Request for

Annual

Transportation Plans

For

Fiscal Year 2018



**REQUEST FOR**

**ANNUAL TRANSPORTATION PLANS**

**FOR FISCAL YEAR 2018**

**Application for State and Federal Funding under the**

**PUBLIC TRANSPORTATION PROGRAMS (PTP)**

* **Sections 5303/5304 Planning Assistance**
* **Large Urban Capital and Operating Assistance**
* **Section 5307 Capital and Operating Assistance**
* **Section 5311 Capital and Operating Assistance**

**and**

**AMERICANS WITH DISABILITIES ACT (ADA) FUNDING PROGRAM**

**and**

**STATEWIDE SPECIAL TRANSPORTATION ASSISTANCE PROGRAM (SSTAP)**

**Issued November 2016**

Annual Transportation Plans for Sections 5307, 5311, Large Urban, and ADA; Sections 5339, 5311 and SSTAP Capital Assistance and Sections 5303/5304 Planning Assistance must be submitted by **Part I-January 27, 2017 and Part II-March 24, 2017.**  If applications are not received by this deadline, the MTA may not be able to apply for Federal funds on your behalf. This will jeopardize approval of funds.

**MARYLAND DEPARTMENT OF TRANSPORTATION**

**MARYLAND TRANSIT ADMINISTRATION (MTA)**

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# GENERAL INFORMATION

**GENERAL INFORMATION**

## INTRODUCTION

The Maryland Transit Administration (MTA) of the Maryland Department of Transportation (MDOT) administers funds for public transportation projects in small urbanized and rural areas, as well as for specialized transportation projects statewide. Many of the recipient jurisdictions and operators of these projects are the same. For this reason, the Annual Transportation Plan (ATP) package for Maryland's Public Transportation Programs (PTP), American with Disabilities Act (ADA) Program and Statewide Special Transportation Assistance Program (SSTAP) has been consolidated into one document. This will facilitate the submittal and review process and promote coordination between these closely related programs.

## AUTHORITY FOR THE PROGRAMS

Sections 5307 and 5311 of the Federal Transit Act (USC 49) authorize the US Secretary of Transportation to apportion funds to each state for public transportation projects in the small urban and rural areas. Sections 5303/5304 of this same legislation authorize the apportionment of funds to each state to conduct special transit-related studies. Statewide legislation enacted by the 1985 Maryland General Assembly, Section 2-103.3 of the Transportation Articles of the Maryland Annotated Code was amended to provide for a transportation program for the elderly and persons with disabilities of Maryland under the Statewide Specialized Transportation Assistance Program (SSTAP). The legislation calls for the program to be administered by the Secretary of the MDOT in consultation with the Maryland Department of Aging (MDOA) and the Maryland Department of Disabilities (MDOD) Office. State legislation provides ADA funds for systems that operate fixed routes to provide complementary paratransit service for qualified persons with disabilities. The administration and oversight of transit services resulting from the use of these funds is the responsibility of the MTA, more specifically, the Office of Local Transit Support (OLTS).

## PROGRAM GOALS

**Public Transportation Programs (PTP)**

Maryland’s PTP funding is embodied through both Federal and State authorized programs. Specifically, the PTP includes Section 5307, Section 5311, Section 5303, Section 5304, and Large Urban funding opportunities. The goals of the PTP are to:

* Enhance the access of people in small urban and rural areas by assisting in the maintenance, development, improvement and use of public transportation systems, and
* Encourage and facilitate the most efficient use of funds expended to provide passenger transportation in small urban and rural areas through the coordination of programs and services.

Public transportation is transportation that is open to the general public (not including charter, sightseeing or exclusive school bus). Transportation service can be either publicly or privately owned; however, service must be provided on a regular and continuous basis.

**Americans with Disabilities Act (ADA) Funding Program**

The State of Maryland provides funds that are annually apportioned to transit systems that operate fixed routes to provide complementary paratransit service to persons with disabilities as required under the Federal ADA. The primary goal of the ADA funding program is to provide general-purpose transportation for persons with disabilities who are unable to use traditional fixed-route public transit due to the nature of their disability. This service must meet specific federally established vehicle and operations requirements, and provide an equivalent level of service as the fixed-route service it is intended to complement. More information about ADA paratransit requirements can be found in Section 12 of the *Locally Operated Transit System (LOTS) Program Manual* and through the Federal Transit Administration**.**

**Statewide Special Transportation Assistance Program (SSTAP)**

The goals of the SSTAP are:

* To provide general-purpose transportation for both elderly persons and persons with disabilities.
* To encourage and facilitate the efficient use of funds expended to provide transportation to the elderly and persons with disabilities through the coordination of programs and services.

General-purpose transportation must serve all trip purposes, thus it is transportation to any place a person needs to travel (i.e., grocery store, post office, employment, social center, friend's home, church). SSTAP service cannot be restricted to a particular program or activity, and trip purposes may not be prioritized. SSTAP service may be available to the general public; however, the intent of the program must be to serve the elderly and persons with disabilities. It must be assured that the transportation needs of this target population will be met. Since the program must serve both the elderly and persons with disabilities, an appropriate number of vehicles actively assigned to the program must be lift-equipped.

## RELATIONSHIP BETWEEN SSTAP AND PTP AND WITH OTHER FEDERAL AND STATE PROGRAMS

A common goal of both the PTP and SSTAP funds is to encourage and facilitate the efficient use of funds expended to provide passenger transportation through the coordination of programs and services. While the overall objectives of the PTP and SSTAP differ - that is, the former provides transportation to the general public in the urbanized and rural areas and the latter serves the elderly and persons with disabilities in both urbanized and rural areas - there are parallels which make it desirable and efficient to administer them in a coordinated manner.

The procedures for the use of both PTP and SSTAP funds allow as much flexibility as possible to facilitate coordination of transportation services. SSTAP funds must complement and supplement existing transportation services. Since a majority of the existing services are funded through Federal and State programs, a high degree of coordination is feasible. For example, the PTP and SSTAP funds may be used in a consolidated transportation program that is administered and operated from a central office or they may be used in a cooperative arrangement where portions of a transportation program are available for PTP and/or SSTAP funded trips.

SSTAP funds, however, cannot be used in place of funds that currently support elderly and disabled transportation services. Neither PTP nor SSTAP funds may be used as a match for capital acquisitions that are funded through other sources. In addition, State and/or Federal funds used as local match must comply with all regulations governing the use of those funds.

**The Relationship Between ADA Paratransit and SSTAP Services**

ADA paratransit is quite different from SSTAP in that ADA service parameters are highly prescribed by Federal regulation. ADA paratransit is required only for a narrow population of individuals who are unable to use fixed-route service because of their disability, while SSTAP serves any individual with a disability as well as elderly persons. ADA paratransit also requires a much higher level of service than is required by SSTAP, in terms of response time, days and hours of service, and capacity. While both services may be operated using the same vehicles and drivers, operating policies and customer information should clearly differentiate between the two programs.

## ELIGIBLE APPLICANTS

**Public Transportation Programs (PTP)**

Eligible applicants for the PTP and Sections 5303/5304 funds include counties, municipalities and public agencies, as well as non-profits, public corporations, boards, and commissions established under State law. The ATP of any municipality, public agency or public corporation, board, or commission established under State law, applying for PTP funds for the first time, must be submitted by the county in which the public entity is located. Eligible applicants for these funds will continue to be public entities as described above. Only one

application per county will be accepted. All ATPs for PTP funds must be submitted by the Chief Executive, County Commissioners, or an authorized official appointed by the Chief Executive or County Commissioners. PTP funded programs must provide transportation for the general public.

**Americans with Disabilities Act (ADA) Funding Program**

Public transit systems that operate fixed routes are eligible to apply for State ADA funding, as these are the only systems required by law to provide complementary paratransit service to persons with disabilities. It is important to recognize that revisions to fixed-route service affect complementary paratransit requirements, and may affect a local system’s eligibility to receive State ADA funding.

**Statewide Special Transportation Assistance Program (SSTAP)**

Each County and the City of Baltimore is eligible to apply for the SSTAP funds. Only one ATP from each County or the City of Baltimore will be accepted for SSTAP (as opposed to PTP funds, for which towns/cities can apply) and must be submitted by the Chief Executive, County Commissioners, or an authorized official appointed by the Chief Executive, County Executive, or County Commissioners. The counties must take into account the needs of the municipalities within their jurisdictions. [A Municipality Notification Certification and Area Agency on Aging Certifications are included in the Assurances for State Programs] In the event that a municipality believes it has not been afforded a reasonable share of the funds available to the County, the municipality may appeal the County's decision to the MTA. SSTAP funded programs must provide general-purpose transportation for elderly persons and persons with disabilities.

**Contractual Arrangements**

Each eligible applicant for either PTP or SSTAP funds may make arrangements with one or more public or private transportation provider(s) to operate transportation services. All arrangements made by the applicant for the provision of transportation services using these grant programs must be in written form, and must comply with appropriate state and federal program requirements.

## ELIGIBLE EXPENSES AND MATCH LEVELS

Both the PTP and SSTAP provide funds for capital and/or operating expenses. ADA provides funds for operating assistance only.

**Operating Assistance**

The financing of operating assistance for grant programs is as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Federal Program** | **Federal Share** | **State Share** | **Local Share** |
| Section 5307  Section 5311 | Up to 50% of the net operating deficit | Typically 25% of the net operating deficit | Typically 25% of the net operating deficit |
| **State Program** |  | **State Share** | **Local Share** |
| ADA |  | Up to 90% | 10% minimum |
| Large Urban |  | Pending Annual Allocation | Typically 25% |
| SSTAP |  | Maximum 75% of the net operating deficit | Minimum 25% of the net operating deficit |

**Capital Assistance**

Capital assistance is available for financing capital equipment or facilities projects. Typical capital projects may include, but are not limited to:

* buses, maintenance, service, or paratransit vehicles (including ADA vehicles),
* radios or other communications equipment,
* bus stop signs, benches, or shelters,
* wheelchair lifts and related vehicle modifications,
* vehicle rehabilitation where candidate vehicles meet the extended useful life and rehabilitation cost limits established by the MTA,
* construction or rehabilitation of transit facilities including design, engineering, and land acquisition,
* operational support such as computer hardware and software to be used for the transportation program,
* spare parts, maintenance and other miscellaneous equipment with a unit cost over $1,000 and a useful life of more than one 1 year, and/or,
* vehicle preventive maintenance programs.

The financing of capital assistance for grant programs is:

|  |  |  |  |
| --- | --- | --- | --- |
| **Federal/State Program** | **Federal Share** | **Typical**  **State Share** | **Minimum**  **Local Share** |
| Section 5307 | 80% | 10% | 10% |
| Section 5311 | 80% | 10% | 10% |
| Large Urban |  | 90% | 10% |
| SSTAP |  | 95% | 5% |

**Transportation Development Plan (TDP) and Technical Assistance Funds**

Federal Sections 5303/5304 and State funds are available for public transportation technical studies that provide the necessary planning support in the development and maintenance of public transit projects, including TDPs. These funds may also be used for projects that support the development and administration of activities to promote the coordination of local transportation services. Technical assistance funds are available to jurisdictions currently operating or anticipating initiating public transportation service.

The financing of technical assistance is:

|  |  |  |  |
| --- | --- | --- | --- |
| **Federal Program** | **Federal Share** | **State Share** | **Local Share** |
| Section 5303/5304 | 80% of the project cost | 10% | 10% of the project cost |

## LOCAL MATCH REQUIREMENTS

Local matching funds are required for all types of assistance and must comply with all regulations governing the use of these funds.

Local matching funds required for capital purchases and technical studies must be provided in cash. The source of these funds may be local funds, state grants (other than those received from MDOT/MTA), eligible federal funds or private sources.

Local matching funds required for operating assistance may be provided in cash or in-kind "soft-match" funds (see Appendix A for “soft match” information). An itemization of the source of these funds and type of in-kind service(s) must be provided and must be verifiable, formally documented and supported by local records. Operating funds from human service agency contracts to transport individuals, which are paid directly to the transit provider (and not included as farebox revenue), may be used as contract revenue to offset the net operating deficit, but are not considered local match in the year in which the revenues were earned.

In-kind services used as local matching funds for operating expenses can only be used as a match in direct proportion to the level of service allocated to the program. Examples of eligible in-kind services include office space, supplies and equipment or staff time. Refer to Appendix A for further guidance related to local match.

## PROJECT COMMENCEMENT

Operating costs can be incurred at the beginning of the fiscal year (July 1st). Once a grant agreement with the MTA has been executed, the applicant may request reimbursement of these operating costs.

Technical studies or capital projects CANNOT begin until a grant agreement with the MTA has been executed. Additional information on procedures for conducting procurements can be found in Part II of the Grant Agreement and in the *LOTS Program Manual*.

## ALLOCATION OF FUNDS

**Public Transportation Program (PTP) Funds**

**Operating Assistance**

Funding requests for operating assistance should consist of the following:

* baseline transit operation not to exceed the levels shown on Tables I, II, III and IV,
* ADA related incremental operating costs, and
* additional forecasted costs to expand and/or maintain service.

**Capital Assistance**

Capital assistance for vehicles, equipment with a unit cost of over $1,000, and facilities is provided on the basis of need and the availability of State and Federal funds. Applicants must justify all capital needs. Capital funds will be allocated by MTA in the following order:

1. replacement vehicles
2. vehicles for ADA compliance (including expansion)
3. preventive maintenance
4. parts, radios, miscellaneous maintenance equipment
5. expansion vehicles
6. facilities

In the past, we have asked you to “be reasonable” and only include those “must have” items that you considered a priority. We are still asking that for the project year. However, once you have completed prioritizing those items, continue to include the lower priority items. This is also true for the Five (5) Year Plan. MTA is completing a 25 Year Statewide Capital Needs Inventory, and this information will be helpful to us throughout the planning process.

**Large Urban Program Funds – All State Funds**

Table I lists the jurisdictions that are eligible for Large Urban Program funds. Large Urban funding is discretionary and not formula based. Applicants should build their budgets based on their projected costs to provide planned services, and apply for the funds they need to cover these costs.

**Section 5307 Funds**

Table II lists the jurisdictions that are eligible for Section 5307 funds. Federal funds for this program are annually apportioned and published in the *Federal Register*. Applicants should build their budgets based on their projected costs to provide planned services, and apply for the funds they need to cover these costs, rather than waiting for the allocation and basing their budget on this amount. There are a few applicants that receive their ADA funding in combination with their 5307 funds.

**Section 5311 Funds – Federal and State Funds**

Table III lists the jurisdictions that are eligible for Section 5311 funds. Federal funds for this program are annually apportioned and published in the *Federal Register*. Applicants should build their budgets based on their projected costs to provide planned services, and apply for the funds they need to cover these costs, rather than waiting for the allocation and basing their budget on this amount. Section 5311 funds can be used for either capital or operating projects.

**Americans with Disabilities Act (ADA) Funds – State Funds**

ADA funding is discretionary and not formula based. Therefore, allocation of funds is not assigned each year. Projected budgets for operating costs should be provided by each system on an annual basis.

**Statewide Special Transportation Assistance Program (SSTAP) Funds – State Funds**

The funds available to the SSTAP are annually apportioned in the following manner:

* 60% equally among the counties (including Baltimore City);
* 40% among the counties (including Baltimore City) in proportion to their respective percentages of the State's combined elderly and disabled population utilizing the 2010 Census data.

The allocation of funds for FY 18 is listed in Table IV.

SSTAP funds may be used for either capital or operating projects.

**Transportation Development Plan (TDP) and Technical Assistance Funds**

Each system is requested to complete this type of study on a five (5) year basis. TDP funds are allocated according to the last time a jurisdiction completes an update

See Table V for a list of jurisdictions and the funds available for the studies.

**Table I**

**LARGE URBAN PUBLIC TRANSPORTATION PROGRAM**

**ALLOCATION OF FUNDS**

**The following jurisdictions are eligible to apply for State Large Urban funding:**

|  |  |  |  |
| --- | --- | --- | --- |
| Jurisdiction | State Assistance | + | Local Match |
| Anne Arundel | $593,822 |  | $947,932 |
| Cecil | $240,575 |  | $60,144 |
| City of Annapolis | $822,625 |  | $1,218,828 |
| Howard | $1,367,425 |  | $3,921,989 |
| Montgomery | $582,948 |  | $250,000 |
| Prince George | $112,050 |  | $12,350 |

**Table II**

**SMALL URBAN PUBLIC TRANSPORTATION PROGRAM**

**SECTION 5307 - ALLOCATION OF FUNDS**

**The following jurisdictions are eligible to apply for Federal/State Section 5307 funding:**

|  |  |  |  |
| --- | --- | --- | --- |
| Jurisdiction | Federal + State Assistance | + | Local Match |
| Allegany County (Cumberland) | $748,410 |  | $461,108 |
| Calvert County | $128,833 |  | $122,444 |
| Carroll County (Westminster) | $488,941 |  | $259,259 |
| Charles County (St. Charles) | $2,483,959 |  | $2,207,119 |
| Frederick County (City of Frederick) | $2,806,759 |  | $1,027,030 |
| Harford County (Bel Air/ Aberdeen/  Havre de Grace) | $1,679,831 |  | $664,827 |
| St. Mary’s County | $604,190 |  | $151,048 |
| Washington County (Hagerstown) | $1,248,093 |  | $587,965 |
| Tri-County Council Lower Eastern Shore | $1,639,224 |  | $1,174,872 |

**Applicants should build their budgets based on their projected costs to provide planned services, and apply for the funds they need to cover these costs.**

The Federal Transit Administration no longer has a cap on Section 5307 operating funds. These funds can be used for both operating and capital needs. Operators applying for these funds should request funding based on projected operational and capital costs for services eligible for this program. If you are unsure which of your services are eligible, please work with your Regional Planner (RP) to define them. Please note the Federal portion of the operating assistance cannot exceed 50% of the net operating deficit. Capital awards are considered at an 80% Federal, 10% State, and 10% Local cost share. Preventive maintenance costs may be funded as a capital project under either Section 5307 Program or the 5311 Program**.**

**Table III**

**RURAL PUBLIC TRANSPORTATION PROGRAM**

**SECTION 5311**

**Base Line Program**

**FISCAL YEAR 2018**

**The following jurisdictions are eligible to apply for Section 5311 funding:**

|  |  |  |
| --- | --- | --- |
| **Jurisdiction** | **Federal + State Assistance** | **Local Match** |
| Allegany | $ 324,461 | $ 324,461 324,461 |
| Anne Arundel County | $ - | - |
| Baltimore County | $ 163,616 | 40,904 |
| Calvert County | $ 263,213 | $ 159,990 |
| Caroline/Kent/***Talbot*** Counties | $ 358,980 | $ 226,946 |
| Carroll County | $ 150,021 | $ 68,203 |
| Cecil County | $ 222,051 | $ 95,942 |
| Charles County | $ 96,247 | $ 60,600 |
| Dorchester County | $ 556,072 | $ |
| Frederick County | $ 306,792 | $ 128,532 |
| Garrett County | $ 215,352 | $ 324,461 |
| Harford County | $ - | - |
| Howard County | $ 388,416 | $ 1,037,388 |
| Montgomery County | $ 309,958 | $ 363,000 |
| Ocean City | $ 715,782 | $ 701,177 |
| Prince George's County | $ 156,506 | $ 3,222,639 |
| Queen Anne's County | $ 316,062 | $ 390,583 |
| St. Mary's County | $ 795,238 | $ 911,799 |
| Washington County | $ - | - |
| Tri-County Council of Lower Eastern Shore | $ 339,615 | $ 113,205 |
| (Worcester, Wicomico, Somerset) |

Fiscal Year allocation is subject to budget approval by the General Assembly and the Federal FY 2018 allocation.

**Table IV**

**STATEWIDE SPECIAL TRANSPORTATION ASSISTANCE PROGRAM**

**Baseline Program**

**FISCAL YEAR 2018**

**TOTAL ALLOCATION**

|  |  |
| --- | --- |
| **Jurisdiction** | **State Assistance\*** |
| Allegany County | $141,544 |
| Anne Arundel County | $245,966 |
| Baltimore City | $379,335 |
| Baltimore County | $395,836 |
| Calvert County | $127,003 |
| Talbot County | $- |
| Kent County | $- |
| Caroline County | $- |
| **Three County Total** | $360,652 |
| Carroll County | $151,029 |
| Cecil County | $134,073 |
| Charles County | $137,609 |
| Dorchester County | $122,724 |
| Frederick County | $159,159 |
| Garrett County | $119,664 |
| Harford County | $170,371 |
| Howard County | $162,520 |
| Montgomery County | $379,107 |
| Prince George's County | $332,819 |
| Queen Anne's County | $122,064 |
| St. Mary's County | $131,054 |
| Somerset County | $117,447 |
| Washington County | $146,917 |
| Wicomico | $- |
| Worcester County | $- |
| **Tri-County Council of Lower Eastern Shore** | $269,015 |
| **Total** | **$4,305,908** |

\*Fiscal Year 2018 allocation is subject to budget approval by the General Assembly.

**Table V**

**TRANSPORTATION DEVELOPMENT PLAN PROGRAM**

**ALLOCATION OF FUNDS**

FISCAL YEAR 2018

**TOTAL ALLOCATION**

|  |  |
| --- | --- |
| **Jurisdiction** | **Federal/State Assistance\* (90%)** |
| Carroll County | $90,000 |
| Garrett County | $90,000 |
| St. Mary’s County | $90,000 |

Fiscal Year allocation is subject to budget approval by the General Assembly and the Federal FY 2018 Federal allocation.  **Funds may be subject to change**. Grantees will be notified when funds become available.

## PROGRAM REQUIREMENTS

Recipients of funding applied for through the ATP must comply with Federal and State requirements pertaining to each program. For comprehensive guidance on Federal and State requirements for recipients of PTP, ADA, and SSTAP funding, please refer to the *LOTS Program Manual*.

## RELATIONSHIP OF THE ATP TO OTHER ANNUAL PLANNING AND APPLICATION REQUIREMENTS

**Inclusion in the Transportation Improvement Program (TIP)**

Where local projects exist or are being proposed within the current planning/study area boundaries of a Metropolitan Planning Organization (MPO) (which may include areas that are currently non-urbanized, but are expected to become urbanized within the next 20 years), the local projects must be included in the MPO’s TIP. Local transit systems need to be involved in the annual development of the TIP and need to plan for several years in advance, as the TIP has a six (6) year planning horizon, and because amending the TIP involves a formal process. The MTA takes care of submitting a Program of Projects (POP) for all of the TIPs, incorporating local projects that are applied for in the local ATPs. It is critical that local ATP’s are submitted to MTA by the deadline indicated.

**Inclusion in the Statewide Transportation Improvement Program (STIP)**

In addition to its annual POP, the State must also submit a three (3) year STIP for Federal transportation funds. Local systems can assist the MTA in planning for adequate funding for local transit by realistically projecting capital replacement needs for the next five (5) years in each ATP, as well as updating the local TDP every five (5) years with a feasible and well-developed capital and operations plan.

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**INSTRUCTIONS FOR PREPARING THE ANNUAL TRANSPORTATION PLAN**

# INSTRUCTIONS FOR COMPLETING THE FY 2018 ANNUAL TRANSPORTATION PLAN

## SUBMISSION DEADLINES

**PTP Operating, Capital, and Planning Assistance**

ATP’s for PTP Large Urban and Sections 5307 and 5311 operating or capital assistance; ADA operating assistance and Sections 5303/5304 planning assistance must be submitted by **Part 1-January 27, 2017 and Part II-March 24, 2017.** If complete applications are not received by this deadline, the MTA will not be able to apply for Federal funds on grantees’ behalf in the application MTA submits to the Federal Transit Administration. This will jeopardize approval of funds.

## RECOMMENDED TIMELINE FOR REQUIRED TASKS

Because a number of the tasks involved in developing your ATP require lengthy preparation times, the following timeline is provided to assist applicants in completing these tasks in time to submit a complete ATP by the application deadline. Detailed instructions for the public hearing and private enterprise involvement requirements are provided in a later section in these instructions.

**October 5th, 2016**

**Form 6 and 6a due in ProjectWise. These forms will be processed using TERMLite with State of Good Repair (SGR) results returned to LOTS by December 12, 2016.**

**November 17, 2016**

One day training session on ProjectWise and the distribution of FY 2018 ATP Workbook to be used for reference only.

* Application documents will be made available through ProjectWise to the applicable LOTS.
* **If you are applying for SSTAP funds**, notify the municipalities in your county as early as possible. SSTAP applicants must provide written notification to each municipality in the county of the availability of SSTAP funds, and consider the needs of these municipalities in the planning for the use of these funds**. Please provide a copy of this notification as part of your application in Part I-D-#G. At a minimum, this notification must be made 30 days in advance of submitting the application.** However, the needs of the municipalities should be addressed early in the planning process, and local applicants are encouraged to involve the municipalities on their local Advisory Committees.
* **If you are planning to apply for a major capital facilities project**, contact your MTA Regional Planner (RP) early to ensure that MTA is aware of your need and intent to apply for facility funding. They can also guide you in the process to ensure that Federal and State planning requirements are met, help you develop a project budget, and assist with developing specifications for procuring design and construction services. To be eligible for facilities funding, the proposed facility must be included in your TDP or other subsequent planning documents prepared for and approved by MTA.

**January/February**

**“Due to MTA” means a final document will be available in ProjectWise, in each LOTS’ “ATP Working Folder”, for MTA to review/comment and/or print.**

* Schedule the presentation of your ATP to local elected officials for approval (application must be approved prior to submission to MTA by the deadline).

***At least 30 days before submitting your ATP to local elected officials for approval, you must****:*

* Notify private operators.
* Submit the SSTAP portion of your ATP to your local Area Agency on Aging for approval.
* Notify the municipalities in your county of the availability of SSTAP funds (recommended to be completed earlier to allow for their needs to be addressed in the proposed plan). Include a copy of this notification as part of your ATP in **Part I-D-#G.**
* Publish notice of an opportunity for a public hearing with at least a three (3) week window in which to request a hearing. The tentative hearing opportunity should be scheduled so that you have time to address significant issues before presenting the ATP to the elected officials for approval.
* **PART I of your application will be “Due to MTA” by COB Friday, January 27, 2017.**

**January/February**

* If requested, hold the public hearing, providing accessible information or sign language interpretation upon request.
* Submit your ATP to local elected officials and your attorney for approval.

**March**

* **PART II of ATP is “Due to MTA” by COB Friday, March 24, 2017.**

**MTA Review Schedule:**

**February**

* MTA will begin to review PART I of the LOTS’ ATP’s.
* LOTS should check their folder “ATP OLTS Comments” in ProjectWise for review comments from the MTA.
* If additional information is requested, these documents will be provided through ProjectWise, to MTA no later than early March.

**March**

* MTA will begin review of PART II; please be prepared to answer questions about material submitted.
* MTA staff will review your application for accuracy and completeness.
* LOTS should check their folder “ATP OLTS Comments” in ProjectWise for review comments from the MTA.
* The RP’s will notify their LOTS’ of any revised/additional information that may be required.

**1st Week in April**

* If additional information is requested, these documents will be provided to MTA through ProjectWise, no later than early April.
* The Review Team will meet within the last two (2) weeks of April to continue the review and reach a consensus.

## OVERVIEW OF APPLICATION FORMAT

The application forms are provided to each LOTS in their “ATP Working Folder” located in ProjectWise. Re-save all documents with their original document name. Please follow naming protocol illustrated on the Application Checklist for any supporting documentation you will be providing.

**TERM Lite Documents**

**Form 6: Current Vehicle Inventory (as of January 2017)**

*For your convenience and to ensure the consistency of information gathered, this form has been modified to include drop down menus.*

***YOU MUST CHOOSE FROM THE DROP DOWN LIST!***

***THE FORMULAS WILL NOT WORK IF YOU TYPE IN A BOX THAT HAS A DROP DOWN LIST.***

**All vehicles should be listed currently in your fleet either in the Revenue Vehicles portion of the form or Non-Revenue Vehicles.**

**5310 Vehicles should be listed under Non-Revenue Vehicles and clearly labeled as 5310 funded.**

**Route Type -** A drop down list will allow you to choose whether the vehicle is used for FR (Fixed Route) or DR (Demand Response). If a vehicle is used for both types of service select the service type where the vehicle operates the most.

**Vehicle Type** - A drop down list will allow you to choose the type of vehicle. These are your only choices. If you are not sure what category to use please contact your RP.

**Vehicle Length** - A drop down list is provided to choose length of your vehicle. If you have a question about a vehicle, please call your RP.

**Current Physical Condition** - Please review the “revised” Vehicle Condition numbering guidelines on your Vehicle Replacement Worksheet.

List all vehicles for your ***entire vehicle inventory***:

Vehicles currently ***on order*** that were funded in previous years.

Be sure to indicate the date the vehicle was ordered or the date you anticipate placing the order. Also indicate the grant year in which the vehicle was funded, **the purchase price** and the vehicle number the new vehicle will replace, if applicable. The vehicle ***TO BE*** replaced should be listed in the active fleet inventory.

**If a vehicle was purchased with funds other than MTA, please complete the MTA Grant Number column by indicating source of funding, i.e., local, special, etc.**

Vehicles ***requested*** this year as either:

* replacements for existing vehicles, or
* expansions to your fleet.

Each replacement vehicle requested for FY 18 must correspond to a currently owned vehicle in Form 6. In Form 6, “Fiscal Year Budgeted for Replacement” all current vehicles must correspond to replacement information provided in Capital Plan Forms C-4 and C-5.

Replacement requests must indicate the vehicle number to be replaced, and a vehicle replacement worksheet must be submitted for each vehicle requested. Replacements are awarded on an individual basis; therefore, substitutions after the award ***will not*** be permitted.

**Form 6a: Fixed Asset Inventory**

*For your convenience and to ensure the consistency of information gathered, this form has been modified to include drop down menus.*

***YOU MUST CHOOSE FROM THE DROP DOWN LIST!***

***THE FORMULAS WILL NOT WORK IF YOU TYPE IN A BOX THAT HAS A DROP DOWN LIST.***

List all property (shop equipment, facility, etc.) assigned to, in use by or available to the program, regardless of ownership or funding source.

* **Inventory Control Number:** The number assigned, if any, by your organization to each asset purchased.
* **Department:** The department within your organization that manages/ uses the asset. For example, the asset may be a printer, and it is located in “Admin”.
* **Asset Category:**You will choose from a drop down list. If you are not sure which category an item should be classified as, please contact your RP.
* **Asset Type**: You will choose from a drop down list. If you are unsure what category your asset should be classified as, please contact your RP.
* **Description of Use:** Provide a description of the daily use and condition of the asset.
* **Delivered Price:** Total cost of purchase (include delivery, additions, etc.)
* **Grant Number:** If there was more than one grant used, use the grant that provided the largest source of funding. We are asking for Grant #’s from 2008 forward**.**
* **In-Service Date:** Date the equipment was put in to revenue generating use.

* **Part I – A** is a Word document that requests qualitative program information with supporting documentation to be provided according to the naming protocol illustrated on the Application Checklist. In this section you will describe the services provided by your organization. This document will only permit information to be entered in designated locations, and can be moved through by using the TAB key.
* **Part I – B** is an Excel document that requests narrative program information with supporting documentation to be provided according to the naming protocol illustrated on the Application Checklist. This form will only permit data to be entered in designated locations, and can be moved through by using the TAB key.
* **Part I – C** contains the ITS Architecture Questionnaire.
* **Part I – D** consists of all project compliance documents that are required to process your ATP Application. Supporting documentation should be saved according to the naming protocol illustrated on the Application Checklist.
* **Part II – A** contains Operating Budget Forms B-1 through B-5 and Operating Project Justification Forms for PTP and ADA services.
* **Part II – B** contains Capital Budget Forms C-1 through C-9,Capital Project Justification Forms for Vehicles, Equipment and Facilities, and Vehicle Replacement Worksheets.
* **Part II – C** contains all certifications and assurances that are required annually to receive Federal and/or State grant funds.
* The **Application Checklist** lists all forms, narrative responses, and supporting documentation that must be submitted with the FY 18 ATP. **It is organized in the same order that forms should be compiled in your completed application in your “ATP Working Folder” in ProjectWise. Please follow the naming protocol illustrated on this list.**

## Part I-A - PROGRAM DESCRIPTION

This document is formatted to be ‘tabbed’ through. All responses should be placed in the yellow boxes as indicated. Copy and paste where necessary **inside** the yellow boxes. The boxes will adjust with your entries. Please enter ALL information on this document. **All required supporting documentation should be uploaded according to the naming protocol illustrated on the Application Checklist.**

**The yellow box is not format friendly.** Our suggestion is to type your responses in a separate word document with “minimal formatting” and then cut and paste it into the yellow box. MTA is aware that adding/editing information in this section can be very challenging. We are looking at other options, but currently, this is the format that works best for LOTS at this time.

**A. Contact Information**

Enter the Jurisdiction/Program Name and Legal Name in the designated location on this page. The application contact should be the person to whom any application questions will be directed.

**ZIP CODE** – When providing address, please include the nine (9) digit zip code. This is a new FTA requirement.

**Attention:** The Name and Title identified in the “Application Submitted By:” section of this page should match the Name and Title of the person authorized to file the application as identified in the Authorizing Resolution. If not, explain the relationship/authority of the person executing the documents.

**The System for Award Management (SAM**) – A business or LOTS must register with SAM using their DUNS#. Once registered, SAM will then issue a Cage Code. The registration confirmation may take a few days so please allow time to receive your Cage Code. You must be registered with SAM in order to receive payment from the Federal government as a Federal contractor. Registering can be accomplished yourself, or for a fee you may elect to hire an outside party to register for you.

***Please provide a copy of your SAM documentation. (FTA Requirement)***

**B. Operator/Service Description**

The answers to these questions provide a qualitative description of your transportation services. Use additional space as needed. Please list supporting documentation provided in response to each question, and number each to correspond to the question it answers. Distinguish where necessary between PTP and SSTAP funded services.

**C. Project Coordination**

PTP and SSTAP funds must be used in transportation projects that encourage the use of funds through the coordination of programs and services. In addition, SSTAP funded transportation services must increase and supplement, but not replace, existing transportation services. PTP and/or SSTAP funds should be used in the following ways:

* in a consolidated transportation services program that is administered and operated from a central facility, and/or
* in a cooperative arrangement, and/or
* to pay for eligible PTP/SSTAP passengers on a vehicle while another funding source pays for other passengers, and/or
* to pay for eligible PTP/SSTAP miles or hours of a passenger trip while another funding source pays for the remaining miles or hours.

Coordination efforts should focus on sharing vehicles, supplies, staff, purchases of service, individual trips, hours, miles, fuel and any other arrangements to provide as many trips as possible with the available funds and resources. Consider all possible arrangements for sharing resources that are feasible in your area. These arrangements may include components funded by other sources in your total transportation program, as well as other providers. Other transportation providers include public transportation services, private-for-profit providers, non-profit organizations, local government transportation providers or other providers as may exist in the area. Particular emphasis should be placed on coordination between and among the SSTAP, FTA Sections 5307, 5311, and 5310 funds.

**It cannot be over-emphasized that creative, cost-effective, fully utilized transportation services are to be supported by PTP and/or SSTAP funding.**

## Part I – B - CURRENT SERVICES

This section provides a quantitative snapshot of services provided.

**Form 1: Transportation Program Summary**

This summary is designed to provide quick information about your transportation services to the reviewer. Fill out each field accurately.

**In the vehicle summary, Vehicles Used in Peak Service plus Spare/Backup Vehicles calculates the Total Vehicles in the Service automatically. The Spare Ratio is also an automatic calculation. Please include in-service revenue vehicles only in this section.**

***NEW: It is required by the NTD (National Transit Database) to distinguish between the number of Fixed Route and Demand Response vehicles. For those systems using the same vehicle to operate both types of service, count the vehicle in the service type that vehicle operates the most.***

**Form 2: Current Service Characteristics**

This form provides a brief description of the different components and service modes of your transportation program. Insert additional rows as needed.

For “Level of Service,” indicate approximate percentage of each service type operated within each grant program. For example, for Section 5311, an operator might operate approximately 50% as fixed-route service and 50% as route deviation service.

Provide a copy of your fare policy or schedule if the complexity of your fare policy makes completion of the “Fares” portion of this form unfeasible.

**Form 2a: FY 2016 Service Performance Summary**

Indicate the following for each type of service or route provided in ***FY 2016.***

***New: Please use the Form 2a assigned to your system (Small Urban, Urban or Rural). If you are unsure which Form 2a to use, contact your Regional Planner.***

* **total passenger trips** (each passenger boarding, including transfer boardings, is counted as one passenger trip),
* **total service miles** (calculated as miles from driver pull-out to driver pull-in, including deadhead mileage—data should be available from driver trip sheets and/or maintenance records),
* **total service hours** (calculated as the time from driver pull-out to driver pull-in, including deadhead time—data should be available from driver trip sheets),
* **total operating costs** (including administrative and maintenance costs),
* **total farebox receipts** (includes all cash and electronic fares, all proceeds from sale of paper or electronic fare media, discounts, tokens),
* **other local operating revenue** (including contract revenues, fare subsidies from local organizations, and local government support or contributions),
* **advertising revenue** (any revenue earned from displaying advertising on your buses or in/on your shelters.

For Large Urban and Sections 5307 and 5311 services, report all information based on the service type (fixed-route, deviated fixed-route, or demand-response). Provide a name for each route and indicate whether the route is fixed-route, deviated fixed-route, or demand response. ADA passengers should be reported as a sum total. Count each trip, mile, hour, and dollar in only one program/route within the categories indicated. Performance measures will be calculated automatically. MTA performance standards are attached in Appendix D. If you have any questions, contact your Regional Planner.

SSTAP ridership (passenger trips) must also be broken out into four different groups of customers:

* Disabled (non-elderly) ambulatory (able to walk)
* Disabled (non-elderly) non-ambulatory (use wheelchair or scooter)
* Elderly ambulatory (able to walk)
* Elderly non-ambulatory (use wheelchair or scooter)

**Safety Information**

***Systems must report the number of accidents and incidents that have occurred in the fiscal year by type. For this reporting, use the National Transit Database (NTD) approved definition, rather than simply relying on the number of post-accident drug tests performed, as not all are or should be conducted under DOT regulations. Further information is contained on Form 2a. The NTD definitions are also included in Appendix G.***

**Form 7: Vehicle Utilization Plan**

The information on this form is a crucial part of the ATP. It provides a description of the service area and route assignment for each vehicle during a typical week. An example is provided to illustrate how this form should be completed. If a vehicle is used for more than one route or service, use a separate line for each route or service. If a vehicle’s schedule varies according to the day of the week, use a separate line for each day. Insert additional lines and pages as needed. Complete for all currently owned ***active*** vehicles listed in Form 6. **Do not include spares**. Active vehicles must equal or exceed Vehicles Used in Peak Service on Form 1.

## Part I - C – ITS ARCHITECTURE CONFORMITY PROCESS

## All proposed ITS Projects must be evaluated to ensure compliance with the Maryland State-Wide ITS Architecture Conformity Process. If you are proposing an ITS project, please be sure to include all relevant project information on the ITS Project Questionnaire in PART I-C. If you are proposing to buy equipment that received ITS approval in previous ATP’s, you must re-submit your ITS form for the new equipment.

## Part I - D – PROGRAM COMPLIANCE

**A: Civil Rights**

Enter the required information in order to determine your agency’s status with respect to these plans. If you have a service contractor, supply this information for them as well.

Be sure to attach a copy of the required plans/policies or contact your RP if your organization does not currently maintain these plans/policies or if you have updated/revised the plan in the past year.

**B: Civil Rights Contacts - Applicant**

Provide all the requested contact information for those persons responsible for these programs within your jurisdiction.

**C: Civil Rights Contacts - Contractor**

If you have a service contractor, supply this information for them as well.

**D: Safety and Security**

This section requires documentation of expenditures related to Safety & Security.

**E: Maintenance Program**

This section requires documentation of your vehicle maintenance program and your facility maintenance plan. Please provide a copy of each.

**F: Training Programs**

This section requires documentation of your training expenses and programs, to include new driver training and retraining, maintenance and other training.

Please note that training is available for systems in non-urbanized areas through the Rural Transit Assistance Program (RTAP). Training sessions are implemented to assist in the design and implementation of training and technical assistance projects and other support services tailored to meet the specific needs of rural transportation providers. An annual allocation is provided to the State, and is administered in conjunction with the Section 5311 program.

Scholarships to attend training are available through a separate application process. For more information on RTAP training and scholarships, contact your Regional Planner.

**G: Public Hearing**

Each jurisdiction that requests operating and capital assistance must hold a public hearing or provide an opportunity for a public hearing to be held upon request. A public hearing or opportunity for a public hearing is not required for technical planning assistance projects.

**Notice of Opportunity for a Public Hearing**

The recipient must afford an opportunity for a public hearing on the program of projects and budget, if one has not been held during development, to provide citizens a forum to present their views on the projects proposed.

The notice must be published in a newspaper of general circulation informing the public that a three-week period has been established during which they can request a public hearing on the program of projects. The process to request a hearing must be described in the notice (unless the hearing will be conducted whether or not a request is received).

The hearing should be proposed for 30 days from the date of notice with a three-week period to submit a written request for a hearing. The hearing should be held the following week.

The notice must include the following:

* Name of applicant
* Area to be served
* Program of Projects - description of service
* Budget and financing information. Notice must identify specific dollar amounts of state and/or federal funds for each project and clearly state that these funds are being applied for from the Maryland Transit Administration and the Federal Transit Administration.
* Time, date and place for the public hearing.
* An itemized list of **ALL** current capital requests.
* Instructions to request a hearing if you are publishing an opportunity for a hearing upon request.

***A copy of the notice as it appears in the newspaper must be submitted as a part of this ATP in PART I-D #G, Public Hearing.***

***All private operators in the service area must also be mailed a separate notification of the public hearing. (This can be included in PART I-D #H, Private Operator Notification). Please provide one copy of the letter and a listing of the operators .***

**Location and Record of Hearing**

The public hearing must be held at a place and time generally convenient for persons affected by the project. Meeting locations and materials must be accessible to persons with disabilities, including sight and hearing impaired persons. Provisions must be made at the hearing for submission of written statements, exhibits, and oral statements. A list of attendees, minutes of the public hearing, and copies of written statements must be submitted with the ATP.

**If No Requests for a Hearing are Received**

If no one requests a hearing, then the applicant must attach a letter stating that there were no requests for a public hearing and that the program of projects is finalized. A sample letter is provided as Appendix E.

Comments

Whether or not a hearing is held, the applicant must attach copies of any written statements received and describe how public comments were addressed.

**H: Private Enterprise Involvement**

Neither the PTP nor the SSTAP can fund projects that would duplicate service provided by existing private operators. It is necessary to contact existing operators to establish whether they could provide part or all of the service in a cost-effective manner and at a sufficient level. In 1994, the FTA rescinded the Private Enterprise Participation Rule. In its place, the FTA now requires each applicant/recipient of FTA funds to:

* Make available to the public information concerning the amount of funds available and the program of projects the recipient intends to undertake,
* Develop the program of projects in consultation with interested parties,
* Publish the program of projects in sufficient detail to afford affected citizens, private transportation providers, and elected officials an opportunity to submit comments on the project, the budget, and the performance of the recipient, and
* Afford an opportunity for a public hearing (which may be accomplished though Section G above).

**Private Operator Notification**

To ensure the participation of private providers in the provision of service, all private providers in the proposed service area of the SSTAP and PTP funded projects must be notified in writing of your ATP. A sample letter of notification is provided in Appendix F. This notice must inform them of the intended service and invite them to submit comments on the proposed program of projects and budget, as well as to submit comments on the performance of the applicant. **This notification must be postmarked, using regular mail, at least 30 days prior to the submission of the ATP to your local elected officials for their approval.**  Documentation of this notification must be included in the ATP in PART I-D #H. (Private Operator notification must also be included in the Notice of Public Hearing detailed under PART I-D #G).

**Private Sector Responses**

The applicant must attach copies of any comments received from the private sector as well as the applicant’s response to the comments, and describe how comments received from private operators (either in writing or at the public hearing) were addressed and incorporated into your FY 17 program.

**I: Purchased Transportation**

If the applicant purchases transportation service from a private operator, the operator contact should be identified on Form 2. A brief description of the contract arrangement should be included here, including the operator(s), the contract term and any options, and the scope of services to be provided. ***Please provide copies of current contracts following the naming protocol illustrated on the Application Checklist.***

**J: Drug and Alcohol Policy Compliance**

Recipients of FTA funds are required to comply with FTA regulations, ``Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations,'' at 49 CFR part 665, subpart I and with 49 CFR part 40 as are all contractors. Provide the dates of your original policy and of its most recent update. If you have a service provider, provide this information for them as well.

**K: Cell Phone Policy**

For safety purposes MTA requires that grantees have in place a policy limiting the use of cell phones and other portable electronic communication devices for its employees and subcontractors. Copies of these policies must be submitted with your application.

## Part II – A – OPERATING BUDGET REQUEST

To minimize the information local applicants must manually type, many of the worksheets have cells that draw information from (or link to) cells in other worksheets in the file. **Capital Forms C-4, C-5, C-7, and C-9 are linked to Form B-1 in the workbook.** Many subtotals and totals are designed to calculate automatically with formulas that have been entered into these cells. ***Cells that require input are highlighted yellow. Automated cells are indicated on each form by gray shading.*** To maximize the benefits of these automated links and calculations, be sure to read the instructions for each form closely, avoid manually entering information into automated cells, and avoid editing the format of the form (other than where instructed to insert additional rows as needed). ***Do not insert columns or change column headings***. Inserting columns or changing column headings may invalidate the information in automated summary cells.

Applicants should not rely on the linked or calculated information to be correct without cross-checking. Even minor changes made to one form may alter the validity of a related cell in another form. Please keep in mind it is possible that there may be errors in formulas. For this reason, please double check your totals before submitting and **let your Regional Planner know if you discover any problems with the worksheets. DO NOT MAKE MODIFICATIONS TO THE FORMULAS OR CELL REFERENCES WITHOUT HAVING CONTACTED MTA FIRST.**

**Form B-1: FY 18 Grant Budget Summary**

This form is designed to be automatically completed by linking to information on other forms as they are completed, and provides a comprehensive overview of all public operating, capital, and technical assistance requested from MTA in FY 18 (Ridesharing, Senior Ride and other Human Service programs reported on Form B-2 will not appear on Form B-1). **You should not need to enter information into this form if other forms were completed correctly; however, once you have completed all of your other FY 18 budget forms in the workbook, it is important to cross-check the totals shown on Form B-1 with Forms B-2, B-4, C-4, C-5, C-7, and C-9, and ensure the accuracy of the data.**

**Form B-2: Operating Budget Summary**

The Operating Budget Summary contains columns for Total Program, SSTAP, Large Urban, Section 5311, ADA and/or Section 5307, Senior Ride, and Other. ***Do not insert or delete columns or rows, or change column headings on this form***. Aggregated information on this form automatically populates the cells on Form B-1, and changing columns will invalidate this automated information resulting in the need to manually complete Form B-1 (this cannot be done without contacting your Regional Planner as the form is password protected). Instructions for each column are provided below; each column must be completed if applicable to your transit system. Please note that this ATP does not serve as an application for Ridesharing, Senior Ride and other Human Service programs funding; however, estimated budgets must be provided for these programs to provide MTA with a complete picture of your system’s transit budget and cost allocation.

An operating budget worksheet must be completed even if an applicant is applying for capital assistance only. **If a cost category listed on the Operating Budget Worksheet is not applicable to your program, enter “0” (zero) on the line for that cost category.** Attach footnotes as needed to provide additional explanation where expenses may not be self-explanatory.

List eligible operating expenses according to line item. All operating expenses must be incurred on an accrual basis. *Ineligible* expenses are expenses relating to the transportation program that are not directly related to the daily operations of the program. Examples of ineligible expenses include expenses of a city council in considering transit matters; charitable contributions and donations; entertainment expenses; fines and penalties; interest expenses on loans; and depreciation accrued on facilities or equipment purchased with Federal and/or State grants. Appendix B defines the terms used in this form.

***Tubes & Tires: This line item has been moved from “Vehicle Operations Expenses” to “Maintenance Expenses” on Form B-2.***

***Preventative Maintenance (PM): When requesting (PM) under “Maintenance Expenses” please insert the amount of funding you are requesting from MTA as a “PM-Capital Expense,” with the remaining costs shown as “Tubes and Tires” in the budget.***

Indicate all sources of local match funding, including “soft match.” See Appendix A for guidelines on “soft match” as local match.

Instructions for each column are as follows:

* **Total Program** - The combined expenses and revenues for all transportation services, including SSTAP, Large Urban, Section 5311, ADA and/or Section 5307, and Other. **This column will update automatically as information is entered into other columns.**
* **SSTAP Program** - See Table III for the FY 18 funding levels. This column reflects the portion of the total program that provides general purpose trips for the elderly and persons with disabilities. The SSTAP operating costs are paid for with SSTAP operating assistance and/or use SSTAP funded equipment. Both the State and local shares of SSTAP operating assistance must be identified.
* **Large Urban Baseline FY 18** – See Tables I & II for the current baseline levels. This column reflects service that is funded by PTP operating assistance and/or uses PTP funded equipment in urbanized areas. Both the Federal/State share and local share of the PTP operating assistance must be identified. The Large Urban Program is 100% State funds.
* **Section 5311 Baseline FY 18** – See Table IV for the current baseline levels. This column reflects service that is funded by the PTP operating assistance and/or uses PTP funded equipment in non-urbanized areas. Both the Federal/State share and local share of the PTP operating assistance must be identified.
* **Section 5307 Service** – ADA and Section 5307 have been combined for funding purposes. ADA funding has been extended without an increase in funds.
* **ADA Service -** For those systems implementing a complementary paratransit service to comply with ADA, identify the FY 18 operating costs associated with ADA compliance. **Do not enter information in this column, this column will populate automatically as information is entered into Form B-4.**
* **Senior Ride** – This column indicates estimated FY 18 budget under the Senior Ride program.
* **Other** – The “Other” column should include Medical Assistance, other transportation contracts, and other services that are not funded through MTA.

An **Operating Project Justification Form** must be submitted for all new services and for all proposed service expansions. The form is located in Part II–A behind Form B-2. Describe and justify each project, using additional sheets as necessary. It is particularly important to indicate what capital funding will be used to operate each project, as well as to estimate anticipated ridership, total vehicle miles and hours, fare revenue, and operating costs for the project in FY 18. If the proposed change is programmed in your most recently completed TDP, include a copy of the recommendation from the final document in your justification

**Form B-3: Contractor’s Budget Summary**

If there is a purchase of service arrangement with a private for-profit or non-profit operator, Form B-3 is required for ***each*** operator from which you purchase service. **Preventative Maintenance is a capital expense.** The total expense from this form will appear on Form B-2 in the Purchased Service line item. One (1) copy of the contract and/or terms of the purchase of service agreement must also accompany this application and the agreement should be described in **Section 6 – Program Compliance.**

**Form B-4: ADA Operating Budget**

* A budget estimating FY 18 operating expenses, as well as the previous year’s award, is needed for ADA funding. Information entered in the FY 18 column of this form will automatically populate the appropriate column in Form B-2.

An **ADA Operating Project Justification Form** must be submitted for all projects requesting an increase in ADA funding in FY 18. This form is located in Part II-A behind Form B-4. Describe and justify the need for additional funds should your proposed budget vary more than 10% from your 2017 budget. It is particularly important to indicate what funding will be used to operate additional services as well as to estimate anticipated ridership, total vehicle miles and hours, fare revenue, and operating costs for the project in FY 18.

**Form B-5: Technical Assistance Budget**

See Table V for current funding levels and eligible jurisdictions for preparation of Transportation Development Plans (TDP’s). If you are eligible to apply for technical assistance funds in the current year, complete this form. MTA can procure planning services for this project on your behalf.

## Part II - B - CAPITAL REQUESTS

**All capital projects will require a copy of the Independent Cost Estimate (ICE). You may find an example of a typical ICE in the appendix of this application. The ICE should be the first document in the procurement file for a capital project. This document will be required as part of the justification in the ATP Grant Application.**

The Capital Project Plan is a six-year plan of your projected capital needs and addresses replacement vehicles, expansion vehicles, vehicle refurbishments, equipment, and facilities. It is used to request capital projects for FY 18, to estimate funding needs for the upcoming budget years, to determine the affordability of your plan and to help the MTA budget and forecast future state and federal funds for your service.

The instructions in this section are organized into each of the following subsections:

1. General Requirements
2. Vehicle Funding Requests
3. Equipment Funding Requests
4. Facilities Funding Requests

**General Information**

**Overview of the Capital Project Plan Forms**

Form C-1: Summary of FY 18 Capital Requests in Priority Order

Form C-2a: Capital Project Plan Small Bus Cost Worksheet (Type 1A)

Form C-2b: Capital Project Plan Small Bus Cost Worksheet (Type 2A)

Form C-2c: Capital Project Plan Small Bus Cost Worksheet (Type 3A)

Form C-2d: Capital Project Plan Small Bus Cost Worksheet (Type 4A)

Form C-3: Capital Project Plan Medium Bus Cost Worksheet

Form C-4: FY 18 Capital Project Plan FY 18 Vehicle Requests

(Replacement **AND** Expansion)

Vehicle Replacement Worksheet(s)

Capital Justification Form (Vehicles)**ICE Form Needed**

Form C-5: Capital Project Plan FY 18 Vehicle Refurbishment Requests

Form C-6: Capital Project Plan Future Vehicle Requests

Form C-7: Capital Project Plan FY 18 Equipment Requests

Capital Justification Form (Equipment) **ICE Form Needed**

Form C-8: Capital Project Plan Future Equipment Requests

Form C-9: Capital Project Plan FY 18 Facilities Requests

Capital Justification Form (Facilities)**ICE Form Needed**

Instructions for each of these Capital Project Planforms will be provided in this section.

*For your convenience and to ensure the consistency of information gathered, many of these forms have been modified to include drop down menus.*

**The Importance of Forecasting Future Capital Requirements**

It is very important to identify your capital requirements for the next five (5) years. Facility projects as well as vehicle and equipment needs should be identified in your plan. Your FY 18 requests should reflect critical projects. Forecasted projects identified between FY 2018 and FY 2022 (in Forms C-6, and C-8) are intended to provide the MTA with a forecast of your future financial needs so that MTA can accurately budget future Federal funding needs. When estimating funds needed for the out years use current (FY 2017) dollars. Do not inflate the numbers.

Any changes in this five (5) year plan during the course of the year should be submitted to the MTA RP to keep the MTA informed and to enable us to keep our financial forecasts current.

**Procurement Requirements for Approved Capital Projects**

All procurement activities are the responsibility of the applicant. The applicant should use the procurement procedures of the jurisdiction that executed the grant agreement, as long as they conform to the standards for the MTA and the Federal Transit Administration. The applicant is also responsible for settling all contractual and administrative issues arising out of procurements undertaken with project funds, although MTA staff is available to provide technical assistance. The MTA conducts a centralized procurement of vehicles on behalf of all grant recipients. Part II of the Grant Agreement provides the detailed requirements for third party contracts and procurement. Procurement requirements are also described in Section 4 of the *LOTS Manual*.

***PLEASE NOTE:***

* Each Vehicle Replacement Worksheet and Capital Project Justification Form must indicate who will procure the project, as well as the intended advertising date of the project, the projected award date, and the projected delivery date.
* Capital projects cannot be implemented until a concurrence letter has been executed between the MTA and the appropriate jurisdiction.
* All documents for third party contracts and procurements must be received and approved by the MTA in advance of bid solicitation.

**Vehicle Funding Requests**

Instructions for vehicle funding requests are organized as follows:

* Specifications and Estimated Costs for Vehicles (FY 18 only)
* Replacement or Expansion Vehicles (FY 18 only)
* Vehicle Refurbishments (FY 18 only)
* Special Note on Vehicle Accessibility Requirements
* Future Vehicle Requests (FY 2018-2022)

***Advertising Dates, Award Dates, and Receipt Dates should be realistic. Please indicate number of months from receipt of grant agreement.***

###### Replacement & Expansion Vehicles

To apply for **replacement or expansion** vehicles in FY 17, Forms C-1, C-2, C-3 and C-4 must be completed and a Vehicle Replacement Worksheet must be attached for each requested replacement. A Capital Project Justification form must be completed for each expansion request.

* **Form C-1: Summary of FY 18 Capital Requests in Priority Order**

It is very important that you fill out the chart accurately, denoting overall local priority for funding for each vehicle, equipment, or facility funding project requested. Assign a project name or brief description for each project requested, and list in order of priority. Designate the type of project and requested funding sources by placing an “x” in the appropriate boxes. Replacement Vehicle Requests **must** identify the number of the vehicle to be replaced in the appropriate column. ***Priorities assigned on this form must match those used on other FY 18 Capital Plan forms (Forms C-4, C-5, C-7, and C-9).*** As requests for capital funds often exceed available resources, inconsistencies in labeling capital project priorities among the forms in your ATP may result in funding denial for high-priority requests.

* **Forms C-2a, C-2b, C-2c, or C-2d** is to be used to order a gas engine, small bus. There are four (4) different bus configurations. Each has it’s own worksheet and order form listing the available options. Please use the correct order form to order the small bus that is needed for your service. ***The forms in this year’s ATP are estimates (small and medium duty buses). The small bus worksheet is based on the current contract. The actual figures could fluctuate +/- 10%-20% when actual state contact is approved.***

* **Form C-3** is to be used to order a medium bus. ***The forms in this year’s ATP are estimates (small and medium duty buses). The small bus worksheet is based on the current contract. The actual figures could fluctuate +/- 10%-20% when actual state contact is approved.***

Select the TYPE of vehicle by entering a “1” in the appropriate column. Enter the number of optional ITEMS needed for that ONE (1) vehicle.

* **Form C-4** identifies whether requested vehicles are Replacement or Expansion. The “priority” column must correspond to the priority indicated for each replacement on Form C-1. Replacement numbers are linked from Form 6. Use the vehicle costs from Forms C-2 and C-3 in the Total Project Cost column.

**If you are requesting vehicles that will not be purchased from the state contract (i.e. heavy duty transit buses, support vehicles, etc.) contact your RP for project cost information.**

**Vehicle Replacement Worksheet** - You must complete this form for each replacement vehicle requested for funding in FY 18. ***Please review the revised General Definition of Condition Codes.*** This form includes information on the age and mileage of the vehicle to establish its eligibility under the Vehicle Useful Life Standards in Appendix C. A written justification that is ***specific to each vehicle*** must be completed, as **vehicles will not be eligible for replacement based solely on age and/or mileage.** The justification portion of each vehicle replacement worksheet is critical to MTA’s decision on whether or not to fund the replacement. PLEASE NOTE: DOWN TIME DOES NOT COUNT AS PART OF THE ESTIMATED USEFUL LIFE AND MUST BE “DEDUCTED” FROM THE AGE OF THE VEHICLE. i.e., if a vehicle is six (6) years old, but has been out of service for six (6) months because of its condition, according to FTA, it HAS NOT MET A SIX (6) YEAR USEFUL LIFE. ***Vehicles for which extended warranties have been purchased are not eligible for replacement until the end of the warranty period. Attach your ICE Form.***

* **Capital Project Justification Form** - You must complete this form for each expansion vehicle requested for funding in FY 18. The form also includes a written justification that must be completed. ***Attach your ICE Form*.** 
  + **Vehicle Useful Life Standards** - To ensure that vehicles are adequately maintained and remain in service for their minimum normal service life; the MTA has established minimum useful life criteria for State and Federally funded vehicles. These standards apply to all vehicles purchased with Sections 5307, 5311, and SSTAP funds, as well as for vehicles which will be replaced with vehicles funded from these programs, regardless of the initial funding source. MTA’s useful life policy is more stringent than FTA’s.

Service life begins on the date the vehicle was placed in service and continues until it is removed from service. See Appendix C for the useful life standards. Significant capital maintenance performed throughout the vehicle’s life may extend the asset’s useful life (i.e., when you refurbish vehicles, you must ADD at least four (4) years to the estimated useful life). As discussed previously, extended down time must be excluded from the calculation of a vehicle’s age. ***Vehicles for which extended warranties have been purchased are not eligible for replacement until the end of the warranty period.***

* **Replacement Prior to Minimum Service Life** - The MTA is reluctant to replace vehicles prior to the end of their normal service life. Under certain circumstances, however, vehicles may need replacement prior to the end of their normal life. In these situations, the applicant will justify the need for the early replacement, including a detailed description of the condition of the vehicle. Contact your Regional Planner for additional details on replacing a vehicle prior to completion of its useful service life and for an explanation of local funding reimbursements due the State and Federal government in these instances. See Appendix C for more information on useful life criteria.

**Vehicle Refurbishments**

To apply for vehicle refurbishments in FY 18, Form C-5 must be completed and a Capital Project Justification Form must be attached for each requested refurbishment.

* **Form C-5: FY 18 Vehicle Refurbishment Requests -** This form must include all vehicle refurbishments requested in FY 18. The “priority” column must correspond to the priority indicated for each refurbishment on Form C-1. The “Fleet Number” column must correspond to the fleet numbers on Form 6. Use current year cost estimates; contact your Regional Planner for more information of vehicle refurbishment costs. ***Refurbishing vehicles extends their useful life.***
* **Capital Project Justification Form** - You must complete this form for each vehicle refurbishment requested for funding in FY 18. The form also includes a written justification that must be completed. ***Attach your ICE Form*.**

***Vehicle refurbishments and extended warranties require an extension of a vehicle’s useful life.***

**Special Note on Vehicle Accessibility Requirements**

The Federal ADA requires that:

* Fixed-Route Services—Public transit operators must purchase lift-equipped vehicles that meet ADA standards for fixed-route services (49 CFR 37.71), as well as for route deviation services.
* Demand-Responsive Services—Public and private transportation operators must operate enough accessible vehicles to ensure the provision of equivalent service for persons with disabilities including individuals who use wheelchairs (49 CFR 37.77, 49 CFR 37.101, and 49 CFR 37.103).

If an Applicant that operates demand-responsive service has determined that it operates a sufficient number of accessible vehicles to provide equivalent service for persons requiring the use of the wheelchair lift or ramp to board, and therefore is requesting a non-lift-equipped vehicle for use in demand-responsive service, a Certification of Equivalent Service must be completed. This Certification is provided in PART II-C #10.

**Future Vehicle Requests**

* **Form C-6: Future Vehicle Requests** must be completed for all projected vehicle replacements, expansions, and refurbishments. This form is intended to provide the MTA with a forecast of your future financial needs so that MTA can accurately budget future Federal funding needs. When estimating funds needed for the out years, use current (FY 2017) dollars shown in Forms C-2 and C-3. Do not inflate the numbers.

**Equipment Funding Requests**

Equipment, such as radios and communications equipment, fareboxes, wheelchair lifts and restraints, computer hardware and software, maintenance equipment, preventive maintenance, or spare parts and/or miscellaneous equipment with a project cost of at least $1,000 and a useful life of more than one year, can be requested as a capital project.

Fareboxes and other “options” can be ordered with vehicles and therefore may not need to be a separate item. Instead, indicate on Forms C-2 and C-3, Specifications and Estimated Cost for Vehicles, that a farebox is needed. The following three (3) forms are required for other equipment requests:

* **Form C-7: FY 17 Equipment Funding Requests -** This form must include all equipment requests that are not addressed in Forms C-2 and C-3. A Capital Project Justification Form (Equipment) must also be attached for each line item requested in Form C-7.
* **Capital Project Justification Form** (**Equipment)** - You must complete this form for all equipment requested for funding in FY 18. The form also includes a written justification that must be completed. If this is a joint project or is to be shared with another agency or department, please address this in your justification and include a discussion of cost sharing or allocation for the project. ***Attach your ICE Form.***
* **Form C-8: Future Equipment Requests** - This form is intended to provide the MTA with a forecast of your future financial needs so that MTA can accurately budget future Federal funding needs. When estimating funds needed for the out years, use FY16 dollar amounts. Do not inflate the numbers.

**Facilities Funding Requests**

Facilities projects can be new construction, expansions, or renovations that will be used to operate and/or maintain public transportation service. It is important to plan for any facilities projects as early as possible, and therefore, in addition to FY 18 requests, your facilities request forms should include anticipated requests for the next six (6) years.

MTA will work closely with all counties anticipating a facilities-type project in the next six (6) years to determine feasibility and availability of funds. Contact your RP if your FY 18 facility request is a new project. See Section 7 of the LOTS Manual for more information.

* **Form C-9: FY 2018 Facilities Funding Requests -** The project cost is separated into two (2) parts: Design and Engineering (D&E) and Construction. Include the appropriate costs in each section. The design and engineering phase and the construction phase should not be programmed into the same fiscal year.

**Also indicate the intended advertising date of the project, the projected award date, the delivery date for the design and engineering phase, and for the construction phase.**

* **Capital Project Justification Form** (**Facilities)** - This must be completed for all facilities projects planned or programmed during the next six (6) years. As on Form C-9, the D&E and Construction costs should be separated and not programmed in the same year. If this is a joint project or is to be shared with another agency or department, please address this in your justification and include a discussion of cost sharing or allocation for the project. ***Attach your ICE Form.***

## Part II - C - CERTIFICATIONS AND ASSURANCES

The certifications and assurances contained in the submittal packet must be executed and returned to the MTA. The Federal/State General Assurances have been grouped together. The specific funding programs for which your organization is applying will determine which assurances should be returned. However, the following assurances are required annually:

* General Assurances
* Authorizing Resolution
* Opinion of Counsel
* Special section 5333(b) Warranty
* List of Labor Representatives
* Civil Rights Certification

The following section discusses the other assurances that may be required, based on the services you provide. If you are applying for:

**Section 5307 funds, you must submit:**

* Assurances for Section 5307, and
* Certifications and Assurances for the Urbanized Area Formula Program

**Section 5311 funds, you must submit:**

* Assurances for Section 5311, and
* Certifications and Assurances for the Non-Urbanized Area Formula Program

**SSTAP funds, you must submit:**

* Assurances for State Programs (SSTAP)

**A vehicle that is not lift-equipped, you must submit:**

* A Certification of Equivalent Service

Assurances are being provided to the local applicants in .pdf format. Because they are based on Federal and State requirements, assurances may NOT be altered in any way. They must be signed and dated by the local attorney and the applicant agency’s authorized official. **The documents will be accepted as legal documents in .pdf format.**

For a description of what each assurance means, see Appendix B of the ***LOTS Manual*.**

## APPLICATION SUBMISSION INFORMATION

*Applications are to be compiled according to the format on your Application Checklist. The files listed in your “ATP Working Folder” within ProjectWise are the documents you will use to prepare your ATP that MTA will review and comment on.*

*After final review and approval from MTA/OLTS a .pdf document should be saved in your “ATP Final Folder” in ProjectWise. This will become your official ATP Application.*

These items must be received by the deadline indicated on the front of the application package.

**FY 2018**

**Annual Transportation Plan (ATP)**

**Application**

**Legal Name:**

**Submitted by:**

**(Contact person for questions regarding this application)**

**Name/Title**

**Phone Fax**

**Email**

**Date:**

**Application Checklist**

A complete Annual Transportation Plan will include each of the following items. They should be assembled in the sequence indicated.

Cover Page that includes “FY 2018 Annual Transportation Plan,” legal name, jurisdiction name and date submitted to MTA.

**TERM Lite - Inventory Included/ N/A To be Date**

**Complete Submitted**

Form 6: Vehicle Inventory

Form 6a: Fixed Asset Inventory

**PART I-A -Program Description**

A. Contact Information

B. Operators/Service Description

C. Project Coordination

(Attachments-Timetables, Marketing Materials, etc.) **(Part I-A-Timetables.pdf, Part I-A-Marketing.pdf)**

**PART I-B - Current Services**

Form 1: Transportation Program Summary

Form 2: Current Service Characteristics

Form 2a: FY 2017 Service Perf. Summary

Form 7: Vehicle Utilization Plan

**PART I-C – ITS Architecture Conformity Process**

Preliminary ITSQuestionnaire

**PART I-D – Program Compliance**

A. EEO/DBE/TITLE VI Contacts

B. Civil Rights Compliance – Applicant

EEO Plan

**(Part I-D-EEO Plan.pdf)**

DBE Plan

**(Part I-D-DBE Plan.pdf)**

Title VI Policy Statement

**(Part I-D-Title VI Plan.pdf)**

C. Civil Rights Compliance – Contractor

EEO Plan

**(Part I-D-Contractor EEO.pdf)**

DBE Plan

**(Part I-D-Contractor DBE.pdf)**

Title VI Policy Statement

**(Part I-D-Contractor Title VI.pdf)**

D. Safety & Security

**Included/ N/A To be Date**

**Complete Submitted**

E. Maintenance

All relevant forms

**(Part I-D-PM Forms.pdf)**

Pre-Trip Inspection

Written contract (s) &

price schedules

Sample of PM Certification

Copy of Facilities Maintenance Plan

**(Part I-D-PM Facility Plan.pdf)**

F. Training

G. Public Hearing**-(Part I-D-Public Hearing.pdf)**

Copy of Published Notice

Copies of any written comments

List of Attendees

Minutes from hearing

Letter stating no requests for hearing         

H. Private Enterprise Involvement-**(Part I-D-Private Enterprise.pdf)**

List of Private Operators

Sample of letter to Private Operators

Any comments from Private Operators

I. Purchased Transportation

Copies of current contracts

**(Part I-D-Purchased Transportation.pdf)**

J. Drug and Alcohol Testing Program

**(Part I-D-Drug Alcohol.pdf)**

K. Cell Phone Policy

Copies of policy**-(Part I-D-Phone.pdf)**

**PART II-A** - **FY Budget Request**

Form B-1: FY2018 Grant Budget Summary

Form B-2: Operating Budget

Operating Project Justification

Form B-3: Contract Operator Budget

Form B-4: ADA Operating Budget

ADA Project Justification

Form B-5: Technical Assistance Budget

**PART II-B – FY Capital Project Plan**

Form C-1: Summary of Capital Requests in Order

Form C-2a: Small Bus Cost Worksheet-Type 1A

Form C-2b: Small Bus Cost Worksheet-Type 2A

Form C-2c: Small Bus Cost Worksheet-Type 3A

Form C-2d: Small Bus Cost Worksheet-Type 4A

Form C-3: Medium Bus Cost Worksheet

Form C-4: FY2018 Vehicle Requests

Vehicle Replacement Worksheet

Capital Justification Form (Vehicles)

Independent Cost Estimate (ICE)

Form C-5: FY2018 Vehicle Refurbishments

Capital Justification Form (Vehicles)

Independent Cost Estimate (ICE)

Form C-6: FY2018 Future Vehicle Requests

Form C-7: FY2018 Equipment Requests

Capital Justification Form (Equipment)

Independent Cost Estimate (ICE)

Form C-8: FY2018 Future Equipment Requests

Form C-9: FY2018 Facilities Requests

Capital Justification Form (Facilities)

Independent Cost Estimate (ICE)

**PART II-C – Certifications and Assurances**

**Included/ N/A To be Date**

**Complete Submitted**

**Public Transportation Programs (Federal Funding)**

State Programs Assurances

1. Certification of Area Agency on Aging
2. Authorizing Resolution
3. Opinion of Counsel
4. List of Labor Representatives
5. Special Section 5333(b) Warranty
6. Civil Rights Certification
7. Certification of Equivalent Service
8. Federal Assurances

**APPLICATION for more than $100,000 in FTA Funds**

1. Certification on Restrictions on Lobbying

**IF APPLICATION for SSTAP ONLY**

1. Assurances for SSTAP
2. Assurances for State Programs
3. Certification of Area Agency on Aging

This section is to be completed by the person who validated the accuracy and completeness of this application.

Validated By: Date:

[Print Name] Add Signature/Title