# **WisDOT Project Change Form Instructions**

#### Important Information

The Wisconsin Department of Transportation (WisDOT) STP-Urban, STP-Rural, Local Bridge, TAP and CMAQ Programs Project Change Form for Design is required for each submitted Change Management request. Please use these form instructions to assist you in completing the Project Change Form. You need only fill out the sections pertaining to the change request.

Questions on the Change Management process should be directed to the appropriate WisDOT regional contact person listed below:

SE Region	Bob Schmidt	<u>robert1.schmidt@dot.wi.gov</u>	(262) 548-8789
SW Region	Michael Erickson	michael.erickson@dot.wi.gov	(608) 246-5361
NW Region	Bill Zimmer	william.zimmer@dot.wi.gov	(715) 635-5014
NC Region	Sandy Stankevich	<pre>sandy.stankevich@dot.wi.gov</pre>	(715) 365-5784
NE Region	Sandy Carpenter	Sandra.carpenter@dot.wi.gov	(920) 492-5681

When you have completed the Project Change Form, include the name of the local unit of government in the file name and email it to the appropriate WisDOT region address:

SE Region	robert1.schmidt@dot.wi.gov
SW Region	michael.erickson@dot.wi.gov
NW Region	william.zimmer@dot.wi.gov
NC Region	sandy.stankevich@dot.wi.gov
NE Region	Sandra.carpenter@dot.wi.gov

#### **Project Change Type Entry Fields**

Project Change Type: (Required) Check all applicable boxes (Cost Increase, Cost Decrease, Substitution, New Project, Drop, Scope Change or Other) pertaining to this Project Change Form Request.

#### **Project Information Entry Fields**

Project ID(s): (Required) Indicate WisDOT project ID(s) (ex. 9999-00-73) associated with this Project Change Form Request. Check State Municipal Agreement (SMA) for correct ID(s).

Program: (Required) Indicate WisDOT Local Program (STP-Urban, STP-Rural, Local Bridge, TAP, CMAQ) associated with this Project Change Form Request.

Awarded Program Cycle: (Required) Indicate WisDOT Program funding cycle (ex. 2015-2020) associated with this Project Change Form Request. Check State Municipal Agreement (SMA) for correct program funding cycle.

Project Title: (Required) Indicate project title (or road name/location) associated with the project. Check State Municipal Agreement (SMA) for correct project title (or road name/location).

**Project Location:** (Required) Indicate location description (or limit description) associated with the project. Check State Municipal Agreement (SMA) for correct location description (or limit description).

**Project Sponsor:** (Required) Indicate the Project Sponsor (local unit of government that is financially responsible for the improvement) associated with the project. Check State Municipal Agreement (SMA) for correct Project Sponsor.

**PS&E date:** (if applicable) Indicate the Plan Specifications & Engineering (PS&E) date associated with the project. Check with your WisDOT regional contact for correct PS&E date.

Schedule/LET date: (Required) Indicate the Schedule/LET (construction) date associated with the project. Check with your WisDOT regional contact for correct Schedule/LET date.

#### Project Information Entry Fields (Cont.)

<u>Project total cost:</u> (Required) Indicate the Total (Est.) Project Cost associated with the project. Check State Municipal Agreement (SMA) for Total (Est.) Project Cost.

**Federal amount:** (Required) Indicate the current approved Total Federal Project Cost associated with the project. Check State Municipal Agreement (SMA) for Total Federal Project Cost.

<u>State amount:</u> (Applicable Local Bridge projects only) Indicate the current approved Total State Project Cost associated with the project. Check State Municipal Agreement (SMA) for Total State Project Cost.

**<u>Project description:</u>** (Required) Provide concise description of the project parameters (Improvement type, etc.). Check State Municipal Agreement (SMA) Proposed Improvement-Approved Scope for project parameters.

<u>Project(s) approved through MPO:</u> (Required) Indicate if the project was approved through a Metropolitan Planning Organization (MPO). If the project was approved through a MPO, confirm that the MPO has been notified of/has approved the proposed change. Check with your WisDOT regional contact if you have questions.

### Cost Increase Request Entry Fields

<u>New requested project total cost:</u> (Required) Indicate the new requested Total Project Cost associated with this Project Change Form Request.

<u>New requested Federal amount:</u> (Required) Indicate the new requested Total Federal Project Cost associated with this Project Change Form Request. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

<u>New requested State amount</u>: (Applicable Local Bridge projects only) Indicate the new requested Total State Project Cost associated with this Project Change Form Request. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

<u>Increment of federal funds requested:</u> (Required) Indicate the difference between the existing (original) Total Federal Project Cost and the new requested Total Federal Project Cost associated with this Project Change Form Request. This is the increase of federal funding needed on the project. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

**Increment of state funds requested:** (Applicable Local Bridge projects only) Indicate the difference between the existing (original) Total State Project Cost and the new requested Total State Project Cost associated with this Project Change Form Request. This is the increase of state funding needed on the project. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

<u>Is there a change to the current schedule date:</u> (Required) Indicate if there is a change to the current schedule date (Y or N). If Yes, submit a <u>Schedule Change Form Request</u> with this Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding Schedule Change Form Requests.

<u>Justification</u>: (Required) Explain the need for design change (vertical profile, horizontal alignment, cross section, safety, traffic analysis, environmental, etc.) associated with this Project Change Form Request.

<u>A detailed justification is required for Project Change Form Cost Increase Requests.</u> The optional <u>Change</u> <u>Management Worksheet</u> [Attachment A] can be used in lieu of this justification. Check with your WisDOT regional contact if you have questions regarding the Change Management Worksheet.

Please Note:

- Do not round calculations.
- Do not include requests for contingency funding.
- Break down all cost estimates (structure, approaches, specific item increases, additional design costs, etc.). See <u>Change Management Worksheet</u> for detail.
- If requested change is out of approved Project Scope, include the <u>engineering justification</u> to support the request.

#### **Dropped Project Request Entry Fields**

**Description:** (Required) Provide concise description of the dropped project parameters (Improvement type, etc.). Check State Municipal Agreement (SMA) Proposed Improvement-Approved Scope for project parameters.

<u>Reason for dropping project(s)</u>: (Required) Provide concise explanation of the reasoning/need to drop the project(s).

#### Substituted Project Information Entry Fields

<u>Project ID(s) of project to substitute:</u> (Required) Indicate WisDOT project ID(s) (ex. 9999-00-73) associated with your Substitution Request. Check State Municipal Agreement (SMA) for correct ID(s). If multiple projects are substituted, include all project IDs.

<u>Entitlement holder:</u> (Required) Indicate the Project Sponsor (local unit of government that is financially responsible for the improvement) associated with the substituted project. Check State Municipal Agreement (SMA) for correct Project Sponsor.

**<u>Project Title:</u>** (Required) Indicate project title (or road name/location) associated with the substituted project. Check State Municipal Agreement (SMA) for correct project title (or road name/location).

**<u>Project Limits:</u>** (Required) Indicate limit description (or location description) associated with the substituted project. Check State Municipal Agreement (SMA) for correct limit description (or location description).

<u>Is there a change to the current schedule date:</u> (Required) Indicate if there is a change to the current schedule date (Y or N). If Yes, submit a <u>Schedule Change Form Request</u> with this Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding Schedule Change Form Requests.

<u>Requested project total:</u> (Required) Indicate the Total (Est.) Project Cost associated with the substituted project. Check State Municipal Agreement (SMA) for Total (Est.) Project Cost.

**<u>Requested Federal amount:</u>** (Required) Indicate the Total Federal Project Cost associated with the substituted project. Check State Municipal Agreement (SMA) for Total Federal Project Cost.

**<u>Requested State amount:</u>** (Applicable Local Bridge projects only) Indicate the Total State Project Cost associated with the substituted project. Check State Municipal Agreement (SMA) for Total State Project Cost.

<u>Please describe the project and funding request:</u> (Required) Provide concise description of the substituted project parameters (Improvement type, etc.) and the funding request. Check State Municipal Agreement (SMA) Proposed Improvement-Approved Scope for project parameters.

<u>Please describe the reason for the substitution:</u> (Required) Explain the need for the project substitution. Check with your WisDOT regional contact if you have questions regarding project substitution justification/explanation.

#### Cost Decrease Request Entry Fields

<u>New requested project total cost:</u> (Required) Indicate the new reduced Total Project Cost associated with this Project Change Form Request.

<u>New requested Federal amount:</u> (Required) Indicate the new reduced Total Federal Project Cost associated with this Project Change Form Request. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

<u>New requested State amount:</u> (Applicable Local Bridge projects only) Indicate the new reduced Total State Project Cost associated with this Project Change Form Request. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

**Increment of federal funding decrease:** (Required) Indicate the difference between the existing (original) Total Federal Project Cost and the new reduced Total Federal Project Cost associated with this Project Change Form Request. This is the reduction in federal funds to the project. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

#### Cost Decrease Request Entry Fields (Cont.)

Increment of state funding decrease: (Applicable Local Bridge projects only) Indicate the difference between the existing (original) Total State Project Cost and the new reduced Total State Project Cost associated with this Project Change Form Request. This is the reduction in state funds to the project. Check with your WisDOT regional contact if you have questions on how to calculate this amount.

<u>Is there a change to the current schedule date:</u> (Required) Indicate if there is a change to the current schedule date (Y or N). If Yes, submit a <u>Schedule Change Form Request</u> with this Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding Schedule Change Form Requests.

<u>Justification</u>: (Required) Explain the reasoning associated with the reduction of funds on the improvement project. Check with your WisDOT regional contact if you have additional questions on how to provide Project Change Form Request justifications.

#### New Project Request Entry Fields

**<u>Project ID(s)</u>**: (Required) Indicate all new WisDOT project IDs (ex. 9999-00-73) associated with this new Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding correct project ID(s).

**<u>Program</u>**: (Required) Indicate WisDOT Local Program (STP-Urban, STP-Rural, Local Bridge, TAP, CMAQ) associated with this new Project Change Form Request.

**<u>Program Cycle:</u>** (Required) Indicate current WisDOT Program funding cycle (ex. 2017-2022) associated with this new Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding correct program funding cycle.

**<u>Project Title:</u>** (Required) Indicate project title (or road name/location) associated with the new project. Check with your WisDOT regional contact if you have questions regarding correct project title (or road name/location).

**<u>Project Location</u>**: (Required) Indicate location description (or limit description) associated with the new project. Check with your WisDOT regional contact if you have questions regarding correct location description (or limit description).

**Entitlement holder:** (Required) Indicate the Project Sponsor (local unit of government that is financially responsible for the improvement) associated with the new project. Check with your WisDOT regional contact if you have questions regarding correct Project Sponsor.

<u>Is there a change to the current schedule date:</u> (Required) Indicate if there is a change to the current schedule date (Y or N). If Yes, submit a <u>Schedule Change Form Request</u> with this Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding Schedule Change Form Requests.

<u>Project total cost:</u> (Required) Indicate the Total (Est.) Project Cost associated with the new project. Check State Municipal Agreement (SMA) for Total (Est.) Project Cost.

<u>Federal amount:</u> (Required) Indicate the Total Federal Project Cost associated with the new project. Check State Municipal Agreement (SMA) for Total Federal Project Cost.

<u>State amount:</u> (Applicable Local Bridge projects only) Indicate the Total State Project Cost associated with the new project. Check with your WisDOT regional contact if you have questions regarding Total State Project Cost.

**<u>Project description:</u>** (Required) Provide concise description of the new project parameters (Improvement type, etc.). Check with your WisDOT regional contact if you have questions regarding project parameters.

<u>Justification</u>: (Required) Explain the need for the new project associated with this Project Change Form Request. <u>Please</u> include description of the new project funding source.

Please Note:

• A new application for the Project ID must be submitted by the region LPPM to WisDOT Central Office.

*Check with your WisDOT regional contact if you have additional questions on how to provide New Project Change Form Request justifications.* 

Scope Change Request Entry Fields

**<u>Road/Local Bridge Project:</u>** (Required) Indicate if Scope Change Request is associated with a Road (STP) project or Local Bridge project. If other, please specify (ex. TAP, CMAQ).

<u>Is there a change to the current schedule date:</u> (Required) Indicate if there is a change to the current schedule date (Y or N). If Yes, submit a <u>Schedule Change Form Request</u> with this Project Change Form Request. Check with your WisDOT regional contact if you have questions regarding Schedule Change Form Requests.

<u>Reason for scope change(s)</u>: (Required) Explain the need for scope change (vertical profile, horizontal alignment, cross section, safety, traffic analysis, environmental, etc.).

Please Note:

• Include the <u>engineering justification</u> to support the request.

Check with your WisDOT regional contact if you have additional questions on how to provide Project Scope Change Form Request justifications.

**Description:** (Required) Provide concise description of the <u>new</u> project parameters (Improvement type, etc.). Check with your WisDOT regional contact if you have additional questions.

# Other Project Change Request Entry Fields

**Description:** (If Applicable)

Reason for request: (If Applicable)

# Request Signature Entry Fields

**<u>Preparer Signature:</u>** (Required) Provide signature of individual completing the Project Change Form Request.

**Date:** (Required) Date of signature of individual completing the Project Change Form Request.

<u>WisDOT LPPM or LPM:</u> (Required) All Project Change Form Requests must be signed by WisDOT Region staff.

**Date:** (Required) Date of signature of WisDOT Region staff on Project Change Form Request.

# For WisDOT Local Programs and Finance Section Only Entry Fields DO NOT COMPLETE: WisDOT Local Programs & Finance Central Office staff will review and respond. Request(s) approved? \_\_\_\_ Yes \_\_\_\_ No Reviewer's signature: Reference number: Date: Comments: Comments: