

OFFICE OF ECONOMIC DEVELOPMENT
TRANSPORTATION ECONOMIC DEVELOPMENT FUND

CATEGORY B: COMMUNITY SERVICE INFRASTRUCTURE FUND APPLICATION

SECTION ONE: APPLICANT INFORMATION

CITY OR VILLAGE NAME New Haven	MAILING ADDRESS 57775 Main Street	ZIP CODE 48048	COUNTY Macomb
CONTACT PERSON Brian Meissen	CONTACT PHONE NO. (586) 749-5301	CONTACT TITLE President	E-MAIL ADDRESS bmeissen@newhavenmi.org
ALTERNATE CONTACT PERSON Sandra Cazel	PHONE NO./EXTESION (586) 749-5301 / 212	ALTERNATE CONTACT PERSON TITLE Office Manager	E-MAIL ADDRESS SCazel@NewHavenMi.Org
STATE SENATOR Dan Lauwers	STATE SENATE DISTRICT NO. 25	STATE REP. Jaime Greene	STATE REP. DISTRICT NO. 65

SECTION TWO: PROJECT INFORMATION

1) STREET NAME Havenridge Road	PROPOSED PROJECT LIMITS (Using nearest cross streets) Main St to Anne St	LINEAR LENGTH OF PROJECT 530
ROADWAY CLASSIFICATION Major Collector	PASER RATING 3	DAILY AVERAGE TRAFFIC COUNT 2943
CONSTRUCTION COST 494040		
<p>DESCRIPTION OF PROPOSED WORK; include specific treatment method with details such as quantities (ie patching) and/or depth (ie mill/fill), where applicable. Preventative maintenance & rehab of poor Havenridge roadway (PASER 3) by milling off top 3" of existing 3" asphalt layer; Repave with 1.5" of asphalt (2 layers); Full depth repair where needed; The proposed work is to be paired with other infrastructure work</p> <p>This project is planned to be publicly bid under one contract along with other similar work in the Village. Plans & specs currently under design for 2026 bid & construction.</p> <p>IS ANY ADDITIONAL RIGHT-OF-WAY NEEDED FOR THE PROJECT(S)? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, PLEASE BRIEFLY DESCRIBE.</p>		
2) STREET NAME	PROPOSED PROJECT LIMITS (Using nearest cross streets)	LINEAR LENGTH OF PROJECT
ROADWAY CLASSIFICATION	PASER RATING	DAILY AVERAGE TRAFFIC COUNT
CONSTRUCTION COST		
<p>DESCRIPTION OF PROPOSED WORK; include specific treatment method with details such as quantities (ie patching) and/or depth (ie mill/fill), where applicable.</p> <p>IS ANY ADDITIONAL RIGHT-OF-WAY NEEDED FOR THE PROJECT(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE BRIEFLY DESCRIBE.</p>		

3) STREET NAME	PROPOSED PROJECT LIMITS (Using nearest cross streets)		LINEAR LENGTH OF PROJECT
ROADWAY CLASSIFICATION	PASER RATING	DAILY AVERAGE TRAFFIC COUNT	CONSTRUCTION COST
DESCRIPTION OF PROPOSED WORK; include specific treatment method with details such as quantities (ie patching) and/or depth (ie mill/fill), where applicable.			
<p>IS ANY ADDITIONAL RIGHT-OF-WAY NEEDED FOR THE PROJECT(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE BRIEFLY DESCRIBE.</p>			
4) STREET NAME	PROPOSED PROJECT LIMITS (Using nearest cross streets)		LINEAR LENGTH OF PROJECT
ROADWAY CLASSIFICATION	PASER RATING	DAILY AVERAGE TRAFFIC COUNT	CONSTRUCTION COST
DESCRIPTION OF PROPOSED WORK; include specific treatment method with details such as quantities (ie patching) and/or depth (ie mill/fill), where applicable.			
<p>IS ANY ADDITIONAL RIGHT-OF-WAY NEEDED FOR THE PROJECT(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE BRIEFLY DESCRIBE.</p>			
5) STREET NAME	PROPOSED PROJECT LIMITS (Using nearest cross streets)		LINEAR LENGTH OF PROJECT
ROADWAY CLASSIFICATION	PASER RATING	DAILY AVERAGE TRAFFIC COUNT	CONSTRUCTION COST
DESCRIPTION OF PROPOSED WORK; include specific treatment method with details such as quantities (ie patching) and/or depth (ie mill/fill), where applicable.			
<p>IS ANY ADDITIONAL RIGHT-OF-WAY NEEDED FOR THE PROJECT(S)? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE BRIEFLY DESCRIBE.</p>			

SECTION THREE: PROJECT FUNDING

1a) WILL THE PROPOSED PROJECT(S) BE PAIRED WITH OTHER NONPARTICIPATING INFRASTRUCTURE WORK? I.E., SEWER, WATER, ELECTRIC, OR OTHER? ☒ YES ☐ NO

IF YES, PLEASE BRIEFLY DESCRIBE NATURE OF WORK AND COST ESTIMATE: \$ 30000

Storm sewer installation, catch basin structures & adjustments, and associated misc work.

1b) ARE FUNDS COMMITTED FOR THIS NONPARTICIPATING WORK? ☒ YES ☐ NO

2) ARE YOU APPLYING FOR ADDITIONAL FUNDING FOR ANY OF THE PROJECTS LISTED IN THIS APPLICATION? ☐ YES ☒ NO

IF YES, PLEASE PROVIDE

AGENCY NAME

ADDITIONAL FUNDING

AMOUNT REQUESTED

YEAR EXPECTED

3) PROJECT COST CALCULATIONS AND GRANT REQUEST

a. TOTAL CONSTRUCTION COSTS FROM SECTION 2: \$ 494040

b. MAXIMUM GRANT AMOUNT NOT TO EXCEED 50% of SECTION 3.3a: \$ 247020 OR

c. MAXIMUM GRANT AMOUNT NOT TO EXCEED: \$250,000.00

d. **THE LESSER OF 3b AND 3c = GRANT REQUEST:** \$ 247020 OR 50 % WHICHEVER IS LESS*

e. **PARTICIPATING MATCH PROVIDED BY LOCAL AGENCY (AT LEAST 3a MINUS 3d):** \$ 247020

f. TOTAL NONPARTICIPATING COST FROM SECTION 3.1a: \$ 30000

g. TOTAL AGENCY FUNDING COMMITMENT (SECTION 3.3e PLUS SECTION 3.3f): 277020 **

* If the project total comes in higher or lower than anticipated in this application, the final grant amount will be the lesser of the total grant award or the grant percentage (3d).

** The resolution should note this dollar amount as committed by the local agency.

SECTION FOUR: PROJECT IMPLEMENTATION

1) PROPOSED PROJECT START DATE (mm/dd/yyyy): 06/01/2026

2) WILL THE PROPOSED WORK BE PAIRED WITH OTHER ROADWORK BY ANOTHER AGENCY? ☐ YES ☒ NO

IF YES, PLEASE PROVIDE THE AGENCY NAME:

3) WILL YOUR AGENCY OVERSEE THE GRANT IMPLEMENTATION? ☒ YES ☐ NO IF NO, WHO WILL OVERSEE THE GRANT IMPLEMENTATION? I.E., LOCAL AGENCY, CONSULTANT ENGINEERING FIRM, ETC.:

ADDITIONAL COMMENTS**REQUIRED DOCUMENT CHECKLIST**

☒ RESOLUTION OF SUPPORT

☒ MAP

☒ CONSTRUCTION ESTIMATES

☒ PHOTOS

NAME OF AUTHORIZED SIGNATORY FROM RESOLUTION

E-MAIL ADDRESS

PHONE NUMBER

Brian Meissen

bmeissen@newhavenmi.org

586-749-5301

SIGNATURE

DATE