

PROJECT CHANGE REQUEST

PROJECT ID. 0613000151
 DISTRICT/EA 06-0Q630 PPNO 6697 PGM Doc. SHOPP PGM Del FY 15/16 PROG CODE 201.235

Cty Rte PM Description

PROJECT (SCOPE) DESCRIPTION: FRE/MAD 41 R29.3/R33.4, 0.0/1.7 Roadside Safety Improvements

DOES THIS PROJECT INVOLVE PROPOSITION 1B FUND(S)? NO YES , TYPE(S) (CMIA, Route 99, STIP, SHOPP, etc.) _____

SCOPE, COST & SCHEDULE CHANGES

TYPE OF REQUEST: PGM COST PGM YEAR SCOPE SPLIT / COMBINE OTHER: _____

COMPONENT Change (\$'s in 1,000's)

	EXISTING (PROGRAMMED)		PROPOSED		COST EXPENDED to Date % COMPLETE			COST CHANGE			
	Value	FY	Value	FY	Expended	% Expended	% Complete	Value	Value%	Yrs	Type
PA&ED	\$ 247	15/16	\$ 246	15/16	\$245	99%	100%	\$ _____	_____ %	_____	_____
PS&E	\$ 700	15/16	\$ 734	15/16	\$ 3	0%	0%	\$ 34	5%	_____	A
R/W SUP	\$ 26	15/16	\$ 26	15/16	\$0	0%	0%	\$ _____	_____ %	_____	_____
CON SUP	\$ 576	15/16	\$ 576	15/16	\$0	0%	0%	\$ _____	_____ %	_____	_____
R/W CAP	\$ 12	15/16	\$ 30	15/16	\$0	0%	0%	\$ 18	150%	_____	A
CON CAP	\$2,688	15/16	\$2,843	15/16	\$0	0%	0%	\$ 155	6%	_____	A
Total	\$4,249		\$4,455		\$248			\$ 207	5%		

WHAT PHASE IS THE PROJECT IN? PRE-PGM DELIVERY YR PGM DELIVERY YR & PRE VOTE POST VOTE

Cost Change Type	Description	Data Systems Changed	
		Programmed Budget	Approved Cost
A	Programming Cost Change	CTIPS	AMS Advantage
B	Headquarters Cost Approval		AMS Advantage
C	District Cost Documentation		
NA	No Change Proposed		
Supplemental Funds Requests			
SFR	Supplemental Funds Request		AMS Advantage If Expenditures < 100%

Cty - Rte - PM - Description

New Project Description: _____
 (Only If Revised)

“010” Safety Project? Yes No

Project Performance	EXISTING (PROGRAMMED)	PROPOSED	PERFORMANCE CHANGE	
	<u>20</u> Locations Value Units	<u>20</u> Locations Value Units	<u>0</u> Locations Value Units	<u>0%</u>

(SHOPP PRIMARY PERFORMANCE OUTPUT BY PROGRAM CODE)

12.) (A) (STIP-RIP) WHEN DID THE DISTRICT DISCUSS THIS WITH HEADQUARTERS STIP PROGRAM MANAGER AND THE RTPA OR COUNTY TRANSPORTATION COMMISSIONS STAFF? EXPLAIN THEIR REACTION.

(B) (STIP-IIP) WHEN DID THE DISTRICT DISCUSS THIS WITH HEADQUARTERS STIP PROGRAM MANAGER? EXPLAIN THEIR REACTION.

(C) (SHOPP) WHEN DID THE DISTRICT DISCUSS THIS WITH THE HEADQUARTERS PROGRAM MANAGER? EXPLAIN THEIR REACTION.

Dawn Grinstain, Program Advisor, reviewed this PCR on February 24, 2015 and asked if a field review had been conducted to best determine the location of the access gates and the need for relocating utilities. A PDT field review was conducted on March 12, 2013 and functional units reviewed the projects as stated in the Project Report signed November 19, 2014.

13.) LESSONS LEARNED, NEW STRATEGIES (What new information pertaining to this project could be beneficial to others?)

14.) District Project Manager Signature

Suzie Holdridge
 for SUZIE HOLDRIDGE
 District Project Manager

 Date (559) 243 - 3432
 Phone Number

Samer Shaath
 SAMER SHAATH
 Deputy District Director
 Program/Project Management

2/26/15
 Date

APPROVAL - COMMENTS - CONCERNS

- PD Concurrence
- PD Objections (detail concerns):

15.) Comments - Concerns:

Paul Gennaro
 PAUL GENNARO
 HQ Project Delivery Coordinator

2/25/15
 Date

APPROVAL

Sharrri Bender Elhert
 SHARRI BENDER ELHERT
 DISTRICT DIRECTOR

3/3/2015
 Date

	Approve	Deny	No HQ Action
Cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scope	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Split / Combine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Revise & Resubmit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Monique for
 JAMES E. DAVIS
 HQ DIVISION CHIEF
 PROJECT MANAGEMENT

3/15/15
 Date

Rachel Falsetti
 RACHEL FALSETTI
 HQ DIVISION CHIEF
 TRANSPORTATION PROGRAMMING
for *3/18/15*
 Date

REQUIRED ATTACHMENTS

- (a) Attach 1 page copy (screenprint) of project workplan/status schedule.
- (b) Attach the current CTIPS project information.
- (c) PCR Data Worksheet, if applicable (for splits/combiners).
- (d) For STIP Projects, please attach the latest Project Programming Request (PPR).
- (e) Summary Cost Estimates, if/when needed.

PROJECT ID. 10300000341
 DISTRICT/EA 06-00630

