



South Carolina
Department of Transportation

Political Subdivisions Submitting Grant Applications or Earmark Requests

SCDOT owns and maintains approximately 97% of the federal-aid eligible highway system in the State of South Carolina. SCDOT also coordinates a comprehensive regional planning process with the Metropolitan Planning Organizations (MPOs) and Councils of Governments (COGs) to identify transportation projects to benefit the unique requirements of South Carolina's communities. Maintaining integrity of the State Highway System and existing transportation planning process is essential to effectively apply for and administer awarded competitive grants and/or earmarked funds.

To that end, political subdivisions must coordinate with SCDOT **at least 45 calendar days** before submitting a **state or federal grant application or earmark request** if any of the following apply:

- The project impacts the State Highway System;
- The project impacts the coordinated statewide transportation planning process;
- The project impacts SCDOT operations;
- Project impacts to SCDOT, the State Highway System, or coordinated statewide transportation planning process are unknown; or
- A letter of support is being requested to include in the grant application or earmark request.

The attached form must be completed in its entirety and provided to SCDOT at least 45 calendar days before submitting a grant application or earmark request.

Failure to adhere to the 45 calendar day requirement may result in a lack of grant or earmark support from SCDOT.

Please contact ChiefofStaff@scdot.org with any questions.



Grant / Earmark Synopsis

Please complete and submit to ChiefofStaff@scdot.org

Applicant's Name		
Applicant's Point of Contact / Email Address / Phone Number		
Grant Program (i.e., RAISE, Safe Streets and Roads for All)	(Select one) <input type="checkbox"/> State <input type="checkbox"/> Federal	Grant Program Title:
Earmark	(Select one) <input type="checkbox"/> State <input type="checkbox"/> Federal	
Grant Application / Earmark Due Date		
Requesting a Letter of Support from SCDOT?	(Select one) <input type="checkbox"/> Yes <input type="checkbox"/> No	To Whom Should it be Mailed? Name / Address:
Amount of Funding Requested		
Total Project Cost <i>Include funding requested + applicable match</i>		
Project Title		
Project Scope		



Project Location	
Who will the project benefit? Why is it important?	
How does the project address needs not already being met?	
How, specifically, will the grant / earmark funds be used?	
Applicant's commitment to providing match and cover any cost overruns.	(Select one) <input type="checkbox"/> The applicant will provide all match and cover all cost overruns. <input type="checkbox"/> The applicant is unable to provide all match and/or cover all cost overruns.
Is the project in the TIP, STIP, or other planning document?	<input type="checkbox"/> TIP <input type="checkbox"/> STIP <input type="checkbox"/> Other. Explain:
Project status (i.e., conceptual, shovel-ready)?	
Has there been any project coordination with SCDOT? If yes, explain.	(Select one) <input type="checkbox"/> No <input type="checkbox"/> Yes; Explain:
Have any approvals been received (i.e., SCDOT, NEPA)? If yes, explain.	(Select one) <input type="checkbox"/> No <input type="checkbox"/> Yes; Explain:
Additional Information	

