

*Wisconsin Department of Transportation (WisDOT)*  
**Signals and ITS Standalone Program Project Application Form**  
**GENERAL INSTRUCTIONS**

**MUNICIPAL APPLICATIONS DUE TO REGIONAL LIAISON: September 19, 2025**

**\*\*Municipalities may submit a maximum of two applications per calendar year.\*\***

**REGIONAL APPLICATIONS DUE: October 10, 2025**

The following application will be used to evaluate and determine award of Signals and ITS Standalone Program projects to be funded as budget permits. Each applicant requesting funds from the Signals and ITS Standalone Program must submit the following information:

- ☐ Completed Signals and ITS Standalone Program Project Application Form (one for each project request).
- ☐ Any supporting materials deemed necessary by the Region or municipalities.

**Project Application Form:**

- 1 Project Identification – Fill in the areas applicable to the proposed project.
- 2 Project Type – Identify the proposed project type.
- 3 Project Information – Describe the proposed project in as much detail as possible. Detailed descriptions explaining how the project will address the identified need(s) are essential for application review and evaluation.
- 4 Project Cost and Schedule – Provide the project costs in the requested fiscal year. When developing project estimates account for additional costs associated with accessible pedestrian signals (APS), traffic signal detection, and emergency vehicle preemption (EVP) systems if your project is proposing them. Provide anticipated project schedule and proposed resources to accomplish implementation. Geometric improvements must not exceed 50% of the TOTAL COST funded by this appropriation.  
**\*\*Maximum project award is limited to \$1,250,000.\*\***  
**\*\*Municipal projects require 10% funding commitment from the requesting agency. Requesting municipal agency will also be responsible for any project costs more than the approved appropriation funding amount asked for in this application.\*\***  
**\*\*Award of new SISP projects is subject to timely performance on previous awards.\*\***
- 5 Additional Project Information – Answer the questions as they relate to the proposed project.
- 6 Contact Information and Signature – Provide contact information. Application must be signed by the WisDOT Regional Operations Chief (WisDOT managed projects only) or the Municipal Sponsor to certify application and commit funds.

**Supporting Materials:** Each completed application shall include the following, *if applicable*:

- Map of location or general sketch of project proposal or site photo(s). *An adequate sketch is the minimum requirement. Preliminary plan layout sheets or study reports should be provided if available.*
- Completed Project Evaluation Factor (PEF) worksheet and/or Interactive Highway Safety Design Model (IHSDM) benefit-cost analysis.
- TSMO-TIP package (one for each project request as required based on project type).
- New Traffic Signal – Warrant Documentation, required **only** for proposals to install new traffic signals (example worksheet available upon request. Ref: Manual on Uniform Traffic Control Devices [MUTCD], Chapter 4C). Approved Traffic Control Signal Approval Request [Form DT1199](#) (Required with application for all proposals to install new traffic signals on the State Trunk Highway System, including Connecting Highways and ramp terminals).
- New Pedestrian Hybrid Beacon – Warrant Documentation, required **only** for proposals to install new pedestrian hybrid beacons (example worksheet available upon request. Ref: Manual on Uniform Traffic Control Devices [MUTCD], Chapter 4F). Approved Pedestrian Hybrid Beacon Approval Request [Form DT1196](#) (Required with application for all proposals to install new pedestrian hybrid beacons on the State Trunk Highway System, including Connecting Highways).
- Systems Engineering Analysis (SEA) – *An SEA may be needed for certain types of projects funded by this Program.*

**Submittal Instructions and General Questions:**

Program Contact – Todd Szymkowski, PE, PTOE, PMP | Bureau of Traffic Operations | [todd.szymkowski@dot.wi.gov](mailto:todd.szymkowski@dot.wi.gov) | 414-227-3125  
Projects requested by a municipality should be coordinated with and submitted to their Regional liaisons (found at link below):  
(<https://wisconsin.dot.gov/Pages/doing-bus/local-gov/astnce-pgms/highway/sisp.aspx>).

*Wisconsin Department of Transportation (WisDOT)*  
**Signals and ITS Standalone Program**  
**Project Application Form**

### 1. Project Identification

PROJECT NAME (consistent with TSMO-TIP documentation if applicable)			
FUNDING REQUEST TOTAL \$			
COUNTY	CITY/TOWN	REGION	
STATE TRANSPORTATION IMPROVEMENT PROGRAM (STIP) ELIGIBLE (Is this project eligible to be integrated with an existing STIP project?)			<input type="checkbox"/> YES <input type="checkbox"/> NO
MUNICIPAL*		<input type="checkbox"/> YES <input type="checkbox"/> NO	MUNICIPAL PRIORITIES (If two (2) applications are submitted, select priority) <input type="checkbox"/> 1 <sup>ST</sup> <input type="checkbox"/> 2 <sup>ND</sup>
*Municipal projects require a 10% funding commitment from the requesting agency. The requesting municipal agency will also be responsible for any project costs more than the approved appropriation funding amount based on this application.			

### 2. Project Type

Identify the proposed project type: Check boxes that apply below.	
<input type="checkbox"/> 1. New Signal Installation*	Install new traffic signal.
<input type="checkbox"/> 2. Signal Rehabilitation*	Upgrade or replace existing signal infrastructure (poles, wiring, detection, cabinet, controller, etc.); Construct minor geometric improvements.
<input type="checkbox"/> 3. Signal Retrofit*	Install monotubes, flashing yellow arrows, or other safety improvements at existing traffic signal, Install adaptive signal systems; replacement of TS 1 cabinets, controllers, etc.
<input type="checkbox"/> 4. Signal and Ramp Meter Retiming	Collect and evaluate data; Develop timing plan; Develop and implement corridor coordination plan. <b><i>Municipal owned signals not eligible for this project type per <a href="#">Form DT1199</a>.</i></b>
<input type="checkbox"/> 5. Intersection Communication	Construct and integrate fiber communication for signals; Install and integrate wireless communication, including cellular modems and radios for signals.
<input type="checkbox"/> 6. New ITS Device Installation	Install new ITS infrastructure including cameras, backbone fiber, network equipment, etc.
<input type="checkbox"/> 7. ITS Device Rehabilitation	Upgrade, install or replace existing detection, controllers, battery backup, cameras, ramp meter LED's, etc.
<input type="checkbox"/> 8. System Software and Data	Develop, upgrade, install or replace software including ongoing licensing fees and data subscriptions.
<input type="checkbox"/> 9. Life-Cycle Replacement	Replace existing end-of-life signals and/or ITS equipment including cameras, controllers, LED's, etc. <b><i>Municipal owned signals not eligible for this project type per <a href="#">Form DT1199</a>.</i></b>
<input type="checkbox"/> 10. Crosswalk Technology Improvements*	Rectangular rapid flashing beacons (RRFB), accessible pedestrian signals (APS), and pedestrian hybrid beacons.
<input type="checkbox"/> 11. Other	Examples include: <ul style="list-style-type: none"> <li>Performance Measures Applications</li> <li>Research and Development Projects</li> <li>CAV Deployments and Applications</li> <li>Studies, Plans, and Evaluations</li> </ul>
*Items not covered by SISP program funds: all lighting infrastructure, decorative signal poles, decorative cabinets, and decorative signal infrastructure. Other items may also not be covered as deemed appropriate by the SISP evaluation committee.	

### 3. Project Information

#### 3a. Project Description

Project description should include location specific information.

☐ See attached TSMO-TIP Application

#### 3b. Mobility Improvements

In some detail, describe the anticipated mobility improvements of the proposed project and how they will be measured (e.g., detector data will be used to determine before and after peak hour delay).

☐ See attached TSMO-TIP Application, if applicable.

Indicate your expected benefits below and provide documentation to support your analysis.

☐ Annual mobility benefits are expected to be greater than the capital cost of the project.

☐ Annual mobility benefits are expected to be greater than half of the capital cost of the project.

☐ Annual mobility benefits are expected to be greater than \$0.

☐ No expected mobility improvements.

#### 3c. Operations and Maintenance Impacts

In some detail, describe how the proposed project is anticipated to impact operations and maintenance funds. For example, is the project replacing infrastructure that has been regularly out-of-service and has required increased maintenance?

☐ See attached TSMO-TIP Application, if applicable.

☐ There is a demonstrated history of maintenance issues that will be corrected with this project.

Include specific number of knockdowns, service calls, outages, etc., below.

☐ Maintenance may be reduced due to this project.

☐ No expected operations and maintenance impacts.

### 3d. Existing Conditions

Describe the conditions of the existing infrastructure. For example, condition of current infrastructure could be described as fair, disrepair, or out of commission. List any components NOT meeting current WMUTCD standards. Existing age of the current infrastructure could be described as 5 years past end-of-life, within 5 years past end-of-life, within 3 years of expected end-of-life, or current/new installation. Typical lifecycles of common infrastructure include communications (20 years), signal poles (25 years), controller (16 years), cabinet (20 years), DMS (20 years), CCTV (10 years), and detection (10 years).

### 3e. Energy and Environmental Impacts

In some detail, describe the anticipated energy and environmental impacts of the proposed project. For example, is the proposed project expected to replace existing infrastructure that may be accessed from a central location rather than driving to the field location for manual access?

☐ See attached TSMO-TIP Application, if applicable.

Indicate your expected benefits below.

☐ Annual energy and environmental benefits are expected to be greater than the capital cost of the project (provide documentation).

☐ Annual energy and environmental benefits are expected to be greater than \$0.

☐ Project is not expected to impact the natural environment.

☐ Project is expected to negatively impact the natural environment.

### 3f. Safety Improvements

In some detail, describe current safety concerns and the anticipated safety improvements of the proposed project.

☐ See attached TSMO-TIP Application, if applicable.

☐ No expected safety impacts.

#### 4. Project Cost and Schedule

List major construction items and associated estimates such as new traffic signal installation, intersection channelization, etc. When developing project costs account for additional costs for accessible pedestrian signals (APS), traffic signal detection, and emergency vehicle preemption (EVP) systems if your project is proposing them. Project expense is considered during the evaluation of the projects. Therefore, **ALL COSTS** (including design, utilities, and R/E) should be provided regardless of whether awarded project funds will be used for all elements of the project. **Maximum project award is limited to a total of \$1,250,000.**

<b>Cost</b>	FY27 (07/26 – 06/27)	FY28 (07/27 – 06/28)	FY29 (07/28 – 06/29)	FY30 (07/29 – 06/30)
<b>Design:</b>				
WisDOT Staff Delivery/Design				
Consultant Work Order				
<b>Real Estate:</b> (Note: Real estate acquisition CANNOT be funded by this appropriation.) Identify funding source:				
<b>Construction:</b>				
Procurement: State Furnished Materials				
Procurement: Service and Installation				
LET Construction				
<b>Other Costs:</b>				
<b>*TOTAL PROJECT COST PER FY =</b>				
<b>MUNICIPAL FUNDING COMMITMENT (10%) =</b>				

\* Awarded project funds must be encumbered during the FY identified unless coordinated with the Regional Program Liaison. Requested funds will not be increased beyond the amount asked for in this application after the award of the project.

<b>Schedule</b>		
Task	Months (MM/YY – MM/YY)	Anticipated Required Resources (Region Project Design Section (PDS), Region Traffic Operations, consultant, procurement contracts, etc.)
1. Design		
2. Real Estate		
3. Procurement		
4. Construction		
5. Other		

## 5. Additional Project Information

### 5a. Performance Improvement Program Goals

<p>Does this project help with achieving WisDOT's performance goals? Refer to <a href="http://dotnet/mapss/index.htm">http://dotnet/mapss/index.htm</a></p> <ul style="list-style-type: none"><li>– <i>Mobility</i>: Delivering transportation choices that result in efficient trips and no unexpected delays.</li><li>– <i>Accountability</i>: The continuous effort to use public dollars in the most efficient and cost-effective way.</li><li>– <i>Preservation</i>: Protecting, maintaining, and operating Wisconsin's transportation system efficiently by making sound investments that preserve and extend the life of our infrastructure, while protecting our natural environment.</li><li>– <i>Safety</i>: Moving toward minimizing the number of deaths, injuries, and crashes on our roadways.</li><li>– <i>Service</i>: High quality and accurate products and services delivered in a timely fashion by a professional and proactive workforce.</li></ul>	<p>Select all that apply:</p> <p><input type="checkbox"/> Mobility</p> <p><input type="checkbox"/> Accountability</p> <p><input type="checkbox"/> Preservation</p> <p><input type="checkbox"/> Safety</p> <p><input type="checkbox"/> Service</p>
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### 5b. Additional Justification

<p>Provide additional detail that should be considered during the evaluation of this project. This may include the consequences of what would happen should the project not be implemented.</p>
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## 6. Contact Information and Signature

PRIMARY CONTACT NAME (Responsible for Project Delivery)	TITLE	
EMAIL ADDRESS	TELEPHONE	
WISDOT REGIONAL LIAISON CONTACT NAME (Municipal Only)	MUNICIPAL SPONSOR EMAIL ADDRESS	
MUNICIPAL SPONSOR SIGNATURE (Responsible for 10% funding – Municipal Only)		DATE
SIGNATURE OF WISDOT REGIONAL OPERATIONS CHIEF (WisDOT Projects Only)		DATE

REVISED 12/7/2023