

## INSTRUCTIONS

### Exhibit 22-R ATP Non-Infrastructure Project Work Plan

1. **Date:** Insert Today's Date
2. **Project Number:** Leave blank for ATP Cycle 2 solicitation
3. **Project location:** Insert project location (**Exp: City of Santa Ana - Mt Vernon Elementary School**)
4. **Project Description:** Provide brief project description.  
(**Exp: Conduct bicycle and pedestrian safety education, encouragement and traffic safety enforcement near schools.**)

### Task Details

Identify the various Task and associated Activities/Deliverables that each task entails.  
Provide a "Task Detail" table for each. (Task A, Task B, Task C, etc.)

- 5a. **Task Name:** Provide name of Task
- 5b. **Task Summary:** Provide a brief Task description for the various components to be completed in your project.
- 5c. **Schedule: Start Date and End Date:** Provide a start and end date for each Task. (Month - Year)
- 5d. **Activities and Deliverables:** List the activities and deliverables that will be completed under this Task.

### Staff Costs

- 6a. **Staff Title:** List the staff title/position that will work on this task. (**Example: Party 1 - Program Manager**)
- 6b. **Total Hours:** Provide the total estimated hour of each party listed in 6a.
- 6c. **Rate Per Hour:** Provide the rate per hour of each party listed in 6a.  
If using a Consultant to perform the work, list the estimated Consultant cost.
- 6d. **Subtotal Party Costs:** Leave Blank - The total Party Cost is automatically calculated.
- 6e. **Indirect Cost:** If an agency has an approved indirect cost rate with Caltrans they can include that cost here.  
For agencies without an approved indirect cost rate leave blank.
- 6f. **Total Staff Cost:** Leave Blank - This is automatically calculated from data entered in 6d. and 6e.

### Task Notes

7. **Task Notes:** Provide any additional information that will clarify the work to be conducted under this task.  
Describe the who, what, when and where of your project. Attach an additional sheet if needed.

### Other Costs

- 8a. **Travel:** Provide total cost of Travel; if applicable
- 8b. **Equipment:** Provide total cost of Equipment(s); if applicable
- 8c. **Supplies/Materials:** Provide total cost of Supplies/Materials; if applicable
- 8d. Provide any additional costs; if applicable
- 8e. Provide any additional costs; if applicable
- 8f. **Other Direct Costs:** Provide additional other direct costs; if applicable
- 8g. **Total Direct Costs:** DO NOT FILL - This is formulated from data entered in 8a. - 8f.

**Note: An itemized cost estimate for each of these categories must also be provided.**

### Task Grand Total

9. **Task Grand Total:** DO NOT FILL - This is formulated from data entered in 6g. and 8g.