North Central Texas Council of Governments

NCTCOG MTP Policy Bundle Application for NTTA

MTP Policy Application Acknowledgement

I hereby certify that all information provided and contained herein is complete, accurate, and true. I am authorized to provide information on behalf of my agency. (Typing your name in the box below will serve as your electronic signature to this certification.)

1. Acknowledgement:

Name	
Title	
Agency	
Date	

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Air Quality: Clean Fleet

For questions - Contact Amy Hodges, ahodges@nctcog.org, (817) 704-2508

2. Please enter the name of the person completing the Clean Fleet section if different from person listed in the Acknowledgement.

3. Has your agency adopted the Clean Fleet Policy adopted by the Regional Transportation Council (RTC) in December 2014 (RTC Resolution R14-10), or a policy consistent with the four major elements of the Clean Fleet Policy?

○ Yes

○ No

4. Is your agency a Clean Cities stakeholder (see www.dfwcleancities.org)?
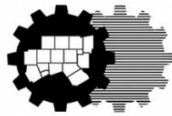
○ Yes

○ No

5. Has your agency adopted an idle-reduction policy/standard operation procedure for your own internal fleet vehicles?

○ Yes

○ No

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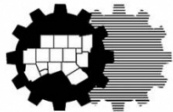
Air Quality: Clean Construction

For questions - Contact Lori Clark, lclark@nctcog.org, (817) 695-9232

6. Please enter the name of the person completing the Clean Construction section if different from person listed in the Acknowledgement.

[   ]

7. Has your agency adopted or implemented contract-based efforts (such as bid specifications, incentives, contracting preferences, etc.) to reduce emissions from equipment used in construction projects (such as backhoes, loaders, tractors, etc.)? For examples, see www.nctcog.org/construction or Item 110, Air Quality Requirements for Equipment, in the NCTCOG Public Works Construction Standards North Central Texas, Fifth Edition.

○ Yes

○ No

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Air Quality: Recycling Efforts

For questions - Contact Jenny Narvaez, jnarvaez@nctcog.org, (817)608-2342

8. Please enter the name of the person completing the Recycling Efforts section if different from person listed in the Acknowledgement.

[   ]

9. Has your agency implemented a transportation refuse recycling ordinance to reduce waste within your jurisdiction?
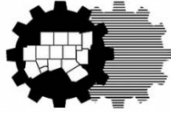
○ Yes

○ No

10. Our agency: (Check all that apply)

☐ is willing to participate or has participated in a Transportation Refuse Recycling Policy

☐ is willing to participate or has participated in the development of a plan for a Transportation Refuse Policy

☐ none of the above

![North Central Texas Council of Governments logo]

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Environmental: Stormwater Management

For questions - Contact Shawn Conrad, sconrad@nctcog.org, (817) 704-5695

11. Please enter the name of the person completing the Stormwater Management section if different from person listed in the Acknowledgement.

[ ]

For every answer chosen below, please upload supporting documentation in the appropriate space at the end of this section. Chose only those answers that are applicable to your agency and provide supporting documentation approved by your agency.

12. Our agency has: (Select all that apply)

☐ **A. adopted sustainable stormwater policies for transportation improvements and site development to promote improved water quality, flood control, and reduced run-off effects**

☐ **B. funded or implemented sustainable stormwater management projects as part of transportation improvements and site development to promote improved water quality, flood control, and reduced run-off effects**

☐ **C. a formal interdepartmental coordination process that considers sustainable alternatives such as green infrastructure for typical projects such as retrofits, repairs, and new projects to identify how multiple community and departmental benefits can be attained through green infrastructure**

☐ **D. implemented projects that meet NCTCOG's Transportation Integrated Stormwater Management (TriSWM) criteria or strategies (Please visit this website for details on the TriSWM Program: http://iswm.nctcog.org/triswm.asp)**

☐ **E. none of the above**

For all options checked above, please upload supporting documentation in the " Stormwater Management Attachment" form located below.

NTTA- Stormwater Management Attachments

If applicable, please upload the relevant documentation required by the previous survey questions in the space provided below.

Agency Name: *

[ ]

NOTE: After attaching the individual file per question, you must press (or click) the SUBMIT button at the bottom of this form in order for the attachments to be submitted. (You will receive a confirmation that your file(s) have been submitted.)

Answer A: Attach a File

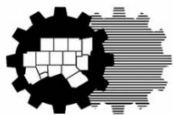Choose File | No file selected

Answer B: Attach a File

Choose File | No file selected

Answer C: Attach a File

Choose File | No file selected

Answer D: Attach a File

Choose File | No file selected

Submit

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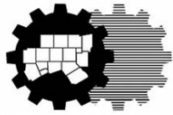Travel Demand Management (TDM): Employer Trip Reduction (ETR) Program

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817)695-9273

13. Please enter the name of the person completing the Employer Trip REduction (ETR) section if different from person listed in the Acknowledgment.

14. Does your agency implement an alternative commute program or trip reduction program for agency employees?

◯ Yes

◯ No

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NCTCOG MTP Policy Bundle Application for NTTA

Travel Demand Management (TDM): Employer Trip Reduction (ETR) Program

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817)695-9273

15. Since you answered "Yes" to the previous question, does your agency utilize TryParkingIt.com to track participation in your agency's alternative commute program?

◯ Yes

◯ No

16. Would you agency be willing to utilize/promote TryParkingIt.com to your employees using an Employer Portal on the website? All information and training will be provided by NCTCOG staff.

◯ Yes

◯ No

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Travel Demand Management (TDM): Employer Trip Reduction (ETR) Program

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817)695-9273

17. Since you answered "Yes" to the previous question, who should NCTCOG contact to initiate the setup of the TryParkingIt.com Employer Portal?

[ ]

18. If your agency does not have a formally established trip reduction program, do you encourage faculty/staff to participate in trip reduction strategies like carpooling, vanpooling, biking, walking, taking transit, or bringing their lunch to work?

◯ Yes

◯ No

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Travel Demand Management (TDM): Employer Trip Reduction (ETR) Program

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817)695-9273

19. Since you answered "No" to the previous question, would your agency be willing to work with NCTCOG to develop/formalize a trip reduction program for your employees? NCTCOG staff will provide TDM-related information for distribution.
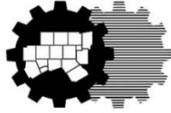
◯ Yes

◯ No

20. Our agency: (Select all that apply)

[ ] will contact NCTCOG staff to request assistance in developing/formalizing a trip reduction program for agency employees

[ ] is currently coordinating with NCTCOG staff on ETR strategy outreach efforts

[ ] none of the above

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817) 695-9273

21. Please enter the name of the person completing the Wrong-Way Driving section if different from person listed in the Acknowledgement.

22. Has your agency implemented improvements that will assist in reducing wrong-way driving (WWD) incidents within your jurisdiction?

◯ Yes

◯ No

If yes, when were improvements completed and what intersections received improvements?

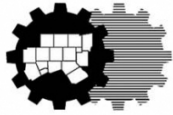For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817) 695-9273

23. Since you answered "Yes" to the previous question, what improvements were completed? (Please select all that apply)

☐ **One Way Signs**

☐ **Route Markers**

☐ **Replace Left Turn Pavement Arrows with Straight Arrows**

☐ **Addition of Straight Arrow Markings in Extended Bays**

☐ **Do Not Enter Signs**

☐ **Lowered Do Not Enter Signs**

☐ **Lane Assignment Signs**

☐ **Wrong Way Signs**

☐ **Lowered Wrong Way Signs**

☐ **Red Reflective Tape on Sign Posts**

☐ **Wrong-way Reflective Pavement Arrows**

☐ **Elimination of Conflicting Lane Assignment Signs and Markings**

☐ **Add or Relocate Larger One-way Signs on Signal Mast Arms as Close to the Left-turn as Possible**

☐ **Replace Incandescent Bulbs with LED Bulbs**

☐ **Install Vertical Green Arrows**

☐ **Green Arrow on Signal Head**

☐ **Wrong-way signs with Red Flashing Lights without Active Detection**

☐ **Wrong-way signs with Red Flashing Lights with Active Detection**

☐ **Wrong-way Active Detection with TMC Communication**

☐ **Wrong-way Active Detection with TMC Communication and CCTV Verification**

☐ **Use of Dynamic Message Signs for Wrong-way Driving Alerts**

☐ Other

[   ]

24. Has your agency implemented an outreach or educational campaign to help educate drivers about WWD?

◯ Yes

◯ No

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817) 695-9273

25. Please enter the name of the person completing the Traffic Incident Management section if different from person listed in the Acknowledgement.

[   ]

26. Have your agency's emergency response agencies attended the NCTCOG TIM training or similar training since 2013?

◯ Yes

◯ No

If a similar training was attended, what agency offered the training? When was the most recent month/year of attendance?

[   ]

27. Has your agency adopted the RTC or similar policy regarding incident management practices within your jurisdiction?

◯ Yes

◯ No

If Yes, please upload a copy of the adopted resolution in the "Traffic Incident Management Attachment" form in the space below.

NTTA- Traffic Incident Management Attachment

If applicable, please upload the relevant documentation required by the previous survey questions in the space provided below.

Agency Name: *

NOTE: After attaching the individual file per question, you must press (or click) the SUBMIT button at the bottom of this form in order for the attachments to be submitted. (You will receive a confirmation that the file(s) were submitted.)

Adopted resolution: Attach a File

Choose File | No file selected

Submit

28. Does your agency track the regional incident management performance measures (Incident Clearance Time, Roadway Clearance Time, Secondary Crash, and Recovery Time) outlined by NCTCOG?

◯ Yes

◯ No

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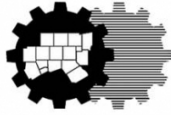NCTCOG MTP Policy Bundle Application for NTTA

Safety: Traffic Incident Management

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817) 695-9273

29. Since you answered "Yes" to the previous question, is your agency willing to share the performance measures with NCTCOG?
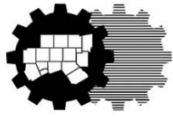
◯ Yes

◯ No

NCTCOG MTP Policy Bundle Application for NTTA

Safety: Traffic Incident Management

For questions - Contact Sonya Landrum, slandrum@nctcog.org, (817) 695-9273

30. Since you answered "No" to the previous question, does your agency: (Select all that apply)

☐ **A. utilize your own standard incident management definitions (i.e. response time, clearance time)**

☐ **B. collect and monitor incident response times**

☐ **C. collect and monitor clearance times**

☐ **D. none of the above**

31. Has your agency established a multi-disciplinary major incident review process?

○ Yes

○ No

32. Since you answered "Yes" to the previous question, is your agency willing to share the adopted process with NCTCOG?

○ Yes

○ No

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Security: Securing Transportation Infrastructure

For questions - Contact Eric Quintana, equintana@nctcog.org, (817) 608-2381

33. Please enter the name of the person completing the Securing Transportation Infrastructure section if different from person listed in the Acknowledgement.

[   ]

34. Our agency: (Select all that apply)

☐ **A. is willing to participate or has participated in nomination or recommendation of assets for the top 10 regionally identified transportation infrastructure components**

☐ **B. is willing to participate or has participated in the development of a security plan to address the assets**

☐ **C. none of the above**

35. Were assets identified within the agency's jurisdiction?

○ Yes

○ No

NCTCOG MTP Policy Bundle Application for NTTA

For questions - Contact Eric Quintana, equintana@nctcog.org, (817) 608-2381

36. Since you answered "Yes" to the previous question, is the security plan completed for the assets within the agency's jurisdiction?

◯ Yes

◯ No

37. Are measures in place to protect the assets?

◯ Yes

◯ No

If yes, please describe the measures or if you pefer, please use the "Securing Transportation Infrastructure Attachment" form below to attach documents that describe the measures.

> [text box]

NTTA- Securing Trans. Infrastructure Attach

If applicable, please upload the relevant documentation required by the previous question in the space provided below.
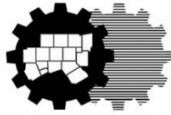
NTTA Agency Name:

[input field]

NOTE:

After attaching the individual file per question, you must press (or click) the SUBMIT button at the bottom of this form in order for the attachments to be submitted. (You will receive a confirmation that the file(s) were submitted.)

Measures in place to protect assets: Attach a File

[Choose File] No file selected

Additional Information: Attach a File

[Choose File] No file selected

[Submit]

Operations/Safety: Copper Theft
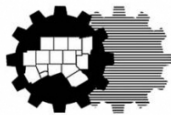
For questions - Contact Marian Thompson, mthompson@nctcog.org, (817) 608-2336

38. Please enter the name of the person completing the Copper Theft section if different from person listed in the Acknowledgement.

39. Has or is your agency willing to participate in planning or implementing measures to prevent theft and vandalism, including copper theft and associated fiber optic damage?

◯ Yes

◯ No

40. Since you answered "Yes" to the previous question, has your agency: (Select all that apply)

☐ **A. contacted NCTCOG to obtain information and assistance in preventing future occurrences**

☐ **B. developed measures to prevent future occurrences**

☐ **C. implemented measures to prevent future occurrences**

☐ **D. none of the above**

If your city has implemented measures to prevent future occurrences, please describe the measures or if you prefer, please use the "Copper Theft Attachment" form below to upload documents that describe these measures.

NTTA - Copper Theft Attachment

If applicable, please upload the relevant documentation required by the previous survey question in the space provided below.
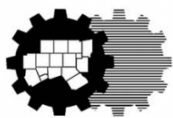
NTTA Agency Name:

NOTES:

Per the instructions above, please upload documentation that describes the measures taken to prevent future occurrences of theft and vandalism, including copper theft and associated fiber optic damage. After attaching an individual file per browser, you must press (or click) the SUBMIT button at the bottom of this form in order for the attachments to be submitted. (You will receive a confirmation that the file(s) were submitted.)

Document 1: Attach a File

Choose File | No file selected

Document 2: Attach a File

Choose File | No file selected

Submit

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For questions - Contact Marian Thompson, mthompson@nctcog.org, (817) 608-2336

41. Please enter the name of the person completing the Integration section if different from person listed in the Acknowledgement.

[   ]

42. Does the agency have a transportation management center, traffic management center or traffic signal operating system?

◯ Yes

◯ No

NCTCOG MTP Policy Bundle Application for NTTA

Traffic Operations: Integration

For questions - Contact Marian Thompson, mthompson@nctcog.org, (817) 608-2336

43. Since you answered "Yes" to the previous question, is the system(s) integrated with systems of other agencies in the region?

◯ Yes

◯ No

44. Has the agency executed the Memorandum of Understanding between Dallas-Fort Worth Regional Intelligent Transportation System Partners Concerning Guiding Principles for Multi-Agency Communication, Data and Video Sharing which is available at: https://www.nctcog.org/nctcg/media/Transportation/DocsMaps/Manage/ITS/ITSMOU.pdf. (MOU information and instructions for processing can be found here: https://www.nctcog.org/trans/manage/its.)

◯ Yes

◯ No

Please use the "Traffic Operations: Integration Attachment" form below to upload a copy of your executed Memorandum of Understanding.

NTTA - Traffic Operations: Integration Attachment

If applicable, please upload the relevant documentation required by the previous survey question in the space provided below.

NTTA Agency Name:

[   ]

NOTE:

After attaching an individual file per browser, you must press (or Click) the SUBMIT button at the bottom of this form in order for the attachments to be submitted. (You will receive a confirmation that the file(s) were submitted.)

MOU: Attach a File

[Choose File] No file selected

Additional Documentation: Attach a File

[Choose File] No file selected

[Submit]

Do not hit the "DONE" button until you are ready to submit the survey!