

Form 1.1 Application

- 1. Agency Name** DCA
- 2. Date of Application Submittal to DEP** 2020-03-13
- 3. CDBG-DR Program** Atlantic City Resilience Program (ACRP)
- 4. Application ID Number** AC Intersections
- 5. National Objective Description/Number** LMI
- 6. Grant Number** B-13-DS-34-0001
- 7. Applicant Name** City of Atlantic City (First) Intersections (Last)
- 8. Project Location** 28 Separate Intersections, (Street Address)
City of Atlantic City (Municipality) Atlantic (County) New Jersey (State)
Multiple (Block) Multiple (Lot)

(A separate form with a unique Application ID number is required for each location.)

9. Detailed Project Description

Provide a thorough description of the existing conditions at the site, work that will occur at the site, and the final project outcome. See Appendix A for directions.

The proposed project includes the inspection, upgrade and replacement of traffic signals at 27 separate intersections (approximately 200 signals) throughout Atlantic City. Many of these signals have control centers that are located below the 500-year floodplain limitation for critical features. The City plans to retain an experienced engineering firm to complete an inventory of all the existing traffic signals and to develop and implement a capital plan. The capital plan will include elevating control centers where needed to comply for federal and State requirements, upgrade systems that were damaged by Superstorm Sandy and similar storm events, and synchronize all signal to provide for emergency evacuations, produce a more efficient system and reduce harmful emissions. HUD funding requested by the City is 2,000,000.00 which is based upon estimated costs for professional services (\$200,000), upgrades (\$1,500,000) and construction contingencies (20 percent-\$300,000).

10. Change in Use

Will the project result in a change in use for the land or structure? If YES, please describe and document.

Examples:

- a. Residential use » Non-residential (commercial, industrial, or mixed use)
- b. Non-residential (commercial, industrial, or mixed use) » Residential

11. Change in Size or Capacity

Will the project result in a change in size or capacity of **any kind**? If YES, describe the percentage increase in size, footprint, number or capacity. Include any increase in number or square footage of main building(s), ancillary structure(s), parking areas, landscaping, paving, discharges such as sewage (wastewater), solid waste (trash), or process discharges, etc.

Examples:

- a. Increase in retail space, restaurant or theater seating capacity with 30% larger footprint and additional parking spaces.
- b. Addition of a second story to an existing building in the same footprint.
- c. Increase in production capacity of manufacturing facility by 15%
- d. Change in landscaping resulting in 25% more impervious surface/paving.

12. Market Value

What is the estimated cost of the rehabilitation as a percentage of the estimated post-rehab value of the building? Attach documentation such as comparable housing or commercial property prices.

Example:

The cost of the rehabilitation is currently projected at \$1,212,412. The estimated value of the property after rehabilitation is expected to be \$2,000,425. (Rehabilitation costs are 61% of the projected value at completion.)

☐ Right of Entry Form signed by property owner