

## MDOT Prioritization Pilot

### Sample Completed Application

Project Type: Transit Oriented Development

*An asterisk (\*) indicates a required field. Blue text signals branching logic (e.g., if an applicant answers X, ask question Y.). Red text represents a sample response.*

## Introduction

The following application outlines the project information needed for the Maryland Department of Transportation's (MDOT's) new project prioritization process for evaluating surface transportation capacity enhancing projects requesting funding in the Consolidated Transportation Program (CTP). This process is intended only for projects that are located or operate on the state system or that provide benefits to the state system.

Please note that the current round of the prioritization process is a **pilot round** in which MDOT and applicants can test the application process. There is currently **no funding** associated with this pilot round, and it is not anticipated that any projects will be funded through it. The pilot will, however, help MDOT strengthen the system and enable applicants to understand and become familiar with it so that when funding becomes available in the future, the prioritization process and applicants are better prepared.

### Application Due Date

Applications for the pilot round of the new prioritization process are due by 11:59 pm on February 18, 2025. Applicants are responsible for completing the application to provide the requested information and data to evaluate proposed projects.

### New Transparency Provision

Submitted applications, excluding items such as personal data, will be made available for public review via the MDOT website. All application fields, unless otherwise marked, will be made public to allow elected officials, community members, businesses, and other interested stakeholders the opportunity to review and be better informed on potential surface transportation capacity enhancing projects. This will provide greater opportunity for these individuals to comment on potential projects being considered by MDOT for funding.

### Applicant Resources

Applicants are encouraged to review the new prioritization process resources available via the MDOT website ([www.mdot.maryland.gov/tso/pages/Index.aspx?PageId=83](http://www.mdot.maryland.gov/tso/pages/Index.aspx?PageId=83)), including the technical guide, responses to frequently asked questions (FAQs), and information session recordings.

Further questions about the application or the new project prioritization process can be directed to [prioritization@mdot.maryland.gov](mailto:prioritization@mdot.maryland.gov).

## Section 1: Applicant Information

Full Name\*

Jane Jacobs

Title/Role\*

**Planner III**

Organization\*

**XYZ County Department of Transportation**

Organization Type\*

*[select one]*

- County Government
- Municipal Government
- State Government Agency
- Independent City
- Metropolitan Planning Organization (MPO)
- Locally Operated Transit System (LOTS)

Address Line 1\*

**789 Chestnut Street**

Address Line 2

City\*

**Y Town**

State\*

**MD**

Zip Code\*

**XXXXX**

Applicant Point-of-Contact Email Address\* *[Not shared with the public, for questions about the application]*

**Jane.Jacobs@XYZCounty.gov**

Project Email Address\* *[Public-facing, for questions about the project]*

**planning@XYZCounty.gov**

Applicant Point-of-Contact Phone Number\* *[Not shared with the public, for questions about the application]*

**XXX-XXX-XXXX**

## Section 2: Documentation Screening

Project Name\*

**C Station Transit Oriented Development**

### Project Type & Eligibility

Select the modal/facility type:\*

*[select all that apply]*

*Please select all that apply. For example, an applicant submitting a highway widening project that also includes the installation of a new bike lane should select both 'highway capacity project' and 'bike/pedestrian capacity project.' An applicant submitting a Complete Streets or Road Diet project with bike/pedestrian amenities should select 'bike/pedestrian capacity project.' As a reminder, eligible*

*projects are surface transportation capacity enhancing projects for which the state funding request, including federal funding that MDOT controls, is at least \$5 million and less than \$400 million.*

- Highway capacity project – adds new through or auxiliary lanes to a roadway, constructs a new roadway, constructs new interchange, modifies an existing interchange in a manner that allows it to move more people, or modifies an existing intersection in a manner that allows it to move more people.
- Transit capacity project – increases passenger capacity (e.g., adds a new rail platform, expands a park-and-ride, adds bus only lanes, or adds new routes; includes commuter rail)
- Bike/pedestrian capacity project – adds or expands bike or pedestrian facilities (including via Complete Streets or Road Diet efforts).
- Intercity passenger or commuter rail capacity project – increases passenger capacity (e.g., adds a new rail platform, adds new rail track, or otherwise results in increased service levels).
- Intelligent transportation systems project – increases highway capacity through a combination of technology and physical infrastructure.
- None of the above.

Select the scope type:\*

*[select one]*

- Expansion project – adds capacity to existing transportation amenities or services. Examples include: highway widening, increased frequency of service on an existing bus route, or modification of an existing interchange.
- New road/service project – provides a transportation service where it did not previously exist. Examples include: the creation of a new bus route, the installation of a new bike lane or sidewalk, or the construction of a new transit station.
- Other

Is the total requested funding for the project, including both capacity expansion and State of Good Repair (SGR) components, as applicable, at least \$5 million?\* *[Not shared with the public]*

*[select one]*

- Yes.
- No.

Is the total requested funding for the project, including both capacity expansion and State of Good Repair (SGR) components, as applicable, less than \$400 million?\* *[Not shared with the public]*

*[select one]*

- Yes.
- No.

Does this project have a completed feasibility study or an equivalent document?\* *[Not shared with the public]*

*[select one]*

- Yes.
- No.

*IF APPLICANT ANSWERS “Yes.” TO “Does this project have a completed feasibility study or an equivalent document?,” ASK:*

Upload the project's completed feasibility study or the equivalent document.\*

[upload file]  
✓ Uploaded!

*IF APPLICANT ANSWERS "Yes." TO "Does this project have a completed feasibility study or an equivalent document?\*" ASK:*

Which alternative and/or option do you want scored? Please describe any differences between the alternative described in the feasibility study (or equivalent document) and the current proposed project.\*

**The proposed project is summarized in the attached feasibility study, beginning on p. 2. There is one difference between the feasibility study and currently propose project. Instead of a pedestrian bridge over A Road, there will now be a 30' wide raised crosswalk.**

Upload a concept plan of the project's proposed improvements.\*

*The concept plan should provide an aerial view of the project location and clearly identify all proposed improvements and their limits. All roads and transportation facilities should be labeled, and map features (legend, scale, and north arrow) should be included. For transit facility projects, new routes and routes that will have an increase in frequency or speed should be identified.*

[upload file]  
✓ Uploaded!

*[see <https://www.mdot.maryland.gov/tso/pages/Index.aspx?PageId=83> for sample concept plan]*

Upload any other relevant supporting documentation.

[upload file]  
✓ Uploaded!

*[documentation of difference from feasibility study]*

*IF APPLICANT ANSWERS "No." TO "Is the total requested funding for the project at least \$5 million?\*" DISPLAY THE FOLLOWING MESSAGE: "This project is not eligible because the total requested funding is less than \$5 million."*

*IF APPLICANT ANSWERS "No." TO "Is the total requested funding for the project less than \$400 million?\*" DISPLAY THE FOLLOWING MESSAGE: "This project is not eligible because the total requested funding is \$400 million or more."*

*IF APPLICANT ANSWERS "NO." TO "Does this project have a completed feasibility study or an equivalent document?\*" DISPLAY THE FOLLOWING MESSAGE: "This project is not eligible because it does not have a completed feasibility study or equivalent document."*

### **Section 3. Project Prioritization Application (Part 1)**

#### **Project Scope, Budget, Purpose, and Need**

In which jurisdiction(s) is the project located?\*

[select all that apply]

- Allegany County
- Anne Arundel County
- Baltimore City
- Baltimore County
- Calvert County
- Caroline County
- Carroll County
- Cecil County
- Charles County
- Dorchester County
- Frederick County
- Garrett County
- Harford County
- Howard County
- Kent County
- Montgomery County
- Prince George's County
- Queen Anne's County
- Somerset County
- St. Mary's County
- Talbot County
- Washington County
- Wicomico County
- Worcester County
- XYZ County

**Provide the project limits:**

Start\*

**C Station parking lot**

End\*

**MD ABC, adjacent to station**

Total Cost\*

**\$900,000,000**

The sum of local funding, private funding, discretionary federal funding, and state and state-controlled federal funding request must equal the total cost.

Local Funding

**\$50,000,000**

Private Funding

**\$500,000,000**

Discretionary Federal Funding

**\$200,000,000**

State and State-Controlled Federal Funding Request\*

This should include both capacity expansion and State of Good Repair (SGR) components, as applicable.

**\$150,000,000**

Who developed the project's total cost estimate?\* [Not shared with the public]

- MDOT
- County or Municipality

- Metropolitan Planning Organization (MPO)
- Other: \_\_\_\_\_

In what year was the project's total cost estimate developed?\* *[Not shared with the public]*  
*If the estimate is more than 2 years old, MDOT will inflate costs to the expected start date.*

**2024**

Describe the project's purpose and need (in up to one paragraph).\*

**The proposed project will redevelop the large parking lot at C Light Rail Station into a transit oriented development (TOD). Additionally, it will transform the existing MD ABC alongside the station into a complete street, facilitating pedestrian access between the station/development and existing shopping center across the road. The project will consist of the following components:**

- (1) MD ABC, between Cross Street 1 and Cross Street 2, will be narrowed from four 12' lanes to two 10' lanes. The existing 5' sidewalks on both sides will each be replaced with an 8' sidewalk and a 4' buffer. Both sides will have 5' conventional bike lanes. The existing 12' left turn lanes will be replaced with a 10' left turn lane and 6' median.**
- (2) Midblock between Station Entrance 1 and Station Entrance 2, a 30' raised crosswalk will be added, connecting the station to the shopping center. The crosswalk will be highly visible and accompanied with a HAWK signal.**
- (3) To provide a 16' pedestrian refuge island at the midblock crossing, the taper lengths of the existing left turn lanes will be shortened. The taper of the left turn lane approaching Station Entrance 1 will be shortened from 60' to 40'. The taper of the left turn lane approaching Station Entrance 2 (which also serves as an entrance into the shopping center) will be shortened from 70' to 50'.**
- (4) The third of the station parking lot nearest the platform will be redeveloped into a 6-story parking garage, intended for station and retail patrons. The ground floor of the garage will be retail spaces. Floors 3-6 will overhang the existing bus bay. On all four sides of the garage will be roadways, each consisting of two 10' lanes, a 10' loading zone on the garage side, two 4' buffers, and two sidewalks. On the side of the parking garage, sidewalks will be 20' to accommodate outdoor seating at retail spaces providing food service. On the opposite side, sidewalks will be 6'.**
- (5) The rest of the parking lot will be redeveloped by DEF Corporation into a walkable village, with mixed uses, small blocks, slow streets reinforced by design, and sidewalks with generous widths and buffering. This section will be privately funded.**

#### **Section 4. Project Prioritization Application (Part 2)**

##### **Proposed Safety Improvements**

Which of the following safety improvements are included in this project?\*

*Please select all that apply and provide the best available information.*

*[select all that apply]*

- Widened shoulders

Route: \_\_\_\_\_

From (Starting Intersection): \_\_\_\_\_

To (Ending Intersection): \_\_\_\_\_

*[+ Add another location for this improvement type]*

- Dedicated turn lanes

Description of Improvement(s):

\_\_\_\_\_

Route: \_\_\_\_\_

Cross Street or Equivalent: \_\_\_\_\_

*[+ Add another location for this improvement type]*

- Rumble strips

Route: \_\_\_\_\_

From (Starting Intersection): \_\_\_\_\_

To (Ending Intersection): \_\_\_\_\_

*[+ Add another location for this improvement type]*

- Improved road alignment

Description of Improvement(s):

**Repurposing of travel lanes, reduction of travel lane width**

Route: **MD ABC**

From (Starting Intersection): **Cross Street 1**

To (Ending Intersection): **Cross Street 2**

*[+ Add another location for this improvement type]*

- Guardrail, median, or buffers

Route: **MD ABC**

From (Starting Intersection): **Cross Street 1**

To (Ending Intersection): **Cross Street 2**

Breaks: **Station Entrance 1, Station Entrance 2**

*[+ Add another location for this improvement type]*

**+Added**

- Guardrail, median, or buffers

Route: **All streets within TOD**

From (Starting Intersection): \_\_\_\_\_

To (Ending Intersection): \_\_\_\_\_

Breaks: \_\_\_\_\_

[+ Add another location for this improvement type]

**X** New lighting

Route: **MD ABC** \_\_\_\_\_

From (Starting Intersection): **Cross Street 1** \_\_\_\_\_

To (Ending Intersection): **Cross Street 2** \_\_\_\_\_

**X** New lighting

Route: **All streets within TOD** \_\_\_\_\_

From (Starting Intersection): \_\_\_\_\_

To (Ending Intersection): \_\_\_\_\_

[+ Add another location for this improvement type]

Other (please specify)

Improvement type: \_\_\_\_\_

Route: \_\_\_\_\_

From (Starting Intersection): \_\_\_\_\_

To (Ending Intersection): \_\_\_\_\_

[+ Add another location for this improvement type]

**Proposed Major Improvements**

Please complete the following sections for the major improvement types included in the proposed project. Do **not** enter details related to the following safety improvements: widened shoulders; dedicated turn lanes; rumble strips; improved road alignment; guardrail, median, or buffers; and new lighting. These should be described in the previous section, 'Proposed Safety Improvements.'

*IF APPLICANT ANSWERS "Highway capacity project" TO "Select the modal/facility type:\*, " ASK THE FOLLOWING SERIES OF QUESTIONS:*

**Highway Capacity Project Information**

Please complete the following set of questions separately for each major proposed improvement.

Improvement Description (e.g., widening, intersection improvement, etc.) \*

\_\_\_\_\_

# Lanes (Existing)\*

\_\_\_\_\_

# Lanes (Proposed)\*

\_\_\_\_\_

Improvement Location



Route:\*

Start:\*

End:\*

[+ Add another highway segment that will be modified by the proposed project]

*IF APPLICANT ANSWERS "Transit capacity project" TO "Select the modal/facility type:\*, " ASK THE FOLLOWING SERIES OF QUESTIONS:*

**Transit Capacity Project Information**

*Please complete the following set of questions separately for each major proposed improvement.*

Please list of all of the project's station or stop locations.

**C Station**

What transit route(s) or line(s) does this project create or enhance?

Route/line name\*

**Light Rail**

*Weekday hours of service:*

First trip on weekdays\*

**3:00 am**

Last trip on weekdays\*

**2:00 am**

*Weekday frequency of service (in minutes):*

Peak\*

**15**

Off-peak\*

**30**

*Travel time (end-to-end, in minutes):*

Peak\*

**80**

Off-peak\*

**75**

New Weekday Transit Passengers\*

*For guidance on the development of an estimate, please email [prioritization@mdot.maryland.gov](mailto:prioritization@mdot.maryland.gov) to be connected with MTA. MTA will review applicant-provided estimates.*

**200**

Who developed the project's new weekday transit passengers estimate?\* [Not shared with the public]

**GHI MPO**

[+ Add another transit route/line that will be modified by the proposed project]

**+Added**

Please list of all of the project's station or stop locations.

**C Station**

Route/line name\*

**MTA Bus X**

Weekday hours of service:

First trip on weekdays\*  
**5:00 am**

Last trip on weekdays\*  
**12:00 am**

Weekday frequency of service (in minutes):

Peak\*  
**30**

Off-peak\*  
**60**

Travel time (end-to-end, in minutes):

Peak\*  
**90**

Off-peak\*  
**80**

New Weekday Transit Passengers\*

For guidance on the development of an estimate, please email [prioritization@mdot.maryland.gov](mailto:prioritization@mdot.maryland.gov) to be connected with MTA. MTA will review applicant-provided estimates.

**30**

Who developed the project's new weekday transit passengers estimate?\* [Not shared with the public]

**GHI MPO**

[+ Add another transit route/line that will be modified by the proposed project]

**+Added**

Please list of all of the project's station or stop locations.

**C Station**

Route/line name\*

**XYZ County Bus Y**

Weekday hours of service:

First trip on weekdays\*  
**6:00 am**

Last trip on weekdays\*  
**10:00 pm**

Weekday frequency of service (in minutes):

Peak\*  
**25**

Off-peak\*  
**45**

Travel time (end-to-end, in minutes):

Peak\*

20

Off-peak\*

15

New Weekday Transit Passengers\*

For guidance on the development of an estimate, please email [prioritization@mdot.maryland.gov](mailto:prioritization@mdot.maryland.gov) to be connected with MTA. MTA will review applicant-provided estimates.

30

Who developed the project’s new weekday transit passengers estimate?\* [Not shared with the public]

GHI MPO

[+ Add another transit route/line that will be modified by the proposed project]

IF APPLICANT ANSWERS “Bike/pedestrian capacity project” TO “Select the modal/facility type:\*,” ASK THE FOLLOWING SERIES OF QUESTIONS:

**Bicycle/Pedestrian Capacity Project Information**

Please complete the following set of questions separately for each major proposed improvement.

Improvement Description (e.g., new bike lane, new sidewalk, etc.)\*

Widening of sidewalk in both directions

Improvement Location

Route:\*

MD ABC

Start:\*

Cross Street 1

End:\*

Cross Street 2

Length of new bike lane (miles):\*

0

Length of new sidewalk (miles):\*

0.61

[+ Add another bike or pedestrian improvement]

+Added

Improvement Description (e.g., new bike lane, new sidewalk, etc.)\*

Installation of new bike lanes

Improvement Location

Route:\*

MD ABC

Start:\*

Cross Street 1

End:\*

Cross Street 2

Length of new bike lane (miles):\*

0.61

Length of new sidewalk (miles):\*

0

[+ Add another bike or pedestrian improvement]

+Added

Improvement Description (e.g., new bike lane, new sidewalk, etc.)\*

Installation of new midblock crosswalk with HAWK signal

Improvement Location

Route:\* **MD ABC** Start:\* **Cross Street 1** End:\* **Cross Street 4**

Length of new bike lane (miles):\* **0** Length of new sidewalk (miles):\* **0**

[+ Add another bike or pedestrian improvement]  
**+Added**

Improvement Description (e.g., new bike lane, new sidewalk, etc.)\*

**Installation of new sidewalks**

Improvement Location

Route:\* **Entire TOD** Start:\* **N/A** End:\* **N/A**

Length of new bike lane (miles):\* **0** Length of new sidewalk (miles):\* **1.8**

[+ Add another bike or pedestrian improvement]  
**+Added**

Improvement Description (e.g., new bike lane, new sidewalk, etc.)\*

**Installation of parallel-bar pattern crosswalks**

Improvement Location

Route:\* **Entire TOD, all intersections & legs** Start:\* **N/A** End:\* **N/A**

Length of new bike lane (miles):\* **0** Length of new sidewalk (miles):\* **0**

[+ Add another bike or pedestrian improvement]  
**+Added**

*IF APPLICANT ANSWERS "Intercity passenger or commuter rail capacity project," TO "Select the modal/facility type:\*, " ASK THE FOLLOWING SERIES OF QUESTIONS:*

**Intercity Passenger Rail Capacity Project Information**

*Please complete the following set of questions separately for each major proposed improvement.*

What intercity passenger rail facilities or tracks does this project modify?

Facility or Track Name(s)\*

New Weekday Passengers\*

For guidance on the development of an estimate, please email [prioritization@mdot.maryland.gov](mailto:prioritization@mdot.maryland.gov) to be connected with MTA. MTA will review applicant-provided estimates.

Who developed the project’s new weekday transit passengers estimate?\* [Not shared with the public]

Description of Proposed Improvements\*

*IF APPLICANT ANSWERS “Intelligent transportation systems project – increases highway capacity through a combination of technology and physical infrastructure.” TO “Select the modal/facility type:\*,” ASK THE FOLLOWING SERIES OF QUESTIONS:*

**Intelligent Transportation Systems (ITS) Project Information**

Please complete the following set of questions separately for each major proposed improvement.

Improvement Description\*

# Lanes (Existing)\*

# Lanes (Proposed)\*

Improvement Location

Route:\*

Start:\*

End:\*

[+ Add another ITS improvement]

Would the proposed project increase pedestrian accessibility in or around the project location?\*

- Yes.
- No.

*IF APPLICANT ANSWERS “Yes.” TO “Would the proposed project increase pedestrian accessibility in or around the project location? \*,” ASK THE FOLLOWING:*

How would the proposed project increase pedestrian accessibility?

**The proposed project calms traffic on MD ABC via lane repurposing and narrowing; installs a midblock crosswalk with HAWK signal on MD ABC; installs sidewalk buffers and pedestrian refuge islands on MD ABC; and converts a large parking lot into a walkable town center with buffered sidewalks, small blocks, and slow streets.**

Does the proposed project include replacement of a transportation facility or reconstruction of a transportation facility with a remaining useful life of 20 years or less?\*

If you are not sure on the remaining useful life but believe it is 20 years or less, please select 'maybe,' and SHA or MTA, as appropriate, will validate the remaining useful life of the asset(s). The purpose of this

information is to give credit to the project in the prioritization process by reducing the costs considered for purposes of the 'score to cost ratio' used to rank projects.

- Yes.
- No.
- Maybe.

*IF APPLICANT ANSWERS "Yes." or "Maybe." TO "Does the proposed project include replacement of a transportation facility or reconstruction of a transportation facility with a remaining useful life of 20 years or less?\*", ASK THE FOLLOWING:*

Please identify mile posts and bridge numbers (available here:

<https://data.imap.maryland.gov/datasets/maryland::bridge-structure-location/explore?showTable=true>) for each included asset, as applicable. Please note the in-kind

replacement cost estimate for each included asset. Please include a date and source for each estimate.

## Section 5. Submit

### Signed Resolution or Letter

All applicants must have a resolution or letter signed by their elected or governing body sponsoring the project. Please upload a PDF of your signed resolution or letter below.

*[+ Upload Signed Resolution or Letter]*

**✓ Uploaded!**

*[see <https://www.mdot.maryland.gov/tso/pages/Index.aspx?PageId=83> for endorsement letter template]*

**To the MDOT Prioritization Team:**

**On behalf of XYZ County, I affirm the C Station TOD has the support and endorsement of the County for the Maryland Department of Transportation's (MDOT's) Project Prioritization process. Please do not hesitate to be in touch should any additional information be of use.**

**Sincerely,  
[County Executive's Signature]  
[County Executive's Name]  
[County Executive's Title]**

### Submit

I attest that I am authorized to submit this application on behalf of my organization and that all information contained within is true and correct to the best of my knowledge.

Signature  
*[select one]*

Text       Draw

Your Name

**Jane Jacobs**

**Jane Jacobs**