



RESOLUTION NO. _____
OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

**RESOLUTION TO SUPPORT THE APPLICATION FOR TRANSPORTATION
ENHANCEMENT (TE) FUNDING
FOR CONSTRUCTION OF A CLASS 1 BIKE PATH ALONG THE SMUD
POWERLINE CORRIDOR IN EL DORADO HILLS FROM SILVA VALLEY ROAD TO
EL DORADO HILLS BLVD.**

WHEREAS, the El Dorado County Transportation Commission (EDCTC) is making available Transportation Enhancement (TE) program funds from the EDCTC 2008 Regional Transportation Improvement Program (RTIP) and;

WHEREAS, said procedures and criteria established by the State of California require a resolution authorizing the application by the applicant's governing body before submission of said application; and

WHEREAS, El Dorado County possesses a Master Agreement with CALTRANS making them an eligible applicant for these Federal transportation funds; and

WHEREAS, El Dorado County desires to obtain funding for a Class 1 bike path to improve safety and convenience for bicycle commuters and pedestrians and;

WHEREAS, Federal TE funds are intended to provide a means to creatively and sensitively integrate transportation facilities into their surrounding environment and;

WHEREAS, the subject project provides a provision for facilities and safety for bicycles and pedestrians

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors hereby authorizes the Department of General Services to apply for TE grant funding to be applied to the construction of a Class 1 bike path in the SMUD Corridor from Silva Valley Parkway to El Dorado Hills Blvd.

Resolution No. _____
Resolution to support the application for
Transportation Enhancement funding for construction of
a Class 1 Bike Path in the Sacramento Municipal Utility District (SMUD)
Corridor from Silva Valley Parkway to El Dorado Hills Blvd.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the _____ day of _____, 200__, by the following vote of said Board:

Attest:

Cindy Keck
Clerk of the Board of Supervisors

Ayes:

Noes:

Absent:

By: _____

Chairman, Board of Supervisors

I CERTIFY THAT:

THE FOREGOING INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE.

DATE: _____

Attest: CINDY KECK, Clerk of the Board of Supervisors of the County of El Dorado, State of California.

By: _____