



**OREGON DEPARTMENT OF TRANSPORTATION**  
**Transportation Safety Division**

**GRANT PROJECT APPLICATION**

*Project No:* 1517WKZN-421 BBB

*Project Name:* PORTLAND PB WZ ENF/TSD

Answer each question in the boxes provided. Answer each question completely and according to the instructions in *Italics*. All fields are required.

**I. Project Description**

Patrol enforcement for work zones.

**II. Problem Statement**

- A. Describe the problem(s) this project will try to impact:  
*(Describe the problem(s) you intend to impact with this grant.)*

This project will address fatal, injury and pdo crashes within select State of Oregon highway construction zones designed to federal standards. It will provide reductions to vehicle speeds, distracted drivers, and provide greater awareness of police enforcement in work zones.

- B. Provide summary data about the problem(s):  
*(Give summary data regarding the problem as it exists in your jurisdiction.)*

Year	WZ Inv FATALITIES * (Persons)	WZ Inv Crashes**	WZ Inv Fatal and Serious Inj Crashes** (Fatal and Injury A Crashes)	WZ Inv Mod/Minor Inj Crashes** (Injury B and C Crashes)
2009	18	508	34	269
2010	9	490	24	237
2011	10	527	24	265
2012	6	429	22	227
2013	6	427	14	202
2014 Prelim.		4	n/a	n/a

- C. List current activities and associated agencies already involved in solving the problem(s):  
*(Include all related activities and agencies involved. If you have a current project, list the objectives of that project and progress in achieving them.)*

Public information and education programs statewide and within local jurisdictions. Enforcement statewide and within local jurisdictions focusing on incidents and prevention. National efforts and entities working toward a reduction in work zone related traffic deaths, injuries and crashes along with increased awareness. Engineering efforts both within the State and local governments related to traffic calming and work zone safety. National engineering efforts and guidebook development and distribution nationally by the NCHRP.

### III. Objectives

*(Describe quantifiable products or outcomes that address those problems identified in Section II that should result from the proposed activities. Normally at least three very specific objectives should be given and each should include beginning and ending date.*

***The following are examples:***

*"To increase safety belt usage in (funded jurisdiction) from 85% to 90% by September 30, 2004, with the use rate determined by conducting observed use surveys."*

*"To reduce nighttime fatal and injury crashes occurring in (funded jurisdiction) by 20% from 60, the average for the 1998-2001 period, to 48 during the 12-month period starting October 1, 2003, and ending September 30, 2004."*

*"To provide intensive probation supervision to a minimum of 30 additional persons convicted of DUII in (funded jurisdiction) by making at least three face-to-face contacts with each person weekly from October 1, 2003, through September 30, 2004."*

*"To complete an evaluation by July 1, 2004, to determine if using photo radar will lead to a significant reduction in fatal and injury traffic crashes in that location."*

	Start Date	End Date	Objective
1.	7/01/2015	6/30/2017	Reduce the number of work zone related fatal, injury, pdo crashes within state highway work zones through enforcement presence and active patrol. Reduce speeds in work zones and provide input to ODOT on the ease of maneuvering within work zones.
2.	7/01/2015	6/30/2017	Provide preventative and incident specific public information and education efforts to the public through media efforts and other activities.

3.	7/01/2015	6/30/2017	Provide high visibility/high contact enforcement efforts while patrolling under this grant and while performing enforcement as part of any match requirements.
----	-----------	-----------	--

#### IV. Proposed Activities

##### A. Major Activities

*(List major activities to be carried out to achieve objectives stated in Section III above. List the start and end date for each activity, and include in your description what will be done, who will do it, and who will be affected.)*

	Start Date	End Date	Activity
1.	7/01/2015	6/30/2017	Communicate regularly to coordinate work zone safety enforcement with ODOT, Project Managers, Region Trans Safety Coord, Inspectors, R1 Work Zone Coord, other police agencies, public information officers and TSD Roadway Safety Program Mgr.
2.	7/01/2015	6/30/2017	Provide overtime work zone patrol on projects requested and as agreed upon by GHQ Patrol Services Division through the WZ Electronic Tracking System/Master Project Spreadsheet 2015-17 as updated from time to time.
3.	7/01/2015	6/30/2017	Provide match as specified in Exhibit A, and 2015-17 Work Zone Enforcement Guidelines.
4.	7/01/2015	6/30/2017	Conduct activities as identified within Exhibit A of this grant agreement and follow ODOT Work Zone processes within the 2015-17 Work Zone Enforcement Guidelines and its revisions.
5.	7/01/2015	6/30/2017	Provide high visibility/high contact enforcement efforts while on patrol under this grant.
6.	7/01/2015	6/30/2017	Provide preventative and incident specific public information and education efforts to the public through the media and other venues.
7.	7/01/2015	6/30/2017	Provide updated federal indirect rate and updated overtime and straight time hourly rates when available for negotiation of any expected grant adjustment(s).
8.	7/01/2015	6/30/2017	All troops/officers working the grant will be lidar/radar certified and will have said equipment available for use.

Plans for sharing the project activities with others:

Yes. Coordination with police agencies statewide and media to the extent possible. Coordinate with ODOT staff.

**B. Coordination**

*(List the groups and agencies with which you will be cooperating to complete the activities of the project. Explain how you will be working together. In those projects not requiring the involvement of other agencies, a statement justifying the ability of the applicant to carry out the project independently should be included.)*

Is coordination with outside agencies or groups required? If **yes**, check here: ☒

**1) If you checked the box above, please fill in the following. Otherwise skip to item 2) below:**

Name/role of groups and agencies involved:

Police agencies statewide to the extent possible as coordinating work on given work zone projects.

**2) Fill this if you did not check the box above:**

Ability to complete the project independently:

**C. Continuation**

Plans to continue the project activities after funding ceases:

Yes, depending on funding.

**V. Evaluation Plan**

**A. Evaluation Questions**

*(You will be reporting on your objectives in your Project Evaluation. At a minimum each objective should be rephrased as an evaluation question. For example, what percentage of the public in (funded jurisdiction) wears a safety belt? What percentage increase is this? Add questions that demonstrate expected or potential impact of the project on the state or jurisdiction's traffic safety environment. Avoid yes/no evaluation questions.)*

	<b>Evaluation Question</b>
1.	What are the grand totals of the provided OT hours and Match hours, number of citations, number of warnings, vehicles stopped for the entire grant period?
2.	What of the following types of patrol were provided & if various types were provided please identify the estimated percent of the time they were used under this grant. Single officer in work zone, multiple officers in work zones, other creative efforts?
3.	Are there perceptions from the trooper/officers with regard to active or static patrol, when they are best used etc?

**B. Data Requirements**

1. Data to be collected: The Data Table presented as Exhibit A will be submitted with required quarterly reports.
2. Data System

Describe how the data will be collected, stored, and tabulated:

All police agencies participating in the grant track OT cites/warnings, hours, days etc. per work zone patrolled per the 2015-2017 Work Zone Enforcement Guidelines/Exhibit A, Work Zone Enforcement Project Work Plan attached hereto and any revisions.

**C. Evaluation Design**

Describe how the data will be analyzed:

Data will be analyzed to identify what level of additional enforcement the State's receiving on dedicated work zone enforcement from year to year.

**D. Project Evaluation Preparation**

A Project Evaluation Report will be submitted to TSD following the requirements given in the Agreements and Assurances.

**VI. Grant Project Budget Summary**

**A. List of major budget items:**

Patrol Hours

**B. Budget Allotment**

The agency named in this document hereby applies for \$221,588.00 in Transportation Safety funds to be matched with \$43,057.62 in funds from source City of Portland Match to carry out a traffic safety project described in this document.

**VII. Budget and Cost Sharing**

**(Complete Form 737-1003 Budget and Cost Sharing.** You may attach one page to explain specific requests. If you are applying for a multiple-year grant, you must include a separate budget for each year for which you are requesting funding.)

**VIII. Exhibits**

- A. Exhibit A: Work Zone Enforcement Project Work Plan
- B. Exhibit B: Job Descriptions  
*(Provide copy of job descriptions of all positions assigned to the project 500 hours or more paid with grant funds.)*
- C. Exhibit C: Contracts or Service Agreements  
*(Provide signed copies of any contracts or other service agreements that are entered into by the grantee as part of this project. These shall be reviewed by TSD to determine whether the work to be accomplished is consistent with the objectives of the project. All contracts awarded by the grantee shall include the provision that any subcontracts include all provisions stated in the Agreements and Assurances.)*

**IX. Agreements and Assurances**

*(READ, sign and attach to the grant project application.)*

**X. Approval Signatures**

I have read and understand the Agreements and Assurances stipulating the conditions under which the funds for which are being applied will be available and can be utilized. **The agency named in this document is prepared to become a recipient of the funds should the grant funds be awarded, contingent upon authorization by Portland City Council of the grant award and agreement.**

**A. Agency Information**

Agency Name*:	Portland Police Bureau
Street Address:	1111 SW 2nd Ave.
City:	Portland
State:	OR
Zip:	97204

## B. Project Director

First Name: Kelli Last Name: Sheffer  
Title: Capt. Email: kelli.sheffer@portlandoregon.gov  
Phone: (503) 793-6997 Fax: (503) 823-2220  
Street Address: 7214 N. Philadelphia Ave.  
City: Portland  
State: OR  
Zip: 97203  
Signature: *Kelli Sheffer* Date: 6-7-15

## C. Authorizing Official of Agency Completing Application

First Name: Charlie Last Name: Hales  
Title: Mayor Email: MayorHales@portlandoregon.gov  
Phone: (503) 823-4120 Fax: (503) 823-3588  
Street Address: 1221 SW 4th Avenue, Suite 340  
City: Portland  
State: OR  
Zip: 97204  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Non-profit agencies must submit proof of exempt status under Code Sec. 501(c)(3)

Mail signed copies to: Oregon Dept. of Transportation  
Transportation Safety Division, MS 3  
4040 Fairview Industrial Drive SE  
Salem, OR 97302-1142

Email completed electronic copy to your TSD Program Manager.

**Agreements and Assurances****Project Director:**

Kelli Sheffer, Captain

Signature

Date

**Designated Alternate:**

Catherine Reiland, Sr. Business Operations Manager

Signature

Date

**Authorizing Government Official:**

Charlie Hales, Mayor

Signature

Date

TO BE COMPLETED BY TSD

Project No.: 1517WKZN-421 BBB

Title: PORTLAND PB WZ ENF/TSDOTC approval date: June 18, 2015Total project cost: \$264,645.62TSD grant funds: \$221,588.00All matching funds: \$43,057.62Matching source(s): Local

Authority to approve modifications to this agreement is delegated to the Transportation Safety Division grant manager.

\_\_\_\_\_  
Manager, Transportation Safety Division Oregon  
Department of Transportation

Date