Oregon Department of Transportation

Public Transit Division

State Discretionary Grant Program

GRANT APPLICATION INSTRUCTIONS

This document is available in alternative formats upon request.

Instructions for Completing Applications

The application forms may be downloaded from the ODOT Public Transit Division Web site at the following address:
http://www.oregon.gov/ODOT/PT/PROGRAMS/disc_grant_program.shtml

Forms may also be accessed by contacting your STF Agency coordinator (see list in Appendix B).

Forms are in Word format that allows you to complete them and save a copy on your local computer.

Project Application

Please review the instructions before starting to complete the application. Numbered instructions correspond to specific numbered sections on pages of the application form. Instructions for individual lines on the application form which are **not** numbered, such as applicant information boxes, are indicated by an arrow. ➢

STF Agencies will complete a consolidated list of applications and submit all projects to ODOT PTD by the deadline. So, there could be several completed applications for various sub-recipient transportation providers attached with the STG cover sheet. See *Instructions for STF Agencies* for more information about the grant process, or contact the STF Coordinator in Appendix B of this document.

Section 1. STF Agency Information

All agencies applying for projects must complete the STF Agency Information chart on the top of Page 1.

- ➢ In the Applicant Information box, starting from the top line and working left to right, enter your agency name; Federal Employer Identification Number (FEIN); agency phone number (or your direct phone number at the agency); your Fax number; your agency's Federal Congressional District and Urbanized Zone (UZA) if you are in one; a URL link to your agency website or internet address of your agency home page; your agency mailing address; and the name, title, and email address of the contact person for the application, at your agency.

Oregon federal Congressional Districts may be identified from this federal map link: http://www.nationalatlas.gov/printable/congress.html#or Urbanized Zones are available from the United States Census Bureau.

- ➢ After completing the Checklist, be sure to sign the certification statement at the bottom before submitting the application packet to PTD. List agency name at top, and in the three boxes below that, print your name and job title; sign the form, and date it.

Section 2. Application

An application form should be completed for each individual project submitted for STG funding consideration.

1. Agency who will perform project: In this box you will provide identifying information about the project agency.

- In the applicant information box, starting from the top line and working left to right, enter your agency name; Federal Employer Identification Number (FEIN); agency phone number (or your direct phone number at the agency); your Fax number; Alternate agency name ("Doing Business As"), if used; your agency's Federal Congressional District and Urbanized Zone (UZA) if you are in one; a URL link to your agency website or internet address of your agency home page; your agency mailing address; and the name, title, and email address of the contact person for the application, at your agency.

2. Project Type: In the project checklist below the applicant information box, identify the type of project by checking one of the three boxes:

- Transit operations project. Check here and complete Section A of the application.
- Mobility Management project. Under this type, select all services that apply, and complete Section A of the application.
- Capital item. Check which type of capital asset, and complete either Section B (vehicle purchase) or Section C (all other capital) of the application.

Section A. Project Description for Transit Operations & Mobility Mgmt.

1. **Project Description:** In the discussion box, provide a concise and specific description of the project to be funded.

2. **How will the project benefit older adults and people with disabilities?** In the discussion box, describe how the project benefits the target group(s). Provide specific performance measures such as number of rides, number of people trained, and other appropriate measures. Identify the gap in existing services being addressed through the project.

3. **Project Derived from a Local Coordinated Plan**: Enter the page number where your project or service is identified, and the date the plan was adopted by the lead agency. If you do not know, get assistance from your STF Agency Coordinator. All projects **must** be derived from a local plan.

4. **Is the project Match for another PTD discretionary grant project?** Select Yes or No from the drop-down menu. If Yes, identify the project and funding source in the detail box provided.

5. **Project Cost:** enter the total project cost from the budget worksheet. If the project is match, identify the amount needed for match. Then complete the Budget Sheet on the next page.

Budget Sheet for Operations and Mobility Management (Page 4):

- When entering data in this budget sheet, be sure use the "TAB" key to navigate from column to column on each line. (Using the "enter" key takes you down to the next line instead of to the field in the next column.)
- Enter the project costs by line item for both fiscal years.
- Be sure to complete **both** columns of the budget if your request includes both fiscal years of the biennium. Otherwise, the request will only be for one fiscal year of funding.
- Under "Project administration expense", enter the administrative salaries and benefits, facility costs, and other operating costs associated with administration of the project. Use the "Other" section for any expense items that don't fit into the other line items in this section.
- Under "Operations", enter the line item operating expenses associated with the project in the "Item" lines. You can fill in the description in the text box provided.
- Under "Preventive Maintenance", enter the line item operating expenses associated with the project in the "Item" lines. You can fill in the description in the text box provided.
- Subtotals and Grand Total are automatically generated in the worksheet. The Grand Total should match the "Project Total" amount you entered under question no. 5 in the "Project Description" on Page 3.

Section B. Vehicle Project Information

1. **Vehicles to be Purchased**: Complete the table in question1 for all vehicles to be purchased in your vehicle project. If these are Replacement vehicles, the vehicles in this section should correspond in number and type with the vehicles listed for replacement in table question 5. If the vehicle project is an Expansion project, the table in question 5 does not have to be completed.

   All agencies should plan to purchase vehicles utilizing the State DAS vehicle price agreement contracts. PTD-coordinated price agreements are available for all five categories of public transit vehicles. State vehicle price agreements are also in place for most standard service vehicles (passenger cars and trucks) that an agency may seek to acquire. Please see PTD requirements and website links to the contracts under "Capital Projects – Vehicle Purchases" in the Applicant Guidance section of the instructions.

See application guidelines for PTD policies regarding client-only transportation, and minimum vehicle use.

Vehicles which are not ADA-accessible (i.e. not equipped with wheelchair lifts, on-board wheelchair securement, etc.) require a Certificate of Equivalent Service. A link to this form is found on the PTD website at this link: http://www.oregon.gov/ODOT/PT/PROGRAMS/CAPITAL/EquivalentServiceCertificationADA.pdf

Any equipment and bus wraps required to put the vehicle into service should be included in the cost estimates. Most providers will be accessing the state price agreements for vehicle purchases. Work with the vendor representatives for cost estimates and be sure to include all options in the requested vehicle cost. Annual vehicle price adjustments are common and will be allowed for new model year vehicles; work with the vendor and be sure to include this in your vehicle cost.

- When entering data in this table, be sure use the "TAB" key to Tab to navigate from column to column on each line.
- Complete one row on the table for each category of vehicle being requested
- Select the correct vehicle category (Category A through E-7) from the drop-down menu box. See the list in Appendix A: *Vehicle Description and Useful Life Standards* to identify vehicle categories. (If a replacement project, the new vehicle should be a close match to the vehicle being replaced, or attach an explanation to your application)
- Enter quantity of vehicles to be acquired
- Enter full cost of individual vehicle including all options
- The "Total" cell will be populated automatically for you – you do not need to enter anything here. The formula is Quantity X individual vehicle cost
- Enter number of regular seats on vehicle (when ADA station is deployed)
- Enter number of ADA stations on the vehicle
- Enter total seating capacity (regular seats + ADA stations)
- Select fuel type from the drop-down menu; choices are explained in footnote "a" below the table
- Enter the estimated order date, and the estimated delivery date in the two columns provided. You may need to check with a vendor for a typical delivery schedule for the type of vehicle selected; there is a minimum 160 days from order to delivery for ADA-equipped vehicles.

2. **Project Derived from a Local Coordinated Plan**: Enter the page number where your project or service is identified, and the date the plan was adopted by the lead agency. If you do not know, get assistance from your STF Agency Coordinator. All projects **must** be derived from a local plan.

3. **Is the project Match for another PTD discretionary grant project?** Select Yes or No from the drop-down menu. If Yes, identify the project and funding source in the detail box provided.

4. **How will the project benefit older adults and people with disabilities?** In the discussion box, describe how the project benefits the target group(s). Provide specific performance measures such as number of rides, number of people trained, and other appropriate measures. Identify the gap in existing services being addressed through the project.

   For a vehicle replacement project, also describe any changes in use from the purpose of the vehicles being replaced. (For example, ridership increases could justify purchasing slightly larger vehicles; or where greater flexibility is needed in dial-a-ride services, several smaller vehicles could be replacing a large bus.)

5. **The following information is required for Replacement vehicle projects**: Complete the chart in this table to describe each vehicle to be replaced. The information will be used to confirm that each vehicle meets or exceeds one of the useful life standards for the category. See the list in Appendix A: *Vehicle Description and Useful Life Standards* to help identify which standard applies to a specific vehicle.

- Use one row of the table per vehicle. If more than three vehicles are being replaced, attach a list and check the box provided below the table
- When entering data in this table, be sure use the "TAB" key to Tab to navigate from column to column on each line. (Using the "enter" key takes you down to the next line instead of to the field in the next column.)
- Year, make(manufacturer), and model number of the vehicle being replaced;
- Select one of the categories from A to E-7 from the drop-down menu (see *Vehicle Description and Useful Life Standards* chart for categories);
- Enter Vehicle Identification Number;
- Enter total number of seats including ADA seats;
- Enter state vehicle license number;
- Enter current mileage as of the date this application is completed;
- Select vehicle disposal status from drop-down menu; see explanations on footnote "b" below the table (sold, transfer, or back-up)

Section C. Project Information for Capital Items Other Than Vehicles

This form should be used for purchase of non-vehicle capital assets, such as computers, software, communications equipment, printers, shop equipment, bike racks for vehicles, passenger shelters, and signs.

1. **Description of Equipment by category:** Complete the table in question1 for all items to be purchased in your equipment project.

   For specialized equipment, work with the vendor representatives for cost estimates and be sure to include all options in the requested equipment cost. Annual price adjustments are common and will be allowed; work with the vendor and be sure to include this in your equipment cost.

   - When entering data in this table, be sure use the "TAB" key to navigate from column to column on each line.
   - Complete one row on the table for each category of equipment being requested
   - Enter quantity of equipment to be acquired
   - Enter full cost of individual items including all options
   - The "Total" cell will be populated automatically for you – you do not need to enter anything here. The formula is Quantity X individual item cost
   - Enter the estimated order date, and the estimated delivery date in the two columns provided. You may need to check with a vendor for a delivery schedule for any customized equipment.

2. **Project Derived from a Local Coordinated Plan**: Enter the page number where your project or service is identified, and the date the plan was adopted by the lead agency. If you do not know, get assistance from your STF Agency Coordinator. All projects must be derived from a local plan.

3. **Is the project Match for another PTD discretionary grant project?** Select Yes or No from the drop-down menu. If Yes, identify the project and funding source in the detail box provided.

4. **How will the project benefit older adults and people with disabilities?** In the discussion box, describe how the equipment project benefits the target group(s). Provide specific performance measures such as number of rides, number of people trained, and other appropriate measures. Identify the gap in existing services being addressed through the project.

5. **Project Cost:** enter the total equipment project cost from the budget worksheet. If the project is match, identify the amount needed for match. Then complete the Budget Sheet on the next page.

Documented Categorical Exclusion (DCE) Worksheet – The DCE form is required for facilities projects including signs and amenities, passenger shelters, and all larger facilities.

This is the information required for any project for structures with the potential to impact wildlife, watershed or historical areas. The worksheet is on our Web site at: http://www.oregon.gov/ODOT/PT/PROGRAMS/disc_grant_program.shtml

Appendix A – Vehicle Descriptions and Useful Life Standards

CATEGORY A: Large, Heavy-Duty Transit Bus - ADA

Gross Vehicle Weight Rating (GVWR): 33,000 to 40,000 lbs.
Minimum 2 ADA stations required. (This category includes articulated buses.)
Length: 35' – 40'
Passengers: 35 – 40+
Useful Life: 12 Years or 500,000 miles
Price Range: $200,000 - $300,000+

CATEGORY B: Medium-Size, Heavy-Duty Transit Bus - ADA

Gross Vehicle Weight Rating (GVWR): 26,000 to 33,000 lbs.
Minimum 2 ADA stations required.
Length: ~ 30' – 35'
Passengers: 25 – 35
Useful Life: 10 Years or 350,000 miles
Price Range: $150,000 - $280,000 (~ $10,000 more for diesel)

CATEGORY C: Medium-Size Medium-Duty Transit Bus & Truck Chassis Cutaway - ADA

Gross Vehicle Weight Rating (GVWR): 10,000 to 26,000 lbs.
Minimum 2 ADA stations required.
Length: ~ 25 – 30'
Passengers: 16 – 30
Useful Life: 7 Years or 200,000 miles
Price Range: $70,000 - $175,000 (~ $7,000 to $10,000 more for diesel)

CATEGORY D: Medium-Size, Light-Duty Bus & Van Chassis Cutaway Bus - ADA

Gross Vehicle Weight Rating (GVWR): 10,000 to 16,000 lbs.
Minimum of 2 ADA stations required if 22 ft. or greater in length, 1 ADA station if less than 22 ft.
Length: 20' – 25'
Passengers: 12 – 16
Useful Life: 5 Years or 150,000 miles
Price Range: $40,000 – $65,000 ($5,000 to $10,000 more for diesel)

CATEGORY E: Small, Light-duty Bus; Vans; Minivans; Station Wagon; Sedan – ADA and Standard

Gross Vehicle Weight Rating (GVWR): 6,000 to 14,000 lbs.
1. ADA accessible: Small, light-duty van chassis cutaway (9-12 passenger)
2. ADA accessible van: Lift- or ramp-equipped, lowered floor/raised roof
3. ADA accessible: Modified minivan

Standard vehicles are not in the ODOT Public Transit Price Agreements, but may be on the Department of Admin. Services statewide contracts:

4. Standard: van
5. Standard: minivan
6. Standard: station wagon
7. Standard: sedan

Passengers: 3 – 14
Useful Life: 4 Years or 100,000 miles
Price Range: $18,000 - $55,000

Appendix B – STF Agency Coordinators: Contact Information for Applicants

STF Agency	Contact	Phone	Email	Address
Baker County	Christina Cook	(541) 523-8209	ccook@bakercounty.org	1995 Third St. Suite 140 Baker City OR 97814
Basin Transit Service	Starla Davis	(541) 883-2877	bts@ccountry.net	1130 Adams Street Klamath Falls OR 97601
Benton County	Sharon Fipps	(541) 754-1748	sharon.fipps@ci.corvallis.or.us	PO Box 1083 Corvallis OR 97339
Columbia County	Janet Wright	(503) 397-1035	wrightj@co.columbia.or.us	230 Strand St St Helens OR 97051
Coos County	Bruce Bennett	(541) 269-2013	bbennett@scbec.org	93781 Newport Lane Coos Bay OR 97420
Crook County	Kathy Puckett	(541) 447-6554	kathy.puckett@co.crook.or.us	200 NE Second Street Prineville OR 97754
Curry County	Joanne Wasbauer	(541) 412-8806	jwasbaurer@currypublictransit.org	PO Box 1771 Brookings OR 97415
Deschutes County	Judith Ure	(541) 330-4627	judithu@co.deschutes.or.us	1300 NW Wall St # 200 Bend OR 97701
Douglas County	Vicki Nunenkamp	(541) 957-3005	vlnunek@co.douglas.or.us	621 W Madrone Roseburg OR 97470
Gilliam County	Delene Durfey	(541) 384-2114	delene.durfey@co.gilliam.or.us	PO Box 427 Condon OR 97823
Grant County Transportation District	Karin Barntish	(541) 575-2721	kbltc@centurytel.net	PO Box 367 John Day OR 97845
Harney County	Ann Lessar	(541) 573-6024	ann.lessar@state.or.us	450 N Buena Vista Ave Burns OR 97220
Hood River County Transportation District	Dan Schwanz	(541) 296-7545	mccogtransnet@gorge.net	201 Federal The Dalles OR 97741
Jefferson County	Kathleen Puckett	(541) 475-4451	Kathy.puckett@co.jefferson.or.us	66 SE D Street Madras OR 97741
Josephine County	Scott Chancey	(541) 474-5441	schancey@co.josephine.or.us	201 River Hights Way Grants Pass OR 97526
Lake County	Bob Pardee	(541) 947-6003	bpardee@co.lake.or.us	513 Center Street, Lakeview OR 97360
Lane Transit District	Terry Parker	(541) 682-3245	terry.parker@lts.org	P O Box 7070 Eugene OR 97401
Lincoln County	Cynda Bruce	(541) 574-1292	cbruce@co.lincoln.or.us	410 Harney Street Newport OR 97365
Linn County	Mark Volmert	(541) 924-8430	mvolmert@ocwcog.org	1400 Queen Ave SE Ste 205A Albany OR 97321
Malheur County	Loni Debban	(541) 889-7651	loni@mcoainfo.com	PO Box 937 Ontario OR 97914
Morrow County	Gayle Guttierez	(541-676-5667	mctreasurer@morrow.or.us	PO Box 768 Heppner OR 97836

STF Agency	Contact	Phone	Email	Address
Rogue Valley Transit District	Julie Brown	(541) 608-2413	j.brown@rvtd.org	3200 Crater Lake Ave Medford OR 97504
Salem Area Mass Transit District	Mona West	(503) 588-2424	westm@cherriots.org	555 Court St NE # 5230 Salem OR 97301-3776
Sherman County	Marnene Benson	(541) 565-3553	marnenebw@co.sherman.or.us	500 Court Street Moro OR 97039
Sunset Empire Transit District	Cindy Howe	(541) 861-5399	cindy@ridethe bus.org	465 Skipanon Drive Warrenton OR 97146
Tillamook County Transit District	Matt Mumford	(503) 842-3115	mmumford@tillamookbus.com	PO Box 188 Tillamook OR 97141
TriMet	Claire Potter	(503) 962-5867	potterc@trimet.org	4012 SE 17th Ave. Portland OR 97202
Umatilla County	Robert Pahl	(531-278-6210)	robertp@co.umatilla.or.us	216 SE 4th Pendleton OR 97801
Union County	Shelley Burgess	(541) 963-1001	sburgess@union-county.org	1106 K Avenue La Grande OR 97850
Wallowa County	Susan Roberts	(541) 426-4543	sroberts@co.wallowa.or.us	P O Box N St Joseph OR 97846
Wasco County	Dan Schwanz	(541) 386-4202	cat1@gorge.net	PO Box 1147 Hood River OR 97031
Wheeler County	Candy Humphreys	(541) 468-3391	wcct@centurytel.net	P O Box 152 Spray OR 97874
Yamhill County	Tonya Saunders	(503)474-4910	saunders@co.yamhill.or.us	535 NE 5th St. McMinnville OR 97218
Burns Paiute Tribe	Kenton Dick	(541) 573-2088	kenton.dick@burnspaiute-nsn.gov	100 Pasigo Street. Burns OR 97720
Confederated Tribes of Grand Ronde	Kim Rogers	(503) 829-2250	kim.rogers@grandronde.org	9615 Grand Ronde Rd. Grand Ronde OR 97347
Confederated Tribes of Siletz	Pamela Lind	(541) 444-8361	pamelal@ctsi.nsn.us	P O Box 549 Siletz OR 97380
Confederated Tribes of Umatilla	Jim Beard	(541) 966-2599	jimbeard@ctuir.com	PO Box 638 Pendleton OR 97801
Confederated Tribes of Warm Springs	David Conroy	(541) 553-3491	dconroy@wstribes.org	1233 Veterans St. Warm Springs OR 97761
Coquille Indian Tribe	Jack Lennox	(541) 756-0904	jacklennox@coquilletribe.org	PO Box 783 North Bend OR 97459
Cow Creek Tribe of Umpqua Indians	Tonya Theiss-Script	(541) 541-677-5575	theiss@cowcreek.com	2371 NE Stephen Street, Roseburg OR 97470
Confederated Tribes of Coos, et al	Diann Weaver	(541) 888-9577	dweaver@csb.portland.ihs.gov	1245 Fulton Ave, Coos Bay OR 97420
Klamath Tribes	Jana De Garmo	(541) 783-2219	jana.degarmo@klamathtribes.com	501 Chiloquin Blvd. Chiloquin OR 97624