

Nebraska Department of Roads
Comprehensive Planning Assistance Program
Intent-to-Apply Form

Government Agency Name:		Type of Government:	
Agency Contact Person:		Title:	
Mailing Address: <i>(Street, City, State, Zip)</i>		Daytime Phone No.:	Fax No.:
		E-mail Address:	
		What is the date of your current Comp Plan?	
Do you have a current Comprehensive Plan (<i>Comp Plan</i>)? <input type="checkbox"/> Yes <input type="checkbox"/> No		What area did the Comp Plan include?	
What was the forecast year or horizon year?			
Does it have a Long-Range Transportation Plan (LRTP) element, a traffic assignment network, and is there a GIS database available for land use information?			
When are you planning to begin a new (<i>or updated</i>) Comp Plan?			
Estimated Cost?		Horizon Year?	
Are there any proposed or committed developments in your area, or any anticipated highway or street capacity problems?			
Describe briefly what your new or updated Comprehensive Plan will contain.			