Vermont Advisory Council on Historic Preservation (VACHP) before demolishing, altering, or transferring any property that is potentially of historical, architectural, archaeological, or cultural significance; and states that the State Historic Preservation Officer (SHPO), through the administration of Vermont Division for Historic Preservation (VDHP), shall cooperate with state agencies in the planning and conduct of specific undertakings affecting historic properties and preservation objectives. The VACHP delegated to VDHP the authority to consult with Community Planning & Revitalization Division (CP&R) of the Department of Housing and Community Development within the Agency of Commerce and Community Development to review and resolve any impacts to historic resources (buildings and sites) in accord with state law.

The Downtown Transportation Fund (DTF) is a financing tool that assists municipalities in paying for transportation-related capital improvements within or serving a Designated Downtown. Investment in the infrastructure of public spaces stimulates private investment and creates a sense of identity and pride in Downtowns across Vermont.

For questions about the historic preservation review process please contact VDHP at accd.projectreview@vermont.gov. For questions about the DTF program and application please contact Natalie Elvidge at natalie.elvidge@vermont.gov.

To start the DTF historic preservation review process, please complete this form and submit it, with the information requested below, to VDHP at accd.projectreview@vermont.gov.

1. Applicant Contact Information:

a. Name:

b. Organization:

c. Email address:

d. Phone number:

2. Building/Project site information:

a. Project/Building name:

b. Property owner:

c. Address:

d. GIS Coordinates (when available):

3. Please provide a short description of the proposed project:

4. Project information:

- a. Project involves ground disturbance: Yes ☐ No ☐
- b. Building is more than fifty (50) years old: Yes ☐ No ☐
- c. Historic Resource is listed in the State or National Registers of Historic Places (check [Online Resource Center](#)):
Unsure ☐ Yes ☐ No ☐ In Historic District ☐
- d. Project involves other public funding or permitting: Yes ☐ No ☐

Please list other federal or state agencies involved in the project:

5. Type of review requested:

- a. ☐ Preliminary/conceptual review
- b. ☐ Final documentation review

6. Please also submit:

- a. ☐ Project location map (can be annotated google map or similar)
- b. ☐ Site map (including proposed ground disturbance)
- c. ☐ Project design plans
- d. ☐ Photographs of project area and historic resource(s) when applicable/available please submit
- e. ☐ Material Spec sheets
- f. ☐ Archaeological Reports
- g. ☐ Architectural Reports

Please email this form and supporting materials to ACCD.ProjectReview@vermont.gov

TO BE COMPLETED BY VDHP:

- ☐ Determination of Eligibility
- a. SHPO determination of eligibility for State Register of Historic Places
- Yes ☐ Individually Yes ☐ In Historic District No ☐

Date of DOE and Staff: _____

Comments:

- ☐ No Historic Properties Affected
- ☐ No Historic Resource Present in Area of Potential Effect
- ☐ Work will have No Effect on Historic Resource
- ☐ Historic Properties Affected
- ☐ Qualified Professional Historic Preservation Consultant will be required
- ☐ Qualified Professional Archeological Consultant will be required
- ☐ Archeological Resource Assessment (ARA) required
- ☐ Phase 1 archeological investigation required
- ☐ No Adverse Effect
- ☐ Conditions: _____

DATE: _____

- ☐ Adverse Effect
- ☐ VACHP consultation required
- DATE: _____
- ☐ Project MOA or other agreement docs executed
- DATE: _____
- ☐ Grant Conditions: _____

DATE: _____

- ☐ Concur with Final Design Plans and/or completed conditions

DATE: _____

Comments/Justification Related to Requirements:

☐ Preliminary/conceptual Approval

☐ Final Documentation Approval

**any project changes not included as part of this review must be evaluated by VDHP prior to construction/implementation*

X: _____
For: **Vermont Division for Historic Preservation**