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| 1. **Applicant Information**
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| 1. †Applicant: Click or tap here to enter text.
2. Primary contact: Click or tap here to enter text.
3. Mailing address: Click or tap here to enter text.
4. Phone number: Click or tap here to enter text.
5. Email: Click or tap here to enter text.
6. Is the Applicant a public sector agency or a private sector organization? Click or tap here to enter text.
7. Describe the Applicant’s organizational structure, including members of the project team: Click or tap here to enter text.
8. What is the Applicant’s fiscal year end date? Click or tap here to enter text.

†*Applicant refers to the entity requesting the SIB loan. The entity should have the authority to execute the loan agreement and receive SIB funds for eligible project costs.* |
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| 1. **Project Information**
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| 1. Project name: Click or tap here to enter text.
2. \*Describe the project, including location, project limits and transportation mode. Provide graphics if available: Click or tap here to enter text.
3. Describe the purpose of the project, include public and economic benefits the project will achieve: Click or tap here to enter text.
4. Describe the design features of the project: Click or tap here to enter text.
5. How does the project foster innovative partnerships between private and public sectors and attract private debt or equity investment? Click or tap here to enter text.
6. How does the project use new technologies, including intelligent transportation systems, to enhance the efficient operation of the project? Click or tap here to enter text.
7. How does the project help maintain or protect the environment? Click or tap here to enter text.
8. How does the project provide transportation benefits for improving intermodalism, cargo and freight movement, and safety? Click or tap here to enter text.
9. How does the project provide for connectivity between the State Highway System and airports, seaports, rail facilities, and other transportation terminals and intermodal options pursuant to Section 341.053, F.S. for the increased accessibility and movement of people and goods? Click or tap here to enter text.
10. \*Does the project address damage from a disaster that led to an official state declaration of emergency? If yes, answer questions A. & B. below and provide supporting documentation related to damage claims filed with FEMA or an applicable insurance carrier. [ ]  Yes [ ]  No
11. To what extent did the damage impact a public transportation facility’s ability to maintain its previous level of service and remain accessible to the public? Click or tap here to enter text.
12. To what extent did the damage impact the cash flow or revenue-generation ability of the public-use facility? Click or tap here to enter text.
13. Does the project meet the following eligibility requirements? See SIB FAQ page for details and resources - <https://www.fdot.gov/comptroller/pfo/sib-faqs.shtm>

A. Federal/State Guidelines: [ ]  Yes [ ]  No B. Section 339.55, F.S. – Florida State Infrastructure Bank: [ ]  Yes [ ]  No 1. Is the project eligible to receive federal funds? [ ]  Yes [ ]  No
2. Is the project part of the Strategic Intermodal System or the Emerging Strategic Intermodal System (Section 339.63, F.S.)? [ ]  Yes [ ]  No - Please specify: Click or tap here to enter text.
3. Is the project eligible for the Transportation Regional Incentive Program (Section 339.2819, F.S.)? [ ]  Yes [ ]  No
4. \*Is the project included in the Adopted Comprehensive Transportation Plan of the applicable Metropolitan Planning Organization (Section 339.175, F.S.), and the Florida Transportation Plan (Section 339.155, F.S.)? Provide adoption documentation or provide the anticipated adoption date. [ ]  Yes [ ]  No – Adoption date: Click or tap here to enter text.
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| 1. Do the engineering plans and use of personnel/consultants meet minimum qualifications of Rule Chapter 14-75.003, Florida Administrative Code? [ ]  Yes [ ]  No [ ]  N/A
2. Has/Will Right-of-Way (ROW) been acquired in compliance with Public Law 91-646, Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended and all laws and rules governing ROW acquisition? [ ]  Yes [ ]  No [ ]  N/A
3. Will SIB funds enable work to proceed on the project at an earlier date than would otherwise be possible? [ ]  Yes [ ]  No - Please explain: Click or tap here to enter text.
4. If a SIB loan is awarded, will the project commence within 90 days of execution of the agreement and availability of SIB funds? [ ]  Yes [ ]  No
5. Provide the development schedule of the project:

A. Anticipated project advertisement date: Click or tap here to enter text.B. Anticipated project start date: Click or tap here to enter text.C. Anticipated project completion date: Click or tap here to enter text.1. Describe the status of the project’s environmental review: Click or tap here to enter text.
2. Does the project engineering comply with the Department’s Project Development and Environmental (PD&E) Manual? [ ]  Yes [ ]  No - Please explain: Click or tap here to enter text.
3. Do the project environmental impacts comply with the Department’s Project Development and Environmental (PD&E) Manual? [ ]  Yes [ ]  No - Please explain: Click or tap here to enter text.

FDOT PD&E Manual - <https://www.fdot.gov/environment/pubs/pdeman/pdeman-current>  |
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| 1. **Loan Information**
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| 1. Proposed loan repayment term (number of years): Click or tap here to enter text.
2. Proposed interest rate (provide rationale): Click or tap here to enter text.
3. Anticipated loan disbursement schedule (total should equal total proposed SIB loan amount):

July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text. July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text. July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text. July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text. July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text. July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text. July 1, Choose an item. – June 30, Choose an item. : Amount: $Click or tap here to enter text.  Total amount: $Click or tap here to enter text.1. Provide a description of the primary revenue source(s) that will be pledged to repay the SIB loan: Click or tap here to enter text.
2. Provide a description of any alternative/backstop revenue sources that may also be pledged to repay the SIB loan, if applicable: Click or tap here to enter text.
3. \*If the listed repayment source(s) include local fees, taxes and/or other local revenues, provide the date the resolution was or will be approved and adopted by the local government. Provide supporting documentation: Click or tap here to enter text.
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| 1. **Financial Information**
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| 1. \*Provide a financial plan using Microsoft Excel. The financial plan should include sufficient detail to assess the economic feasibility of the project. The financial plan should include anticipated SIB loan disbursements, repayments and other outstanding debts that are supported by the pledged revenues. The financial plan should reflect the most current cost estimates and forecasts (within six months of application date). Provide assumptions used and documentation supporting financial projections used in the plan.
2. \*Provide the Applicant’s audited financial statements for the past two fiscal years.
3. Provide applicable anticipated funding sources:
4. Proposed SIB loan amount: $Click or tap here to enter text.
5. Prior SIB loan amount awarded on this project: $Click or tap here to enter text.
6. Federal contributions: $Click or tap here to enter text.
7. State contributions: $Click or tap here to enter text.
8. Local contributions: $Click or tap here to enter text.
9. Private sector contributions: $Click or tap here to enter text.
10. Bond proceeds: $Click or tap here to enter text.
11. Other (provide description): $ Click or tap here to enter text. Click or tap here to enter text.
12. Estimated total project cost: $Click or tap here to enter text.
13. If bond proceeds are used to help finance this project, provide details below (if not applicable, proceed to question 5):
14. Anticipated date of bond sale: Click or tap here to enter text.
15. Type of bond (G.O., revenue): Click or tap here to enter text.
16. Bond rating: Click or tap here to enter text.
17. Bonds tax-exempt: [ ]  Yes [ ]  No
18. Issuer of bonds, issuer minimum coverage ratio, source of revenue servicing debt and maturities: Click or tap here to enter text.
19. How would the proposed SIB loan impact lifecycle costs for the project and accessibility to other debt financing? Click or tap here to enter text.
20. Provide a breakdown of all costs by project activity (i.e. design, construction, Right-of-Way, etc.): Click or tap here to enter text.
21. Describe the proposed project’s creditworthiness in relation to the Applicant’s outstanding debt: Click or tap here to enter text.
22. Describe rate covenants associated with the Applicant’s existing debts, if applicable: Click or tap here to enter text.
23. What is the anticipated lien position of the SIB loan if the pledged repayment source services existing debt: Click or tap here to enter text.
24. Describe how adequate debt service coverage will be achieved to ensure repayment of the proposed SIB loan and any existing debt: Click or tap here to enter text.
25. \*Provide any additional documentation and reports to support the assumptions made in this application (i.e., historical revenues, feasibility studies, Traffic and Revenue reports, etc.).
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Refer to <https://www.fdot.gov/comptroller/PFO/sib.shtm> for additional information.

\**Include supporting documentation with submission*