EXHIBIT 3-Q REQUEST FOR AUTHORIZATION TO PROCEED WITH NON-INFRASTRUCTURE PROJECT (CONSTRUCTION PHASE)

[Place this form on Local Agency Letterhead]

	Date:	
To:		
District Local Assistance	FTIP/FSTIP ID:Engineer	
Caltrans, Office of Local	Federal Project No:	
Califalis, Office of Local I	Project ID/Advantage ID:	
	PPNO (For STIP Projects only):	
	Project Description:	
Dear		
you secure Federal Authorization texceed those provided to this agen	rsable work for the above-referenced non-infrastructure project, we request to Proceed and the obligation of funds. The federal funds requested will not acy in the federally approved Federal Transportation Improvement Program relation Improvement Program (FSTIP).	hat
Attached are the following docume	ents required to authorize this phase of work:	
Request for Authorization Package	2	
[] Completed Exhibit 3-E <i>Re</i> [] Copy of FTIP/FSTIP Refe [] Completed Exhibit 3-O <i>Fi</i> [] NI project work plan, budget	inance Letter	
Agreement End Date (AED)		
The project AED must be identifie which of the following applies:	ed on Exhibit 3-O Sample Local Federal-aid Project Finance Letter. Check	
	requested with this submittal. Date: ed with this submittal. Date:	
Toll Credit Usage		
[] This project will use Toll [] This project will NOT use	•	
Field Review Form (Exhibit 7-B)		
[] Completed Exhibit 7-B <i>Fi</i> [] Project Application for SR		

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January 2019

[] Categorical Exclusion (CE). Application of the control of the	oproval Date: eening Form for Non-Infrastructure Projects (PES-NI)
Disadvantaged Business Enterprise (DB	<u>E)</u>
[] For consultant contracts a Disac contract and Exhibit 10-O1 <i>Con</i>	roject will be performed by local agency staff. Ivantaged Business Enterprise (DBE) goal will be established for each esultant Proposal DBE Commitment will be submitted with each proposal. ution, Exhibit 10-O2 Consultant Contract DBE Information shall be
A&E Consultant Contracts	
[] Consultant contract(s) already	executed.
Acceptance date of Exhibit 10-C by Caltrans	Name of Consultant
acceptance prior to contract a [] Work is being done by Local A	
acceptance prior to contract a [] Work is being done by Local A	award. Agency staff.

Project Agreement and Liquidation of Funds

Upon issuance of Authorization to Proceed (E-76) by the Federal Highway Administration (FHWA), a Program Supplement Agreement (PSA) and state approved project Finance Letter will be prepared to encumber the federal and/or state funds for the project. This Agency understands that any federal and/or state funds encumbered for the project are available for reimbursement until the applicable fund reversion date(s) shown on the state approved project Finance Letter (unless an extension is granted by the Department of Finance).

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Invoice Submittal

This Agency understands that only work performed after federal "Authorization to Proceed" (E-76) is eligible for reimbursement. Invoices for reimbursement will not be submitted until after the federal and state (if applicable) funds are encumbered via an executed "Program Supplement Agreement" and/or State approval Finance Letter. In addition, it is also understood that an invoice must be submitted at least once every six (6) months for each project phase until all funds are expended.

CERTIFICATION

I certify that the facts and statements in this Request for Authorization Package are accurate and correct. This Agency agrees to comply with the applicable terms and conditions set forth in Title 23, U.S. Code, Highways, and the policies and procedures promulgated by the FHWA and California Department of Transportation (Caltrans) relative to the above-designated project.

I understand that this Agency is responsible for all costs in excess of the federal and/or state funds obligated encumbered as well as for all costs it incurred prior to receiving the FHWA issued "Authorization to Proceed." I further understand that all subsequent phases of the project will require a separate "Federal Authorization to Proceed."

Please advise us as soon as the "Authorization to Proceed" has been issue	d. You may direct any questions to
at	<u>.</u>
Signature of Full-time Local Agency Employee in Responsible Charge	
Print Name	
Title	
Agency	

Distribution: DLAE

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