

Delaware County Multi-Use Trail Assistance Application Deadline: June 16, 2023

APPLICAN	T: Orange Township, Ohio		06/06/23 Date:
Address:	680 East Orange Drive		
City:	ewis Center	ohio State:	Zip:
Contact:	ilas Bowers		
Title:	irector of Operations		
st Email:	bowers@orangetwp.org		
(Note: Contact s	should be available during business hours and be best to an	swer or coordinate a res	sponse to questions.)
PROJECT I	NAME: Green Meadows Drive Shared Us	e Path	
Brief Projec	ct Description:		
2	vnship is seeking funding through the Delaware feet of bike/pedestrian trail along Green Mead	-	Trail Program to construct
The trail will	I serve as a connector to segments of trail prev	iously constructed.	
area. When	see from the included Orange Township Trail r n this project is complete there will be trail conn h School and to businesses, houses and parks	ectivity from most o	of Green Meadow to
How does t	his Project relate to the Delaware County	Trail System Ma	ster Plan?
	seeks to further the master plan by connecting centers and business areas.	portions of our tra	Il network to the townships
trail network	ically, when complete, this segment will connect that includes Orange Road and extends as fad in the Delaware County Trail Plan,		
	een Meadows will connect to the larger trail net stem as well.	work in Orange To	wnship and eventually the

PROJECT FINANCIAL INFORMATION

Funding Amount Requested: \$40,0	(*)	
Proposed Use for DCTC Funds:		
These funds, along with funds from the township, will	ll be used for construction.	
Project Estimated Costs (include an opinion of cost estimate signed/sealed/s	stamped by a registered professi	onal engineer)
Engineering:	\$	
Construction:	\$130,000.00	
Right-of-way or easements:	\$	
Contingency:	\$	0.0%
TOTAL ESTIMATED COST:	\$130,000.00	
Project Financial Resources		
Local Revenues:	\$90,000.00	69.2 %
Other Public Revenues:	\$0.00 \$0.00 \$0.00	0.0 % 0.0 % 0.0 %
* DCTC Funding Requested:	\$40,000.00	30.8 %
TOTAL FINANCIAL RESOURCES: \$	130,000.00	100.0 % must equal 100%
Does your community have a financial plan for Please explain:	maintenance of the complet	ed project?
As with all Orange Township trails, we have program department budget.	ned their maintenance into our cu	irrent service

DETAILED PROJECT DESCRIPTION

(include a route map with property ownership identified, site photos and other appropriate info)

Specific Location and Work to be completed (including begin and end termini):

permit bocation and work to be completed (midding begin and end termin):	
The project location is along Green Meadows Drive starting at Orange Point Drive and extend west for approximately 858 feet.	ling north
Length: 858 feet Width: 10 Number of properties intersecting trail	: NA
Have all necessary easements on private property been secured? □ N/A ■ Ye Is the trail located within existing right-of-way? □ Ye	s □ No
Is the trail part of a preserve, natural or scenic corridor? $\ \ \Box$ Ye	s n No
Are there constructability issues or environmental concerns? \qquad Ye \text{Please explain how these will be addressed.}	s ■ No
Does this trail connect to an existing trail? Is the trail part of (or link to) the Central Ohio Greenway Trail system? Is the trail part of (or link to) the Delaware County Trail System Master Plan? If yes to any of the above three questions, please explain: There is a multi use path along Green Meadows Drive that this trail is connecting to and exter	s No
Does the trail provide a transportation alternative along with recreation? Does the trail connect destination locations (schools, parks, retail, restaurants, etc.)? Ye Please explain:	
Green Meadows Drive connects a number of businesses to subdivisions in the area. Addition employees of the local businesses can use the trail for exercise at their leisure.	ıally,

Please explain how the project will address equity or quality of life needs especially for the disadvantaged and/or underserved populations within your community: (Such populations may include low-income, minorities, senior citizens, veterans, children, persons with mental/physical disabilities, college students or other groups unintentionally excluded from planning processes) This trail will connect population segments in Orange Township to businesses. This will allow those in the township without cars access to jobs. Also, the increased connectivity of Orange Township trails, provides senior citizens easy access to parks and exercise opportunities. Please explain the Economic Opportunities this project may provide: This trail will expand the connection between people and jobs. **PROJECT SCHEDULE** (Enter dates as mm/dd/vy:) Engineering/Design Begin date: _____ End Date: Right-of-way/Easement Acquisition Begin date:_ End Date: Begin date: 09/01/23 End Date: 10/10/23 Bid Advertisement and Award Begin date: 03/01/24 End Date: 05/01/24 Construction When Funds from DCTC will be needed Begin date: 03/24/23 End Date: 05/01/24 SUPPLEMENTAL QUESTIONS Has your community adopted a Local Trail Plan? ■ Yes □ No Does your community have a Complete Streets policy or standards? Yes 🗆 No Are trails part of your community's zoning and development requirements? ■ Yes □ No Is there documented public support for the project? □ Yes ■ No Please explain:

Is there developer involvement in Please explain:	the project?		□ Yes ■ No
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ADDITIONAL Please provide any additional info to consider prior to making a dec (i.e. copies of Local Trail Plan, Compl showing connection to destination lo easements/right-of-way, proof of ot	ision to recommend fun lete Streets info, zoning/de ocations or other trails, imp	ding for this project velopment document oact on school zones, e	: ition, map widence of
Please find included with this applicat			ort on the
project and a map of the Orange Tow	nsnip trali system marking i	its exact location.	A characteristic for the characteristic for t
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APPLICANT CERTIFICATION	Philippink (Market Control of Con		essocial social appropriate the second secon
The undersigned certifies: (1) he/s	she is legally authorized	to request and accer	ot financial
ssistance from Delaware County;	(2) to the best of his/he	er knowledge and be	lief, all
epresentations that are part of th locuments and commitments of t			
authorized by the governing body			
ssistance be provided, the applica			
Certifying Representative: Silas	Bowers, Director of Op	erations	
Printed form, type or print Name	and Title)		
	5.1 0	6/15/2022	
Original Signature / Date Signed:	Silas Bowers	6/15/2023	
Submit Applications to Delaware C 109 N. Sandusky Street, P.O. Box 80			
OCTC Use Only			
Project #	Population Proximity	Recommend Project:	
Into submitted.	1 optimity		
te submitted:te reviewed:	1 miles:	Amount funded:	

