Lumpkin County, Georgia

Lumpkin County Transit

Agenda Item: **APPLICATION SUBMISSION – GDOT SECTION 5311 –**
November 1, 2016 **RURAL TRANSIT SFY 2018**

Item Description: **APPLICATION SUBMISSION - SFY2018 (July 1, 2017 – June 30, 2018) Lumpkin County Board of Commissioners is required to submit an application each year to the Georgia Department of Transportation (GDOT) for continuation of funding for the 5311 Rural Transit program. The deadline for the application submission is November 29, 2016.**

Exhibit - SECTION 5311 – RURAL TRANSIT BUDGET FOR SFY 2018:

Funding Request Summary:

	Total	Federal	State	Local Match
Operating Budget Total	**$153,762**	**$76,881**	**0**	**$76,881**

Facts & Historical Lumpkin County's Transit Program was created over twenty (20) years ago. For SFY 2016, Transit provided more than 5,200 passenger rides to the citizens of Lumpkin County. Transportation was provided for medical appointments, shopping, personal errands, employment, and school.

Potential Courses of Action:

A. Submit a signed application.

B. Do not submit an application.

Comparison: If Course A is chosen the funding will be secured to continue to operate the transportation for the period July 1, 2017 through June 30, 2018.

If Course B is chosen, the funding will not be secured and the operation of the transportation program will be suspended at the end of the current funding cycle (June 30, 2017).

Recommendation: It is recommended that Course A be chosen – Submit the signed application. The transportation program is valuable to many citizens of Lumpkin County who otherwise would have no viable means of affordable transportation.

Budget Impact: There will be no adverse impact to the 2017 budget as revenue and expenses related to this funding source are included and approved in the budget. Sufficient funds will need to be allocated in the FY 2018 budget to meet the match requirement.

SECTION 5311 - RURAL TRANSIT BUDGET State fiscal year period: July 1, 2017 - June 30, 2018

Subrecipient: Lumpkin County Board of Commissioners

District: 1

Date: 10/20/2016 Deadline to submit budget to GDOT for approval is: October 20, 2016 @ 4:00 p.m.

State Budget Year: SFY18

Operating Period: 1-Jul-2017 To: 30-Jun-2018

Administrative Budget	Cost	*Operating Budget*	Cost	*Capital Budget*	*Qty*	*Cost/Each*	Cost
				33. Standard Van*			$0.00
1. Director Salary	$26,697.00	16. Driver Salary	$50,052.00	34. Conversion Van*			$0.00
2. Supervisor Salary		17. Dispatcher Salary	$29,970.00	35. Conversion Van / Lift*			$0.00
3. Bookkeeper Salary		18. Mechanic Salary		36. Shuttle Van		$41,066.92	$0.00
4. Secretary Salary		19. Fuel	$13,000.00	37. Shuttle Van / Lift		$44,712.92	$0.00
5. Training	$1,000.00	20. Maintenance and repairs	$10,000.00	38. Shuttle Bus**		$46,528.92	$0.00
6. Marketing	$1,365.00	21. Drug/Alcohol Testing	$600.00	39. Shuttle Bus / Lift**		$48,947.92	$0.00
7. Telephone	$600.00	22. License		40. Mobile Radio		$2,000.00	$0.00
8. Office Supplies	$1,000.00	23. Uniforms	$700.00	41. Base Radio		$7,200.00	$0.00
9. Rental Expenses/Equip Rental		24. Fringe Benefits	$31,543.00	42. Computer Hardware		$3,200.00	$0.00
10. Standard Overhead		25. Communications	$600.00	43. 6" Vehicle Lettering		$25.00	$0.00
11. Computer Software	$2,420.00	26. Utilties		44. Vehicle Striping		$265.00	$0.00
		27. RM licensing		45. Other:			$0.00
		28. Other:	$600.00	46. Other:			$0.00
12. Audit	$700.00	29. Other		47. Surveillance cameras			$0.00
13. Indirect Expenses		30. Other		48. Tablets			$0.00
14. Other		31. Other		49. Roof Hatch		$300.00	$0.00
15. Other		32. Other		50. Bike Rack		$1,200.00	$0.00
Administrative Total	$33,782.00	Operating Total	$137,065.00	Capital Total	0		$0.00

Net Operating Summary

Administrative Total / Ratio	$33,782.00	19.77%
Operating Total / Ratio	$137,065.00	80.23%
Total Operating Budget	$170,847.00	
48. LESS: Purchase of Service (POS) Revenue		
49. LESS: Non-5311 Expenses	$0.00	
Public Transportation Budget	$170,847.00	
50. LESS: 10% Fare Revenue	$17,085	
Net Operating Total	$153,762.00	

*Note: These vehicle options are not available

**Note: Shuttle Buses Require CDL w/passenger endorsement

6" Lettering is cost per vehicle for system name/ must equal total number of vehicles requested if selected

Select striping per vehicle if striping is wanted

Subrecipients fill-in green highlighted areas ONLY

Budget Summary	Totals	Federal	State	Local
Operating Budget Total	$153,762.00	$76,881.00		$76,881.00
**Purchase of Service (POS) Local Funds	$32,000.00			
Capital Budget Total	$0.00	$0.00	$0.00	$0.00
Budget Grand Total	***$153,762.00***	***$76,881.00***	***$0.00***	***$76,881.00***

FEDERAL TRANSIT ADMINISTRATION

FY2018 - SECTION 5311 GRANT APPLICATION PACKAGE

DATE OF ISSUANCE: SEPTEMBER 28, 2016

DEADLINE FOR SUBMITTAL: NOVEMBER 29, 2016

Please submit completed grant applications to:

Jamie Cochran, FAICP
GDOT Intermodal Office – Transit Program
600 W. Peachtree Street
Atlanta, Georgia 30308
E-mail: jacochran@dot.ga.gov

PART A: GRANT APPLICANT AND REQUEST INFORMATION

Please complete the information requested in the table below for the organization submitting this FTA grant application package.

FTA Program Funding Request (please check all that apply)	☐ Planning ☐ Capital (small) ☐ Mobility Management ☐ Capital (vehicles) ☐ Operating
Name of Applicant Organization:	
Public Transportation Service Area (i.e. county, city, or region)	
Does Your Organization Currently Operate Public Transportation Services Using FTA Section 5311 Funding?	☐ Yes ☐ No
DUNS Number:	
Mailing Address:	
Name and Title of Person Authorized to Submit the Grant Application	
Address, Phone Number and E-Mail Address for Authorized Person	
Organization Type	☐ County Government ☐ City Government ☐ Regional Commission ☐ MPO ☐ Private Non-Profit Organization
Name, Title, Address, Phone, and E-Mail Address for Chief Executive of the Organization	

PART B: SAMPLE TRANSMITTAL LETTER
(please place on organization's letterhead and include signature of authorized official)

(Date)

Ms. Jamie Cochran, FAICP
Transit Programs Manager – Intermodal Office
Georgia Department of Transportation
One Georgia Center
600 W. Peachtree Street – 9th Floor
Atlanta, Georgia 30308

Dear Ms. Cochran:

The _____ (Applicant's organization) is applying for an FTA Section 5311 grant for _____ (planning, capital, operating, or mobility management) grant in aid in the transit operation of the _____ (transit agency's name). The _____ (planning, capital, operating, or mobility management) assistance requested in this project has been reviewed and approved by the local transportation planning process and is listed in the current Transportation Improvement Program (TIP)/State Transportation Improvement Program (STIP). We are requesting federal assistance in the amount of $ _____ for capital assistance, $ _____ for operating assistance, $ _____ for planning assistance, and $ _____ for mobility management assistance. State assistance in the amount of $ _____ is also requested which will be matched with local assistance in the amount of $ _____.

We attest that all of the information contained in this funding request is correct and that the applicant has the legal, financial, technical, and managerial capacity to carry out the proposed project and maintain the project property.

If you have questions about this request for funding, please contact _____ at _____(phone) or _____ (email).

Sincerely,

(Name of Authorized Official)

(Title of Authorized Official)

PART C: BACKGROUND INFORMATION AND PROJECT DESCRIPTION

Part C-1-1: **Transportation System and Services:**
(please describe your organization's Section 5311 transit system, if any, including total number of vehicles (by GDOT number, passenger capacity, type, and whether wheelchair lift-equipped); listing of all communications equipment (two-way radios), security equipment (cameras), and dispatching equipment (i.e. use of RouteMatch, etc. used; length of time your organization has provided transit services; and description of how services are delivered (i.e. by a third party operator, by own staff, etc.; and your arrangements for maintaining your Section 5311 vehicles. ***If your organization is applying for FTA for a NEW public transportation service****, please describe the area to be served, transit needs to be meet, overall organization for planning and delivering transit services, all agencies/entities providing key transit-related activities, including vehicle operations, vehicle maintenance, reporting, etc.).*

Part C-1-2: *Please complete the following tables with information about your current vehicle fleet.*

Table C-1: Current Vehicle Fleet

DOT Vehicle #	Vehicle Type	Wheelchair-Equipped? (Yes or No)	Mileage	Condition (Excellent, Good, Fair, Poor)

Name and Location of Agency/Organization and Providing Maintenance for Current Section 5311 Vehicles:

_____

_____

How long has this agency/company/organization been maintaining your current vehicle fleet?

_____

Table C-1-3: Current Service Area

Counties Served by Your Transit System	Type of Service Provided (general public service, POS contracts, etc.)	Total Passenger Trips Provided in this Area in FY 16	Total Local Funding Provided for this Area in FY 16

Part C-1-4: **Public Transportation Markets Served:**
(please describe the customer group(s) to be served by the proposed transit funding assistance, including statistics, etc. ***If you are proposing a NEW public transportation service, please describe the potential customer groups to be served by the new service).***

Part C-1-5: **Applicant Eligibility and Capabilities:**
(please describe your organization's eligibility to carry out these activities with the requested FTA funding; and legal, financial technical, and managerial capability to improvement the project and maintain the project property. ***If you are a NEW applicant****, please provide information about the organization structure, board of directors, decision-making process, date/year when the organization was incorporated, types of services provided by the organization, etc.)*

Part C-1-6: **Statement of Public Benefits:**
(please describe the anticipated benefits to the public from the proposed project, including statistical information, where possible)

Part C-1-7: **Project Coordination**
(Please describe how FTA-assisted services are or will be coordinated with social service agencies and private transportation providers in the service area)

Part C-1-8: **Service Initiation and Delivery**
(***if you are a NEW applicant for FTA Section 5311 funding***, *please describe your plan for intiating the service, including major phases and milestones for launching the new service and any other public or private sector partners participating in the launch of the new service).*

PART D: **PROJECT BUDGET**

(please complete the attached Project Budget form, including the number and type of vehicles requested, small capital items to be purchased, and amount for planning, operating, or mobility management assistance. Please insert the ***COMPLETED*** *Project Budget that has already been initially reviewed by your GDOT District Public Transportation Specialist in this grant application).*

INSERT GDOT PROJECT BUDGET FORM HERE

Part D-1: **Sources of Local Funds**

Please list ALL sources of local matching funds, including amounts. The use of purchase of service (POS) contracts as local matching funds should also be identified, along with the source of the funding, total amounts, and all POS rates for service.

Table D-1: Source of Local Matching Funds

Local government general revenues	$
Estimated Revenue from Purchase of Service (POS) Contracts (please show revenue from each POS contract and purchasing agency)	$
Estimated Farebox Revenue	$
Other: please specify -	$
Other: please specify -	$

Please insert a copy of all Purchase of Service (POS) agreements for FY 2017 and FY 2018 in your grant application, including identification of contract rates for services.

Please insert a copy of any Third Party Operator (TPO) agreements for FY 2017 and FY 2018 in your grant application, including the name and contact information for your TPO service provider.

Table D-2: Three-Year Budget Trend

Last FY 2016 (actual)		**Current FY 2017 (this year's budget)**		**Proposed FY 2018 (this application)**	
Federal	$	Federal	$	Federal	$
State	$	State	$	State	$
Local (total including farebox, general fund, and POS revenues)		Local (total including farebox, general fund, and POS revenues)		Local (total including farebox, general fund, and POS revenues)	
Total	**$**	**Total**	**$**	**Total**	**$**

PART E: AUTHORIZING RESOLUTION

(This Authorizing Resolution must be enacted by the governing body of the applicant organization and signed by the Chair of the County Commission, Mayor, or the head of the governing body of other eligible applicant organization, as appropriate. Please make sure the authorizing resolution is properly witnessed and notarized, including the date the notary commission expires. It should also be stamped with the notary seal as well as the seal of the county commission, city, or appropriate applicant jurisdiction. The certificate of the attesting officer must also be completed).

AUTHORIZING RESOLUTION

RESOLUTION AUTHORIZING THE FILING OF AN APPLICATION WITH THE GEORGIA DEPARTMENT OF TRANSPORTATION AND THE UNITED STATES DEPARTMENT OF TRANSPORTATION FOR A GRANT FOR PUBLIC TRANSPORTATION ASSISTANCE UNDER SECTION 5311 OF THE FEDERAL TRANSIT LAWS UNDER CHAPTER 53 OF TITLE 49 U.S.C.

WHEREAS, the Federal Transit Administration and the Georgia Department of Transportation are authorized to make grants to non-urbanized (rural) areas for mass transportation projects; and

WHEREAS, the contract for financial assistance will impose certain obligations upon Applicant, including the provision by it of the local share of project costs; and

WHEREAS, it is required by the United States Department of Transportation and the Georgia 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 under the United States Department of Transportation requirements thereunder; and

NOW THEREFORE, BE IT RESOLVED BY (_____), hereinafter referred to as the "Applicant",

1. That the (_____) hereinafter referred to as the "Official is authorized to execute and file an application on the behalf of the Applicant, a City/County government, with the Georgia Department of Transportation to aid in the financing of public transportation assistance pursuant to Section 5311 of the Federal Transit Act.

2. That the Official is authorized to execute and file such application and assurances or any other document required by the U.S. Department of Transportation and the Georgia Department of Transportation effectuating the purpose of Title VI of the Civil Rights Act of 1964.

3. That the Official is authorized to execute and file all other standard assurances or any other document required by the Georgia Department of Transportation or the U.S. Department of Transportation in connection with the application for public transportation assistance.

4. That the Official is authorized to furnish such additional information as the U.S. Department of Transportation or the Georgia Department of Transportation may require in connection with the application of the project.

5. That the Official is authorized to execute grant contract agreements on behalf of the Applicant with the Georgia Department of Transportation in connection with the application for public transportation assistance.

6. That the applicant while making application to or receiving grants from the Federal Transit Administration will comply with FTA Circular 9040.1G, FTA Certifications and Assurances for Federal Assistance 2018 as listed in this grant application and General Operating Guidelines as illustrated in the *Georgia State Management Plan and Administrative Guide for Rural Public Transportation Programs.*

7. That the applicant has or will have available in the General Fund the required non-Federal funds to meet local share requirements.

APPROVED AND ADOPTED this_____day of _____, 2016.

_____
Authorized Official

_____
Type Name and Title

Signed, sealed and delivered this_____day of _____, 2016 in the presence of

_____
Witness

_____
Notary Public/Notary Seal

CERTIFICATE

The undersigned duly qualified and acting (_____) of (_____) *(Title of Certifying/Attesting Official)(Applicant's Legal Name)* certifies that the foregoing is a true and correct copy of a resolution adopted at a legally convened meeting held on _____, 2016.

_____
Name of Certifying/Attesting Officer

County Seal

_____
Title of Certifying/Attesting Officer

PART F: FTA CERTIFICATIONS AND ASSURANCES

As part of this grant application package, **all** applicants **must include original signed documents** (please see attachment for FY2018 FTA Certifications and Assurances). These documents must be signed by the **Chief Executive** (County Commission Chair or Mayor for local government jurisdictions or Executive Director or similar executive position for other types of organizations) **AND** the organization's **Attorney.**

- **The FTA Certifications and Assurances signature page must be checked (√) that ALL Categories (01-23) are being certified.**
- **(PLEASE INSERT FTA Fiscal Year 2016 Certifications and Assurances Signature Page AND the "Affirmation of Applicant" and Affirmation of Applicant's Attorney" page.**

PART G: **PRIVATE ENTERPRISE COORDINATION (PUBLIC NOTICE)**
(the Applicant **MUST** *publish this notice one time in the local government's legal newspaper. The original legal ad and notarized publisher's affidavit from the newspaper should be included in your grant application (please see next page).*

PUBLIC NOTICE

(Legal Name of City/County/Eligible Organization) is applying for funding assistance under Title 49 U.S.C. Section 5311 of the Federal Transit Act pertaining to rural areas.

The **(Legal Name of City/County/Eligible Organization)** will offer general public transportation to all citizens of **(Legal Name of County/ City)** for any worthwhile purpose, including but not limited to shopping, medical treatment, social services, and other purposes.

The **(Legal Name of City/County/Eligible Organization)** solicits private sector input and participation to assure that private for-profit transportation operators have a fair and timely opportunity to participate in the development of this program.

The **(Legal Name of City/County/Eligible Organization)** also solicits comments and concerns from the general population on local rural public transportation services.

The **(Legal Name of City/County/Eligible Organization)** also solicits comments and concerns from the disabled population and their representatives to assure that issues relating to the disabled are addressed in the service design proposed during the planning process.

Interested persons are invited to request that a public hearing be held to discuss the services being offered or development of the application. Written comments, requests for a public hearing and/or written notice of intent by private for-profit transportation operators to provide or participate in any or all of the above services should be submitted no later than fifteen (15) days from the date of this publication to:

COMMISSION CHAIRMAN/MAYOR/EXECUTIVE OF ELIGIBLE ORGANIZATION

ADDRESS/CITY/STATE/ZIP CODE

PHONE NUMBER

If no response is received within the fifteen (15) days, the Applicant must certify this in the completed grant application (on the organization's letterhead).

If there is a response to the Public Notice, the "Private Enterprise Coordination Certification (please Part G-1 on the next page) MUST BE COMPLETED and included in the completed grant application.

Part G-1: **Private Enterprise Coordination Certification**
(please have the County Commission Chair, Mayor or Executive for the Eligible Organization sign and date this form. This exhibit, the original legal ad appearing in the local newspaper, and notarized publisher's affidavit from the newspaper should be included in the grant application)

List of private providers operating in the service area:

_____

_____

_____

Date(s) Notified (if any received) :

_____

Attach Notice and Affidavit from newspaper or letter sent to private providers.

Last Day to Respond:

_____

(Legal Name of City/County/Eligible Organization) will annually review existing service and any proposed service changes to determine the feasibility of private providers providing the public service. An annual review will be scheduled and a review format will be developed to carry out this task. Private providers will be notified and their interest in the service provision will be assessed. Private providers will be invited to attend and be a part of the annual review process.

_____
Signature of Authorized Officer

_____
Name and Title of Authorized Officer

_____
Date

PART H: **FTA TITLE VI DATA COLLECTION AND REPORTING**
(please complete the following sections pertaining to your organization's Title VI program activities)

A. General Reporting

1. List any lawsuits or complaints filed pertaining to your organization's Section 5311 program.

2. Has your organization applied for any other federal financial assistance for transportation?
____Yes ____ No If so, what kind of financial assistance and from which source?
_____
_____

3. No Civil Rights/Title VI Compliance Review Activity has been conducted in the last three years.

B. Title VI Monitoring Procedures

GDOT requires the following monthly reporting in order to meet FTA National Transit Database requirements. Accurate completion of the following information is critical to continued Section 5311 grant eligibility. Subrecipients must provide this data monthly, including data on population of your service area, percentage of trips made by minority population (compared to the total); types of services provided; days and hours of operation; number and type of vehicles in operation; number/percentage of wheelchair-equipped vehicles total seating capacity; service area; total monthly ridership; transit costs by hour, mile, etc.; number of trips by trip purpose; quality of service; etc. Please seek technical assistance from your public transit coordinator, if you have any questions regarding the definitions or completion of these data.

The Applicant organization agrees to provide this data on a monthly basis in a format designated by GDOT.

_____
Signature of Authorized Official

_____
Date

APPENDIX A

FY2018 SECTION 5311 GRANT APPLICATION CHECKLIST

Part	Name/Description of Item	Completed? (yes or no)
A	Grant Application and Request Information	
B	Transmittal Letter	
C	Background Information and Project Description	
D	Project Budget	
E	Authorizing Resolution	
F	FTA Certifications and Assurances Signature Page	
F-1	Affirmation of Applicant and Applicant's Attorney	
G	Private Enterprise Coordination	
G-1	Private Enterprise Coordination Certificate (if needed)	
H	Title VI Data Collection and Reporting	

Reviewed By:	**District Public Transportation Specialist**	**Date**
	Transit Program Manager	**Date**

APPENDIX B

GDOT DISTRICT PUBLIC TRANSPORTATION SPECIALISTS AND CONTACT INFORMATION

District	Counties	Name/Contact Information
1	Banks, Barrow Clarke, Dawson, Elbert, Forsyth, Franklin, Habersham, Hall, Hart, Jackson, Lumpkin, Madison, Oconee, Rabun, Towns, Stephens, Union, Walton, and White	Jemal Sheppard 2594 Gillsville Highway Gainesville, GA 30507 (770) 531-5738 djsheppard@dot.ga.gov
2	Baldwin, Bleckley, Burke, Columbia, Dodge, Emanuel, Glascock, Greene, Hancock, Jasper, Jefferson, Jenkins, Johnson, Laurens, Lincoln, McDuffie, Morgan, Newton, Oglethorpe, Putnam, Richmond, Taliaferro, Treutlen, Warren, Washington, Wilkes, Wilkinson,	Kristy "Mellie" Pettit 4260 Frontage Road Augusta, GA 30909 (478) 552-4634 kpettit@dot.ga.gov
3	Bibb, Butts, Coweta, Crawford, Dooly, Fayette, Harris, Heard, Henry, Houston, Jones, Lamar, Macon, Meriwether, Marion, Monroe, Muscogee, Peach, Pike, Pulaski, Schley, Spalding, Stewart, Sumter, Talbot, Taylor, Troup, Twiggs, Upson, Webster	Carrie Anderson 115 Transportation Blvd., Thomaston, GA 30286 (706) 646-7570 caanderson@dot.ga.gov
4	Atkinson, Baker, Ben Hill, Berrien, Brooks, Calhoun, Clay, Coffee, Colquitt, Cook, Crisp, Decatur, Dougherty, Early, Echols, Grady, Irwin, Lanier, Lee, Lowndes, Miller, Mitchell, Quitman, Randolph, Seminole, Terrell, Thomas, Tift, Turner, Wilcox, Worth	Donna Stinson 710 West 2nd Street Tifton, GA 31794 (229) 391-5462 dstinson@dot.ga.gov
5	Appling, Bacon, Brantley, Bryan Bulloch, Camden, Candler, Charlton, Chatham, Clinch, Effingham, Evans, Glynn, Jeff Davis, Liberty, Long, McIntosh, Montgomery, Pierce, Screven, Tattnall, Telfair, Toombs, Ware, Wayne, Wheeler	Troy Green 204 N. US Highway 301 Jesup, GA 31546 (912) 530-4372 tgreen@dot.ga.gov
6	Bartow, Catoosa Chattooga, Cherokee, Dade, Fannin, Floyd, Gilmer, Gordon, Haralson, Murray, Paulding, Pickens, Polk, Walker, Whitfield	Freida Black 500 Joe Frank Harris Pkwy. Cartersville, GA 30120 (678) 721-5312 fblack@dot.ga.gov