**ALABAMA DEPARTMENT OF TRANSPORTATION**

**LOCAL TRANSPORTATION BUREAU**

**Public Transit Section**

**FEDERAL TRANSIT ADMINISTRATION**

**FEDERAL FISCAL YEAR 2022**

**CARES Act and Section 5307**

**APPLICATION**



**Dissemination Date: July 23, 2021**

**Due Date:** **August 31, 2021**

|  |
| --- |
| **Application must be submitted in the order listed on checklist andall pages are to be in sequence and consecutively numbered in whole numbers including support documents.** |
| **Fiscal Year 2022 5307 Application Checklist** |
| **Application Deadline: August 31, 2021**  |
|  |  |  |
| **Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  |  |
| **Exhibits** | **Required Application Package** | **Page No.** |
| **1** | **Agency Information Sheet** |   |
| **2** | **Designated Agency Letter** |   |
| **3** | **Current System and Project Description Form** |   |
|  1. General description of service area including delineated boundaries |   |
| (a)    Service Area Population |   |
| (b)   Service Area Square Miles |   |
| (c)    System Start-up Date |   |
| (d)   Brief History of System |   |
| (e)    Mission Statement |   |
| (f) Current Year Goals and Objectives |   |
|  2. General description of applicant and subcontractors |   |
| (a) Organization Chart(s) |   |
|  3. General Description of proposed transportation service |   |
| (a) Specific route information and highlighted map (8½ʺ x 11“) of service area(s)  |   |
| (b) General description of proposed services to be provided outside of service area |   |
| (i) Support documentation/Concurrence Letter, if applicable |   |
| (ii) Documentation Certifying Compliance with crossing state lines, if applicable |   |
| (c) Hours and days of operation |   |
| (d) Number of project vehicles in operation |   |
| (e) Number of back-up vehicles |   |
| (f) Eligible users of service |   |
| (g) Service changes from previous year |   |
| (h) Planned system changes for next year |   |
|  4. Current fare structure |   |
| (a) Description of fare eligibility process |   |
| (i) Copy of fare application form, if applicable |   |
| (b) Date of last fare increase |   |
| (c) Planned fare increases |   |
| (d) Operating recovery ratio |   |
|  5. Copy of system brochure |   |
|  6. Describe efforts to market or promote system |   |
|  7. Describe your method of implementing and announcing service changes and fare Increases |   |
|  8. Describe coordination efforts |   |
| (a) Attachment - Directory of local Transportation Steering Committee |   |
| (b) Attachment - Schedule of Transportation Steering Committee meetings for FY-2022 |   |
|  9. System Safety, Security and Emergency Preparedness Plan (SSEPP) updates as applicable |   |
| 10. Transit Security Planned Expenditures |   |
| 11. Americans with Disabilities Act Compliance Documentation |   |
|  (a) Copy of Current ADA Complentary Paratransit Plan, if Applicable |   |
|  (b) Annual ADA Update and Certification Form |   |
| **4** | **Capital Equipment** |   |
| 1. Vehicle Inventory Form |   |
| 2. Vehicle Profile Sheet  |   |
| 3. Non-Expendable Equipment Inventory Form |   |
| 4. Transit Program Fleet Replacement Form |   |
| 5. Project Implementation Schedule |   |
| 6. Fleet Classification Form |   |
| **5** | **Public Participation Process** |   |
| 1. Copy of the **Public Hearing Notice** as it appeared in the newspaper  |   |
| 2. Notarized statement verifying publication (publisher’s affidavit) |   |
| 3. Summary or transcript of the Public Hearing signed by an official of the transit system |   |
| 4. Public Hearing Documentation from the most recent TIP process |   |
| 5. Copy of TIP pages showing projects |   |
|   |   |
| **6** | **Complaint and Bid Protest Procedures** |   |
| 1. Copy of written procedures addressing complaints within and without the organization (excluding Title VI)  |   |
| 2. Copy of Bid Protest Procedures  |   |
|   |   |
| **7** | **Title VI General Reporting Requirements (Civil Rights)** |   |
|  |   |   |
| **5307 CARES ACT Grant** |
| **8** | **5307 CARES ACT Grant Funding Summary**  |   |
| **9** | **5307 CARES ACT Application Letter** |   |
| **10** | **5307 CARES ACT Grant Project Budget Worksheets**  |   |
| 1. Program of Projects  |   |
| 2. Line Item Budget Sheet |   |
|  (a) Operation Budget  |   |
|  (b) Capital Budget |   |
| 3. Source of Budget Funds Sheet |   |
|  (a) Operation Source Budget Sheet (100% Funding) |   |
|  (b) Capital Source Budget Sheet (100% Funding) |   |
| 4. Section 5307 CARES ACT Vehicle Request Budget Form- ***If Ordering Vehicles.*** |   |
| 5. Approved Indirect Cost Rate proposal, if applicable |   |
|   |   |
| **11** | **5307 CARES Act Authorizing Resolution** |   |
| **5307 Regular Grant**  |
| **12** | **5307 Regular Grant Funding Summary** |   |
| **13** | **5307 Regular Grant Application Letter** |   |
| **14** | **5307 Regular Grant Project Budget Worksheets, if applying**  |   |
| 1. Program of Projects |   |
| 2. Line Item Budget Sheet |   |
|  (a) Capital Budget |   |
|  (b) Preventative Maintenance Budget |   |
|  (c) Planning Budget |   |
| 2. Source of Budget Funds Sheet |   |
|  (a) Capital Source Budget Sheet (80%/20% Funding based on Type) |   |
|  (b) Preventative Maintenance Source Budget Sheet (80%/20%) |   |
|  (c) Planning Source Budget Sheet (80%/20%) |   |
| 3. Section 5307 Vehicle Request Budget Form- ***If Ordering Vehicles.*** |   |
| 4. Local Match Commitment Letter |   |
|  (a) Local Match Documentation Certification |   |
|  (b) Local Match Documentation Resolution |   |
| 5. Approved Indirect Cost Rate proposal, if applicable |   |
|   |   |
| **15** | **5307 Regular Vehicle Depreciation Schedule** |   |
|  | 1. Vehicle Depreciation Schedule |   |
|  |   |   |
| **16** | **5307 Regular Grant Authorizing Resolution** |   |
| **17** | **Completed Application\*** |   |
| 1. Final Document Developed should have: |   |
|  (a) Grant Coversheet Attached |   |
|  (b) Application Checklist Correctly Completed and Attached |   |
|  (c) All Application Checklist Questions Answered |   |
|  (d) All Application Checklist Items Requested are attached and in sequence with question. |   |
|  (Attachments must be inserted directly after question.) |   |
|  (e) Final Document pages are consecutively numbered in whole numbers and in sequence of checklist including support documents. |   |
|  (f) Follow Grant Applicatin Submission Process as indicated in instructions. |   |
| ***\*No instructions or other items not listed on the checklist should be submitted within Final Application Document.*** |   |

EXHIBIT 1 – Agency Information Sheet

The current data sheet provides agency contact and general project information. Complete instructions and the required form follow:

**INSTRUCTIONS**

The Agency Information Sheet questions must remain together on one page.

1: Fill in grant applicant name and address.

2: Fill in date of application and agency profile/contact information.

3: Fill in DUNS Number.

4: Indicate any providers or subcontractors, other than applicant, that will receive

 funds from this application. If no subcontractors indicate with N/A.

5: List the area(s) and congressional district(s) to be served by the project.

6: List service area population and square miles (numbers only).

7: List hours and days of operation.

8: List Project Number.

9: List Service Contracts Names and Estimated Amounts for FY2022 for each contract. Indicate overall total if more than one contract.

10: Select all grants being applied for in the FY2022 Application.

Agency Information Sheet

|  |  |
| --- | --- |
| 1. **Name and Address of Applicant:**

 *(Please include Zip Code plus 4)* |  |
| 1. **Date:**
 |  |
| **Contact Person:** |  |
| **Telephone:** |  |
| **Fax:** |  |
| **Email Address:** |  |
| 1. **DUNS Number:**
 |  |
| 1. **Name of Subcontractors:**
 |  |
| 1. **Area(s) to be Served by Project:**
 |  |
| **Congressional District(s):** |  |
| 1. **Service Area Population:**
 |  |
| **Service Area Square Miles:** |  |
| 1. **Hours & Days of Operation:**
 |  |
| 1. **Project Number:**
 | UPT-\_\_\_\_\_\_\_\_ |
| 1. **Service Contract(s) and Estimated Amounts for FY2022:**
 |  |
| 1. **Grants Applying For:**
 | \_\_\_\_\_ 5307 CARES \_\_\_\_\_ 5307 Regular |

EXHIBIT 2 - Designated Agency Letter

A sample letter of designation follows:

**Sample Designated Agency Letter**

**(Place on Applicant’s Letterhead)**

Date

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

Dear Mr. Lindsey:

Subject: **Letter of Designation**

The (**Applicant’s Name**) has carefully considered the selection of an implementing agency for its Section 5307 project. We designate (**Designated Agency**) as our local implementing agency. The principal contact person for this project is (**principal contact**).

If you have any questions on this designation, please contact (**principal contact**) at (**telephone number**).

Sincerely,

Signature of Designated Official

Title

EXHIBIT 3 - Current System and Project Description Form

Complete the **Current System and Project Description Form**. Each section must reflect complete and accurate information for your transit system. The required **Current System and Project Description Form** follows.

**Current System and Project Description Form**

**3.1. General description of the service area, including the geographic location, and delineating the geographic boundaries:**

(a) Service Area Population (numbers only):

(b) Service Area Square Miles (numbers only):

(c) System Start-up Date (date the transit system began receiving FTA funds):

(d) Brief History of System:

(e) Mission Statement:

(f) Current Year Goals and Objectives *(provide at least one measurable goal and at least one measurable objective)*:

**3.2. General description of the eligible applicant and any subcontractors.**

1. Organization Chart(s)from upper level downward (for example, Executive Director at top, Management in middle, and Drivers at the bottom).

**3.3. General description of proposed transportation service such as “contract, subscription, commuter express, demand response”, etc.**

(a) Specific route information including 8½ʺ x 11ʺ map(s) of service area(s) highlighting area(s) served. Such maps may be accessed, downloaded, and printed in PDF format via the link included below:

 <http://alabamamaps.ua.edu/contemporarymaps/alabama/counties/>

(b) General description of service(s) to be provided outside of service area, including frequency of such service(s).

1. Support Documentation/Concurrence Letter for services that are provided outside of your service area from each affected transit agency, if applicable.
2. Documentation certifying compliance with requirements of other States must be provided for services crossing state lines., if applicable.

(c) Hours and days of operation:

(d) Number of project vehicles in operation (numbers only):

(e) Number of back-up vehicles (numbers only):

(f) Eligible users of service:

(g) Service changes from previous year (if any):

(h) Planned system changes for next year (if any):

**3.4. Current fare structure, including Elderly and Disabled (E&D) and/or Americans with Disabilities Act (ADA) fares, if applicable:**

(a) Description of fare eligibility process:

1. Attach copy of fare application form for elderly and disabled and/or Americans with Disabilities Act (ADA) and identification card, if applicable if not indicate with N/A:

(b) Date of last fare increase:

(c) Planned fare increases (if any):

(d) Operating recovery ratio for all grants (All farebox revenues divided by total overall operating costs):

**3.5. Attach a copy of your system brochure. (Insert in sequence of question)**

**3.6. Describe your efforts to market or promote the system (list type, number, cost of promotional items distributed and include projected budget amount for Fiscal Year; describe any newspaper and/or Internet advertisements; and clearly describe the type and frequency of other efforts).**

**3.7. Describe your method of implementing and announcing service changes and fare increases. (Must include number of days’ notice to public.)**

**3.8.** **Describe your efforts to coordinate with and involve the area transportation providers and human service agencies in the agency’s transit service including any involvement in the regional human service coordinated transportation planning process.**

1. Attachment – Directory of Local Transportation Steering Committee
2. Attachment – Schedule of Transportation Steering Committee Meetings

**3.9. Provide updates to your system’s Safety, Security and Emergency Preparedness Plan (SSEPP) since the latest submission as applicable. If there are no updates to your SSEPP, a statement must be submitted stating such. Must include date of last review or frequency of review.**

**3.10 Any recipient of Urbanized Area Formula Award Program Funds must annually certify that it is spending at least one percent (1%) of such funds for transit security projects or that such expenditures for security systems are not necessary. Will your agency expend 1% or more of the Section 5307 funds in this award application for security purposes? If no, please provide a detailed response.**

For subrecipients that spend the one percent, examples of appropriate security expenditures include:

*1) Facility perimeter security and access control systems (e.g., fencing, lighting, gates, and card reader systems)*

*2) Increased camera surveillance of an area in or adjacent to the system*

*3) Emergency telephone line or lines to contact law enforcement or security personnel in an area in or adjacent to the system*

*4) Security and emergency management planning*

*5) Training and drills (SAFETEA-LU expanded the definition of security related capital projects to include planning, training, and drills, such that these expenditures are now eligible expenses for subrecipients in UZAs over 200,000 population to apply towards the one percent for security requirement)*

*6) Any other project intended to increase the security and emergency management of an existing or planned transit system.*

There are three reasons that subrecipients may have for considering the one percent security expenditure to be unnecessary:

*1) A recent threat and vulnerability assessment identified no deficiencies*

*2) TSA/FTA Security and Emergency Management Action Items met or exceeded*

*3) Other. For the “other” category, the typical reason is that a subrecipient spends sufficient local, other FTA, or DHS funds on security projects and, therefore, does not need to spend formula award funds on security projects.*

*Regardless of the reasons for deciding not to spend Section 5307 funds on transit-related security, subrecipients should provide information and documentation that supports their decision*.

**3.11 Americans with Disabilities Act Compliance Documentation:**

Fixed Route Only: The DOT ADA regulations require public entities operating fixed route transit to provide complementary paratransit to persons with disabilities who are unable to use the regular fixed route system. **Fixed route service providers must include a copy of the current ADA Complementary Paratransit Plan**.

 All Applicants: **The Annual ADA Update and Certification Form (see next page) must be completed, signed, and included**.

|  |  |
| --- | --- |
| **3.11 Annual Americans with Disabilities Act (ADA) Update and Certification Form** |  |
| **Transit Agency:**  |
| **Six (6) Service Criteria**  |  | **Y/N** |
| **1. Service Area** | Service to all origins and destinations within the defined area |  |
| Coordination with contiguous/overlapping service areas |  |
| **2. Response Time** | Requests accepted during normal business hours on “next day" basis |  |
| Requests accepted on all days prior to days of service (e.g., weekends/holidays) |  |
| Requests accepted at least 14 days in advance |  |
| Trips scheduled within one hour of requested pickup time |  |
| **3. Fares** | No more than twice the base fixed fare for eligible individuals |  |
| Compliance with companion fare requirement |  |
| Compliance with personal care attendant fare requirement |  |
| **4. Days and Hours of Service** | Paratransit provided during all days and hours when fixed route service is in operation |  |
| **5. Trip Purposes** | No restriction on types of trip purposes |  |
| No restriction by trip purpose in scheduling |  |
| **6. Capacity Constraints** | No restrictions on the number of trips an individual will be provided |  |
| No waiting list for access to the service |  |
| No substantial numbers of significantly untimely pickups for initial or return trips |  |
| No substantial number of trip denials or missed trips |  |
| No substantial numbers of trips with excessive trip lengths |  |
| When capacity in unavailable, subscription trips are less than 50% |  |
| **CERTIFICATION OF PARATRANSIT PLAN** |
| The (**transit agency name**) hereby certifies that it has completed the ***2022 Paratransit Review*** as required under 49 CFR 37.139(j) and finds it to be in conformance with the transportation plan developed under 49 CFR part 613 and 23 CFR part 450 (the FTA/FHWA joint planning regulation). This certification is valid for one year.  |
| Signed by:  |

EXHIBIT 4 - Capital Equipment

This Exhibit requires the Applicant to provide information on federally funded capital equipment.

**\*\*\*This Exhibit will include all FTA funded vehicles that have been approved by ALDOT for the purpose of being used in the delivery of the general public services. \*\*\***

Complete the accompanying forms as indicated below:

1. **Vehicle Inventory Form:** The completed Vehicle Inventory Form includes the vehicle description, vehicle identification number, grant number (5307, 5309, 5339, etc.), cost, etc. Condition will be listed as new, excellent, good, fair, or poor. **New (N)** = Less than 2,500 miles. **Excellent (E)** = Low mileage in relation to age & no visible mechanical flaw. **Good (G)** = Average mileage in relation to the age & only minor mechanical flaws. **Fair (F)** = High mileage &/or noticeable mechanical flaws. Repairs are beginning to exceed normal maintenance schedules. **Poor (P)** = High mileage & major mechanical flaws. Major repairs such as engine or transmission overhaul, etc. needed to keep the vehicle in service. **Out of Service (O)** = Vehicle is unreliable or is completely inoperable. Vehicle has been pulled from service due to unsafe operating conditions. List recent vehicle disposals and vehicles planned for disposal along with estimated disposal dates. List the number and type of wheelchair accessible vehicles, and whether or not such vehicles meet ADA accessibility requirements. Vehicle count throughout applications should correspond.
2. **Vehicle Profile Sheet:** The Vehicle Profile Sheet includes the vehicle identification number, vehicle type, mileage accumulation through **date to be provided by applicant agency**, seating capacity, tag number, model year, accessibility information, service utilization information, and service description. Vehicle count throughout application should correspond.
3. **Non-Expendable Equipment Inventory Form:** The Non-Expendable Equipment Inventory Form shall include a list of all items other than vehicles that are not readily exhaustible (e.g., gasoline is exhaustible; a computer is not readily exhaustible and is thus non-expendable). Please note that source grant refers to the FTA Section the Equipment was purchased with (5307, 5309, 5339, etc.). Condition will be listed as new, excellent, good, fair, or poor.
4. **Transit Program Fleet Replacement Form:** The Transit Program Fleet Replacement Form shall include a list of all federally funded vehicles which meet disposal requirements and will be disposed of in this grant period. The Estimated month and year to be taken out of the Revenue Service should indicate this fiscal year of this application. The total vehicles listed on this form should equal the replacement count of all vehicle budget request forms within this application.
5. **Project Implementation Schedule:** Each award application for capital and/or planning projects will include a completed Project Implementation Schedule. This Schedule references the acquisition, construction and disposition of capital projects or funding of technical assistance projects. The Schedule should be monitored during the life of the project. Any changes to be made to the Schedule after award approval should be submitted to the Department by the 30th day following the end of each quarter.
6. **Fleet Classification Form:** The Fleet Classification Form shall include a quantity breakdown of active and inactive federally funded vehicles for before award and after award based on peak requirements, spares, contingency reserve, and pending disposals.

|  |
| --- |
| **FY2022 Vehicle Inventory Form***List only FTA Funded Vehicles.* |
| **Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  |  |  |  |
|  | **Year** | **Equipment Description (Make/Model)** | **Vin Number** | **Source Grant** | **Acquisition Date** | **Cost** | **% Federal Participation** | **Title Holder** | **Location (City)** | **Condition (New, Excellent, Good, Fair, or Poor)** | **Disposal Date** | **Useful Life** | **Disposal Price** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **20** |  |  |  |  |  |  |  |  |  |  |  |  |  |

ALDOT Transit Vehicle Profile Sheet

INSTRUCTIONS

The following instructions are provided to assist in completing the Vehicle Profile Sheet. The required Form is provided on the next page and is also attached in an Excel version.

|  |  |
| --- | --- |
| VIN Number: | Ensure that this number is correct. The Vehicle Identification Number (VIN) is necessary to link your information to the ALDOT inventory. Remember there is no letter “O” in a VIN number only zeros. |
| Funding: | Section 5307, Section 5311, ARRA, CARES Act, etc*.*  |
| Vehicle Type: | M = Minivan. V = Standard Van, Commuter Van, High Roof Van (Transit Van), Modified Van. CCB = 25’ to 35’ Light and Medium Duty Cut-A-Way Chassis 17, 21, 25, 30 passenger Bus.B = 30’ Heavy Duty Rail & Body on Chassis Bus.  |
| Mileage as of (Insert date): | ALDOT will use this mileage as a baseline for future comparisons. |
| Seating Capacity: | Enter the actual number of seats available. |
| Tag: | Vehicle's License Plate Number |
| Model Year: | Year of Chassis Manufacture |
| Lift: | Is the vehicle lift equipped? ***Answer Yes or No only****.* |
| Stations: | Enter the number of wheelchair stations (0, 1, 2, etc.) |
| Start Time of the Service: | This is the first time of the day that this vehicle is available for revenue service. Use military time (the 24-hour clock). This will allow for calculations later. The clock starts at 0100, which is 1:00 O’clock in the morning. You will type 01 then a colon then 00. (01:00). It will appear in the cell as 1:00. Likewise, for 1:30 in the afternoon you will type 13 then a colon then 30 (13:30) and it will appear in the cell as 13:30.  |
| End Time of the Service: | This is the last time of the day this vehicle is available for revenue service. The rest is the same as above. |
| Duration: | This field will be calculated in Excel; there is no need for an entry unless the Word version is used. |
| Usage: | C = Contract Service: DR = Demand Response; FR = Fixed Route or any combination; WR = Work Route; S = Subscription;O = Other (Specify). |
| Days of the Week: | Indicate the days of the week that the vehicle is available for revenue service. |
| Description: | Is this a dialysis route? Is it general public/demand response transportation? Is it a scheduled fixed route? Briefly describe the service being provided during the time period. |

|  |  |
| --- | --- |
|  | **FY2022 ALDOT** **Transit Program Vehicle Profile Sheet** *List only FTA Funded Vehicles.* |
| **Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **VIN Number** | **Funding** | **Vehicle Type** | **Mileage as of (Insert Date)** | **Seating Capacity** | **Tag** | **Model Year** | **Lift (Yes/No)** | **# W/C Stations** | **Start Time** | **End Time** | **Duration** | **Usage** | **Sun** | **M** | **T** | **W** | **T** | **F** | **Sat** | **Description of Service** |
| 1 |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |   |
| 2 |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |   |
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| 20 |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |  |  |   |

**FY2022 Transit Program Non-Expendable Equipment Inventory Form**

## **Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Equipment Description | Equipment ID Number | Source Grant | Acquisition Date | Cost | % Federal Participation | Title Holder | Location | Condition (New, Excellent, Good, Fair, or Poor) and Use | Disposal Date |
|  |  |  |  |  |  |  |  |  |  |
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|  |
| --- |
| **FY2022 Transit Program Fleet Replacement Form** |
| *List all vehicles to be replaced with FTA Funding in this application. List only FTA Funded Vehicles.*  |
| **Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
|  |  |  |  |  |  |  |  |
|  | **Year** | **Make/Model** | **Year of Purchase** | **Vin Number** | **Mo/Year Placed in Revenue Service** | **Accumulated Mileage** | **Estimated Mo./Yr. to be taken Out of Revenue Service** |
| **1** |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |
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| **20** |  |  |  |  |  |  |  |

**Project Implementation Schedule**

(For Capital and/or Planning Awards Only)

1. Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Contact Person and Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Schedule of Activities (use appropriate format):

1. EQUIPMENT PURCHASE

|  |  |
| --- | --- |
| * Start date for preparing bid specifications:
 |  |
| * Completion date for preparing bid specifications:
 |  |
| * Bid advertisement date:
 |  |
| * Bid award date:
 |  |
| * Delivery date(s):
 |  |
| * Acceptance date(s):
 |  |
| * Estimated cost:
 |  |

1. TECHNICAL STUDIES

|  |  |
| --- | --- |
| * Start date for agency projects:
 |  |
| * Notice to Proceed date for all pass-through projects (third party contracts)
 |  |
| * Contract award date for all pass-through projects:
 |  |
| * Draft report completion date:
 |  |
| * Final report completion date:
 |  |
| * 100% completion date:
 |  |
| * Estimated cost for 100% completion:
 |  |

C. DISPOSITION ACTIVITY (i.e., equipment or real property)

|  |  |
| --- | --- |
| * Description of disposition action:
 |  |
| * Starting date(s):
 |  |
| * Ending date(s):
 |  |

4. Overall Project Completion Date:

5. Narrative explanations as required:

***Note: Please enter “State Administered Activity” for those items implemented directly by ALDOT.***

**Fleet Classification Form**

|  |
| --- |
| Agency Name:  |
|  |
|  |  | Before AwardApproval | Amount ofChange | After AwardApproval |
| I. | Active Fleet  |  |  |  |
|  | A. Peak Requirement  | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  | B. Spares  | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  | C. Total (A+B)  | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  | D. Spare Ratio (B/A) | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  |  |  |  |  |
| II. | Inactive Fleet |  |  |  |
|  | A. Contingency Reserve  | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  | B. Pending Disposal  | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  | C. Total (A+B)  | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |
|  |  |  |  |  |
| III. | Total Fleet  |  |  |  |
|  | (I.C. + II.C) | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ |

EXHIBIT 5 - Public Participation Process

**Guidance on promoting Inclusive Public Participation**. ALDOT subrecipients should seek out and consider the viewpoints of minority, low-income, and Limited English Proficiency (LEP) populations in the course of conducting public outreach and involvement activities In order to comply with the DOT Order on Environmental Justice and the DOT Limited English Proficiency (LEP) Guidance.

An agency’s public participation strategy shall offer early and continuous opportunities for the public to be involved in the identification of social, economic, and environmental impacts of proposed transportation decisions.

* **Effective Practices for Fulfilling the Inclusive Public Participation Requirement.** Subrecipients have wide latitude in determining how, when, and how often specific public involvement measures should take place, and what specific measures are most appropriate. Subrecipients should make these determinations based on the composition of the population affected by the recipient’s action, the type of public involvement process planned by the recipient, and the resources available to the agency. Efforts to involve minority and low-income people in public involvement activities can include both comprehensive measures, such as placing public notices at all stations and in all vehicles, and measures targeted to overcome linguistic, institutional, cultural, economic, historical, or other barriers that may prevent minority and low-income people from effectively participating in a subrecipient’s decision-making process. Effective practices include:
* Coordinating with individuals, institutions, or organizations and implementing community-based public involvement strategies to reach out to members in the affected minority and/or low-income communities;
* Providing opportunities for public participation through means other than written communication, such as personal interviews or the use of audio or video recording devices to capture oral comments;
* Using locations, facilities, and meeting times that are convenient and accessible to low-income and minority communities;
* Using different meeting sizes or formats, or varying the type and number of news media used to announce public participation opportunities, so that communications are tailored to the particular community or population;
* Implementing DOT’s policy guidance concerning subrecipients’ responsibilities to LEP persons to overcome barriers to public participation.

Further guidance in this regard may be accessed via the following link to **FTA Circular 4702.1 (series)**: <http://www.fta.dot.gov/legislation_law/12349_14792.html>.

Eligible applicants must ensure that the public is aware of the Urban Transit project and has adequate input into the project. Eligible applicants must, therefore, initiate a public participation process as part of their Urban Transit Program application requirements.

**Public Hearing Required:** The public participation process must comprise, at a minimum, conducting a public hearing. The public hearing must be advertised at least seven (7) days prior to the hearing. A public hearing must be held to allow all persons, including private transportation providers and new business entrants, equal opportunity to comment on the proposed transportation service. For operating applications, the service description must clearly indicate all service to be provided including open door contract service and any proposed service or fare changes. For capital applications, the capital items to be purchased and a short description of construction projects must be included. The hearing must be advertised by public notice once in the local newspaper of widest circulation at least seven (7) days prior to the hearing.

**\*\*Please note: A copy of the Public Hearing Notice must be placed in the reception desk area, meeting rooms, transit facilities, and on the vehicles to allow all individuals including Limited English Proficiency (LEP) individuals an opportunity to participate in this hearing**.

 Translation services must be provided free of charge to limited English speaking individuals.

*\*If provider meets the safe harbor threshold: At a minimum the statement: “If information is needed in another language, then contact [telephone number]”—should be stated in English and in any other language(s) spoken by LEP populations that meet the Safe Harbor threshold*.

A sample Public Hearing Notice is included in this section.

**Include the following as Exhibit 5:**

1. **Copy of the Public Hearing Notice as it appeared in the newspaper**
2. **Notarized statement verifying publication (publisher’s affidavit)**
3. **Summary or transcript of the public hearing signed by an official of the transit system**

**The public hearing notice and the application preparations require immediate and simultaneous attention**

The Public Hearing Notice must be prepared so it can be published **at least 7 days** prior to the public hearing (see next page for a Sample Public Hearing Notice).

**Application Due Date:** Applications for current and prospective subrecipients **must be received on or before August 31, 2021**

Any questions concerning these instructions should be directed to Regional Managers and for the 5307 (f) to ALDOT as indicated in the application instructions.

***(Items in Blue will require individualized updates based on Agency &***

***Notice must be published in newspaper at least 7 days prior to the listed public hearing date.)***

**SAMPLE Public Hearing Notice**

The XYZ Commission (XYZ Transit System) is applying to the Alabama Department of Transportation for Operational, Administration, Planning, and Capital assistance award under 49 U.S.C. Section 5307 of the Federal Transit Laws, as codified, as well as the Coronavirus Aide, Relief, and Economic Security (CARES) Act of 2020. This grant funding will provide financial assistance for public transportation service for the residents of XYZ County.

Copies of detailed budgets, and service description may be obtained via website, email request and/or at XYZ Transit System’s office name and physical address.

The service is provided for general public and currently operates Monday-Friday, 6 a.m. to 6 p.m. All residents including wheelchair users, must schedule 24 hours in advance. Fares range from $1.00 to $100.00 per one-way trip. No Service or Fare Changes are planned for FY2022 or Planned service and Fare changes for FY2022 are…

Capital funding will be used to be purchase are 4 transit vehicles with wheelchair securements, 2 laptops and construct 1 transit hub located at XYZ. (Make sure to indicate any capital or non-vehicle capital items you are applying for.)

The funds will be used as federal assistance for Operating, Capital, Preventative Maintenance, Planning. (Remove any grant types you are not applying for.)

A public hearing will be held on date at time in the meeting room at the facility name and Address for public comment. If there are questions or comments or if information is needed in another language or alternative format, contact:

John Doe

Transit Director

XYZ Transit System

Telephone Number

Email Address

XYZ Transit System does not discriminate against any individual on the basis of race, color, or national origin.

Exhibit 6 – Complaint and Bid Protest Procedures

Applicants must have written procedures describing the local mechanism for resolving private operator and passenger complaints as well as procedures addressing questions dealing with the fairness of local procurement procedures and decisions.

The Complaint Procedures must include all of the following:

* Provide a step-by-step time frame for responding to and resolving the complaint.
* Identify the responsible parties at the local level to ensure a fair and independent review of the complaint.
* Include a requirement for documenting in writing the complaint and its resolution.

Sample “Complaint Policy and Procedures” and “Bid Protest Procedures” follow.

**Note**: The final step of both procedures must include the following statement: ***All complaints unresolved at the local level will be submitted to ALDOT for final resolution, to the attention of:***

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

**Requirements of Exhibit 6 include:**

1. **Complaint Policies and Procedures**
2. **Bid Protest Procedures**

***XYZ TRANSIT SYSTEM SAMPLE***

COMPLAINT POLICY AND PROCEDURES

It is the policy of the XYZ Transit System to operate the public transportation program in an open and fair manner for employees, passengers, other transit providers, and the general public. No employee, passenger, other transit provider, or the general public will be discriminated against or suffer any reprisals from making a complaint. Complaints must be in writing and specific. Vague or general charges of unfairness that are not substantiated by facts will not be processed. When an allegation is made that a specific violation, misinterpretation, or inappropriate act has occurred, the following steps should be taken to resolve the issue. XYZ TRANSIT will resolve the complaint within fifteen (15) business days of the date of receipt of the written complaint.

**1**. Sample Employee Complaint Policy

If an employee has issue with another employee, passenger, or other member of the general public, he or she should bring the matter to the attention of the Operations Coordinator (OC) or similar authority within 3 days of the occurrence. *Complaints must be specific and in writing.* If the complaint involves the Operations Coordinator or similar authority, the employee should address the issue with the Transit System Director. The OC or similar authority will listen to all parties involved in the situation, investigate with outside sources if necessary, and resolve the matter within fifteen (15) business days of the receipt of the written complaint. If the OC or similar authority cannot resolve the matter, it will be brought to the Transit System Director for resolution. If the matter is not satisfactorily resolved at this point, the Department Head or next higher authority will be consulted. If the employee does not feel the matter has been resolved at this point, the Personnel Director or similar authority should be consulted, and the matter brought before the Personnel Board or similar authority if necessary.

**2. Sample Passenger Complaint Policy**

If a passenger has issue with a XYZ TRANSIT employee, another passenger, or other member of the general public, he or she should bring the matter to the attention of the Operations Coordinator (OC) or similar authority within 3 days of the occurrence. Complaints must be specific and in writing. If the complaint involves the Operations Coordinator or similar authority, the passenger should address the issue with the Transit System Director. The OC or similar authority will listen to all parties involved in the situation, investigate with outside sources if necessary, and resolve the matter within fifteen (15) business days of the receipt of the written complaint. If the OC or similar authority cannot resolve the matter, it will be brought to the Transit System Director for resolution. If the matter is not satisfactorily resolved at this point, the Department Head or next higher authority will be consulted. If the passenger does not feel the matter has been resolved at this point, the XYZ Transit System Liaison or similar authority should be consulted and the matter brought before the entire (Governing Authority) if necessary.

**3. Sample Private Transit Operator Complaint Policy**

If a private transit operator has issue with XYZ TRANSIT, he or she should address the matter with the Transit System Director within 3 days of the occurrence. *Complaints must be specific and in writing.* The Transit System Director will investigate and resolve the matter within fifteen (15) business days of the receipt of the written complaint. If the matter is not satisfactorily resolved at this point, the (next higher authority) will be consulted. If the private operator does not feel the matter has been resolved at this point, the XYZ Transit System Liaison should be consulted and the matter brought before the entire (governing authority) if necessary.

**4. Sample General Complaint Policy**

If a member of the general public has a complaint with a XYZ TRANSIT employee, policy, or other issue, he or she should bring the matter to the attention of the Operations Coordinator (OC) or similar authority within 3 days of the occurrence. *Complaints must be specific and in writing.* If the complaint involves the Operations Coordinator or similar authority, the member of the general public should address the issue with the Transit System Director. The OC or similar authority will listen to all parties involved in the situation, investigate with outside sources if necessary, and resolve the matter within fifteen (15) business days of the receipt of the written complaint. If the OC or similar authority cannot resolve the matter, it will be brought to the Transit System Director for resolution. If the matter is not satisfactorily resolved at this point, the Department Head will be consulted. If the member of the general public does not feel the matter has been resolved at this point, the XYZ Transit System Liaison or similar authority should be consulted and the matter brought before the entire (governing authority) if necessary.

**ALL complaints unresolved at the local level will be submitted to the Alabama Department of Transportation for final resolution, to the attention of:**

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

##### ***Sample Bid Protest Procedures for XYZ Transit System***

The following bid protest procedures have been written in compliance with the Federal Transit Administration (FTA) Third Party Contracting Guidelines (FTA Circular 4220.1F). Parties that wish to file a bid protest should review these procedures in conjunction with FTA’s Circular 4220.1F. These procedures also address complaints or appeals regarding the funding of unsolicited proposals and other protests unrelated to the solicitation process and contract award decisions. XYZ TRANSIT SYSTEM’s protest procedures will be referenced in the bid documents in order that interested parties will know their rights under these protest procedures.

1. Protests Pertaining to the Contract Solicitation Process or Contract Award Decision

The following procedures and time requirements shall be applied uniformly in processing all protests. Protests may be made by active or prospective bidders whose direct economic interest would be affected by a solicitation, proposed award, or award of a contract. Protests must be submitted in writing to:

Jane/John Doe, Director

XYZ Transit System

0000 Your Choice Parkway

Anywhere, AL 00000

XYZ TRANSIT SYSTEM will consider all written protests made within the timelines stated in this document. Protest submissions should be concise, logically arranged, clearly state the grounds for the protest, and must include at least the following information:

1. Name, address, and telephone number of protestor
2. Solicitation or contract name and/or number
3. A detailed statement of the legal and factual grounds for the protest, including copies of all relevant documents or information
4. A statement of relief requested

Only written protests received within the timelines stated in these procedures will be considered. Upon receipt of a protest, XYZ TRANSIT SYSTEM will notify the protestor that the protest has been received by mail within five (5) working days. XYZ TRANSIT SYSTEM may request additional information from the protesting party, which must be submitted in writing to XYZ TRANSIT SYSTEM within five (5) working days from the date of XYZ TRANSIT SYSTEM’s request.

Within twenty (20) working days of receipt of a written protest, XYZ TRANSIT SYSTEM shall either:

1. Issue a final written decision which responds in detail to each issue raised in the protest and includes a rationale for the decision rendered, or
2. Conduct, at XYZ TRANSIT SYSTEM’s discretion, an informal hearing to allow the interested participating parties an opportunity to present their positions and supporting facts, documents, justification, and technical information. XYZ TRANSIT SYSTEM will advise all interested parties of the final decision in writing no later than five (5) working days from the date of the informal hearing.
3. Protests before Proposal Solicitation

Bid protests alleging restrictive specifications or improprieties, which are apparent prior to bid or proposal opening, must be submitted in writing to XYZ TRANSIT SYSTEM and must be received at least five (5) working days prior to bid/proposal opening. Bids will not be opened until five (5) working days after resolution of the protest unless XYZ TRANSIT SYSTEM determines that:

1. The items to be procured are urgently required;
2. Delivery or performance will be unduly delayed by failure to make award promptly; or
3. Failure to make award will otherwise cause undue harm to XYZ TRANSIT SYSTEM.

If the written protest is not received by the time specified, bids or proposals may be received, opened and awarded in the normal manner unless XYZ TRANSIT SYSTEM determines that it is in the best interest of all concerned to delay any step.

1. Protests after Opening of Proposal Solicitation and Prior to Award

Protests against the making of an award may be made after bid opening and prior to award. Such protests must be submitted in writing to XYZ TRANSIT SYSTEM and must be received by XYZ TRANSIT SYSTEM within five (5) working days of the bid opening. If XYZ TRANSIT SYSTEM decides to withhold the award pending resolution of the protest, XYZ TRANSIT SYSTEM will notify all bidders whose bids or proposals might become eligible for award, and offer them the option to extend or withdraw the bid or proposal beyond the 120-day validity period. Awards will not be made until at least five (5) working days after resolution of the protest unless XYZ TRANSIT SYSTEM determines that:

1. The items to be procured are urgently required;
2. Delivery or performance will be unduly delayed by failure to make award promptly; or
3. Failure to make award will otherwise cause undue harm to XYZ TRANSIT SYSTEM or the federal government.
4. Protests after Award

Protests received after announcement of an award or after a contract has been executed will only be considered if XYZ TRANSIT SYSTEM determines that the matter is in the public interest or the protest presents clear and convincing evidence of fraud, misrepresentation, other illegality, or gross impropriety in the selection of a bid/proposal. If a protest is under consideration, XYZ TRANSIT SYSTEM shall evaluate the bid/proposal at issue a second time in its entirety and use the same evaluation criteria and rating factors applied in the initial review of the bid/proposal. The bid/proposal will be evaluated by a panel designated by the XYZ TRANSIT SYSTEM.

If a protest involving an executed contract is under consideration, XYZ TRANSIT SYSTEM will notify the selected contractor of the protest and its basis and may, at its discretion, order the contractor to suspend all XYZ TRANSIT SYSTEM work activities. If the awarded contractor has not executed the contract as of the date the protest is received by XYZ TRANSIT SYSTEM, the contract will not be executed until five (5) working days after resolution of the protest unless XYZ TRANSIT SYSTEM determines that:

1. The items to be procured are urgently required;
2. Delivery or performance will be unduly delayed by failure to make award promptly; or
3. Failure to make award will otherwise cause undue harm to XYZ TRANSIT SYSTEM.
4. **Protests Pertaining to the Funding of Unsolicited Proposals**

The submission of unsolicited proposals is inconsistent with XYZ TRANSIT SYSTEM’s policy to promote a full and open competition among interested parties for FTA contract funds. The filing of unsolicited proposals, therefore, will be deemed inappropriate by XYZ TRANSIT SYSTEM and returned to the sender; complaints or appeals calling for reconsideration of such proposals will not be accepted.

**ALL complaints unresolved at the local level will be submitted to the Alabama Department of Transportation for final resolution, to the attention of:**

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

***Exhibit 7 -* *Title VI General Reporting Requirements (Civil Rights)***

All applicants must complete the following Title VI Annual Report.

**Annual Title VI Reporting Requirements for Rural and Urban Public Transit Providers**

**General Reporting Requirements:**

|  |  |
| --- | --- |
| **Agency Name:** |  |
| **Title VI Coordinator:** |  |
| **Mailing Address:** |  |
| **Telephone No.:** |  |
| **Email Address:** |  |

1. Are new employees trained on Title VI before beginning service? Yes \_\_\_\_ No\_\_\_\_ If yes, how (Orientation, Newsletter, Brochures/Posters, etc.)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Are current copies of the Title VI of the Civil Rights Act of 1964 available and accessible to your unit? Yes \_\_\_\_ No \_\_\_\_

**Record Keeping:**

Please respond either **yes** or **no** to the following questions:

1. Are Title VI Posters displayed in areas where services are provided? Yes \_\_\_\_ No\_\_\_\_
2. Are posters or program brochures available in languages other than English, as needed?

Yes \_\_\_\_ No\_\_\_\_

1. Is information about Title IV disseminated to contractors, to subcontractors?

Yes \_\_\_\_ No\_\_\_\_ How? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are the Title VI rules and regulations included in your planning, scheduling, contracts, etc.?

Yes \_\_\_\_ No\_\_\_\_

1. Are your contracts monitored for non-discrimination? Yes \_\_\_\_ No\_\_\_\_

How? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Planning Boards or Commissions:**

1. Does your agency have an appointed or non-appointed board or commission? Yes\_\_\_\_ No\_\_\_\_
2. Number of minorities serving on your Commissions or Advisory board: \_\_\_\_\_\_\_\_

**Racial Demographics of Board Members and Gender {Number of}:**

African American Male: \_\_\_ African American Female: \_\_\_

Caucasian Male: \_\_\_ Caucasian Female: \_\_\_

Hispanic Male: \_\_\_ Hispanic Female: \_\_\_

Native American Male: \_\_\_ Native American Female: \_\_\_

Other Male {Specify}: \_\_\_ Other Female {Specify}: \_\_\_

**Complaints and/or Lawsuits:**

1. List of all active lawsuits and/or complaints against recipient containing the date of filing, summary of allegation(s), and pending status. If none, indicate with N/A.
2. Description of pending applications for state assistance and assistance currently

being provided from other state agencies. If none, indicate with N/A.

1. Summary of any civil rights reviews conducted within the last year, that includes

the purpose for the review, name of the agency or organization performing the

review, findings and recommendations and status and/or disposition of finds and

recommendations. If none, indicate with N/A.

**Assurances:**

Signed standard DOT Title VI Assurances, including those with **ALDOT**, **FHWA** and **FTA**. – ***No action is required at this time. The Assurances will be requested later if approved for funding.***

**Projects:**

If a construction project is presently proposed or to be completed within the last

year, a fixed-facility analysis summarizing the effect on minority communities that includes:

* The potential impact on minority communities and businesses during and after construction.
* The potential negative environmental impact.
* Detailed list of minority owned businesses and households to be affected.
* Any significant changes or impacts on minority communities and;
* Description of measures adopted to mitigate any identified adverse social, economic, or environmental effects

If none, indicate with N/A.

***Exhibit 8 –* *5307 CARES Act Funding Summary***

***Are you applying for 5307 CARES Act Funding? Select Answer below.***

**\_\_\_\_ *Yes, Continue with next question* \_\_\_\_ *No, Skip to Exhibit 12***

***Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Fiscal Year 2022**

**5307 CARES ACT FUNDING SUMMARY**

**(Amounts should correspond to Source Funding Sheets and Budget sheets for 5307 CARES Act Funding.) ((A. Federal Funds + B. Farebox = C. Total) & (1. Operating + 2. Capital = Row 3. Total))**

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Category** | **A. Federal Funds** | **B. Farebox** | **C. Total** |
| 1. Operating (100%) |   |  |  |
| 2. Capital (100%) |   |  |  |
| 3. Total |   |  |  |

|  |  |
| --- | --- |
| **Escrow Account Balance as of March 30, 2021** |  |

*Indicate N/A if agency does have an Escrow Account.*

EXHIBIT 9 – Section 5307 CARES Act Application Letter

This letter must state that the grant applicant is applying for public transportation operating and capital assistance in accordance withFederal Transit Laws (as codified, 49 USC Section 5307, Financial Assistance for Urban areas). This Exhibit must be on **Applicant’s Letterhead** and must include the following information:

* State amount of urban transit(Federal) funds requested.
* Include applicant's statement that, to the best of its knowledge, all the information contained within the application is true and correct.
* State name of principal contact person and telephone number.
* Include signature of the person designated by the applicant’s governing body to be responsible for administration of the grant.

This letter (on applicant’s letterhead) must be addressed to:

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

A sample application letter follows.

**Section 5307 CARES Act Application Letter**

**(Place on Applicant’s Letterhead. Make sure amounts correspond with Funding Summary.)**

Date

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

Dear Mr. Lindsey:

FY 2022 5307 CARES ACT URBAN TRANSIT PROGRAM APPLICATION

The (**Applicant**) is hereby applying for a **CORONAVIRUS AIDE, RELIEF, & ECONOMIC SECURITY (CARES) Act of 2020** grant under 49 USC Section 5307 *et. seq*., to assist in the operation of the (**XYZ**) Public Transit System. The project application has been reviewed and approved by the (**applicant’s** **governing authority)**.The requested amount of Federal assistance is as follows:

Federal Operating Assistance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Federal Capital Assistance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

There is no required local match under the CARES Act program. The applicant certifies that it will maintain all capital equipment acquired under the project in accordance with Federal property management standards (49 CFR part 18).

The applicant attests that all information contained within this application is true and correct and that the applicant has the legal, financial, and technical capacity to carry out the proposed project. If you have questions or need further information, please contact (**principal contact**) at (**area code**) (**telephone number**).

Respectfully,

Signature of Designated Official

Title

***EXHIBIT 10 - 5307 CARES Act Program of Project & Budget Worksheets***

**🞺 Public Participation Process:** Each award subrecipient is required to develop a Program of Projects (POP) and Budget that have undergone a public participation process. The award recipient must inform the public of the amount of funds available under the Section 5307 program and the capital, operating, and planning projects proposed to be undertaken. The public announcement that summarizes the Program of Projects (POP) will indicate where citizens can examine the proposed Program of Projects and budget in detail and how to submit comments on the proposed program and on the performance of the recipient. This notice is published in the general circulation newspaper in the service area of the recipient. If the community has a large minority of non-English speaking persons, the notice also should be published in a non-English publication. The subrecipient is required to consider comments from the public in preparing the final POP. In addition to the proposed POP, the subrecipient must make the final POP available to the public. A separate advertisement is required for both the proposed POP and the final POP unless the initial advertisement includes a statement indicating that the proposed POP shall become final unless amended as a result of the public participation process.

 **🞺 Consultative Process:** The subrecipient is required to develop the POP in consultation with interested parties, including private transportation providers. **The subrecipient may rely on the MPO to assist in this process.** A Transportation Advisory Committee of the MPO may be informed or used as a reviewer of the POP. Private providers should be involved throughout this process.

The requirement is that a consultative process be used to develop the proposed POP. Publication of the newspaper notice and the public hearing process can be a secondary means for consulting with interested parties, including private providers. **However, relying only on the public hearing process, which occurs after a proposed POP has been developed, is not sufficient.**

**🞺 Coordination:** The subrecipient is required to ensure that the POP provides for coordination of federally assisted mass transportation services. This assurance is included in the Annual List of Certifications and Assurances. Coordination may occur at many levels, from simple information sharing to total consolidation of services.

**🞺 Transportation Plans:** Capital, planning, and operating projects must be part of the current approved Transportation Improvement Program (TIP) and State Transportation Improvement Program (STIP). All urban area transit projects are included in the State Transportation Improvement Program. Please include a copy of the relevant pages from the most recent TIP.

**🞺 Capital Projects:** All capital projects are funded at the 100% Federal to local match ratio unless otherwise specified (please see “Bicycle Racks and Access” below).

**🞺 Clean Air Act (CAA) or Americans with Disabilities Act (ADA) Equipment and/or Facilities:** The federal share for vehicle-related equipment and/or facilities required by the Clean Air Act (CAA) or the ADA is 100%.

**🞺 Bicycle Racks and Access:** The Federal share may be 90 percent for those capital projects used to provide access for bicycles to transit facilities, or to install racks or other equipment for transporting bicycles on transit vehicles.

**🞺 Budget Details:** All applicants must submit project budget data showing detailed operating expenses and revenue. This data provide confirmation that adequate funds will be available to operate and maintain project equipment and/or vehicles. Additionally, the data provides a clear picture of the total budget as it relates to Section 5307 funding. The line items in the budget are used to identify specific operating expenses eligible for Section 5307 funding. Show operating expenses only; capital expenses are listed separately.

**🞺 Sole Source Procurements:** Requests for sole source procurements shall be submitted and reviewed during the application process. Any requests (if applicable) shall have supporting documentation included with the Section 5307 application. Sole Source procurement must be approved by ALDOT in advance of the execution of any contracts and/or securement of services or the agency will be responsible for all expenses associated with the sole source purchase.

**🞺 Indirect Costs:** Title 2 CFR 200 Subpart E-Cost Principles (Super Circular) establishes Federal guidelines for identifying costs that can be reimbursed using Federal funds. According to these guidelines, an approved Cost Allocation Plan (CAP) and/or Indirect Cost Rate (ICR) is required when requesting reimbursement for indirect costs using Federal funds.

**Approved** **Indirect Cost Rate (ICR) proposals must accompany budget submissions**. Applicants awaiting cognizant agency approval of indirect cost rate proposals must submit copies of correspondence requesting such approval in lieu of the actual approval correspondence. If instances exist in which cognizant agencies no longer require annual indirect cost rate plan submissions, such plans must be submitted to ALDOT for review and/or evaluation. The proposal and related supporting documentation must be maintained for audit.

Please note that the Super Circular consolidates and eliminates the duplicative guidance found in eight (8) OMB circulars. Additional information may be accessed via the following links:

<http://www.fhwa.dot.gov/cfo/2cfr200guidance.pdf>

<https://www.transit.dot.gov/regulations-and-guidance/regulations-and-guidance>

**🞺 “Associated Transit Improvements” (formerly “Transit Enhancements”):** The Fixing America’s Surface Transportation Act (FAST Act) eliminated the requirement to spend 1% of Section 5307 funds on Associated Transit Improvements. The provisions of the FAST Act apply to all unobligated funds from FY-2015 and prior years, as well as to FY-2016 funds. “Associated Transit Improvements” are briefly defined as: historic preservation of historic public transportation buildings, bus shelters, functional landscaping and streetscaping, pedestrian access and walkways, bicycle access, signage, and enhanced access to public transportation for persons with disabilities.

**🞺 Questions about the Program of Projects (POP) and the Budget:** For additional information on these items, please call your Respective Regional Manager.

All applicants must submit project budget data showing detailed Operational and Capital expenses and revenue. This information demonstrates the availability of adequate funding to operate and maintain project equipment or vehicles. The budget line items identify specific operational expenses eligible for **CARES Act** funding. Please follow the format of the samples provided. \*\*\* Requests for sole source procurements shall be submitted and reviewed during the application process.

**Indirect Costs:** Title 2 CFR 200 Subpart E-Cost Principles (Super Circular) establishes Federal guidelines for identifying costs that can be reimbursed using Federal funds. According to these guidelines, an approved Cost Allocation Plan (CAP) and/or Indirect Cost Rate (ICR) is required when requesting reimbursement for indirect costs using Federal funds.

**Approved** **Indirect Cost Rate (ICR) proposals must accompany budget submissions**. Applicants awaiting cognizant agency approval of indirect cost rate proposals must submit copies of correspondence requesting such approval in lieu of the actual approval correspondence. If instances exist in which cognizant agencies no longer require annual indirect cost rate plan submissions, such plans must be submitted to ALDOT for review and/or evaluation. The proposal and related supporting documentation must be maintained for audit.

Please note that the Super Circular consolidates and eliminates the duplicative guidance found in eight (8) OMB circulars. Additional information may be accessed via the following links:

1. <https://www.fhwa.dot.gov/cfo/2cfr200guidance.cfm>
2. <https://www.transit.dot.gov/regulations-and-guidance/regulations-and-guidance>

**Requirements for Exhibit 10:**

1. **Program of Projects (Operations & Capital at 100% ONLY)**
2. **Line Item Budget Sheet (Operations & Capital ONLY)**
3. **Source of Budget Funds Sheet (Operations & Capital ONLY)**
4. **5307 CARES Act Vehicle Request Budget Form (if ordering vehicles)**
5. **Approved Indirect Cost Rate Proposal (if applicable)**

**Sample Program of Projects**

**Please use the Program of Projects Table provided in the**

**5307 Templates Excel File when completing your application.**

**This section should include Operations and Capital at 100% ONLY**





**5307 CARES Act BUDGET SHEET**

PROJECT COUNTY: [List County]

FISCAL YEAR 2022

PROJECT NUMBER: RPT-[List Number] ORIGINAL: X

**5307 CARES OPERATIONS LINE ITEM BUDGET**

|  |  |
| --- | --- |
| Drivers | $173,400.00 |
| Maintenance Supervisor | 10,064.00 |
| Fringes | 43,836.00 |
| Maintenance/Repairs | 5,500.00 |
| Uniforms | 2,000.00 |
| Tires | 2,500.00 |
| Fuel/Oil | 44,000.00 |
| **TOTAL** | **$281,300.00** |

**5307 CARES Act LINE ITEM BUDGET SHEET (Continued)**

PROJECT COUNTY: [List County]

FISCAL YEAR 2022

PROJECT NUMBER: RPT-[List Number] ORIGINAL: X

**5307 CARES CAPITAL LINE ITEM BUDGET**

|  |  |
| --- | --- |
| Vehicle Capital | $100,000.00 |
|  |  |
| **Total** | **$120,000.00** |

**Non-vehicle capital is to be included in 5307 Regular grant budget.**

**Note:**

* **All Dispatch/ Scheduling Software new purchases should be listed as Non-Vehicle Capital in 5307 Regular Grant application.**
* **All Dispatch/ Scheduling Software annual maintenance should be listed as Software Maintenance in Administration Line Item Budget (5307 Grant).**
* **Any Sole Source purchase requests (if applicable) shall have supporting documentation included with the Section 5307 application. Sole Source procurement must be approved by ALDOT in advance of the execution of any contracts and/or securement of services or the agency will be responsible for all expenses associated with the sole source purchase.**

**5307 CARES Act SOURCE OF BUDGET FUNDS SHEET**

**(Total Budget amounts should match budget sheets.)**

PROJECT COUNTY: [List County]

FISCAL YEAR 2022

PROJECT NUMBER: RPT-[List Number] ORIGINAL: X

**5307 CARES OPERATING BUDGET**

|  |  |
| --- | --- |
| Total Operating Budget | $281,300.00 |
| LESS: Direct Operating Revenues |  |
| Farebox: | $18,130.00 |
| Net Operating Cost | $263,170.00 |
| LESS: (0%) | $0.00 |
| **TOTAL Federal Share (100%)** | **$263,170.00** |

**5307 CARES CAPITAL BUDGET**

|  |  |
| --- | --- |
| Total Vehicle Capital Budget | $100,000.00 |
|  |  |
| Subtotal | $120,000.00 |
| LESS: (0%) | $0.00 |
| **TOTAL Federal Share (100%)** | **$120,000.00** |

|  |
| --- |
|  **FY2022** **5307 CARES ACT VEHICLE REQUEST BUDGET FORM (Form to be Completed if Requesting Vehicles)****Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Vehicle Type******Price ranges are estimates and subject to change. Prices include wheel-chair stations only. Other options are not included.*** | ***Designed******Seating******Capacity*** | ***Number of******Wheelchair Stations******Per Vehicle*** | ***Engine Type******G-Gas or******D-Diesel*** | ***Number of Each Type Vehicle Needed***  | ***Intended Use******R-Replacement*** |
| Mini Van**$38,500** | 6 | 1 Station Available | Gas only |  |  |
| Transit Van **$51,493-$64,157**  | 15 |  | Gas Only |  |  |
| Modified Van **$51,493-$64,157** | 15 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$49,326-$65,034**  | 17 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$51,747-$69,935** | 21 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$59,516-$71,790** | 25 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$80,000-$85,000** | 25 |  | Diesel only |  |  |
| Cut-A-Way Chassis, HD **$83,674-$95,247** | 28-30 |  | Gas only |  |  |
| Cut-A-Way Chassis, HD **$91,336-$102,890** | 28-30 |  | Diesel only |  |  |
| **TOTALS** |  |  |  | **ENTER TOTAL HERE** |  |
| Note: All vehicle capital requests will be evaluated by ALDOT. The number and types of vehicles awarded are contingent upon available funding. Replacement – an agency requesting to replace vehicles funded through ALDOT. Expansion – an agency currently has vehicles funded by ALDOT and desires to purchase new vehicles to meet service needs. New Service – an agency that has not purchased vehicles through ALDOT. ***Prices are estimates only and are rounded to the nearest $100. Use highest value on vehicle type when projecting cost for grant.*Some vehicles are currently pending contract renewal.****THE NUMBER OF REPLACEMENT VEHICLES ORDERED USING THE BUY ONE GET ONE OFFER ARE LIMITED TO 25% OF THE OVERALL FLEET.** |

***10.5***

**Insert Approved Indirect Cost Rate Proposal, *if applicable***

**(No Sample Provided)**

***Exhibit 11 – Authorizing Resolution* *(CARES Act Section 5307)***

Resolution No. \_\_\_\_\_\_\_\_\_\_\_

Resolution authorizing the filing of an application with Department of Transportation, United States of America, and the Alabama Department of Transportation for an award under the Federal Transit Act.

**WHEREAS**, the Secretary of US DOT Transportation and the Director of the Alabama Department of Transportation are authorized to make awards for a mass transportation Program of Projects and Budgets;

**WHEREAS**, the contract for financial assistance will impose certain obligations upon the Applicant, including the provision of its local share of the project costs in the program;

**WHEREAS**, it is required by the U.S. Department of Transportation in accord with the provisions of Title VI of the Civil Rights Act of 1964, that in connection with the filing of an application for assistance under the Federal Transit Act the applicant gives an assurance that it will comply with Title VI of the Civil Rights Act of 1964 and other pertinent directives and the U.S. Department of Transportation requirements thereunder; and

**WHEREAS**, it is the goal of the Applicant that disadvantaged business enterprises (minority business enterprises and woman business enterprises) be utilized to the fullest extent possible in connection with this/these project(s), and that definite procedures shall be established and administered to ensure that disadvantaged business enterprises (DBEs) shall have the maximum feasible opportunity to compete for contracts and purchase orders when procuring construction contracts, supplies, equipment contracts, or consultant and other services.

**NOW**, THEREFORE, BE IT RESOLVED BY **(Governing Body of Applicant)**

1. That (Title of Designated Official) is authorized to execute and file (an) application(s) on behalf of (Legal Name of Applicant) with the Alabama Department of Transportation to aid in the financing of planning, capital and/or operating assistance projects pursuant to Section 5307 of the Federal Transit Act.
2. That (Title of Designated Official) is authorized to execute and file with such applications an assurance or any other document required by the U.S. Department of Transportation and the Alabama Department of Transportation effectuating the purpose of Title VI of the Civil Rights Act of 1964.
3. That (Title of Designated Official) is authorized to furnish such additional information as the U.S. Department of Transportation and the Alabama Department of Transportation may require in connection with the application for the Program of Projects and Budget.
4. That (Title of Designated Official) is authorized to set forth and execute affirmative disadvantaged business enterprise policies in connection with the Program of Projects and Budget's procurement needs.
5. That (Title of Designated Official) is authorized to execute award agreements on behalf of (Legal Name of Applicant) with the Alabama Department of Transportation for aid in the financing of the planning, capital and/or operating assistance requested in the Program of Projects and Budget.

 **CERTIFICATION**

The undersigned duly qualified and acting (Title of Designated Official) of the (Legal Name of Applicant) certifies that the foregoing is a true and correct copy of a resolution, adopted at a legally convened meeting of the (Governing Body of Applicant) held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

If applicant has an official seal, impress here.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Recording Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Recording Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

***Exhibit 12 –* *Section 5307 Funding Summary***

***Are you applying for 5307 Regular Funding? Select Answer below.***

**\_\_\_\_ *Yes, Continue with next question \_\_\_\_No, Skip to Exhibit 17***

***Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

**Fiscal Year 2022**

**SECTION 5307 FUNDING SUMMARY**

**(Amounts should correspond to Source Funding Sheets and Budget Sheets regarding 5307 Regular Funding.) ((A. Federal Funds + B. Local Funds + C. Contract Revenue + D. Other/Advertising Revenue = E. Total) & (1. Preventive Maintenance + 2. Capital + 3. Planning = Row 4 Total))**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Budget Category** | **A.****Federal Funds** | **B.****Local Funds** | **C.****Contract****Revenue1** | **D.****Other/****Advertising Revenue** | **E.****Total** |
| 1. Capital (80%/20%)
 |   |   |  |  |  |
| 2. Preventive  Maintenance(80%/20%) |   |   |   |  |  |
| 3. Planning (80%/20%) |  |  |  |  |  |
| 4. Total |   |   |  |  |  |

**Amounts of B. Local Funds + C. Contract Revenue + D Other/Adverting Revenue equals match requirement.**

EXHIBIT 13 – Section 5307 Application Letter

This letter must state that the grant applicant is applying for public transportation administration and capital assistance in accordance withFederal Transit Laws (as codified, 49 USC Section 5307, Financial Assistance for urban areas). This Exhibit must be on **Applicant’s Letterhead** and must include the following information:

* State amount of urban transit(Federal) funds requested
* Sample Letter’s Paragraph 2, Sentence 1, will state the amount of Local Assistance to be used as Non-Federal match.
* Include applicant's statement that to the best of its knowledge, all the information contained within the application is true and correct
* State name of principal contact person and telephone number.
* Include signature of the person designated by the applicant’s governing body to be responsible for administration of the grant.

This letter (on applicant’s letterhead) must be addressed to:

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

A sample application letter follows.

**Sample Section 5307 Application Letter**

**(Place on Applicant’s Letterhead. Make sure amounts correspond with 5307 Regular Funding Summary. Local Assistance equals Local Funds + Contract Revenue + Other/Advertising Revenue.)**

Date

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

Dear Mr. Lindsey:

FY-2022 SECTION 5307 URBANIZED TRANSIT PROGRAM APPLICATION

The (**Applicant**) is hereby applying for a Section 5307 (**preventive maintenance / capital / planning**) grant under 49 USC Section 5307, to assist in the operation of the (**Name**) Public Transit System for the period covering October 1, 2022 to September 30, 2022. The project application has been reviewed and approved by the (**Applicant’s Governing Authority)**.The requested amount of Federal assistance is as follows:

Federal Capital Assistance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Federal Preventive Maintenance Assistance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Federal Planning Assistance: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Local assistance in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be used as the non-federal match. The applicant attests that all information contained within this application is true and correct and that the applicant has the legal, financial, and technical capacity to carry out the proposed project. If you have questions or need further information, please contact (**principal contact**) at (**area code**) (**telephone number**).

Respectfully,

Signature of Designated Official

Title

EXHIBIT 14 – Section 5307 Project Budget Worksheets

All applicants must submit project budget data showing detailed Administration and Capital expenses and revenue. This information demonstrates the availability of adequate funding to operate and maintain project equipment or vehicles. The budget line items identify specific operational and administration expenses eligible for Section 5307 funding. Please follow the format of the samples provided. \*\*\* Requests for sole source procurements shall be submitted and reviewed during the application process.

**Indirect Costs:** Title 2 CFR 200 Subpart E-Cost Principles (Super Circular) establishes Federal guidelines for identifying costs that can be reimbursed using Federal funds. According to these guidelines, an approved Cost Allocation Plan (CAP) and/or Indirect Cost Rate (ICR) is required when requesting reimbursement for indirect costs using Federal funds.

**Approved** **Indirect Cost Rate (ICR) proposals must accompany budget submissions**. Applicants awaiting cognizant agency approval of indirect cost rate proposals must submit copies of correspondence requesting such approval in lieu of the actual approval correspondence. If instances exist in which cognizant agencies no longer require annual indirect cost rate plan submissions, such plans must be submitted to ALDOT for review and/or evaluation. The proposal and related supporting documentation must be maintained for audit.

Please note that the Super Circular consolidates and eliminates the duplicative guidance found in eight (8) OMB circulars. Additional information may be accessed via the following links:

<https://www.fhwa.dot.gov/cfo/2cfr200guidance.cfm>

<https://www.transit.dot.gov/regulations-and-guidance/regulations-and-guidance>

**Match and Other Requirements:** All applicants must provide documentation of local matching funds including written commitments from each local funding source (indicating amount of funds authorized and committed as local match for the project). Documentation should be in the form of letters, certifications, or resolutions signed by authorized officials. *(See also Exhibit Description below).*

**In-Kind Match:** In-kind contributions (donation of equipment, supplies, property, and/or services that are beneficial and used by the applicant) must have a documented cash value. In-kind match can include the services of volunteers. Such non-cash sources of local match are eligible only if the value of each is formally documented and supported in accordance with 49 CFR Part 18. ALDOT reserves the right to reject or disallow in-kind contributions as local share if the estimated cash value cannot be determined independently.

**Exhibit Description:** This Exhibit comprises a Line Item Budget Sheet, Source of Budget Funds Sheet, Section 5307 Vehicle Request Budget Form, and Sources of Local Match documentation. Local Match is documented by a Local Match Commitment Letter and a Local Match Certification and the required “Resolution Authorizing Local Matching Funds”. The approved Cost Allocation Plan or Indirect Cost Rate Proposal is included (if applicable).

**Sample Program of Projects**

**Please use the Program of Projects Table provided in the**

**5307 Templates Excel File when completing your application.**

**This section should include Preventive Maintenance and Capital & Non-Vehicle Capital at 80% ONLY**





**5307 LINE ITEM BUDGET SHEET**

PROJECT COUNTY: [List County]

FISCAL YEAR 2022

PROJECT NUMBER: RPT-[List Number] ORIGINAL: X

**5307 CAPITAL BUDGET**

|  |  |
| --- | --- |
| Vehicle Capital | $100,000.00 |
| Non-Vehicle Capital (Support Equipment, Sole Source Purchases)***\*provide detailed list and cost breakdown*** | 20,000.00 |
| **TOTAL** | **$120,000.00** |

**5307 PREVENTIVE MAINTENANCE BUDGET**

|  |  |
| --- | --- |
| Preventive Maintenance | $100,000.00 |
| **TOTAL** | **$120,000.00** |

**5307 PLANNING BUDGET**

|  |  |
| --- | --- |
| Planning Projects | $200,000.00 |
| **TOTAL** | **$200,000.00** |

**Note:**

* **All Dispatch/ Scheduling Software new purchases should be listed as Non-Vehicle Capital in 5307 Regular Grant application.**
* **All Dispatch/ Scheduling Software annual maintenance should be listed as Software Maintenance in Administration.**
* **Any Sole Source purchase requests (if applicable) shall have supporting documentation included with the Section 5307 application. Sole Source procurement must be approved by ALDOT in advance of the execution of any contracts and/or securement of services or the agency will be responsible for all expenses associated with the sole source purchase.**

**5307 SOURCE OF BUDGET FUNDS SHEET**

**(Total Budget amounts should match budget sheets.)**

PROJECT COUNTY: [List County]

FISCAL YEAR 2022

PROJECT NUMBER: RPT-[List Number] ORIGINAL: X

**5307 CAPITAL BUDGET**

|  |  |
| --- | --- |
| Total Vehicle Capital Budget | $100,000.00 |
| Total Non-Vehicle Capital Budget | $20,000.00 |
| Subtotal | $120,000.00 |
| LESS: (20% Local Funds) | $24,000.00 |
| **TOTAL Federal Share (100%)** | **$96,000.00** |

**Contracts: $0.00**

**Advertising $0.00**

**Applicant Share: $24,000.00**

**Total Local Share (20%): $24,000.00**

**5307 PREVENTIVE MANAGEMENT BUDGET**

|  |  |
| --- | --- |
| Total Preventive Maintenance Budget | $100,000.00 |
| LESS: (20% Local Funds) | $20,000.00 |
| **TOTAL Federal Share (80%)** | **$80,000.00** |

**Contracts: $0.00**

**Advertising $0.00**

**Applicant Share: $20,000.00**

**Total Local Share (20%): $20,000.00**

**5307 PLANNING BUDGET**

|  |  |
| --- | --- |
| Total Planning Budget | $200,000.00 |
| LESS: (20% Local Funds) | $40,000.00 |
| **TOTAL Federal Share (80%)** | **$160,000.00** |

**Contracts: $0.00**

**Advertising $0.00**

**Applicant Share: $40,000.00**

**Total Local Share (20%): $40,000.00**

|  |
| --- |
| **FY-2022 SECTION 5307 VEHICLE REQUEST BUDGET FORM (Form To Be Completed If Requesting Vehicles)****Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Vehicle Type******Price ranges are estimates and subject to change. Prices include wheel-chair stations only. Other options are not included.*** | ***Designed******Seating******Capacity*** | ***Number of******Wheelchair Stations******Per Vehicle*** | ***Engine Type******G-Gas or******D-Diesel*** | ***Number of Each Type Vehicle Needed***  | ***Intended Use******R-Replacement******E-Expansion******N-New Service*** |
| Mini Van**$38,500** | 6 | 1 Station Available | Gas only |  |  |
| Transit Van**$51,493-$64,157** | 15 |  | Gas Only |  |  |
| Modified Van **$51,493-$64,157** | 15 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$49,326-$65,034**  | 17 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$51,747-$69,935** | 21 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$59,516-$71,790** | 25 |  | Gas only |  |  |
| Cut-A-Way Chassis Bus **$80,000-$85,000** | 25 |  | Diesel only |  |  |
| Cut-A-Way Chassis, HD **$83,674-$95,247** | 28-30 |  | Gas only |  |  |
| Cut-A-Way Chassis, HD **$91,336-$102,890** | 28-30 |  | Diesel only |  |  |
| **TOTALS** |  |  |  | **ENTER TOTAL HERE** |  |
| Note: All vehicle capital requests will be evaluated by ALDOT. The number and types of vehicles awarded are contingent upon available funding. Replacement – an agency requesting to replace vehicles funded through ALDOT. Expansion – an agency currently has vehicles funded by ALDOT and desires to purchase new vehicles to meet service needs. New Service – an agency that has not purchased vehicles through ALDOT. ***Prices are estimates only and are rounded to the nearest $100. Use highest value on vehicle type when projecting cost for grant.*****Some vehicles are currently pending contract renewal.** **THE NUMBER OF REPLACEMENT VEHICLES ORDERED USING THE BUY ONE GET ONE OFFER ARE LIMITED TO 25% OF THE OVERALL FLEET.**  |

**5307 Local Match Commitment Letter**

**(Place on Applicant’s Letterhead. Make sure amounts correspond with Funding Summary. Local Assistance equals Local Funds + Contract Revenue + Other/Advertising Revenue.)**

Date

Mr. Bradley B. Lindsey, P. E.

State Local Transportation Engineer

Local Transportation Bureau

Alabama Department of Transportation

1409 Coliseum Boulevard

Montgomery, Alabama 36110

Dear Mr. Lindsey:

Subject: FY2022 Section 5307 Local Match Commitment

The (**Applicant Name**) is applying for a Section 5307 (**capital /** **preventive maintenance / planning**) grant to aid in the operation of the (**transit agency**). The preventive maintenance, capital, and/or expenses requested in this project have been reviewed and approved by the **(Applicant) of ([Applicant’s] County/Counties**). We are requesting federal assistance in the amount of $\_\_\_\_\_\_\_\_\_\_ for capital expenses, $\_\_\_\_\_\_\_\_\_\_\_ for preventive maintenance assistance, and $\_\_\_\_\_\_\_\_\_\_ for planning assistance. Local assistance in the amount of $\_\_\_\_\_\_\_\_\_\_\_ will be used as the non-federal match.

The (**Applicant Name**) hereby acknowledges the local matching requirements for the referenced project and affirms assistance in the amount set forth above.

If you have any questions on this request, please contact (**principal contact**) at (**phone number**).

Sincerely,

Signature of Designated Official

Title

**5307 Local Match Certification**

***(Include Farebox Revenue as part of General Fund or in an Appropriate Line Item,
Because Farebox Revenue Makes the Project “Whole”. Amounts should correspond with Funding Summary.)***

We, the undersigned representing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Applicant Name

do hereby certify to the Alabama Department of Transportation that the required local funds for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Public Transportation Program are available from the following source(s):

General Fund: $\_\_\_\_\_\_\_\_\_\_\_

Contracts: $\_\_\_\_\_\_\_\_\_\_\_

Other/Advertising: $\_\_\_\_\_\_\_\_\_\_\_

 Other: $\_\_\_\_\_\_\_\_\_\_\_

 **Total: $\_\_\_\_\_\_\_\_\_\_\_**

These funds will be available as of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title

**5307 Resolution Authorizing Local Matching Funds**

(Amount should equal Local Funds + Contract Revenue + Other/Advertising Revenue on 5307 Funding Sheet)

RESOLUTION NO. \_\_\_\_\_\_\_\_\_\_\_\_\_

**"SECTION 5307 URBAN AREA PUBLIC TRANSPORTATION"**

WHEREAS, the **(Provider of Matching Funds)** recognizes the need for a public transportation program; and

WHEREAS, the **(Provider of Matching Funds)** recognizes that the requirements to obtain Section 5307 funds from the Alabama Department of Transportation include a local match of 20% for preventive maintenance, planning, and capital expenses; and

WHEREAS, the **(Provider of Matching Funds)** recognizes that the local match will be a shared cost with other participating municipalities being responsible for providing an appropriate allocation of local non-federal funds to secure the operating of the Section 5307 Urbanized Area Public Transportation Program.

NOW, THEREFORE, BE IT RESOLVED, that the **(Provider of Matching Funds)** hereby commits the amount of $\_\_\_\_\_\_\_\_\_\_ as local non-federal match for operations, planning and capital expenditures under the Section 5307 Urbanized Area Public Transportation Program during Fiscal Year 2022.

Passed and adopted this the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Elected Official

ATTEST:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clerk

***Exhibit 14 (continued)***

***14.5 Insert Approved Indirect Cost Rate Proposal, if applicable***

***(No Sample Provided)***

***EXHIBIT 15 - Cost Allocation and Vehicle Depreciation Schedule***

***\*\*Total should equal all admin budgets plus all operations budgets applied for plus depreciation schedule. \*\****

All Section 5307 operators will utilize previously approved cost allocation plan for FY2022. Cost allocation is the agency’s total expenditures divided among three categories: hours, miles and overhead. The hours and miles categories include all budget items that are attributable to vehicle operations and are used to calculate, in part, the “actual cost” to be recovered from all third-party contract and allowable incidental charter services.

Vehicle depreciation is attributable to vehicle operations and must be included in full cost recovery calculations. Vehicle depreciation may be derived through straight-line depreciation methodology (i.e., Total Cost of Vehicle Divided by Service Life of Vehicle = Rate Per Mile) satisfying requirements of the Federal Transit Administration.

***Vehicle depreciation costs must be included in the computation of third-party transportation service rates and incidental charter service rates. Service contracts and incidental charter services must accomplish full cost recovery.***

The overhead category includes all the administration items. It is not necessary to include these overhead costs in third party contracting or incidental charter service rates. Compute fixed cost percentage as described in this Exhibit.

Samples of the following items follow:

Sample Chart of Accounts for “Any County”

Sample Cost Allocation Matrix for “Any County”

Sample Vehicle Depreciation Schedule for “XYZ Transit Agency”

**Use the Excel worksheets provided with the Application to develop the following items:**

1. Vehicle Depreciation Schedule

|  |
| --- |
| **FY2022 VEHICLE DEPRECIATION SCHEDULE** |
| *Depreciation amounts should equal on Chart of Accounts, Cost Allocation Matrix and Vehicle Depreciation Schedule. All vehicles on inventory form should be shown on this form, some will have zero value.* |
|  |  |  |  |  |  |  |  |
| **Applicant Name:**  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Count** | **Vehicle Year** | **Vehicle Description** | **Aggregate Cost of Vehicle** | **Mileage** | **Seating Capacity** | **Useful Life Years** | **Single Year Value** |
| 1 |   |   |  |  |  |  |  |
| 2 |   |   |  |  |  |  |  |
| 3 |   |   |  |  |  |  |  |
| 4 |   |   |  |  |  |  |  |
| 5 |   |   |  |  |  |  |  |
| 6 |   |   |  |  |  |  |  |
| 7 |   |   |  |  |  |  |  |
| 8 |   |   |  |  |  |  |  |
| 9 |   |   |  |  |  |  |  |
| 10 |   |   |  |  |  |  |  |
| 11 |   |   |  |  |  |  |  |
| 12 |   |   |  |  |  |  |  |
| 13 |   |   |  |  |  |  |  |
| 14 |   |   |  |  |  |  |  |
| 15 |   |   |  |  |  |  |  |
| 16 |   |   |  |  |  |  |  |
| 17 |   |   |  |  |  |  |  |
| 18 |   |   |  |  |  |  |  |
| 19 |   |   |  |  |  |  |  |
| 20 |   |   |  |  |  |  |  |
|  |  |  |  |  |  | Total Depreciation |  |
| ALDOT has designated the following useful life standards for rolling stock purchases: |  |
| **Type** | **Vehicle** | **FTA Defined Useful Life** |  |  |
| Bus | 30' Heavy duty transit bus (includes Body on Chassis) | 10 Years or 350,000 Miles |  |  |
| Cutaway | 25' - 35' Light duty (Cutaway Chassis) | 5 Years or 150,000 Miles |  |  |
| 30' - 35' Medium duty (Cutaway Chassis) | 7 Years or 200,000 Miles |  |  |
| Van | Modified Van, High Roof Van (Transit Van) | 5 Years or 100,000 Miles |  |  |
| Minivan | Minivans | 5 Years or 100,000 Miles |  |  |
| Revised 04/20/2022 |  |  |  |  |  |  |

***Exhibit 16 – Section 5307 Authorizing Resolution***

Resolution No. \_\_\_\_\_\_\_\_\_\_\_

Resolution authorizing the filing of an application with Department of Transportation, United States of America, and the Alabama Department of Transportation for an award under the Federal Transit Act.

**WHEREAS**, the Secretary of US DOT Transportation and the Director of the Alabama Department of Transportation are authorized to make awards for a mass transportation Program of Projects and Budgets;

**WHEREAS**, the contract for financial assistance will impose certain obligations upon the Applicant, including the provision of its local share of the project costs in the program;

**WHEREAS**, it is required by the U.S. Department of Transportation in accord with the provisions of Title VI of the Civil Rights Act of 1964, that in connection with the filing of an application for assistance under the Federal Transit Act the applicant gives an assurance that it will comply with Title VI of the Civil Rights Act of 1964 and other pertinent directives and the U.S. Department of Transportation requirements thereunder; and

**WHEREAS**, it is the goal of the Applicant that disadvantaged business enterprises (minority business enterprises and woman business enterprises) be utilized to the fullest extent possible in connection with this/these project(s), and that definite procedures shall be established and administered to ensure that disadvantaged business enterprises (DBEs) shall have the maximum feasible opportunity to compete for contracts and purchase orders when procuring construction contracts, supplies, equipment contracts, or consultant and other services.

**NOW**, THEREFORE, BE IT RESOLVED BY **(Governing Body of Applicant)**

1. That (Title of Designated Official) is authorized to execute and file (an) application(s) on behalf of (Legal Name of Applicant) with the Alabama Department of Transportation to aid in the financing of planning, capital and/or operating assistance projects pursuant to Section 5307 of the Federal Transit Act.
2. That (Title of Designated Official) is authorized to execute and file with such applications an assurance or any other document required by the U.S. Department of Transportation and the Alabama Department of Transportation effectuating the purpose of Title VI of the Civil Rights Act of 1964.
3. That (Title of Designated Official) is authorized to furnish such additional information as the U.S. Department of Transportation and the Alabama Department of Transportation may require in connection with the application for the Program of Projects and Budget.
4. That (Title of Designated Official) is authorized to set forth and execute affirmative disadvantaged business enterprise policies in connection with the Program of Projects and Budget's procurement needs.
5. That (Title of Designated Official) is authorized to execute award agreements on behalf of (Legal Name of Applicant) with the Alabama Department of Transportation for aid in the financing of the planning, capital and/or operating assistance requested in the Program of Projects and Budget.

 **CERTIFICATION**

The undersigned duly qualified and acting (Title of Designated Official) of the (Legal Name of Applicant) certifies that the foregoing is a true and correct copy of a resolution, adopted at a legally convened meeting of the (Governing Body of Applicant) held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

If applicant has an official seal, impress here.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Recording Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Recording Officer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

***Exhibit 17 – COMPLETED APPLICATION***

**Ensure all steps for Grant have been completed.**

**Final Document Developed should have:**

1. Grant Coversheet Attached
2. Application Checklist Correctly Completed and Attached
3. All Application Checklist Questions Answered
4. All Application Checklist Items Requested Are Attached and In Sequence with Question. (Attachments/Supporting documents must be inserted directly after question.)
5. Final Document Pages Are Consecutively Numbered in Whole Numbers and In Sequence of Checklist Including Support Documents.
6. Follow Grant Application Submission Process as indicated in instructions.

**No Instructions or Other Items Not Listed on The Checklist Should Be**

**Submitted Within Final Application Document.**