

Exhibit 14-B TCRP Allocation Request

**Section I. Project Information**

- A. Project Name: \_\_\_\_\_  
\_\_\_\_\_
  
- B. Specify the paragraph number, authorized dollar amount, and project description pursuant to Government Code Section 14556.40 (a) (AB 2928, Chapter 91 of the Statutes of 2000) authorizing this project:  
Paragraph Number: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ million
  
- C. Has the Project changed as defined in Section 7.2 or Section 7.3 of the TCRP Guidelines?  
  
\_\_\_\_ Yes, as defined in Section 7.2, complete this Allocation Request form and prepare a narrative describing the nature (what and why) of the change for submittal to the CTC for approval.  
\_\_\_\_ Yes, as defined in Section 7.3, complete this Allocation Request form and indicate:  
    \_\_\_\_ A narrative describing the nature (what and why) of the change is attached.  
    \_\_\_\_ An Amended Application for submittal to the CTC for approval is attached.  
\_\_\_\_ No, complete the Allocation Request form.

**Section II. Approved Application Information**

- A. What was the date of approval for the TCRP Application that covers this Allocation Request? \_\_\_\_\_
  
- B. Is this Allocation Request for a capital phase(s) (Phase 3 or 4 as defined in the Guidelines and Application)?  
  
\_\_\_\_ Yes, answer the following:  
    Does the Approved Application cover any capital phase(s)?  
    \_\_\_\_ Yes, therefore, any required environmental documents were submitted and approved along with the Application. Complete the Allocation Request.  
    \_\_\_\_ No, attach required environmental documents and complete the Allocation Request. This request will require CTC approval.  
\_\_\_\_ No, complete Allocation Request.

**Section III. Project Phases and TCRP Funds covered by this Request**

<b>Planned:</b> (from Application)	<b>Phase 1</b>	<b>Phase 2</b>	<b>Phase 3</b>	<b>Phase 4</b>	<b>Total</b>
TCRP Funds					
Estimated Allocation Date (month/year)					
<b>History:</b> (List all previously approved allocations)					
TCRP Funds					
Allocation Date (month/year)					
<b>Requested:</b> Differences, if any, should be explained					

C The Implementing Agency requests an advance payment of \$\_\_\_\_\_.

Please explain and justify.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. The Implementing Agency requests the following rate of reimbursement be considered in association with the requested allocation.

\_\_\_ Proportionally spread across all funding sources.

\_\_\_ Other, please explain and justify: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section IV. Signatures of Requesting Agencies**

\_\_\_\_\_  
Officer or Director of Implementing Agency

\_\_\_\_\_  
Date

\_\_\_\_\_  
Officer or Director of Applicant Agency  
(Required if different from Implementing Agency)

\_\_\_\_\_  
Date

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