FHWA TRANSFER REQUEST

Type of Transfer Request: Earmark Repurposing

				Name	EXAMPLE FORM			Tracking Numbers		
Requesting Agency:		Transfer	Title	Lead Budget Analyst		State		FHWA-HCF		
			Request Contact:	Telephone	e (123) 456-8910	23) 456-8910	NJ-21-RP-00			
	New Jersey Department of Transportation				example.form@net.org	140-21-141-002				
Demo ID:	NJ073									
	Description of Project - From	Program Code	Funds Amount	_ _		Description of Project - To	Program Code	OA Type*	Amount	
Reconstruction of Institute Street, Lockwood Avenue, First Street, Second Street, Third Street, Ford Avenue, Liberty Street, and Bond Street in the Borough of Freehold, New Jersey 45A0		\$58,545.0		Installation of two miles of sidewalks along Donna's Parkway near Freehold		RN45	NFA_	\$58,545		
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				_ —						
				_ _						
				_ _						
				-						
		TOTAL FROM	\$58,545.0	_ <u> </u>			TOTAL	TRANSFER		
TOTAL FROW \$30,5			Ψ30,343.0	<u>-</u>						
NJ073: Earr	COMMENTS nark obligated more than 10% of available funds but all projects final vouc	hered and close	ed as of 09/14/2007.	L		* OA Type: SL - special limitation; FL - fo NFA - no	ormula limitation; E on-federal-aid	X - exempt fron	n limitation;	
					Earmark Repurposing Certification					
				Т	The Approving Officials certify that, pursuant to section 124 of title I, division					
				fo p	L of Public Law 117-103, the designated earmark(s) meet the requirements for repurposing and that the repurposed funds will be obligated for eligible purposes on the identified project(s) which are within a 25-mile radius of the previously designated earmark. Yes					
STATE TRANSPORTATION DEPARTMENT					FHWA DIVISION ADMINISTRATOR CONCURRENCE					
unobligated an permissible ar regulations. V	e funds requested for transfer are in accordance with the applicable provisions on uncommitted; and that the percentage of funds to be transferred combined with nount eligible for transfer under the affected program categories according to apply where applicable, concurrence from affected Metropolitan Planning Organizations in this office. Further, I certify that I have the authority to approve the transfer of	n previous transfo blicable State and s and other agend	ers does not exceed the d Federal laws and cies has been obtained	with of F	th provis	at I have reviewed the request to transfer fur sions of title 23 U.S.C. and FHWA policy and -aid Highway program funds.				
	Date of Appr	oval							ate of Approval	
Title of Approx	ving Official			Title	le of An	proving Official				

OMB Control No. 2125-0620

Form FHWA-1575 (ERP 2022) 06/2022