# Transportation Earmark Initiation Form

INSTRUCTIONS: Please complete this form and email it to [TransportationEarmarks@dot.state.ma.us](mailto:TransportationEarmarks@dot.state.ma.us) along with any supporting documentation.

## Earmark Source:

Example: Fair Share Supplemental Budget

## Earmark Language:

## Municipality/Agency:

## FEIN:

## State Vendor Code (N/A if not yet set up):

## Contact Name:

## Phone:

## Email:

## Legal Address:

## Scope of Work & Budget

INSTRUCTIONS: Detail the work to be performed using the earmarked funds. The description should directly align with the earmark language inputted on the prior page. Provide a budget table or use the [MassDOT Preliminary Estimate Form](https://madothway.my.salesforce.com/sfc/p/#8y0000008aqq/a/8y000005RXBC/ctfa9WkMTv7Iw.Hik2BFLJrlir50959V6f4Iu7zz5sM). Attach additional documentation as needed.