



800 Second Avenue South | Nashville, Tennessee 37201 | (615) 862-7204 | www.nashvillempo.org  
 Mayor Ernest Burgess, Chairman

**AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009  
 FEDERAL ECONOMIC STIMULUS FUNDS FOR TRANSPORTATION  
 LOCAL CERTIFICATION FORM**

Project/ Route Name:	Sidewalk Maintenance on State Routes ,Major Arterials , and MTA Routes
Description:	Replace and upgrade sidewalks to improve pedestrian , bicycle , and vehicular safety.
Project Sponsor:	Metro Nashville Public Works.
County:	The Metropolitan Government of Nashville and Davidson County
Cost of Proposed Project Phases: Eng, Row., Const	\$15,000,000
Federal Stimulus Requested:	\$1,000,000
Federal Stimulus Offered:	\$544,006
Funding Shortfall:	\$455,994
Describe how the city/county/agency plan to make up the shortfall in order to proceed with the project:	Remainder of Project is funded with Metro Capital Budget Item 02PW022 under BL 2008-229 .

**DEFERRAL OF FEDERAL STIMULUS FUNDING:**

Due to one or more of the following reasons, \_\_\_\_\_ will not able to use the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. Please redistribute the funds to the next highest regional priority.

(select any that apply)

- \_\_\_\_\_ Insufficient funding
- \_\_\_\_\_ Local share of funds not available
- \_\_\_\_\_ Project is not ready-to-go
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

\$544,006 ACCEPTANCE OF FEDERAL STIMULUS FUNDING:

The Metropolitan Government of Nashville and Davidson County accepts the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. I understand that the offer is conditional upon a final review of project eligibility by the Nashville Area MPO, TDOT, and FHWA/ FTA.

I certify that the information provided to the MPO regarding the proposed project accurately portrays the most current information about the project.

I understand that federal economic stimulus funds cannot be used to supplant current federal program funds (i.e., to exchange 80/20 funding with 100% funding), or replace local funds already budgeted for the proposed project.

I understand that federal funds are provided on a reimbursement basis only and I certify that the city/county/agency has the financial resources to cover the costs of the project until such reimbursement.

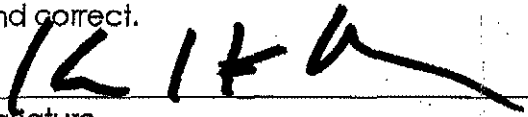
I certify that the city/county/agency will comply with all applicable federal laws and regulations including those related to Title VI of the Civil Rights Act of 1964, ADA, NEPA, and SAFETEA-LU and I understand that the city/county/agency may be denied reimbursement or be required to repay federal funds if it is determined that regulations are not followed.

The city/county/agency intends to (select one)  manage this project locally  request TDOT management.

**CERTIFICATION:**

*Must be certified by the local mayor or chief executive.*

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and certify, to the best of my knowledge, the information contained herein is true and correct.

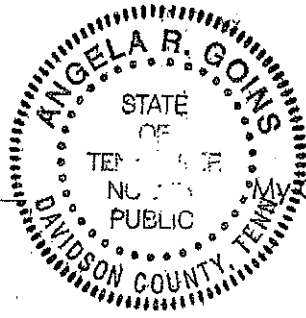
  
Signature

OK Mark May  
5/13/09  
Date

Karl F. Dean, Metropolitan Mayor  
Printed Name & Title

Sworn to and subscribed before me this 13<sup>th</sup> day of May, 2009, the same having personally appeared before me and affirmed that ~~she~~ he had the authority to sign this statement.

Angela R. Goins  
Angela R. Goins  
Notary Public



My Commission expires:  
March 4, 2013



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 Mayor Ernest Burgess, Chairman

**AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009  
 FEDERAL ECONOMIC STIMULUS FUNDS FOR TRANSPORTATION  
 LOCAL CERTIFICATION FORM**

Project/ Route Name:	Multi-Modal Traffic Signal Enhancements @ Various Intersections
Description:	Reconstruction of approximately 7 Traffic Signals to improve pedestrian safety and access.
Project Sponsor:	Metro Nashville
County:	The Metropolitan Government of Nashville and Davidson County
Cost of Proposed Project Phases: Const.	\$3,000,000
Federal Stimulus Requested:	\$3,000,000
Federal Stimulus Offered:	\$1,000,000
Funding Shortfall:	\$2,000,000
Describe how the city/county/agency plan to make up the shortfall in order to proceed with the project:	Remainder of Project is funded with Tip Item 2004-006 , and Metro Capital Budget Items 03PW010 under BL2008-229. Project is under contract with TDOT Pin. No. 103491 since May 26,2005 through Resolution RS 2005-761.

**DEFERRAL OF FEDERAL STIMULUS FUNDING:**

Due to one or more of the following reasons, \_\_\_\_\_ will not able to use the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. Please redistribute the funds to the next highest regional priority.

(select any that apply)

\_\_\_\_\_ Insufficient funding

\_\_\_\_\_ Local share of funds not available

\_\_\_\_\_ Project is not ready-to-go

\_\_\_\_\_ Other (specify) \_\_\_\_\_

\$1,000,000 ACCEPTANCE OF FEDERAL STIMULUS FUNDING:

The Metropolitan Government of Nashville and Davidson County accepts the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. I understand that the offer is conditional upon a final review of project eligibility by the Nashville Area MPO, TDOT, and FHWA/FTA.

I certify that the information provided to the MPO regarding the proposed project accurately portrays the most current information about the project.

I understand that federal economic stimulus funds cannot be used to supplant current federal program funds (i.e., to exchange 80/20 funding with 100% funding), or replace local funds already budgeted for the proposed project.

I understand that federal funds are provided on a reimbursement basis only and I certify that the city/county/agency has the financial resources to cover the costs of the project until such reimbursement.

I certify that the city/county/agency will comply with all applicable federal laws and regulations including those related to Title VI of the Civil Rights Act of 1964, ADA, NEPA, and SAFETEA-LU and I understand that the city/county/agency may be denied reimbursement or be required to repay federal funds if it is determined that regulations are not followed.

The city/county/agency intends to (select one)  manage this project locally \_\_\_\_\_ request TDOT management.

**CERTIFICATION:**

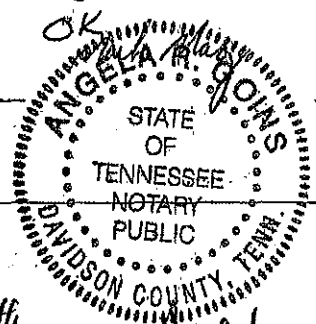
*Must be certified by the local mayor or chief executive.*

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and certify, to the best of my knowledge, the information contained herein is true and correct.

Karl F. Dean

Signature

Karl F. Dean, Metropolitan Mayor  
Printed Name & Title



Date

Sworn to and subscribed before me this 6<sup>th</sup> day of April, 2009, the same having personally appeared before me and affirmed that she had the authority to sign this statement.

My Commission Expires: 3/4/2013

Angela R. Gains  
Angela R. Gains, Notary Public

My Commission expires:

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Notary Public



Copy  
STMID# 6

800 Second Avenue South | Nashville, Tennessee 37201 | (615) 862-7204 | www.nashvillempo.org  
Mayor Ernest Burgess, Chairman

AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009  
FEDERAL ECONOMIC STIMULUS FUNDS FOR TRANSPORTATION  
LOCAL CERTIFICATION FORM

Project/ Route Name:	Improvements at Various Intersections
Description:	Provides corrective actions to resolve high crash rates at approximately 10 County Wide intersections.
Project Sponsor:	Metro Nashville
County:	The Metropolitan Government of Nashville and Davidson County
Cost of Proposed Project Phases: Const.	\$10,000,000
Federal Stimulus Requested:	\$10,000,000
Federal Stimulus Offered:	\$1,000,000
Funding Shortfall:	\$9,000,000
Describe how the city/county/agency plan to make up the shortfall in order to proceed with the project:	Remainder of Project is funded with TIP Item 2008-14-030 and Metro Capital Budget Items 02PW015, 02PW020, 02TP002, and 07PW004 under BL2008-229. Project has been under contact with TDOT Pin No. 111335 since Nov. 20, 2008 through Resolution RS2008-509.

DEFERRAL OF FEDERAL STIMULUS FUNDING:

Due to one or more of the following reasons, \_\_\_\_\_ will not able to use the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. Please redistribute the funds to the next highest regional priority.

(select any that apply)

- Insufficient funding
- Local share of funds not available
- Project is not ready-to-go
- Other (specify) \_\_\_\_\_

**\_\$1,000,000 ACCEPTANCE OF FEDERAL STIMULUS FUNDING:**

The Metropolitan Government of Nashville and Davidson County accepts the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. I understand that the offer is conditional upon a final review of project eligibility by the Nashville Area MPO, TDOT, and FHWA/ FTA.

I certify that the information provided to the MPO regarding the proposed project accurately portrays the most current information about the project.

I understand that federal economic stimulus funds cannot be used to supplant current federal program funds (i.e., to exchange 80/20 funding with 100% funding), or replace local funds already budgeted for the proposed project.

I understand that federal funds are provided on a reimbursement basis only and I certify that the city/county/agency has the financial resources to cover the costs of the project until such reimbursement.

I certify that the city/county/agency will comply with all applicable federal laws and regulations including those related to Title VI of the Civil Rights Act of 1964, ADA, NEPA, and SAFETEA-LU and I understand that the city/county/agency may be denied reimbursement or be required to repay federal funds if it is determined that regulations are not followed.

The city/county/agency intends to (select one)  manage this project locally \_\_\_\_\_ request TDOT management.

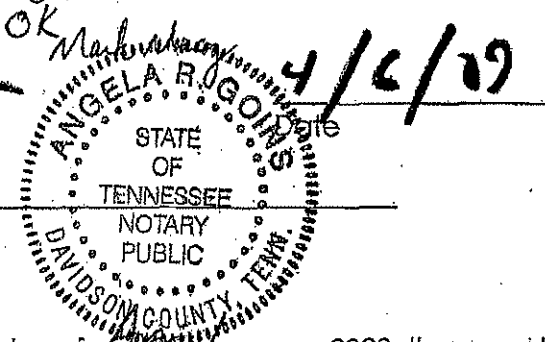
**CERTIFICATION:**

*Must be certified by the local mayor or chief executive.*

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and certify, to the best of my knowledge, the information contained herein is true and correct.

Karl F. Dean  
Signature

Karl F. Dean, Metropolitan Mayor  
Printed Name & Title



Sworn to and subscribed before me this 6<sup>th</sup> day of April, 2009, the same having personally appeared before me and affirmed that he had the authority to sign this statement.

My Commission Expires: 3/4/2013

Angela R. Goins  
Angela R. Goins, Notary Public

STMID# 7



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Mayor Ernest Burgess, Chairman

AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009  
FEDERAL ECONOMIC STIMULUS FUNDS FOR TRANSPORTATION  
**LOCAL CERTIFICATION FORM**

Project/ Route Name:	Traffic Signal Timing Optimization @Various Intersections
Description:	Optimize traffic signal timing at approximately 300 intersections to improve operational efficiency and improve air quality .
Project Sponsor:	Metro Nashville
County:	The Metropolitan Government of Nashville and Davidson County
Cost of Proposed Project Phases: Const.-Implementation	\$2,000,000
Federal Stimulus Requested:	\$2,000,000
Federal Stimulus Offered:	\$1,000,000
Funding Shortfall:	\$1,000,000
Describe how the city/county/agency plan to make up the shortfall in order to proceed with the project:	Remainder of Project is funded with Tip Item 2008-17-020 and Metro Capital Budget Items 90TP001B and 03PW010 under BL 2008-229. Project has been under contract with TDOT Pin No. 110102 since December 1,2008 through Resolution RS 2008-513.

**DEFERRAL OF FEDERAL STIMULUS FUNDING:**

Due to one or more of the following reasons, \_\_\_\_\_ will not able to use the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. Please redistribute the funds to the next highest regional priority.

(select any that apply)

- \_\_\_\_\_ Insufficient funding
- \_\_\_\_\_ Local share of funds not available
- \_\_\_\_\_ Project is not ready-to-go
- \_\_\_\_\_ Other (specify) \_\_\_\_\_





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**AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009  
 FEDERAL ECONOMIC STIMULUS FUNDS FOR TRANSPORTATION  
 LOCAL CERTIFICATION FORM**

<b>Project/ Route Name:</b>	Cumberland River Greenway-TSU Connector
<b>Description:</b>	Paved trail extending 22-mile greenway system to from Metro Center Levee at Clarksville Highway to Ed Temple Blvd
<b>Project Sponsor:</b>	Nashville, Davidson County, Metro Parks
<b>County:</b>	Davidson
<b>Cost of Proposed Project Phases:</b>	\$1,000,000
<b>Federal Stimulus Requested:</b>	\$1,000,000
<b>Federal Stimulus Offered:</b>	\$1,000,000
<b>Funding Shortfall:</b>	N/A (termini reduced)
<b>Describe how the city/county/agency plan to make up the shortfall in order to proceed with the project:</b>	N/A ( termini reduced from original \$2.5 million request)

**DEFERRAL OF FEDERAL STIMULUS FUNDING:**

Due to one or more of the following reasons, \_\_\_\_\_ will not able to use the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. Please redistribute the funds to the next highest regional priority.

(select any that apply)

\_\_\_\_\_ Insufficient funding

\_\_\_\_\_ Local share of funds not available

\_\_\_\_\_ Project is not ready-to-go

\_\_\_\_\_ Other (specify) \_\_\_\_\_

X  ACCEPTANCE OF FEDERAL STIMULUS FUNDING:

The  Metro Board of Parks and Recreation Department of Nashville and Davidson County  accepts the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. I understand that the offer is conditional upon a final review of project eligibility by the Nashville Area MPO, TDOT, and FHWA/ FTA.

I certify that the information provided to the MPO regarding the proposed project accurately portrays the most current information about the project.

I understand that federal economic stimulus funds cannot be used to supplant current federal program funds (i.e., to exchange 80/20 funding with 100% funding), or replace local funds already budgeted for the proposed project.

I understand that federal funds are provided on a reimbursement basis only and I certify that the city/county/agency has the financial resources to cover the costs of the project until such reimbursement.

I certify that the city/county/agency will comply with all applicable federal laws and regulations including those related to Title VI of the Civil Rights Act of 1964, ADA, NEPA, and SAFETEA-LU and I understand that the city/county/agency may be denied reimbursement or be required to repay federal funds if it is determined that regulations are not followed.

The city/county/agency intends to (select one)  AGENCY/Metro Parks  manage this project locally   request TDOT management.

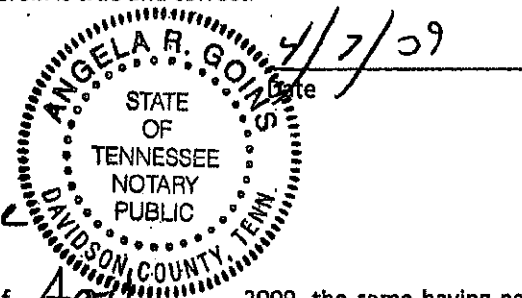
CERTIFICATION:

*Must be certified by the local mayor or chief executive.*

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and certify, to the best of my knowledge, the information contained herein is true and correct.

(K F Dean)   
Signature

Karl F. Dean, Mayor   
Printed Name & Title  
 Metropolitan Government of Nashville   
 and Davidson County



Sworn to and subscribed before me this  7th  day of  April , 2009, the same having personally appeared before me and affirmed that  she  had the authority to sign this statement.

Angela R. Goins   
Notary Public

My Commission expires:  3/4/2013

STIMD ANA



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Mayor Ernest Burgess, Chairman

AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009  
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**LOCAL CERTIFICATION FORM**

Project/ Route Name:	Various Resurfacing Projects in Davidson County
Description:	Pavement resurfacing and markings, bikeway installations, and 20% sidewalk repairs with ramp upgrades and curb ramp installations on various FAU selected routes.
Project Sponsor:	Metro Nashville
County:	The Metropolitan Government of Nashville and Davidson County
Cost of Proposed Project Phases: Const.	\$15,693,899
Federal Stimulus Requested:	\$15,693,899
Federal Stimulus Offered:	\$7,334,125
Funding Shortfall:	\$8,359,774
Describe how the city/county/agency plan to make up the shortfall in order to proceed with the project:	Remainder of Project is funded with Metro Capital Budget Items 02PW021, 06PW0011, and 02UW010 under BL2008-229.

**DEFERRAL OF FEDERAL STIMULUS FUNDING:**

Due to one or more of the following reasons, \_\_\_\_\_ will not able to use the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. Please redistribute the funds to the next highest regional priority.

(select any that apply)

- \_\_\_\_\_ Insufficient funding
- \_\_\_\_\_ Local share of funds not available
- \_\_\_\_\_ Project is not ready-to-go
- \_\_\_\_\_ Other (specify) \_\_\_\_\_

**\$7,334,125 ACCEPTANCE OF FEDERAL STIMULUS FUNDING:**

The Metropolitan Government of Nashville and Davidson County accepts the federal economic stimulus funding offered by the Nashville Area MPO for the proposed project. I understand that the offer is conditional upon a final review of project eligibility by the Nashville Area MPO, TDOT, and FHWA/ FTA.

I certify that the information provided to the MPO regarding the proposed project accurately portrays the most current information about the project.

I understand that federal economic stimulus funds cannot be used to supplant current federal program funds (i.e., to exchange 80/20 funding with 100% funding), or replace local funds already budgeted for the proposed project.

I understand that federal funds are provided on a reimbursement basis only and I certify that the city/county/agency has the financial resources to cover the costs of the project until such reimbursement.


I certify that the city/county/agency will comply with all applicable federal laws and regulations including those related to Title VI of the Civil Rights Act of 1964, ADA, NEPA, and SAFETEA-LU and I understand that the city/county/agency may be denied reimbursement or be required to repay federal funds if it is determined that regulations are not followed.

The city/county/agency intends to (select one)  manage this project locally  request TDOT management.

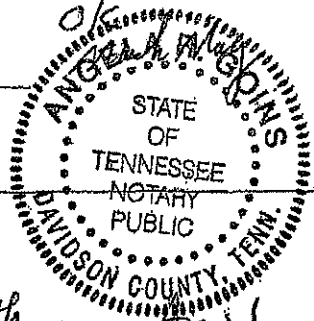
**CERTIFICATION:**

*Must be certified by the local mayor or chief executive.*

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and certify, to the best of my knowledge, the information contained herein is true and correct.

  
\_\_\_\_\_  
Signature

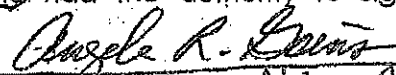
Karl F. Dean, Metropolitan Mayor  
Printed Name & Title



\_\_\_\_\_  
Date

Sworn to and subscribed before me this 6<sup>th</sup> day of April, 2009, the same having personally appeared before me and affirmed that ~~she~~ had the authority to sign this statement.

*My Commission Expires: 3/4/2013*

  
Angela R. Gains, Notary Public