

Attachment B

**TDA Article 3 Project Application Form**

1. <b>Agency</b>	City and County of San Francisco		
2. <b>Primary Contact</b>	Joyce Lee-Yip		
3. <b>Mailing Address</b>	San Francisco Public Works, 49 South Van Ness Ave, 16 <sup>th</sup> Fl, San Francisco CA 94103		
4. <b>Email Address</b>	Joyce.lee-yip@sfdpw.org	5. <b>Phone Number</b>	
6. <b>Secondary Contact</b> (in the event primary is not available)	Victoria Chan		
7. <b>Mailing address</b> (if different) N/A <input type="checkbox"/>			
8. <b>Email Address</b>	victoria.w.chan@sfdpw.org	9. <b>Phone Number</b>	
10. <b>Send allocation instructions to</b> (if different from above):			
11. <b>Project Title</b>	Public Sidewalk Repair and Reconstruction		
12. <b>Amount requested</b>	\$ 681,408	13. <b>Fiscal Year of Claim</b>	FY 21-22, FY 22-23 and FY 23-24

**14. Description of Overall Project:**

Public sidewalk repair and reconstruction.
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**15. Project Scope Proposed for Funding:** (Project level environmental, preliminary planning, and ROW are ineligible uses of TDA funds.)

TDA funds will pay for labor and materials to repair damaged public sidewalks, curbs, gutters, and angular returns at various locations throughout San Francisco.
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**16. Project Location:** A map of the project location is attached or a link to a online map of the project location is provided below:

Citywide
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**Project Relation to Regional Policies** (for information only)

- 17. Is the project in an [Equity Priority Community](#)? Yes  No
- 18. Is this project in a [Priority Development Area](#) or a [Transit-Oriented Community](#)? Yes  No

**19. Project Budget and Schedule**

## Project Eligibility

Project Phase	TDA 3	Other Funds	Total Cost	Estimated Completion (month/year)
Bike/Ped Plan				
ENV				
PA&ED				
PS&E				
ROW				
CON	681,408		681,408	06/2025
Total Cost	<b>681,408</b>	-		

- A.** Has the project been reviewed by the Bicycle and Pedestrian Advisory Committee? Yes  No   
 If "YES," identify the date and provide a copy or link to the agenda.  
 If "NO," provide an explanation).
- B.** Has the project been approved by the claimant's governing body? Yes  No   
 If "NO," provide expected date: \_\_\_\_\_
- C.** Has this project previously received TDA Article 3 funding? Yes  No   
 (If "YES," provide an explanation on a separate page)
- D.** For "bikeways," does the project meet Caltrans minimum safety design criteria pursuant to [Chapter 1000 of the California Highway Design Manual](#)? Yes  No
- E. 1.** Is the project categorically exempt from CEQA, pursuant to CCR Section 15301(c), Existing Facility? Yes  No
- 2.** If "NO" above, is the project is exempt from CEQA for another reason? Yes  No   
 Cite the basis for the exemption. \_\_\_\_\_  
 If the project is not exempt, please check "NO," and provide environmental documentation, as appropriate. N/A
- F.** Estimated Completion Date of project (month and year): \_\_\_\_\_ June 2025 \_\_\_\_\_
- G.** Have provisions been made by the claimant to maintain the project or facility, or has the claimant arranged for such maintenance by another agency? (If an agency other than the Claimant is to maintain the facility, please identify below and provide the agreement. Yes  No
- H.** Is a Complete Streets Checklist required for this project ? Yes  No   
 If the amount requested is over \$250,000 or if the total project phase or construction phase is over \$250,000, a Complete Streets checklist is likely required. Please attach the Complete Streets checklist or record of review, as applicable. More information and the form may be found here: <https://mtc.ca.gov/planning/transportation/complete-streets>