

Oregon Department of Transportation
Rail and Public Transit
STIF Discretionary and Statewide Transit Network
2/1/2019 deadline

Grant County Transportation District Bus Station Expansion Phase 2

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Provider Information

1. Transit Agency Type

- City
- County
- Mass Transit District
- Transportation District
- Special District
- Intergovernmental Entity
- Municipal/Public Corporation or other political subdivision
- Indian Tribe
- Non-Profit
- Private For-Profit

2. What is the main type of service that will be supported by this grant?

- Fixed Route
- Demand Response
- Deviated Fixed Route

Risk Assessment Information

This risk assessment section contains a subset of the entire risk assessment. The entire risk assessment will be populated with the answers you provide in this section and data already reported to RPTD. Please contact Andrew.S.Keefe@odot.state.or.us for assistance.

3. Did your agency have any turnover of management or financial staff in the last 2 years?

- Yes
- No

4. Does your agency have an accounting system that allows you to completely and accurately track the receipt and disbursement of funds related to the award?

- Yes
- No

5. What type of accounting system does your agency use?

- Manual
- Automated
- Combined

6. Does your agency have a system in place that will account for 100% of each employee's time?

- Yes
- No

7. Did your staff members attend required training and meetings during prior grant awards?

- Yes
- No

8. Was your agency audited by the Federal government in the past 2 years?

- Yes
- No

9. If yes, did the audit result in one or more audit findings?

- Yes
- No
- N/A

10. Did your agency stay on budget in the past two years?

- Yes
- No

Applicant Qualifications

11. Describe how your agency has legal, managerial and operational capacity to perform and report on project progress within the scope, schedule and budget. (Operational capacity specifically for workload of projects in this application.)

Enter response in text box or upload your response on the Document Upload tab of the application and write "See Upload."

Grant County Transportation District (GCTD) is the Qualified Entity for Grant County. GCTD was formed as a Transportation District through ORS 267.080 -- 267.510 on December 5, 1990. GCTD is governed by a Board of Directors (BOD) comprising of seven members who are elected At-Large. The BOD set policy and procedure as recommended by the District Manager, with guidance from Special Districts Association of Oregon, ODOT RPTD, FTA, and FMSCA.

GCTD employs 1 District Manager, 1.5 Dispatchers, 10 Drivers & 1 contract bookkeeper.

GCTD currently has five 12 passenger cutaways, two 18 passenger cutaways, one 8 passenger Ford Transit and two minivans, all ADA. January 16, 2019 GCTD started two deviated fixed routes with the STIF formulary that supports the need for an additional District vehicle storage and park and ride accommodations for the public.

12. Capacity to Maintain Compliance

- By checking this box, the applicant certifies that if they are awarded funding they are able to meet or will have the capacity to maintain compliance with applicable federal, state and local laws and regulations including, and not limited to, those pertaining to passenger transportation, civil rights, labor, insurance, safety and health.

13. Does the applicant plan to use a Sub-Recipient or contractor to implement the grant supported activity?

- Yes
 No

14. If Yes, please list the Sub-Recipient(s) and describe how the applicant will provide sufficient Sub-Recipient/contractor oversight to ensure eligibility is maintained while receiving STIF Discretionary or Statewide Transit Network moneys.

If Yes, enter response in text box or upload response on the Document Upload tab and write "See Upload." If No, write N/A.

This project will be put of for bid. A contractor will be used for the site development. GCTD will develop a contract that will include oversight and ensure the contractor maintains eligibility throughout the project.

Project Information

Try to answer all questions, even if your project does not fit neatly within a category. No answer means a zero score.

15. Describe the project to be funded.

See application instructions for required content. Enter response in text box or upload response as an attachment in the Document Upload tab and write "See Upload."

This is Phase 2 of a 3 phase project.

Phase 1 consisted of land purchase to construct an additional bus shelter. The land was purchased June 2018.

Phase 2 (this phase) will consist of complete demolition of the existing structure, level and fill the property, storm drainage, bio swell, paving and fencing.

Phase 3 will be the construction of the bus shelter.

GCTD has previously filed a DCE on Phase 1 of this project, but will file a new DCE for Phase 2.

16. What Local Plans include this project and elements of the project?

See guidance for exemptions to this requirement.

Grant County Coordinated Human Service Public Transportation Plan 6/2016 pg 41, 46 & 50

STIF Priority List: <https://grantcountypeoplemover.com/priority-explanation/>

17. What is the minimum award amount that will still allow your project to proceed?

Enter an amount in dollars.

\$56,500

18. Select the fund source(s) that you think best aligns with your application.

Check all that apply

- STIF Discretionary
 STIF Intercommunity Discretionary
 FTA Section 5311 (f) Intercity Discretionary

Equity and Public Transportation Service to Low Income Households

(Score weights: Discretionary = 20%, STN = 10%)

19. Describe how the project supports and improves access for vulnerable populations.

This project will allow improved access to public transportation by adding to our existing park and ride spaces for our Intercity, Demand Response and Deviated Fixed Routes. Our Deviated Fixed Routes are fare free, extra parking allows more opportunity to utilize the service for low-income and disabled individuals.

High Percentage of Low-income Households was defined by the STIF Advisory Committee as: "High Percentage of Low Income Households" shall mean an area is determined to have a high percentage of low-income households when the percent of resident population demographics with income at or below 200% of poverty level in that area exceeds the percent of low-income population demographics in the State of Oregon by comparison.

There are 783 low-income households within a 1/2 mile of our transit stops on our DFR's. There are 3876 low-income individuals within that same boundary.

Coordination of Public Transportation Services

(Score weights: Discretionary = 10%, STN = 30%)

20. Describe how the project is a collaboration of multiple agencies or involves consolidation, coordination, or resource sharing between agencies.

For Phase 1, GCTD coordinated with ODOT RPTD.

During Phase 2 GCTD will collaborate with the Grant County Road Dept and the City of John Day for resource sharing to demolish the existing structure and disposal of the materials. GCTD will continue to collaborate with ODOT RPTD on the site development.

Statewide Transit Network

(Score weights: Discretionary = 10%, STN = 30%)

21. Describe how the project supports and improves the utility of the statewide transit network, improves the passenger experience, benefits multiple transit providers, and/or creates a foundation for future statewide transit network improvements.

This project will allow additional park and ride spaces for passengers utilizing our Intercommunity & Intercity connections, Deviated Fixed Routes or Demand Response services.

Our Deviated Fixed Routes are fare free, providing the opportunity for everyone to ride without cost to any location those routes stop.

GCTD currently connects Grant County to the Redmond/Bend area every Monday, Wednesday and Friday. Pendleton and Walla Walla every Tuesday. Burns the 1st, 3rd and 5th Thursdays of the month and Baker City the 2nd and 4th Thursdays of the month. On each of these routes, we stop in the small communities along the way, many of which are not served by other public transportation services due to their remoteness.

GCTD has plans to expand connections to Ontario on a weekly basis as well. With the many programs that GCTD operates, the need for additional passenger and vehicle accommodations is significant.

Funding and Strategic Investment

(Score weights: Discretionary = 20%, STN = 10%)

22. Describe how project match requirements will be met or exceeded. If this project will last beyond the 19-21 biennium, describe the plan for ongoing funding including match.

Describe why investment in this project makes sense both from the perspective of current need and long term Oregon transit needs.

Completion of Phase 2 of this project allows for additional park and ride access as well as better administrative office access, as current space is extremely limited and three vehicles of our fleet currently are parked outside and take up additional passenger parking.

Convenience often goes hand-in-hand with increased ridership, this provides convenience for passengers in addition to addressing a big need of the District. From our bus station, passengers are currently able to travel regionally, which includes passengers traveling to airports in destinations that we stop, which reduces costs for passengers having to utilize expensive parking at the airports.

Matching funds will come from current cash on hand. Funding for future maintenance of the land will come from contract revenues and the 5311 Formula Grant for Rural Areas, which is our primary operating grant for Seniors and Individuals with Disabilities.

23. Does this project depend on other funding sources including other discretionary grant processes whose outcomes are uncertain?
 If yes, identify the fund source and anticipated timing of funding certainty. If no, write N/A.
 No.

Environmental and Public Health

(Score weights: Discretionary = 15%, STN = 10%)

24. Describe how the project reduces greenhouse gas emissions, reduces pollution, and/or supports positive health outcomes.

Our current facility has limited capacity for both vehicles in the bus bays and passenger parking. This project increases our ability to keep our vehicles secure during non-business hours, out of the weather and will also increase available park and ride passenger parking. Having a site to park a single occupant vehicle and board a public transit vehicle increases the attractiveness and usefulness of public transit. It allows passengers to travel locally or Intercommunity while their vehicle is secure in a maintained parking area.

Safety, Security, and Community Livability

(Score weights: Discretionary = 25%, STN = 10%)

25. Describe how the project increases use and participation in active transportation, including public transportation.

Our current facility has limited capacity for both vehicles in the bus bays and passenger parking. This project increases our ability to keep our vehicles secure during non-business hours, out of the weather and will also increase available park and ride passenger parking. Having a site to park a single occupant vehicle and board a public transit vehicle increases the attractiveness and usefulness of public transit. It allows passenger to travel locally or Intercommunity & Intercity while their vehicle is secure in a maintained parking area.

The new lot will be under video surveillance and once phase 3 is complete, will have it's own lighting. Until that time, existing exterior lighting will be adjusted to cover the new lot.

26. Describe how the project supports and improves safety of passengers in transit vehicles and safety of other roadway users.

Public transportation is safer than travel in a single occupant vehicle. The Bureau of Transportation Statistics (BTS) reports that, in a typical year, a transit passenger is 40 to 70 times less likely to be killed or injured when riding public transportation than driving or riding in a motor vehicle.

By increasing park and ride capacity, passengers will be able to park at our bus station and then utilize our transit services.

Capital Assets

Capital assets are items that cost at least \$5,000 and have a useful life of at least 3 years.

27. Describe proposed capital purchases. Enter asset details in the Budget and Project Tables tab.

For capital construction projects, additional documentation will be required in the Document Upload tab. See guidance for more information. If no capital assets are included in your application, write N/A.
 The storm drain is anticipated to have a useful life of 40-70 years

The paved parking lot will have a useful life of 10-15 years.

The Bio-Swale useful life is 20-30 years with proper maintenance.

The 6' coated chain link fence is anticipated to last 20 years.

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Project Category and Fund Source

Project Category	Project Cost	Other Fund Source (Federal)	Other Fund Source (State)	Other Fund Source (Local)	Other Fund Source (Other)	Project Category Totals
Vehicle Purchase - Expansion	\$	\$	\$	\$	\$	\$ 0
Vehicle Purchase - Replacement or Right-Sizing	\$	\$	\$	\$	\$	\$ 0
Equipment Purchase	\$ 45,200	\$	\$	\$ 11,300	\$	\$ 56,500
Facility Purchase	\$	\$	\$	\$	\$	\$ 0
Signs/Shelters Purchase	\$	\$	\$	\$	\$	\$ 0
Planning	\$	\$	\$	\$	\$	\$ 0
Project Administration	\$	\$	\$	\$	\$	\$ 0
Operating	\$	\$	\$	\$	\$	\$ 0
Preventive Maintenance	\$	\$	\$	\$	\$	\$ 0
Mobility Management	\$	\$	\$	\$	\$	\$ 0
Total	\$ 45,200	\$ 0	\$ 0	\$ 11,300	\$ 0	\$56,500

Project Totals and Match Rate

Fund Source	Total Project Amount (Grant Amount + Match Amount)	Match Rate	Grant Amount	Match Amount	Match Sources	Overmatch Amount (If Any)	Match Funding is available if project is awarded?	Date match available	% of Funds used for Demand Response Transportation	% of Funds used for Fixed Route Transportation
STIF Discretionary - All Project Categories (20% Match)	\$ 56,500	20 %	\$ 45,200	\$ 11,300	Cash on hand Text	\$	yes Yes/No	07/01/2019 xx/xx/xxxx	50 %	50 %
STIF Discretionary - All Project Categories, Qualified Projects (10% Match)	\$	%	\$ 0	\$ 0	Text	\$	Yes/No	xx/xx/xxxx	%	100 %
STIF Intercommunity Discretionary - All Project Categories (20% Match)	\$	%	\$ 0	\$ 0	Text	\$	Yes/No	xx/xx/xxxx	%	100 %
STIF Intercommunity Discretionary - All Project Categories, Qualified Projects (10% Match)	\$	%	\$ 0	\$ 0	Text	\$	Yes/No	xx/xx/xxxx	%	100 %
5311 (f) Intercity - Operating (50% Match)	\$	%	\$ 0	\$ 0	Text	\$	Yes/No	xx/xx/xxxx	%	100 %
5311 (f) Intercity - Capital, Planning, Project Administration, Preventive Maintenance, Mobility Management (20% Match)	\$	%	\$ 0	\$ 0	Text	\$	Yes/No	xx/xx/xxxx	%	100 %

Vehicle Purchase

Vehicle Purchase	Vehicle Purchase Type	VIN of vehicle being replaced	Make	Model	Vehicle Category	Quantity	Unit Cost	Total Cost	Seats	ADA Stations	Seats w/ADA Stations Deployed	Fuel Type	Estimated Order Date	Estimated Delivery Date	Mileage	Date of Reading	Seller	Vehicle Condition
Vehicle Purchase 1	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 2	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 3	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 4	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 5	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 6	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 7	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 8	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 9	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle
Vehicle Purchase 10	Expansion/Replacement	Only answer if replacing vehicle	Text	Text	Select Letter (A-E)	#	\$	\$ 0	#	#	#	G/D/BD/E/HG/CNG/OF	xx/xx/xxxx	xx/xx/xxxx	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle	Only answer if purchasing used vehicle

Vehicle Replacement Information

Vehicles to Be Replaced	Year	Make	Model	Vehicle Category	VIN	Seats	ADA Stations	Seats with ADA Stations Deployed	Fuel Type	Vehicle Mileage	Disposal Type	Vehicle Condition	Vehicle Maintenance History
Vehicle Replaced 1	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 2	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 3	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 4	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 5	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 6	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 7	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 8	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 9	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.
Vehicle Replaced 10	xxxx	Text	Text	Select Letter (A-E)	17 digits	#	#	#	G/D/BD/E/HG/CNG/OF	#	Sale/Donate/Salvage	Good/Adequate/Marginal/Poor	Also include Right-sizing justification if applicable.

Equipment, Bus Stop Amenities, and Other Assets

Equipment, Signs, Shelters, Facilities, Land	Item Description	Model Number	Quantity	Estimated Unit Cost	Total Cost	Expected Order Date	Expected Delivery Date	Item Location	Lot Size	Square Footage	If breaking ground, have you filled out DCE?
Row 1	Coated 6' chain link fence	Text	250	\$ 20	\$ 5,000	11/01/2019 xx/xx/xxxx	12/31/2019 xx/xx/xxxx	Property Located at 231 NE Dayton Street John Day, OR 97845			e If Applicable
Row 2	Engineering, excavation, concrete storm drains, embankment fill, aggregate base and sub-base, paving	Text	1	\$ 51,500	\$ 51,500	11/01/2019 xx/xx/xxxx	12/31/2019 xx/xx/xxxx	Property Located at 231 NE Dayton Street John Day, OR 97845			e If Applicable
Row 3	Text		#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx				e If Applicable
Row 4	Text		#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx				e If Applicable
Row 5	Text		#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx				e If Applicable
Row 6	Text		#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx				e If Applicable

Row 7	Text	#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx	e	If Applicable
Row 8	Text	#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx	e	If Applicable
Row 9	Text	#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx	e	If Applicable
Row 10	Text	#	\$	\$ 0	xx/xx/xxxx	xx/xx/xxxx	e	If Applicable

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Documents Requested *

Required?

Attached Documents *

Document 1		Preliminary Cost Estimate GCTD Coordinated Transportation Plan
Document 2		Elevation Cert GCTD Site Plan Dayton Existing Site
Document 3		STIF Advisory Committee By-Laws STIF Website and committee members
Document 4		
Document 5		
Document 6		
Document 7		
Document 8		
Document 9		
Document 10		

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