



Federal Transit Administration (FTA) Section 5310 2022 Call for Projects Informational Meeting

September 26, 2022



Agenda

- Introductions
- Program Introduction
- Funding Summary
- Timeline
- 5310 Requirements
- Spokane Regional Transportation Council – Human Services Transportation Plan
- Eligible projects (Traditional/ Other)
- Applications Requirements
- Procurement Requirements
- Project Scoring Criteria
- Subrecipient Requirements
- 5310 Project Examples
- Questions

Introductions

- STA Staff
 - Madeline Arredondo, Assistant Transit Planner
 - Matt Kenney, Principal Transit Planner
- Meeting attendees
 - When called upon, please unmute yourself and state your name and your agency

Program Introduction

- What is Section 5310 funding?
 - Federal Transit Administration (FTA) allocates funding to the Spokane region annually
 - STA is a designated recipient of these funds and works with non-profits and other agencies
 - Non-profits and other agencies apply for funding for projects that provide access to or expand transportation options for seniors and individuals with disabilities

Section 5310 Funding Summary

- FY22 Federal Section 5310 Apportionment - \$900,419
- In December 2021, the STA Board of Directors approved \$190,000 in STA local match contribution which will reduce the monetary responsibility of awarded agencies to just 10% for all projects

Funding Source	Amount Available
FY22 Apportionment	\$602,811
FY21 Unprogrammed Funds	\$297,608
STA Near Term Investment (Local Match Contribution)	\$190,000
Total Federal Funding	\$900,419
Total Funding Available	\$1,090,419

2022 Section 5310 Call for Projects Timeline

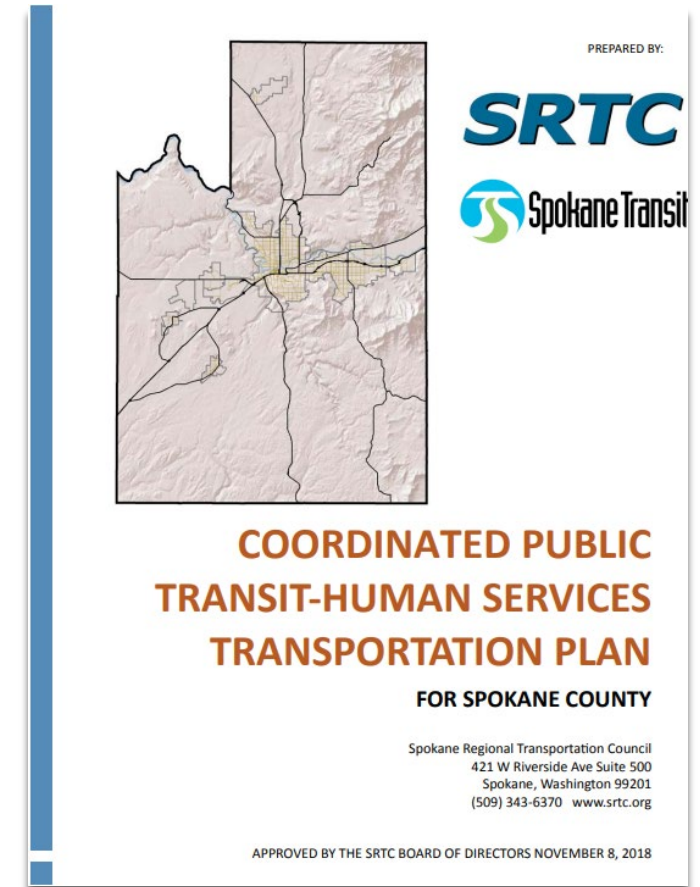
Date	Action
September 12, 2022	Issue Call for Projects (Posted on STA and SRTC websites, published in Spokesman Review, emailed to non-profit organizations)
September 26, 2022	Informational meeting for interested applicants
October 11, 2022	Project applications due
November 30, 2022	Prioritized funding list presented to P&D Committee for review and approval
December 15, 2022	STA Board acts on P&D Committee recommended project list
2023	FTA approval - Contracts executed with Subrecipients

FTA Section 5310 Requirements

- Projects must be identified in the Spokane Regional Transportation Council Human Services Coordinated Transportation Plan (HSTP)
- Projects must be targeted for seniors and people with disabilities
- Projects must begin or end in the Spokane urbanized area
- Must have measurable benefit
- Local governments/municipal corporations must be approved by the State of Washington to provide human services transportation

Spokane Regional Transportation Council - HSTP

- Current strategies to address regional needs
 - Maintaining existing transportation services
 - Service provider/public coordination
 - Public education
 - Integration with Spokane Transit
 - Special needs groups
 - Rider experience/ facilities
 - Technology
 - New/ expanded service
- <https://www.srtc.org/human-services-transportation-plan/>



Eligible Traditional/Capital Projects

- FTA requires that a minimum of 55% of the federal apportionment must be spent on Traditional projects
 - Purchase New ADA Accessible Vehicle
 - ADA Improvements such as, sidewalks, curb ramps, signage, etc.
 - Typically done by a city or county approved to do so by the State
 - Support for Mobility Management and Coordination Programs
 - Mobility Management programs consist of short-range planning, management activities, and projects for improving coordination among public transportation service providers

Eligible Other/Operating Projects

- FTA requires up to 45% of the federal apportionment may be spent on Other projects
 - Paid or Volunteer driver programs that provide transportation to seniors and/or people with disabilities
 - Travel Training programs for riding fixed-route public transit, aimed at seniors or disabled individuals who currently rely on Paratransit or similar transportation services
 - Pay operating expenses for transportation for seniors and individuals with disabilities

Application Requirements

- Complete Application Forms
- Non-profit Status Documentation
 - IRS determination letter
- Most recent financial audit report
- Title VI Plan
- Signed Certifications
- Budget Narrative (Worksheet provided)
- Risk Assessment Questionnaire
 - Policies
- Logic Model (Sample and description provided)
- Procurement Policy

Procurement Requirements

- All procurements (vehicles, equipment, goods, etc.) will be required to meet federal requirements
- STA will procure vehicles on behalf of subrecipients
- Subrecipients will be required to submit a procurement policy
- It is the responsibility of the subrecipient to read these requirements thoroughly prior to executing your agreement

7. VEHICLES

- A. Procurement. To assist the Subrecipient in complying with all procurement regulations required under the Grant, STA will procure the vehicle on behalf of the Subrecipient. STA shall work with the Subrecipient to select the appropriate vehicle, including necessary options and/or equipment, to meet the needs of the Subrecipient. Prior to placing any vehicle order, the Subrecipient shall provide STA with written approval of the configuration and options selected for the Vehicle.

7. PROCUREMENT

The Subrecipient shall make purchases of any incidental goods or supplies essential to this Agreement through procurement procedures approved in advance by STA and consistent with the following provisions:

- A. General Procurement Requirements. The Subrecipient shall comply with third-party procurement requirements of 49 USC chapter 53 and other applicable Federal laws in effect now or as subsequently enacted; with the DOT third-party procurement regulations of 2 CFR Part 200 and 2 CFR part 1201; and other applicable Federal regulations pertaining to third-party procurements and subsequent amendments thereto. The Subrecipient shall also comply with the provisions of FTA Circular 4220.1F, *Third Party Contracting Guidance*, March 18, 2013 and any later revision thereto, except to the extent FTA determines otherwise in writing, which by this reference are incorporated herein; and any reference therein to "Grantee" shall mean Subrecipient.
- B. Full and Open Competition. In accordance with 49 USC § 5325(a), the Subrecipient agrees to conduct all procurement transactions in a manner that provides full and open competition as determined by FTA.
- C. Preference for United States Products and Services. To the extent applicable, the Subrecipient agrees to comply with the following U.S. preference requirements:
- 1) Buy America. The Subrecipient agrees to comply with 49 USC § 5323(j), with FTA regulations, *Buy America Requirements*, 49 CFR Part 661, and any later amendments thereto.
 - 2) Cargo Preference - Use of United States-Flag Vessels. The Subrecipient agrees to comply with 46 USC § 55305 and U.S. Maritime Administration regulations, *Cargo Preference - U.S.-Flag Vessels*, 46 CFR Part 381, to the extent those regulations apply to the Project.
 - 3) Fly America. The Subrecipient understands and agrees that the Federal Government will not participate in the costs of international air transportation of any persons involved in or property acquired for the Project unless that air transportation is provided by U.S.-flag air carriers to the extent service by U.S.-flag air carriers is available, in accordance with the International Air Transportation Fair Competitive Practices Act of 1974, as amended, 49 USC § 40118, and with GSA regulations, *Use of United States Flag Air Carriers*, 41 CFR §§ 301-10.131 through 301-10.143.
- D. Preference for Recycled Products. To the extent applicable, the Subrecipient agrees to comply with EPA *Comprehensive Procurement Guideline for Products Containing Recovered Materials*, 40 CFR Part 247, which implements section 6002 of the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act of 1976, as amended, 42 USC § 6962. Accordingly, the Subrecipient agrees to provide a competitive preference for products and services that conserve natural resources, protect the environment, and are energy efficient, except to the extent that the Federal Government determines otherwise in writing.
- E. Geographic Restrictions. The Subrecipient agrees to not use any state or local geographic preference, except those expressly mandated or encouraged by federal statute or as permitted by FTA.
- F. Government Orders. In case any lawful government authority shall make any order with respect to the Project or Project Equipment, or any part thereof, or the Parties hereto or either Party, the Subrecipient shall cooperate with STA in carrying out such order and will arrange its operation and business so as to enable STA to comply with the terms of the order.

Project Scoring Criteria

Section 5310 Grant Application Scoring Criteria

Category	Points Possible	Points Awarded
Risk Assessment (Scored by staff)	10	
Applications Completeness (Scored by staff)	10	
Proposed Service Improvements	25	
Regional Transportation Needs	10	
Performance Measures	20	
Management	10	
Financials	15	
Total	100	

Subrecipient Requirements

- Quarterly Progress Reports
- Monthly Beneficiary Data Reports
- Accounting Records
- Title VI Plan (Updated every 3 years)
- Cost allocation plans must be submitted annually
- Current Audit must be submitted annually
- Backup detail for all invoices including methodology (Billing SOP)
- Project Closeout

Here to help!



- Please do not be afraid to ask questions or ask for help!
 - Eligibility questions, service area, data gathering, local match requirements, federal requirements, etc.
- We look forward to seeing your project applications!

5310 Operating/Mobility Management Project Examples



Photo description: SNAP volunteer driver Jennifer with project recipient Mary at Mary's residence before being transported to a vital medical appointment.



Photo description: Mobility Managers Holly and Janine give out information for travel training and bus fare assistance.



Photo description: Arc of Spokane staff member Alisha assists a project participant to exit a vehicle.

5310 Capital (Vehicle Purchases) Project Examples



For more information on Section 5310 projects accomplishments, activities, service improvements, and ridership please take a look at the [FTA Section 5310 FY21 Annual Report](#) found on STA's Section 5310 webpage.

Questions?

Presentation materials can be found on STA's Section 5310 webpage at:

<https://www.spokanetransit.com/about-sta/section-5310-program>

Thank you!

Contact information:

Section5310@spokanetransit.com

Madeline Arredondo, Assistant Transit Planner

509.325.6059



Spokane Transit Authority

Application for Federal Transit Administration Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities Funding

Project Title:

Important: *FTA funds require a large degree of dedication to detail and reporting, along with very specific requirements. Please review the documents associated with this call for projects to determine if your agency is able and willing to accept the terms and conditions provided.*

*Applications are due by **5:00 PM on October 11, 2022**; late applications will not be accepted.
Please send the application and copies of the required documents to:*

*Spokane Transit Authority
Attn: Madeline Arredondo
1230 W Boone Ave.
Spokane, WA 99201
or electronically to:
Section5310@spokanetransit.com*

2022 Call for Project Details

Spokane Transit Authority (STA) is issuing a call for projects that will be funded with Federal Transit Administration (FTA) Section 5310 (Enhanced Mobility for Seniors and Individuals with Disabilities) Program funding and STA local contributions. There is approximately **\$1,090,419** in Section 5310 federal funds and STA local funds available for this call for projects (see table below for specific grant sources and amounts).

Projects that are selected to receive funding must primarily benefit seniors and individuals with disabilities as well as support strategies currently identified in the Spokane County Coordinated Public Transit-Human Services Transportation Plan (<https://www.srtc.org/human-services-transportation-plan/>). **See Attachment A for a complete list of eligible capital projects.**

Of the total 2022 apportionment funds available under Section 5310, a minimum of 55% must be spent on “Traditional” capital projects and maximum of 45% of funds can be spent on “Other” operating projects. In the event that there are no eligible applicants available to provide services, STA may certify this scenario to FTA. STA would then allocate available 5310 apportionments to fund complementary STA Paratransit capital projects.

2022 Call for Projects Funding Table

Funding Source	Amount Available
FY22 Apportionment	\$602,811
FY21 Unprogrammed Funds	\$297,608
STA Near Term Investment (Local Match Contribution)	\$190,000
Total Federal Funding	\$900,419
Total Funding Available	\$1,090,419

Project applications are due by **Tuesday, October 11, 2022, at 5:00 PM. Applications received after this date and time will not be considered. Incomplete project applications will also not be considered.** Applications may be sent via USPS, UPS, or FedEx to: Madeline Arredondo, Spokane Transit, 1230 W Boone Avenue, Spokane, WA 99201 or submitted electronically to Section5310@spokanetransit.com. Mailed applications must be postmarked on or before October 11, 2022. Applications sent by fax will not be accepted; however, applications dropped off in person will be accepted.

An informational meeting will be held on Monday, September 26, 2022 (2pm-3pm) via WebEx to provide applicants the opportunity to ask questions about program and project eligibility requirements. Meeting information will be posted on the Spokane Transit Authority website at <https://www.spokanetransit.com/about-sta/section-5310-program>. Persons requesting accommodations are encouraged to contact Dana, Infalt, Acting Community Ombudsman and Accessibility Officer at (509) 325-6096 at least 48 hours in advance of the meeting.

Eligible project applicants can be either private, non-profit organizations, local governments, or other providers of public transportation that provide transportation services for seniors and individuals with disabilities. To be considered a provider of public transportation, an agency must provide “shared-ride” transportation, which means that it may transport two or more passengers in the same vehicle who are otherwise not travelling

together (as opposed to exclusive-ride taxi services). Providers of public transportation can be either public or private agencies.

The evaluations committee, comprised of STA, WSDOT, and SRTC staff, will evaluate submitted projects and a final list of recommended projects will be forwarded to the STA Board of Directors for approval. More information on project scoring and evaluation criteria can be found in STA's [Program Management Plan \(PMP\)](#) for Section 5310.

Spokane Transit assures nondiscrimination in accordance with Title VI of the Civil Rights Act of 1964. For more information, visit www.spokanetransit.com. Upon request, alternative formats of this information will be produced for individuals who are disabled. For accommodations, please call 325-6096 (TTY Relay 711) at least forty-eight (48) hours in advance.

Non-Discrimination Notice

If information is needed in another language, contact (509) 325-6096.

Si necesita información en otro idioma, comuníquese al (509) 325-6096.

Для получения информации на другом языке звоните по тел. (509) 325-6096.

Nếu quý vị cần thông tin bằng một ngôn ngữ khác, xin vui lòng gọi số (509) 325-6096.

Section I: Agency Contact Information and Project Summary

Legal Name of Agency:	
Address:	
Federal Tax ID Number:	
UEI Number (Unique Entity Identifier):	
WA UBI Number (Unified Business Identifier):	
Contact Person (for questions related to the application):	
Phone Number:	
E-mail Address:	

1. Please identify your agency:

- ☐ Local Government/Municipal Corporation (approved by the State of Washington to provide human services transportation)
- ☐ Operator of public transportation services (private or publicly owned)
- ☐ Private, non-profit organization

2. Type of Application (For a complete list of eligible projects, see Attachment A):

- ☐ Traditional Project.

Check the appropriate project type:

- ☐ Purchase New ADA Accessible Vehicle (please complete sections below)

- Size of vehicle
- Fuel type
- Vehicle make and model

- ☐ Acquisition of transportation services under a contract, including operating projects
- ☐ ADA Improvements such as, sidewalks, curb ramps, signage, etc.
- ☐ Support for Mobility Management and Coordination Programs
- ☐ Other eligible capital project, please list:

- ☐ Other Project (Projects must not duplicate existing service provided by Spokane Transit.)

Check the appropriate project type:

- ☐ Support for paid or Volunteer driver programs that provide transportation to seniors and/or people with disabilities.
- ☐ Travel Training programs for riding fixed-route public transit, aimed at seniors or disabled individuals who currently rely on Paratransit or similar transportation services.
- ☐ Other eligible operating project, please list:

3. What is the total cost of this project?

4. Please indicate how much Section 5310 funding you are requesting for this project:

Section II: Project Information and Levels of Service

1. Please provide a detailed description of your project, and the population it will serve.
2. How will this specific project improve transportation access to seniors and/or individuals with disabilities? Please identify barriers in providing transportation this projects seeks to overcome.
3. Please identify the needs and/or strategies listed in the Spokane County Coordinated Transit-Human Services Transportation Plan (HSTP) that your project supports.
4. How many seniors and/or individuals with disabilities will be served as a result of this specific project. Describe the methodology used to calculate this number which will also be used in your logic model.
5. Is this project contingent upon other funding commitments? If yes, list any interrelated projects that you are seeking funding for, either through this call for projects or through applications submitted to (or planned to submit to) other funding sources that are necessary to implement the requested project? (Include a table with the following headings which list the sources and status of other funding commitments – Table headings: plan to apply, applied for, funds awarded, funds secured).
6. Is this funding request scalable (can the project be completed with less than the requested amount)? If so, what changes would need to be made to this application?

Project Quarterly Performance Measures:

For Section 5310 capital projects, as part of federal regulations, agencies are required to report the number of seniors or individuals with disabilities that will benefit from projects or services financed by federal funds. For example, the number of rides (one-way trips) that would be provided annually on vehicles and/or services financed by Section 5310 funds. Applicants applying for ADA improvements must report what additions or changes will be made to the physical infrastructure (transportation facilities, sidewalks, etc.) because of this project. Different measures may be applied depending on the project.

How does your agency plan to gather this federally required data?

Section III: Project Costs

Administrative Expenses

If your agency intends on using an indirect cost rate, please indicate the type below:

- ☐ Federally approved indirect cost plan
- ☐ 10% de minimis rate(your agency has never used a federally approved rate)
- ☐ No indirect costs will apply to this project

If your agency will use an indirect cost rate, please identify the rate and total expenditure in the budget table below. *(Please note that STA will **not** accept indirect cost allocation plans that are not approved in writing, by a federal agency).*

Budget Table

Funding Sources Budget Breakdown			
Source	Source Description	Amount	Source Status
FTA Grant	STA Section 5310 Funds		Application Submitted
Funding Sources Total		\$	-
In-Kind Contributions			
Volunteer hours			
Milage Reimbursement			
In-Kind Total		\$	-
Funding Sources Grand Total		\$	-

Project Budget				
Line Item	Description	5310 Amount	Other Amount	Other Source
Administrative Cost Breakdown				
Payroll/Benefits				
Insurance, services, or supplies (IT, rent, supplies, telecommunications, etc.)				
Other (please specify)				
Admin. Cost Total		\$ -	\$ -	
Operation Costs Breakdown				
Contracted services				
Materials and supplies				
Fuel, Maintenance (oil change, tire rotation, lift maint., etc.)				
Payroll/Benefits (Position, Direct/Contracted staff, FTE, etc.)				
Occupancy				
Phone/Internet				
Other (please specify)				
Operation Costs Total		\$ -	\$ -	
Capital Costs Breakdown				
Software/Hardware				
Equipment				
Vehicle Purchase(s)				
Other (please specify)				
Capital Costs Total		\$ -	\$ -	
Construction Costs Breakdown				
Other (please specify)				
Other (please specify)				
Construction Costs Total		\$ -	\$ -	

Total Project Cost			
5310/Other Total		\$ -	\$ -
Project Cost Grand Total		\$	-

Applicants must provide a budget narrative worksheet to reflect line items included in the Project Budget Table.

Section IV: Agency Experience and Levels of Service

1. Briefly describe your agency and the experience it has providing passenger transportation services.
2. What is your agency's plan to continue the project after the Section 5310 funding expires?

Section V: Finishing Up

Attachments Checklist: Please include the following items with your grant application.
(Applications without required attachments will not be accepted)

- ☐ Complete Application Form
- ☐ Non-profit Status Documentation (IRS determination letter or articles of incorporation)
- ☐ Most recent financial audit report
- ☐ Current Title VI Plan
- ☐ Signed Certifications
- ☐ Budget Narrative (Worksheet provided)
- ☐ Risk Assessment Questionnaire and policies
- ☐ Logic Model (Sample and description provided)

Application Authority

- ☐ I certify, to the best of my knowledge, that the information in this application is true and accurate and that this organization has the necessary fiscal, data collection, and managerial capability to implement and manage the projects associated with this application.
- ☐ My agency agrees to follow STA and federal procurement and grant management requirements of 49 USC 5310 and will submit my agency's procurement policy prior to purchasing any project equipment
- ☐ I understand that a signed 5310 Subrecipient Agreement with STA will be required as a condition of receiving funds.
- ☐ My agency agrees to develop and submit a Title VI Plan that meets the general requirements as described in FTA Circular 47.021B. The Title VI Plan must be submitted to STA within 90 days of an executed agreement. Funds cannot be reimbursed until Title VI Plan is deemed in compliance.
- ☐ I certify that my agency will submit monthly, quarterly, and annual reports as required by the 5310 Subrecipient Agreement. The quarterly reports are due 20 days following the end of each quarter, as follows, Quarter 1 report is due January 20th, Quarter 2 is due April 20th, Quarter 3 is due July 20th, and Quarter 4 and the annual report are due on or before October 20th.
- ☐ Your project will follow all applicable STA and federal procurement requirements, a copy of the requirements will be available at the informational meeting.

All six boxes above must be checked, or your application may not be considered for funding.

Applicant Certification

The Applicant affirms the individual executing this application has been granted the authority to do so, and by their signature, affirms the Applicant will comply with the terms and conditions of this application.

Authorized Signature

Date

Printed Name

Title

The application must be signed by an individual authorized to legally bind the Applicant.

LOBBYING RESTRICTION CERTIFICATION

Certification for Contracts, Grants, Loans and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for making lobbying contacts to an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form--LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions [as amended by "Government wide Guidance for New Restrictions on Lobbying," 61 Fed. Reg. 1413 (1/19/96). Note: Language in paragraph (2) herein has been modified in accordance with Section 10 of the Lobbying Disclosure Act of 1995 (P.L. 104-65, to be codified at 2 U.S.C. 1601, *et seq.*)]
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31, U.S.C. § 1352 (as amended by the Lobbying Disclosure Act of 1995). Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

[Note: Pursuant to 31 U.S.C. § 1352(c)(1)-(2)(A), any person who makes a prohibited expenditure or fails to file or amend a required certification or disclosure form shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such expenditure or failure.]

The Applicant, _____, certifies or affirms the truthfulness and accuracy of each statement of its certification and disclosure, if any. In addition, the Contractor understands and agrees that the provisions of 31 U.S.C. A 3801, *et seq.*, apply to this certification and disclosure, if any.

Applicant Name: _____

Authorized Signature: _____

Printed Name and Title: _____

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION IN A LOWER TIER COVERED TRANSACTION

The Applicant shall comply and facilitate compliance with US DOT regulations, "Nonprocurement Suspension and Debarment", 2 CFR part 1200, which adopts and supplements the U.S. Office of Management and Budget (US OMB) "Guidelines to Agencies on Governmentwide Debarment and Suspension (Nonprocurement)", 2 CFR part 180. These provisions apply to each contract at any tier of \$25,000 or more, and to each contract at any tier for a federally required audit (irrespective of the contract amount), and to each contract at any tier that must be approved by an FTA official irrespective of the contract amount. As such, the Applicant shall verify that its principals, affiliates, and subcontractors are eligible to participate in this federally funded Contract and are not presently declared by any Federal department or agency to be:

- a) Debarred from participation in any federally assisted Award;
- b) Suspended from participation in any federally assisted Award;
- c) Proposed for debarment from participation in any federally assisted Award;
- d) Declared ineligible to participate in any federally assisted Award;
- e) Voluntarily excluded from participation in any federally assisted Award; or
- f) Disqualified from participation in any federally assisted Award.

By signing below and submitting its application, the Applicant certifies as follows:

The certification in this clause is a material representation of fact relied upon by STA. If it is later determined by STA that the Bidder knowingly rendered an erroneous certification, in addition to remedies available to STA, the Federal Government may pursue available remedies, including but not limited to suspension and/or debarment. The Applicant agrees to comply with the requirements of 2 CFR part 180, subpart C, as supplemented by 2 CFR part 1200, while its Application is valid and throughout the period of any Contract that may arise from its Application. The Applicant further agrees to include a provision requiring such compliance in its lower tier covered transactions.

Applicant Name: _____

Applicant Address: _____

Telephone: _____ Fax: _____

Authorized Signature: _____ Date: _____

Printed Name and Title: _____

DISADVANTAGED BUSINESS ENTERPRISE (DBE) PARTICIPATION

DBE PARTICIPATION. STA is committed to ensuring that all firms regardless of race, color, sex or national origin have equal opportunity to participate in STA contracts. Therefore, STA has established an annual agency goal for DBE participation in its contracting opportunities. It shall be understood that no specific goal has been assigned to this contract; however, contractors and subcontractors are required to comply with the following:

1. **Non-discrimination Assurances.** The Applicant shall not discriminate on the basis of race, color, national origin or sex in the performance of this Contract. The Applicant shall carry out applicable requirements of 49 CFR Part 26 in the award and administration of this Contract. Failure by the Applicant to carry out these requirements is a material breach of this Contract, which may result in the termination of this Contract or such other remedy as STA deems appropriate. Each subcontract the Applicant signs with a subcontractor must include the assurance in this paragraph (see 49 CFR 26.13(b)). Violation of these requirements is a material breach of this contract, which may result in the termination of this contract or other such remedy, as STA deems appropriate.
2. **Prompt Payment.** The Applicant is required to pay its subcontractors performing work related to this Contract for satisfactory performance of that work no later than thirty (30) days after the Applicant's receipt of payment for that work from STA. In addition, the Applicant may not hold retainage from its subcontractors.
3. **DBE Participant List.** As required by 49 CFR Part 26.11, STA is required to create and maintain a bidders list of all firms bidding on prime contracts and bidding or quoting subcontracts on Department of Transportation, Federal Transit Administration-assisted contracts. STA is also committed to providing equal access to small business concerns in bidding on STA's contracting opportunities. The U.S. Small Business Administration (SBA) defines a "small business" in terms of the number of employees over the past year or the average annual receipts over the past three years. This standard varies by industry. STA will use size standards established by the SBA to determine small business eligibility.

To comply with this requirement, STA requests the Applicant provide the information required by the Federal Transit Administration on page two of this certification. **This information is not used in determining award of contract or in evaluating your Proposal in any way. Providing this information is voluntary.**

A copy of 49 CFR Part 26 may be found at www.ecfr.gov or by contacting:

Jordan Hayes-Horton
DBE Liaison
Spokane Transit Authority
1230 W. Boone Ave.
Spokane, WA 99201
(509) 325-6032
jhorton@spokanetransit.com

APPLICANT DBE INFORMATION

Applicant Name: _____

Applicant Address: _____

North American Industry Classification System (NAICS) Code: _____

To determine your industry NAICS code go to www.census.gov/eos/www/naics and enter a keyword of your business classification in the box directly above the **2012** NAICS Search on the left side of the page and choose from the selection of codes that best matches your business classification.

Type of Business: _____

Telephone Number: _____ Email Address: _____

Authorized Signature: _____ Date: _____

Printed Name and Title: _____

- Is your firm a Disadvantaged Business Enterprise (DBE) registered with the State of Washington Office of Minority and Women's Business Enterprises?

☐ Yes ☐ No

- How long has your firm been in business? _____

- Please check the box that describes your total gross annual receipts:

- | | |
|--|--|
| <input type="checkbox"/> less than \$500,000 | <input type="checkbox"/> \$3,000,001 - \$3,500,000 |
| <input type="checkbox"/> \$500,000 - \$1,000,000 | <input type="checkbox"/> \$3,500,001 - \$4,000,000 |
| <input type="checkbox"/> \$1,000,001 - \$1,500,000 | <input type="checkbox"/> \$4,000,001 - \$4,500,000 |
| <input type="checkbox"/> \$1,500,001 - \$2,000,000 | <input type="checkbox"/> \$4,500,001 - \$5,000,000 |
| <input type="checkbox"/> \$2,000,001 - \$2,500,000 | <input type="checkbox"/> \$5,000,001 - \$5,500,000 |
| <input type="checkbox"/> \$2,500,001 - \$3,000,000 | <input type="checkbox"/> greater than \$5,500,000 |

- Is your business a small business as defined by the SBA's definition of a small business concern? To determine if your business is considered a small business by SBA go to www.sba.gov/size-standards-tool, enter your six-digit NAICS Code and follow the 3-step process.

☐ Yes ☐ No

DBE SUBCONTRACTORS

Name, Address, UBI of DBE Subcontractor	Portion of Work to be performed.	\$ Amount

Authorized Signature: _____

Printed Name and Title: _____

Attachment A

List of Eligible “Traditional” Capital Projects for Section 5310 Funding

The projects listed are all the types of public transportation capital projects eligible for funding under the Section 5310 grant program. Please note that, in order to be eligible for Section 5310 funding, capital projects must target the needs of seniors or individuals with disabilities. This definition is from 49 USC 5302.

The term “capital project” means a project for:

- Acquiring, constructing, supervising, or inspecting equipment or a facility for use in public transportation, expenses incidental to the acquisition or construction (including designing, engineering, location surveying, mapping, and acquiring rights-of-way), payments of the capital portions of rail trackage rights agreements, transit-related intelligent transportation systems, relocation assistance, acquiring replacement housing sites, and acquiring, constructing, relocating, and rehabilitating replacement housing;
- Rehabilitating a bus;
- Remanufacturing a bus;
- Overhauling rail rolling stock;
- Preventative maintenance;
- Leasing equipment or a facility for use in public transportation, subject to regulations that the Secretary (of Transportation) prescribes limiting the leasing arrangements to those that are more cost-effective than purchase or construction;
- A public transportation improvement that enhances economic development or incorporates private investment, including commercial and residential development, pedestrian and bicycle access to a public transportation facility, construction, renovation, and improvement of intercity bus and intercity rail stations and terminals, and the renovation and improvement of historic transportation facilities
- The introduction of a new technology, through innovative and improved products, into public transportation;
- The provision of non-fixed route paratransit transportation services in accordance with Section 223 of the Americans with Disabilities Act (ADA) (42 USC 12143), but only for grant recipients that are in compliance with applicable requirements of that Act, including both fixed route and demand responsive service, and only for amounts not to exceed 10 percent of such recipient’s annual formula apportionment under 49 USC Sections 5307 and 5311;
- Crime prevention and security including:
 - Projects to refine and develop security and emergency response plans;
 - Projects aimed at detecting chemical and biological agents in public transportation;
 - The conduct of emergency response drills with public transportation agencies and local first response agencies; and
 - Security training for public transportation employees; but
 - Excluding all expenses related to operations, other than such expenses incurred conducting activities described above;
- Establishing a debt service reserve, made up of deposits with a bondholder’s trustee, to ensure the timely payment of principal interest on bonds issued by a grant recipient to finance an eligible project under this chapter; or
- Mobility management:
 - Consisting of short-range planning and management activities and projects for improving coordination among public transportation and other transportation service providers carried out by a

recipient or subrecipient through an agreement entered into with a person, including a government entity, under this chapter (other than 49 USC Section 5309); but Excluding operating public transportation service

List of Eligible “Other” Operating Projects for Section 5310 Funding

- Public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable;
- Public transportation projects that exceed the requirements of ADA
 - Enhancing paratransit beyond minimum requirements of ADA
 - Expansion of current service parameters, expansion of current hours of operation for ADA paratransit services, incremental cost of providing same day service
 - Acquisition of vehicles and equipment designed to accommodate mobility aids that exceed the dimensions and weight ratings established for wheelchairs under ADA regulations...
 - Installation of additional securement locations in public buses beyond what is required by ADA
 - Feeder services (transit service that provides access) to commuter rail, commuter bus, intercity rail, and intercity bus stations for which complementary paratransit service is not required under ADA
- Public transportation projects (capital and operating) that improve accessibility to fixed-route services and decrease reliance on paratransit service
 - Making accessibility improvements to transit and intermodal stations not designated as key stations
 - Travel training programs for individual users on awareness, knowledge, and skills of public transportation and alternative transportation options available in their communities. Includes travel instruction and travel training services
- Public transportation alternatives that assist seniors and individuals with disabilities with transportation
 - Purchasing vehicles to support accessible taxi, ride-sharing, and/or vanpooling programs
 - Supporting administration and expenses related to voucher programs for transportation services offered by human service providers
 - Supporting volunteer driver and aide programs—costs associated with administration, management of driver recruitment, safety, background checks, scheduling, coordination with passengers, other related program functions, mileage reimbursement, and insurance associated with volunteer driver programs

2022 Section 5310 Budget Narrative Worksheet

Purpose

The Budget Detail Worksheet will be used to assist applicants in the preparation of the budget and budget narrative to ensure that only costs that are allowable be charged to the federal award.

Applicants must complete and submit a detailed budget narrative that reflects the amounts included in the Project Budget table of the application. The budget narrative must provide justification, in detail, the total amount needed to implement the project your organization is proposing.

All funds requested must support participants directly served by this project. Projects that receive Section 5310 funding will be required to provide sufficient documentation (established through billing invoices and/or quarterly progress reports) to establish direct benefit to seniors and persons with disabilities.

For each line item listed with a dollar figure provide a brief narrative detailing: (a) how the item relates to the proposed service and (b) the method used to determine the cost. The budget narrative should reflect the budget table in the application and provide information regarding the basis of estimation for each line item, including reference to sources used to substantiate the cost estimate (e.g., organization's policy, payroll document, and vendor quotes, etc.).

Personnel

List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization.

Name/Position

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

Note: Personnel costs are only allowable for direct management and administration of the grant award, i.e., service delivery and preparation of mandatory post-award reports.

TOTAL _____

Fringe Benefits

Fringe benefits should be based on actual known costs or an established formula. Fringe benefits are for the personnel listed in budget category and only for the percentage of time devoted to the project (based on approved time records/sheets).

Fringe Category	Rate
Payroll Taxes	X%
FICA	X%
Insurance	X%
Social Security	X%
Total	X%

Name/Position

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

TOTAL _____

Mileage/Travel

Itemize mileage and travel expenses of project personnel by purpose (e.g., staff/volunteer mileage reimbursement, employee training, community meeting etc.). Show the basis of computation (e.g., two employees to 3-day (specify) training at \$X airfare, \$X lodging, \$X subsistence). Identify the location of travel and purpose (to include specific conference agendas, fees, relevance), if known.

Purpose of Travel

Location

Item

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

TOTAL _____

Equipment

List equipment and supplies (including rolling stock) items that are to be purchased. Rolling stock describes equipment that is used to transport passengers and includes buses, vans, and cars. Light duty vehicles, such as vans, sedans, and pick-up trucks, employed in administrative and maintenance purposes are considered equipment. Explain how the equipment is necessary for the success of the project. Attach a narrative describing the procurement method to be used.

Item

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

TOTAL _____

Supplies

List items by type (office supplies, postage, training materials, copying paper, and other expendable items such as books and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project.

Supply Items

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

TOTAL _____

Other Costs

List items (e.g., construction costs, rent, telephone) by major type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, and provide a monthly rental cost and how many months to rent.

Description

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

Important Note: If applicable to the project, construction costs should be included in this section of the Budget Detail Worksheet.

TOTAL _____

Indirect Costs

List indirect costs by type (federally approved indirect cost plan or de minimis indirect cost rate). For example, provide the cost allocation plan or indirect cost plan rate that has been approved, in writing, by a federal agency and multiply that by the total direct costs of your project. If using a federally approved rate, please attach the written approval to this worksheet. You may also use a de minimis rate (typically 10%) if your agency has never used a federally approved rate.

Description

Computation

Cost

Budget Narrative: Provide a narrative budget justification for each of the budget items identified.

TOTAL _____

Budget Summary

When you have completed the budget worksheet, transfer the totals for each category to the spaces below. Compute the total direct costs and the total project costs. Indicate the amount of Federal funds requested and the amount of non-Federal funds that will support the project. *Under Section F list any cost not captured or categorized in Sections A-E.*

Budget Category	Federal Amount Requested	Non-Federal Amount (support)
A. Personnel	_____	_____
B. Fringe Benefits	_____	_____
C. Travel	_____	_____
D. Equipment	_____	_____
E. Supplies	_____	_____
F. Other	_____	_____
Total Direct Costs	_____	_____
Indirect Costs	_____	_____
* TOTAL PROJECT COSTS	_____	_____
Federal Request	_____	
Non-Federal Amount	_____	



2022 Section 5310 Risk Assessment Questionnaire

Organization Name: _____

I. GENERAL ASSESMENT

1. Organization Experience with Similar Project(s):

Response (X)

5 + years	
3-5 years	
0-3 years	

Comments: If applicable, were the projects completed on time and within budget?

2. Organization experience with State or Federal Funds:

5 + years	
3-5 years	
0-3 years	

Comments:

3. Organization experience with FTA Grant program(s):

5 + years	
3-5 years	
0-3 years	

Comments:

4. Management or staff turnover or reorganization that affects this program:

No turnover or reorganization	
Little turnover or reorganization	
Significant turnover or reorganization	

Comments:

5. Average experience of project staff and management in the current position:

5+ years	
2-5 years	
Less than 2 years	

Comments:

6. Experience of staff and management with the FTA program(s):

5+ years	
2-5 years	
Less than 2 years	

Comments: Please list specific experience.

7. Familiarity with the program:

Have managed/conducted many similar programs in the past (5+ years' experience)	
Have managed/conducted a few similar programs	
Have minimal or no experience with this type of program	

Comments:

8. Effective written procedures and controls for this program:

Accounting Policy/Cash Management (2 CFR 200.302):	
Internal Controls (2 CFR 200.303):	
Travel Policy (2 CFR 200.474):	
Procurement Policy (2 CFR 200.318):	
Compensation (2 CFR 200.430):	
Conflict of Interest Policy (2 CFR 200.112):	
Equipment and Inventory Records (2 CFR 200.313):	
Formal/written and distributed to employees	
Informal policies and controls	
No policies or controls	

Comments: please attach written procedures.

III. LEGAL ASSESSMENT**1. Does the organization have or previously had any suit(s) filed against them within the last 5 years? (such as EEO, DBE, contractor suing for payment)**

No previous or current suits	
Has previously had a lawsuit	
Has a lawsuit	

Comments: Please provide an explanation of each historical and/or active suit, the finding(s) of the suit, and the prevailing party(ies).

2. Organization staff that have been arrested, convicted of a felony or are currently under criminal investigation:

No staff arrested, convicted or currently under criminal investigation	
Has staff that has been arrested, convicted or is currently under criminal investigation	

Comments:

3. Does the organization have any violations of Federal criminal law involving fraud, bribery or gratuity violations potentially affecting the Federal award?

No	
Yes	

Comments: If yes, provide supporting documentation.

IV. MONITORING/AUDIT ASSESSMENT**1. Past Audit findings from the A-133 Audit or any Internal Audits:**

No material findings	
Some findings, not material	
Has material findings	

Comments: If applicable, please discuss how corrective actions were handled for finding(s). Include timeline taken to get findings closed.

2. Have there been any previous audit findings (i.e. other comprehensive audit, Internal Audit)?

No material findings	
Some findings, not material	
Has material findings	

Comments:

3. When was the last on-site monitoring visit?

NA or Less than two years has passed since on-site visit	
Two years have passed since on-site visit	
More than two years have passed since on-site visit	

Comments: Provide the year of visit and provide details about the funding agency and project. List specific findings for each visit and provide details on how the findings were resolved.

V. FINANCIAL SYSTEMS ASSESSMENT**1. Does the organization have a financial management system in place to track and record program expenditures (Examples: QuickBooks, Visual Bookkeeper, Peachtree, or a Customer Proprietary System)?**

Yes, has financial management system in place	
No financial management system in place	

Comments: Please list the system used and length of time in use.

2. Does the accounting system identify the receipts and expenditures of program funds separately for each award?

Accounting system identifies receipts and expenditures of program funds separately for each award	
Accounting system identifies receipts and expenditures of program funds but does not separate for each award	
Accounting system does not identify receipts and expenditures of program funds	

Comments:

3. Does the organization have a time and accounting system to track time and expenditures by budget category?

Yes, Organization has a time and accounting system to track time and expenditures by cost objective	
Organization has a time and accounting system but does not track time and expenditures by cost objective	
Organization does not have a time and accounting system to track time and expenditures	

Comments:

4. Does the organization maintain appropriate internal controls? (Reconciliation checks and balances are in place, duties are segregated, the final approval for payment is made by a different individual than the check/warrant signer)

Yes	
No	

Comments:

V. CAPITAL ASSET TRACKING**1. Has the organization leased any FTA funded equipment to private operators, other public entities, or non-profit organizations?**

No	
Yes, with prior written approval from FTA	
Yes, without prior written approval from FTA	

2. Explain the organization's control system to prevent and investigate loss, damage, or theft of property.

Comments: If applicable, please attach written policy



2022 Section 5310 Risk Assessment Score Card

Once column B is completed STA staff will calculate the risk assessment

Organization Name: _____

I. GENERAL ASSESMENT

1. Organization Experience with Similar Project(s):

Response (X)

Complete this section
using the score in
column C that
corresponds to answer

5 + years		1	
3-5 years		3	
0-3 years		5	

Comments: If applicable, were the projects completed on time and within budget?

2. Organization experience with State or Federal Funds:

5 + years		1	
3-5 years		3	
0-3 years		5	

Comments:

3. Organization experience with FTA Grant program(s):

5 + years		1	
3-5 years		3	
0-3 years		5	

Comments:

4. Management or staff turnover or reorganization that affects this program:

No turnover or reorganization		1	
Little turnover or reorganization		3	
Significant turnover or reorganization		5	

Comments:

5. Average experience of project staff and management in the current position:

5+ years		1	
2-5 years		3	
Less than 2 years		5	

Comments:

6. Experience of staff and management with the FTA program(s):

5+ years		1	
2-5 years		3	
Less than 2 years		5	

Comments: Please list specific experience.

7. Familiarity with the program:

Have managed/conducted many similar programs in the past (5+ years' experience)		1	
Have managed/conducted a few similar programs		3	
Have minimal or no experience with this type of program		5	

Comments:

8. Effective written procedures and controls for this program:

Accounting Policy/Cash Management (2 CFR 200.302):	
Internal Controls (2 CFR 200.303):	
Travel Policy (2 CFR 200.474):	
Procurement Policy (2 CFR 200.318):	
Compensation (2 CFR 200.430):	
Conflict of Interest Policy (2 CFR 200.112):	
Equipment and Inventory Records (2 CFR 200.313):	

Formal/written and distributed to employees		1	
Informal policies and controls		3	
No policies or controls		5	

Comments: please attach written procedures.

III. LEGAL ASSESSMENT

1. Does the organization have or previously had any suit(s) filed against them within the last 5 years? (such as EEO, DBE, contractor suing for payment)

No previous or current suits		1	
Has previously had a lawsuit		3	
Has a lawsuit		5	

Comments: Please provide an explanation of each historical and/or active suit, the finding(s) of the suit, and the prevailing party(ies).

2. Organization staff that have been arrested, convicted of a felony or are currently under criminal investigation:

No staff arrested, convicted or currently under criminal investigation		1	
Has staff that has been arrested, convicted or is currently under criminal investigation		5	

Comments:

3. Does the organization have any violations of Federal criminal law involving fraud, bribery or gratuity violations potentially affecting the Federal award?

No		1	
Yes		5	

Comments: If yes, provide supporting documentation.

IV. MONITORING/AUDIT ASSESSMENT

1. Past Audit findings from the A-133 Audit or any Internal Audits:

No material findings		1	
Some findings, not material		3	
Has material findings		5	

Comments: If applicable, please discuss how corrective actions were handled for finding(s).
Include timeline taken to get findings closed.

2. Have there been any previous audit findings (i.e. other comprehensive audit, Internal Audit)?

No material findings		1	
Some findings, not material		3	
Has material findings		5	

Comments:

3. When was the last on-site monitoring visit?

NA or Less than two years has passed since on-site visit		1	
Two years have passed since on-site visit		3	
More than two years have passed since on-site visit		5	

Comments: Provide the year of visit and provide details about the funding agency and project. List specific findings for each visit and provide details on how the findings were resolved.

V. FINANCIAL SYSTEMS ASSESSMENT

1. Does the organization have a financial management system in place to track and record program expenditures (Examples: QuickBooks, Visual Bookkeeper, Peachtree, or a Customer Proprietary System)?

Yes, has financial management system in place		1	
No financial management system in place		5	

Comments: Please list the system used and length of time in use.

2. Does the accounting system identify the receipts and expenditures of program funds separately for each award?

Accounting system identifies receipts and expenditures of program funds separately for each award		1	
Accounting system identifies receipts and expenditures of program funds but does not separate for each award		3	
Accounting system does not identify receipts and expenditures of program funds		5	

Comments:

3. Does the organization have a time and accounting system to track time and expenditures by budget category?

Yes, Organization has a time and accounting system to track time and expenditures by cost objective		1	
Organization has a time and accounting system but does not track time and expenditures by cost objective		3	
Organization does not have a time and accounting system to track time and expenditures		5	

Comments:

4. Does the organization maintain appropriate internal controls? (Reconciliation checks and balances are in place, duties are segregated, the final approval for payment is made by a different individual than the check/warrant signer)

Yes		1	
No		5	

Comments:

V. CAPITAL ASSET TRACKING

1. Has the organization leased any FTA funded equipment to private operators, other public entities, or non-profit organizations?

No		1	
Yes, with prior written approval from FTA		3	
Yes, without prior written approval from FTA		5	

2. Explain the organization's control system to prevent and investigate loss, damage, or theft of property.

Comments: If applicable, please attach written policy

Risk Level	Range	Action
Highest Risk	72-105	Annual Site Visit/Inspections, Quarterly Desk Audits, Detailed Back Up Documentation
Moderate Risk	36-71	Detailed Back Up Documentation, Quarterly Desk Audits
Lowest Risk	0-35	Regular Monitoring Requirements



Section 5310 Grant Application Scoring Criteria

Category	Points Possible	Points Awarded
Risk Assessment (Scored by staff)	10	
Applications Completeness (Scored by staff)	10	
Proposed Service Improvements	25	
Regional Transportation Needs	10	
Performance Measures	20	
Management	10	
Financials	15	
Total	100	

Project Title:

Applicant:

Name of Committee Scorer:

FY22 Section 5310 Grant Application Scoring Form

Instructions: Please provide a score for each question using the scoring criteria provided (listed under the “Score” column) beginning with **Category: Proposed Services Improvements (25 points)**.

Category: Application Completeness (10 points)

(STA Staff to score this section before Scoring Committee review). If this section is blank, please contact Madeline Arredondo at marredondo@spokanetransit.com.

Is the application complete with all required information needed to score?

Criteria	Comments	Score
To what extent are agency responses included for each application questions? Are any items missing or needing more relevant information? <i>3 points</i>		0 points if any questions missed or incomplete. 3 points if all responses provided and complete. _____
What required attachments did the agency submit for review/approval? Were any items missing or lacking information? <i>2 points</i>		0 points if any items missing or incomplete. 2 points if all attachments provided and complete. _____
What population(s) will the project serve? <i>5 points</i>		1-3 points for seniors or individuals with disabilities served exclusively. 4-5 points if the project serves seniors and/or individuals with disabilities that have medical conditions or other needs that are considered high risk. _____
Total Score <i>Out of 10 possible points</i>		

Category: Proposed Service Improvements (25 points)

Does the project description include a direct benefit to seniors and/or persons with disabilities? Does this description also address a need not being met in the community?

Criteria	Comments	Score
<p>Does the proposed project provide a service that directly benefits seniors and/or persons with disabilities? <i>5 points</i></p>		<p>0 points if the proposed project does not clearly demonstrate that it will provide a direct benefit to seniors and/or persons with disabilities.</p> <p>1-3 points if the proposed project will provide a direct benefit to seniors and/or persons with disabilities.</p> <p>4-5 points if the proposed project provides a direct benefit to seniors and/or persons with disabilities and fills a transportation gap not currently provided in the community.</p> <p>_____</p>
<p>What barriers will this project seek to overcome in providing transportation options to seniors and individuals with disabilities? <i>10 points</i></p>		<p>0 points if the barriers are not identified.</p> <p>1-6 points if barriers are identified and the project provides the needed resources.</p> <p>7-10 points if the project addresses unique or significant barriers by providing tailored and/or specialized transportation options for seniors and individuals with disabilities.</p> <p>_____</p>

Category: Proposed Service Improvements (Continued)

Criteria	Comments	Score
<p>Based on the methodology and/or information provided will the project provide a significant benefit to seniors and individuals with disabilities? <i>10 points</i></p>		<p>0 points if the estimate for the number to be served by the project is not supported by current data.</p> <p>For operating/rolling stock projects: 1-6 points if the estimate for the number to be served by the project is supported by current data.</p> <p>7-10 points if the estimate for the number to be served by the project is supported by current data and primarily benefits seniors and/or individuals with disabilities (75% or greater) with more points weighted to projects that serve more people overall.</p> <p>For construction projects: 1-6 points if the project is located in a census tract with a percentage of the population that are seniors and/or households with a disability that is higher than the county average.</p> <p>7-10 points for projects that directly improve accessibility for destinations, activity centers and transportation facilities that have a demonstrably higher rate of use by those that are seniors or individuals with disabilities, with more points weighted to locations with higher demand.</p> <p>_____</p>
<p>Total Score <i>Out of 25 possible points</i></p>		

Category: Regional Transportation Needs (10 points)

Does the project identify gaps and unmet needs in the context of the regional transportation system?

Criteria	Comments	Score
What specific needs/strategies from the <i>Spokane County Coordinated Public Transit-Human Services Transportation Plan (HSTP)</i> will this project meet? <i>10 points</i>		1-6 points if needs/strategies identified. 7-10 points if more than 5 needs and strategies identified and how the project will meet them. _____
Total Score <i>Out of 10 possible points</i>		

Category: Performance Measures (20 points)

How does the applicant intend to measure the benefit provided by the project, according to the performance measures described in the logic model?

Criteria	Comments	Score
Does the proposed project increase or enhance the availability of transportation services for seniors and/or individuals with disabilities? <i>10 points</i>		0 points if the project does not increase or enhance transportation services. 1-6 points if the project increases OR enhances transportation services. 7-10 points if the project increases AND enhances transportation services. _____
What methodology will be used to gather data regarding one-way trips provided quarterly for seniors and individuals with disabilities? <i>10 points</i>		0 points if the methodology is not provided or wholly inadequate. 1-6 points if the methodology proposed is relatively clear but is questionable in its reliability or the applicant's ability to gather the data. 7-10 points if the methodology proposed is clear, appears reliable and/or the applicant is able to gather the data. _____
Total Score <i>Out of 20 possible points</i>		

Category: Management (10 points)

Based on information provided in the application, does the applicant demonstrate the capacity to administer a federal transportation project?

Criteria	Comments	Score
What qualifications/experience does the management team describe? <i>5 points</i>		0 points if no experience. 1-3 points if management team has experience/qualifications providing transportation services. 4-5 points if management team has experience/qualifications providing transportation services using federal funding. _____
How will the agency sustain this project after agreement expiration? <i>5 points</i>		0 points if project will not continue. 1-3 points if project will continue with 5310 funding. 4-5 points if project will continue without 5310 funding. _____
Total Score <i>Out of 10 possible points</i>		

Category: Financials (15 points)

Based on the budget information provided in the application, does this project have a high potential for success?

Criteria	Comments	Score
What other funding sources have been committed to this project? <i>5 points</i>		0 points if no response provided. 1-3 points for at least one funding commitment that may include in-kind contribution. 4-5 points at least two funding commitments including grant and/or donations. _____

Category: Financials (Continued)

Criteria	Comments	Score
----------	----------	-------

Is this project contingent upon other funding commitments? Indicate, if applicable, any interrelated projects that are seeking funding, either through the current call for projects or other funding sources, that are necessary to implement the requested project? <i>5 points</i>		1-3 points if the project is contingent on other funds. 4-5 points if the project is not contingent on other funds. _____
Is the project feasible to implement with less funds than requested? If so, what changes would be made to address a lower award amount than requested? <i>2 points</i>		0 points if project is not scalable. 1-2 points if project is scalable and provides a description of changes. _____
Are line items in the budget table clearly described in the budget narrative, including the basis for each cost (cost estimates, quotes, actual data, etc.)? <i>3 points</i>		0 points if unclear. 1-3 points if budget line items are clearly described and supported by documentation. _____
Total Score <i>Out of 15 possible points</i>		

Total Project Score Out of possible 100 points	
--	--

Signed:

Name, Title

Date

Program: _____ (name) _____ Logic Model
Situation:



Inputs <i>What we Invest</i>	Outputs <i>Activities Participation</i>		Outcomes -- Impact <i>Short Medium Long</i>		
Assumptions			External Factors		

Program: (Sample) Non-profit 5310 Vehicle Purchase **Logic Model**
Situation: Inadequate equipment and resources to meet transportation needs of clients

Inputs <i>What we invest</i>	Outputs		Outcomes -- Impact		
	Activities	Participation	Short	Medium	Long
Funding	Driver Training	Seniors	"X" rides provided	Increase ridership of target population	Promote mobility of target population
Technology	Program outreach	Individuals with Disabilities	"X" target population served	Increased awareness of transportation resource	Increased access to transportation options
Staff	Ride scheduling	Health care providers	"X" drivers trained		
Volunteers	Trip data gathered	Community Partners	"X" outreach activities	Increased community partners	Meet program goals
Technical Assistance		Volunteers	Maintenance completed		

Assumptions

Drivers/Volunteers available, funding will be adequate

External Factors

Continued need for transportation for target population

Logic Model Descriptions

Situation

This is a description of a challenge, issue, or an opportunity the program's resources and activities will be addressing. The situation will be used as a basis to explain activity direction and the overall goal seeking to be achieved by the program.

Inputs

These are resources that contribute to the program's activities. There are human resources (i.e., faculty, staff, drivers, etc.) and financial resources (i.e. federal, state and local government, private funding, etc.). These are programmatic investments available to support the program.

Output Activities

These are the integrated efforts to address the situation and to highlighting those activities that were instrumental in the achievement of the program's goals. This is critical to the full evaluation of the program because it provides an answer to the situation and explains the outcomes.

Output Participants

Participants, clients, organizations, agencies, decision-makers, and/or customers reached by the activities.

Outcomes Short

This occurs when there is a change in knowledge, awareness, opinions, and intent. This also where you will identify performance measures for when services are provided, and metrics are recorded.

Outcomes Medium

This occurs when there is a change in behaviors, decision-making, and actions. These changes demonstrate how the knowledge gained or increased has been used.

Outcomes Long

This occurs when there is a change in conditions and experiences that have been a result of the changed behaviors and services provided.

Assumptions

These are beliefs about the program, people involved and how the program is perceived to work. Assumptions include ideas about the program or situation; the resources and staff; the external environment; the knowledge base; and the internal environment.

External Factors

These are aspects external to the program that influence the way the program operates and are influenced by the program. Elements that affect the program over which there is little control.

Agency Name: _____ **Project Name:** _____**Grant ID/FAIN #:** _____ **Agreement #:** _____**Month/Year of Report:** _____**1. Monthly Project Activity Narrative** (Please provide descriptions of project-related work during month.)

Describe the month's project activities for transportation of seniors and people with disabilities in Spokane County. Please include information regarding the activities of positions paid by the 5310 program, community outreach, marketing activities, and ride referrals (if applicable).

2. Monthly Beneficiary Data

Include the total number served (unduplicated), total number of one-way rides provided, total number of Seniors served, and total number of Individuals with Disabilities served.

Total Number Served (unduplicated)	
Total number of one-way rides provided	
Total number of Seniors served	
Total number of Individuals with Disabilities served	

3. Project Manager Certification

(Completion of this section certifies that the above information is true and accurate to the best of your knowledge.)

**Project
Manager:****Email:****Title:****Phone:****Signature of Authorized
Person Completing
Form:****Date:**

Please submit this monthly report to Section5310@spokanetransit.com.

Agency Name: _____ **Project Name:** _____

Grant ID/FAIN #: _____ **Agreement #:** _____

Report for quarter ending: ☐ **March** ☐ **June** ☐ **September** ☐ **December**
Year: ☐ **2021** ☐ **2022** ☐ **2023**

1. Progress Narrative (Please provide descriptions of project-related work during the quarter.)

A. Describe project activities for seniors and people with disabilities in Spokane County and the nature and size of unmet transportation needs for this population.

B. Include the geographic area served, total number served (unduplicated), total number of rides provided, total number of hours driven, total number of miles, total number of volunteer drivers utilized, total number of volunteer mileage reimbursed in the quarter (as applicable), total number of Seniors served, and total number of Individuals with Disabilities served.

Geographic Area Served	
Total Number Served (Unduplicated)	
Total Number of Rides Provided	
Total Number of Hours	
Total Number of Miles	
Total Number of Volunteer Drivers Utilized	
Total Number of Volunteer Miles Reimbursed	
Total Number of Seniors Served	
Total Number of Individuals with Disabilities Served	

C. Describe project efforts to address unmet transportation needs.
D. Describe current coordination efforts and activities to identify new transportation resources.
E. Describe service improvements and their impacts to the community, seniors and/or citizens with disabilities. <i>Examples could include increases or enhancements related to geographic coverage, service quality, and/or service times that impact availability of transportation services for seniors and individuals with disabilities.</i>
F. Describe any challenges encountered and any significant changes to the project you foresee as a result.
G. Describe any physical improvements: additions or changes to physical infrastructure (e.g., transportation facilities, sidewalks, etc.), technology, and vehicles as applicable.
H. Describe your outreach efforts to Limited English Proficiency (LEP), minority and low-income populations as it relates to this project.

2. Complaints & Lobbying

A. Report EEO complaints, Title VI complaints, and ADA complaints. Describe complaint(s), investigation activities, and resolution.

B. For awards over \$100,000, describe lobbying activities conducted during the quarter and if there has been an SF-LLL form submitted in record of these activities. Please attach documentation to this report. This is applicable to all 5310 projects.

Any lobbying activities this quarter? ☐ Y ☐ N
SF-LLL form submitted? ☐ Y ☐ N

3. Vehicle Records

A. Attach records for each vehicle (if applicable) including regularly scheduled oil changes, tires, lift/ramp maintenance, accessibility features maintenance, damages, and warranty claims.

Vehicle maintenance records? ☐ Y ☐ N
Warranty claims? ☐ Y ☐ N
Applicable? ☐ Y ☐ N

4. Project Manager Certification

(Completion of this section certifies that the above information is true and accurate to the best of your knowledge.)

**Project
Manager:**

Email:

Title:

Phone:

**Signature of Authorized
Person Completing
Form:**

Date:

Please submit this quarterly report to Section5310@spokanetransit.com.