Resolution Number:	2026-34
Resolution Approval Date:	8/11/2026
Contact Person/Title:	Kathy Raasch
Phone:	760-326-5700x126
Email:	kraasch@cityofneedles.com

Measure I Local Pass-through Program

FIVE YEAR CAPITAL IMPROVEMENT PLAN

Fiscal Years 2026/2027 thru 2030/2031

Jurisdiction:

Needles

6/30/26 Carryover Balance: **$275,133.61**

Projects:	Is Project in City's Non-motorized Transportation Plan? (Yes/No)	Does Project have an ATP Component? (Yes/No)	Is the Project on the City's Nexus Study List? (Public/DIF Share %)		Estimated Total Project Cost	FY2026/27 Est. Revenue	FY2027/28 Est. Revenue	FY2028/29 Est. Revenue	FY2029/30 Est. Revenue	FY2030/31 Est. Revenue	Total Est. Rev.
						$179,147	**$183,367**	**$187,798**	**$192,370**	**$197,012**	**$939,694**
						Current Estimate	Current Estimate	Current Estimate	Current Estimate	Current Estimate	**Total**
City-wide Pavement Management Program	No	No	0.0%	0.0%	$2,000,000	$400,000	$200,000	$200,000	$200,000	$200,000	**$1,200,000**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
			0.0%	0.0%	$0	$0	$0	$0	$0	$0	**$0**
					Projects Total:	$400,000	$200,000	$200,000	$200,000	$200,000	**$1,200,000**

Total Programming is currently **99%** ***(Must not exceed 150% of Carryover Balance + Total Estimated Revenue)***

Total Estimated Programming: **$1,200,000**

Resolution Number:	
Resolution Approval Date:	
Contact Person/Title:	
Phone:	
Email:	

Measure I Local Pass-through Program

FIVE YEAR CAPITAL IMPROVEMENT PLAN

Fiscal Years 2026/2027 thru 2030/2031

Jurisdiction:

Adelanto

Please read yellow cells in column P for Directions!

6/30/25 Carryover Balance: **$0.00**

Projects:	Is Project in City's Non-motorized Transportation Plan? (Yes/No)	Does Project have an ATP Component? (Yes/No)	Is the Project on the City's Nexus Study List? (Public/DIF Share %)		Estimated Total Project Cost	FY2026/27 Est. Revenue	FY2027/28 Est. Revenue	FY2028/29 Est. Revenue	FY2029/30 Est. Revenue	FY2030/31 Est. Revenue	Total Est. Rev.
						$1,163,503	**$1,191,188**	**$1,220,246**	**$1,250,015**	**$1,280,509**	**$6,105,460**
						Current Estimate	Current Estimate	Current Estimate	Current Estimate	Current Estimate	**Total**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
rows			0%	100%	$0	$0	$0	$0	$0	$0	**$0**
					Projects Total:	$0	$0	$0	$0	$0	**$0**

Total Programming is currently **0%** ***(Must not exceed 150% of Carryover Balance + Total Estimated Revenue)***

Total Estimated Programming: **$0**

Directions:

Each Jurisdiction must annually submit a new 5 year CIP to SBCTA by September 1 to receive Local Street Pass-Through funds.

1) Only purple cells need attention/data entry.

2) Select your Jurisdiction in L2 Using Drop Down (Revenue will update automatically)

3) Enter the amount of your unused MSI Local Street funds estimated at the end of the current Fiscal Year in M6.

4) Type the Project Names in column B (see 5 for additional instructions)

5) Please include the type of work. There's no limit on categorial projects, like pavement mgmt or routine maintenance. If adding a specific road/named project, please include road name, limits and type of work.

6) Please enter yes or no as appropriate in cells C&D to indicate if the Project is in a Non-Motorized Trans Plan or has an ATP Component.

7) If the Project is a Capacity Improvement Project/Arterial Project, please enter the Public/DIF Share % from the Nexus Study. Otherwise, leave blank. Please Contact SBCTA if you need help with this.

8) Please enter Estimated Total Project Cost in column G. May be more than the Measure I amount.

9) Please enter the amount of Measure I Local Street dollars estimated to be spent by Fiscal Year.

10) Make sure the programming doesn't exceed 150% of the 5 Year Estimated Revenue + Carryover Balance. If it does, cell H60 will turn pink as a flag, and will show a % above 150%. You will need to reduce programming during the 5 years per Measure I Policy VLS-9, VVLS-13, or MDLS-11.

11) Hide/Unhide blank project lines as needed. If you need more lines to input Projects, please unhide rows up to line 100. If Projects exceed 100 lines, please contact SBCTA for a revised form.

12) Only input/submit the 5 Year CIP using the SBCTA-approved form sent to you. Contact SBCTA if you encounter problems.

13) All projects with expenditures MUST BE LISTED in the CIP in effect at the time of expenditure as a requirement of the Measure I Ordinance and Policy VLS-9, VVLS-13, or MDLS-11. If an agency spends Measure I Local Street funds on a project not listed, a Revised CIP must be submitted by Sept 1 after the year where the expenditures were incurred to avoid an audit finding.

14) Consider submitting CIP to SBCTA for consistency review/policy compliance prior to adoption by jurisdictions governing body. Please call SBCTA with any questions using contact person from Cover Letter.