



**Project Prioritization** *(continued)*

PROJECT PRIORITIZATION

Priority	Listed in TIP 2013-2016		Project Name
	Yes	No	

**Required Public Hearing**

The required public hearing was held on \_\_\_\_\_

**Applicant Certification**

The information provided on this application is in accordance with local regulations and ordinances.

CERTIFICATION

Applicant

Title

Chief Executive Officer Signature

Date

**Submittal Checklist**

- 3 collated copies of complete TIP submittal package
  - Project Prioritization Cover Sheet
  - New Project Application Form for each new project
  - 2-page narrative on evaluation criteria
  - 8.5" x 11" PDF map of project location

Email a copy of complete TIP submittal package to Kimberly.Crabill@doa.ri.gov or provide on a CD

Submit complete TIP submittal package to:

Rhode Island Statewide Planning Program  
 ATTN: Kimberly Crabill  
 One Capitol Hill  
 Providence, RI 02908

CHECKLIST

**ALL APPLICATIONS ARE DUE BY 3:00PM ON FRIDAY, JANUARY 8, 2016**