

Real Property/Facility Asset Information Sheet-Multimodal Division

Agency Name: _____ Date Sheet Completed: _____

Agency Address: _____

Agency Telephone Number: _____ Contact Person: _____

Facility/Real Property Address: _____

Did Agency notify Multimodal Staff or Asset Coordinator of the purchase or construction? Yes No

Name of Builder: _____ Description of Property: _____

Function of the Property or Facility: _____

Start Date of Construction: _____ End Date of Construction: _____

Beginning Active Service Date for Public Use: _____ Agency Assigned Number: _____ **(Required)**

Depreciation Method: _____ Number of Years for Useful Life: _____

Complete One: Monthly Depreciation Amount: _____ or Yearly Depreciation Amount: _____

Budget Details 1: FTA Funding Source: _____ Useful Life Benchmark (Required by TAM): _____

Federal TEAM Number: _____ F & A Contract Number: _____

Project Number: _____ Total Price of Property/Facility: _____

Federal Share %: _____ Amount Paid: _____

State Share %: _____ Amount Paid: _____

Local Share %: _____ Amount Paid: _____

Note: Both the Percentage and Money Amount must be listed.

Budget Details 2: Additional Funding Source: _____

Federal TEAM Number: _____ F & A Contract Number: _____

Project Number: _____

Federal Share %: _____ Amount Paid: _____

State Share %: _____ Amount Paid: _____

Local Share %: _____ Amount Paid: _____

Note: Both the Percentage and Money Amount must be listed.

Required Documentation for Real Property or Facility:

1) Copy of all Receipts for Supplies & Labor, (2) Copy of Deed & Insurance, and (3) Pictures.

Note: Agency's maintenance plan, inspections, and safety plan should be updated for real property or facility. (Multimodal will need revised documents.)

Mail to: TDOT/Multimodal Division, James K Polk Bldg., 505 Deaderick St Ste 1800, Nashville Tn 37243 ATTN: Asset Manager

Revised: Jan 2017