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**ANDERSON COUNTY
TRANSPORTATION COMMITTEE**

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1428 Pearman Dairy Road
Anderson, South Carolina 29625
(864) 260-4190
FAX (864) 260-4629

C FUND ASSISTANCE APPLICATION

Project Location _____

Is the road (Check appropriate box)

State _____

Local _____

Name of Government Entity making application _____

Address: _____

Name of Contact Person: _____

Contact Person's Telephone Number: _____

Total Project Cost: \$ _____ Total C-Funds Requested: \$ _____

Brief description of existing problem and/or need _____

Who will be the Project Manager? _____

Brief description of how the proposed improvement will remedy the existing problem/need:

Are you aware of other funding sources (i.e., State or local governments, special purpose district, businesses, property owners, etc.)? If so, please identify them.

Who will be responsible for any cost overruns? _____

Are pictures or a video tape provided with this application? _____ Yes _____ No

Is supplemental data attached to this application? _____ Yes _____ No

Note: Location maps should accompany this application.

Date

Applicant's Signature