



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
AND PUBLIC FACILITIES

COST ESTIMATE

PROJECT NAME: _____
 STATE PROJECT # _____
 FEDERAL-AID PROJECT # _____
 REGION _____
 LENGTH _____
 DATE _____
 NO. OF PRIVATE/LOCAL GOVT. PARCELS: _____
 NO. OF FEDERAL GOVT. PARCELS: _____

		<i>PRIOR FUNDING</i>	<i>CURRENT REQUEST</i>	<i>CHANGE AMOUNT</i>
	PERSONAL SERVICES			
090	ROW Appraisal and Acquisition	0	0	+0
095	ROW Engineering Services	0	0	+0
134	Training	0	0	+0
	<i>Subtotal Personal Services</i>	<u>0</u>	<u>0</u>	<u>0</u>
297	COST ALLOCATION PLAN	0	0	
099	ROW CONSULTANTS	0	0	
120-126	LAND ACQUISITION PAYMENTS	0	0	
	RELOCATION BENEFITS			
	payments			
129-130	RHP - owners			+0
129-130	RHP - tenants			
131	Residential Moving			+0
128	Businesses			
133	Housing of Last Resort			
	<i>Subtotal Relocation Benefits</i>	<u>0</u>	<u>0</u>	<u>0</u>

ICAP @: _____
 NON-PARTICIPATING COSTS: _____
TOTAL COST ESTIMATE: 0

Remarks:

Approved by: _____ Regional Right-of-Way Chief _____ Date _____