CSX TRANSPORTATION - NEW PROJECT INITIATION FORM Please provide the following information so that CSXT is able to accurately and appropriately process the project setup and billing. Is this project associated with Federal funds? Is this project associated with State funds? Please describe the funding source for this project (i.e. INFRA, Section 130, State, County, Private, etc.). Buy America Additional procurement restrictions (Please describe below) State Suspended and Debarred (Note - All federally funded projects are already monitored against the federal sus/deb listings) **Project Requirements:** Davis-Bacon (Please only check this box if this is a construction project that may be performed by an outside party) CSX is subject to a state single audit as a recipient or subrecipient of funds (The only states that should apply here are FL or NC. FL must provide completed form DFS-A2-NS.) Only complete this section if this Other If you selected Other, please describe below project is associated with Federal and/or State funds. **Project Sponsor Bill To Information** Agency - Sponsor: Billing Address: Contact Name: Phone: E-mail: Project Location: Project Description: Sponsor Project Ref. Number (If applicable) Signature of Applicant* Please sign, and e-mail this form to the authorized CSX representative. Name and Title of Applicant Signature of Applicant Date: *By signing this form you are authorizing CSXT to incur costs and bill against this project. Should the project be canceled, CSXT will bill

the Project Sponsor for the incurred costs. In the event the Project Sponsor is unresponsive for 90 days or more, the project will be closed; and the Project Sponsor will be final billed for all project costs incurred.