

Preliminary Engineering Phase over 10 years Time Extension Request



Federal Highway Administration		Caltrans*			
1. Federal Aid Project No.	2. FSTIP ID No.	3. District		4. Responsible Agency	5. Date
6. Project Location			7. Description of work. Reason for delay and measures taken to resolve issues: Please state the original scope of the project, if scope of work has change explain why the changes took place.		

			place. NOTE: Shifting political priorities (e.g. ARRA), insufficient transportation budgets and staffing issues will not be considered an acceptable justification for a time extension request.
8. Previous Extension Request (If "Yes",			
enter the date and select decision.)		· · · · · · · · · · · · · · · · · · ·	-
No	Date	Decision	
Yes			
If "Yes" Expiration Date			
If "Yes", attach FHWA Approval Letter		proval Letter	
9. Reason for Delay]
10 Submiss	ion Checklist ALL	items	

must be included as part of the packet.	11. Consequences if Time Extension is not granted			
Chronology of delay (e.g. ROW/ENV/LIT)				
Schedule of Milestones				
Latest Finance Letter				
Completed Signature Page				
12. Agency Contact	13. Phone No.	14. E-mail address	15. Date Submitted	

DISTRICT USE ONLY

Office of Bridge, Bond, and Safety Program

Date Received:

Reviewed By:

Reviewed By:

Submission Checklist:

Original E-76

Current E-76

Authorization Date:

HBP

Last Billing Date:

Environmental Documentation (e.g. NEPA/PES Signature)

NEPA

Federal Funds:

FMIS Unexpended Funds:

Completed Signature Page

Date forwarded to FHWA

Date Forwarded to OBBSP:



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The undersigned has reviewed the "Time Extension Request" for the following content and accuracy.

Based on this review, the undersigned has accepted the "Time Extension Request".

	Federal Aid Project No.					
	FSTIP ID No.					
	Responsible Agency					
Agency Contact AGENCY USE ONLY	l understand t	nat typing my name in the Type Name section below, checking of to the words "I agree", constitutes my electronic signature.				
Phone No. E-mail	I Agree	Name				
DISTRICT AREA ENGINEER USE ONLY		nat typing my name in the Type Name section below, checking to the words "I agree", constitutes my electronic signature.				
DLAE Contact	I Agree	Name				
Phone No.						
E-mail						
FHWA USE ONLY						
APPROVED	DENIED	Federal-Aid Ineligibility Notification Attached				
Approved until	Project to close by					
File Reference:						
Comments:						
FHWA Contact:		I understand that typing my name in the Type Name section below, checking on the box next to the words "I agree", constitutes my electronic signature.				
E-mail	I Agree	Name				