

Section 5317
New Freedom
Phoenix/Mesa Urbanized Area
FY 2009 Application
(Populations Over 200,000 within Maricopa County)

APPLICANT INFO:

Organization Name: _____

Project Title: _____

Competitive Selection Process Coordinated By:



City of Phoenix

PUBLIC TRANSIT DEPARTMENT

302 North 1st Avenue, Suite 900
Phoenix, AZ 85003

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APPLICATION PACKET

GENERAL OVERVIEW AND INSTRUCTIONS

This document by the City of Phoenix Public Transit Department (PTD) is an implementation of the Federal Transit Administration's (FTA) New Freedom program, pursuant to 49U.S.C. §5317 and Circular FTA C 9045.1. Additional federal program references can be found in the last page of this document.

Enclosed is the FY 2009 supplemental application packet for the Section 5317 New Freedom program. The application materials will be made available to the Maricopa Association of Government (MAG) membership, Regional Public Transit Authority members, and an electronic version will be placed on the MAG www.mag.maricopa.gov, and Public Transit (<http://phoenix.gov/PUBLICTRANSIT>) websites.

As designated by the Governor of the State of Arizona, PTD administers New Freedom funds for large urbanized areas (populations over 200,000) within the Maricopa County region of the state. Available funding for FY 2009 supplemental process is approximately \$1.36 million for this urbanized area.

New Freedom is a program under the Federal Transit Administration of the US Department of Transportation. The purpose of the New Freedom grant program is to provide funds to support the capital and operating costs of "new" (post August 2005 initiated) public transportation service focused on persons with disabilities, and to encourage public transportation alternatives which provide services and facility improvements to address needs that go *beyond* those required by the Americans with Disabilities Act (ADA). New Freedom projects may include activities permitting a transit operation to extend service beyond the ADA "complementary paratransit" service requirement of "1/4 mile either side of a fixed route" – or other constraints that many public transportation systems historically have had to adhere to or were otherwise financially constrained to improve upon.

Transit operators may also elect to extend their ADA curb-to-curb service provisions, for example, to door-to-door or beyond, depending on other local policy limitations. In other locales, where there is no traditional public transportation, i.e., with such ADA requirements as those stated above, New Freedom may be used to provide new service which enhances disabled persons' ability to access opportunities for jobs, medical or other needs.

ELIGIBILITY

Eligible recipients include private non-profit organizations, State or local governmental authorities, and operators of public transportation services including private operators of public transportation services. The latter group includes private-for-profit cab, shuttle and transit operators whose primary function (for the purposes of this grant program) is to fulfill the public transportation objectives of the program described above.

Activities that could be funded under the program include, but are not limited to:

- Purchasing vehicles and supporting accessible taxi, ride-sharing, and vanpooling programs; including staff training, administration, and maintenance.
- Providing paratransit services beyond minimum requirements (3/4 mile to either side of a fixed route), including for routes that run seasonally.
- Making accessibility improvements to transit and intermodal stations not designated as key stations.
- Supporting voucher programs for transportation services offered by human service providers.
- Supporting mobility management and coordination programs among public transportation providers and other human service agencies providing transportation. These activities are considered a capital cost (provided at the favorable 20% local match rate) and are defined as short-range planning and management activities and projects focused on improving coordination among public transportation and other transportation service providers.

Mobility management typically characterized as personnel, equipment or services – or a combination of these – to organize coordination activities for *more than one* operator-agency. These applications will be evaluated on a case-by-case basis to ensure that they have larger coordination objectives in mind than just those serving a particular applicant’s internal management needs.

- Other capital costs include vehicle/service-related communications equipment, dispatching, scheduling and coordination hardware and software, and ITS (Intelligent Transportation Systems) features such as real-time information displays to inform customers of service status.
- **NEW: Effective May 29, 2009**, FTA is expanding the type of projects it considers to be “beyond the ADA” and thus increase the types of projects eligible for funding under the New Freedom program. Under this interpretation, eligible projects include new and expanded fixed route and demand responsive transit service planned for and designed to meet the needs of individuals with disabilities.

REQUIREMENTS

Matching Funds

Federal funds provide for up to 80 percent of capital projects and 50 percent of operating projects. The Federal funds are available for the year appropriated plus two years, meaning the funds are available to be used for three years. Qualifying expenditures are reimbursed to the sub recipient by the FTA through the City of Phoenix, as the designated recipient for large urbanized areas with populations of 200,000 or greater in Maricopa County, State of Arizona.

Commitment to MAG’s Human Services Coordinated Transportation Planning Process
SAFETEA-LU, the current Congressional authorization for all federal surface transportation programs, calls for a comprehensive approach to coordination including a provision to ensure that projects for all human service-related transportation grants, including Sections 5316 and

5317, are “*derived from a locally developed, coordinated public transit-human services transportation planning process.*”

In Maricopa County, MAG oversees this process. All agencies applying for Section 5317, New Freedom funds will be required to participate in the planning process and support the short-term coordination strategies adopted for MAG’s Human Services Coordinated Transportation Plan. All subrecipients will be required to sign a commitment form agreeing to participate in this process (see *Section 7* of this application). Link to MAG’s Human Services Coordinated Transportation Plan:

http://www.mag.maricopa.gov/pdf/cms.resource/HS_2008_Human-Services-Coordination-Transportation-Plan14220.pdf

Entering into Agreement with City of Phoenix

All subrecipients will be required to enter into a Grant Pass Through Agreement with the City of Phoenix as a result of being awarded any grant funds. The City’s Grant Pass Through Agreement incorporates the terms and conditions outlined in the FTA’s Master Agreement. To view the FY 2009 FTA Master Agreement, visit: <http://www.fta.dot.gov/documents/15-Master.pdf>.

Reporting Requirements

All subrecipients will be required to submit regular progress reports to the City of Phoenix. Specific reporting requirements will be outlined in the Grant Pass Through Agreement. The City of Phoenix will submit all required reports directly to the Federal Transit Administration. A sample quarterly progress report is provided in *Section 9 – Applicant Resources*.

Capital Procurements

All subrecipients must comply with all federal requirements associated with procurements – primarily those pertaining to vehicles – including but not limited to Invitation for Bid (IFB) design, advertisement, the bidding process, contracting and federal Buy America, Bus Testing, Lobbying and Debarment certifications – as well as final City of Phoenix approvals. Contact the City of Phoenix prior to making purchases.

Federal Requirements, General Assurances and Certifications

All subrecipients will be required to comply with all applicable federal requirements, certifications, and assurances. The subrecipients’ Authorized Representative and Attorney must sign the provided forms (see section 8 of this application).

APPLICATION & SELECTION PROCESS

Applicants will participate in a competitive selection process. As the designated recipient charged with administering the New Freedom program, the PTD certifies that the selection of projects will be fair and equitable. Additionally, the process will be conducted in cooperation with the Maricopa Association of Governments, Maricopa County’s metropolitan planning organization, as this will be an area wide solicitation for applications for grants to the recipients and subrecipients under these sections.

2009 City of Phoenix - Section 5317 Tentative Program Timetable*

Public Transit Department (PTD) distributes applications and support material to potential applicants.	Week of August 10, 2009
<p style="text-align: center;">Regional Application Workshop</p> <p style="text-align: center;">Tuesday, August 25, 2009 9:00 a.m. – 10:30 a.m. City of Phoenix Public Transit Department 302 N. 1st Avenue, Phoenix, AZ 85003 9th Floor- Conference Room 9A</p>	<p>Tuesday, August 25, 2009</p> <p><i>*Please contact Wendy Miller to register by phone (602) 495-7207, TTY (602) 495-0936 or via email at wendy.miller@phoenix.gov</i></p>
Applications due to the PTD	Thursday, September 17 @ 4:00 p.m.
PTD to publish the list of applicants and allow a one week period for public comment.	Week of September 21, 2009
Regional Selection Committee receives applications, public comments and instructions for the evaluation and ranking process.	Week of September 28, 2009
Applicant Interviews with Regional Selection Committee	Week of October 12, 2009
Regional Selection Committee provides final funding recommendations to PTD.	Week of October 12, 2009
PTD notification to applicants regarding project selection.	By November 13, 2009
Appeal deadline	By November 27, 2009
TIP Amendment and FTA application process	November 2009 – Early 2010
PTD/ Subrecipient Agreement process	Early 2010 to Mid 2010
Projected availability of funds	Mid to Late 2010

*Timeframes shown may be subject to change.

Regional Application Workshop

The application process begins with a Regional Application Workshop for Sections 5316 and 5317 (Job Access Reverse Commute and New Freedom) Grants. **Workshop is being held on Tuesday, August 25, 2009 from 9:00 a.m. to 10:30 a.m.** at the Phoenix Public Transit Department, 302 N. 1st Avenue, Suite 900, Phoenix, AZ 85003. For registration, information or to request reasonable accommodations, please contact Wendy Miller by phone, (602) 495-7207, TTY (602) 495-0936 or by email at wendy.miller@phoenix.gov.

Application Deadline

Applications are due to the City of Phoenix Public Transit Department, 302 North 1st Avenue, Suite 900 (9th floor), Phoenix, AZ 85003 by **Thursday, September 17, 2009 at 4:00 p.m.** Please make all materials attention to **Wendy Miller**. PTD staff will mark your materials with

a date marker, certifying the date/time your application was received. A receipt of the date/time can be issued if requested. **Late applications will not be accepted.**

While the application itself may be accessed and completed (drafted and edited) electronically, **one original hardcopy and seven (7) copies, total of eight (8), of the application must be submitted.** Original signatures are required on the original application. Allow adequate time to obtain the necessary signatures and approvals and to mail or hand deliver a copy of the application to the Public Transit Department.

Public Comment

The Public Transit Department will publish the list of applicants and allow for a one week period for public comment.

Evaluation of Applications

A Regional Selection Committee is selected to review and evaluate all applications submitted by the deadline. The committee evaluates the information submitted in the application based on criteria as listed in the table below.

Applicant Interviews

All applicants will be invited to an interview process after the evaluation panel conducts a preliminary review of the applications. The interview process will provide an opportunity for the applicant to give a presentation on their proposed project(s) and allows the panel to ask the applicant questions based on their application, and seek any clarification deemed necessary.

Final Selection

The final decision on project selection and funding will be made by the Phoenix Public Transit Director. The Phoenix Public Transit Department retains sole discretion to determine which projects will be funded and the amount of funds awarded to any given project. Phoenix Public Transit Department may award all funding requested, some, or none at all. All applicants will be notified of this decision within one month after the final decision is made.

Appeal Process

Applicants will be given the opportunity to appeal the Public Transit Department funding recommendations. The applicant must use the following process to be recognized as a valid appeal:

Letters of appeal must be submitted and postmarked within 14 calendar days after the postmarked date of decline notice and mailed to: Assistant Public Transit Director, Public Transit Department, 302 N. First Avenue, Suite 900, Phoenix, Arizona 85003. The letter of appeal must clearly identify the applicant, contact person, address, phone number, email address, project description and grounds for appeal.

The Assistant Public Transit Director will review the appeal and notify the applicant in writing of the decision within 14 calendar days. If the applicant is not satisfied with the Assistant Director's response, a secondary appeal may be made to the Public Transit Director at the same address as above. This appeal must be submitted and postmarked within 7 calendar

days of the postmarked date of the appeal decision notice. A copy of the secondary appeal must also be sent to the Assistant Public Transit Director. The Public Transit Director will provide a written response to the applicant within 30 days of receipt of the appeal to the Director's Office. The Public Transit Director's decision is final.

The remainder of this page left intentionally blank.

<i>New Freedom Evaluation Criteria:</i>
<p>I. Addresses the need for new public transportation service targeted at the disabled and provides alternatives that are beyond those required by the ADA. (25 pts)</p> <ul style="list-style-type: none"> • Need for proposed service or equipment; target population; ridership; existing vehicle fleet; replacement or expansion; other transportation services available (availability, sufficiency, appropriateness or other services in area); • Anticipated increase, decrease or no change in service.
<p>II. Effective Utilization of Equipment or Service (25 pts.)</p> <ul style="list-style-type: none"> • Number of clients served; trips; proposed services and trip priorities; hours of equipment operation per day and week; annual miles of vehicle operation; limitations on services
<p>III. Supports local and regional coordination plan (25 pts.)</p> <ul style="list-style-type: none"> • Demonstrates attempts to coordinate with other agencies and public or private transit and paratransit systems, and other services. • Demonstrates willingness to participate in a coordinated system • Participation on local and/or regional coordination committee(s) • Working agreements in place or under construction • Project is clearly derived from the regional plan and demonstrates support for the local strategies • To what degree does the applicant demonstrate attempts to coordinate with other agencies and public or private transit and para-transit systems, and other services? Currently does or would consider doing one of more of the following : <ul style="list-style-type: none"> <input type="checkbox"/> Sends drivers to training held by others <input type="checkbox"/> Invites other drivers to attend their training <input type="checkbox"/> Shares back-up vehicles with other agencies <input type="checkbox"/> Provides information to clients on other available services <input type="checkbox"/> Works to identify availability on vehicles for each others' clients, i.e., centralized info/call center, inter-agency referral system, etc. <input type="checkbox"/> Purchases rides for clients on other agencies <input type="checkbox"/> Sells rides on service to other agencies <input type="checkbox"/> Provides or participates in joint maintenance arrangements • Participates in a joint or coordinated insurance pool
<p>IV. Management Capability (25 pts.) Demonstrates ability to or have/indicate:</p> <ul style="list-style-type: none"> • Availability of—and/or process to obtain—matching funds • Funds to operate and maintain a vehicle for at least four years or 100,000 miles. • Program transportation experience • Designated budget and staff to fund and manage program; • Adequacy of maintenance program • Past Civil Rights or EEO complaints and outcomes

APPLICATION SECTION 1: CHECKLIST

The following documents must be submitted as part of your application:

**Applicant
Check-off**

- Section 1- Checklist**
 - Cover Letter (Addressed to City of Phoenix, transmitting application and summarizing project, federal request amounts, and key points)
- Section 2 - Applicant Information**
 - Provide information for all applicant agencies if a collaborative effort including any interagency agreements
- Section 3 - Organization & Project Description**
- Section 4 - Project Budget & Sustainability**
- Section 5 - Project Summary**
- Section 6 - Support Documentation**
 - Map(s) of Service Area
 - Organizational Chart of Employees and Grant-related Responsibilities
 - Vehicle Inventory List
 - Project support letters and/or opposition letters
 - Copy of IRS 501 (c) (3) letter – Nonprofit Organizations Only
- Section 7 - MAG Short-term Coordination Strategies Commitment Form**
- Section 8 - Certifications and Assurances**
 - Affirmation of Applicant
 - Affirmation of Applicant's Attorney
 - Assurance of Authority of Applicant and it's Representatives
 - General Assurances with all Federal Requirements
 - Certification of Civil Rights Complaint Status
 - Certificate of Compliance with Manufacturer's Maintenance Schedule (Vehicle requests only)
 - Certification of Restrictions on Lobbying (if applicable)

APPLICATION SECTION 2: APPLICANT INFORMATION

Applicant Status Multi-agency collaboration? Check all that apply and provide contact information for each agency.	<input type="checkbox"/> Private/Non-Profit Organization <i>(must provide IRS 501(c)(3) letter in section 6)</i> <input type="checkbox"/> State/Local Government <input type="checkbox"/> Operator of Public Transportation
Primary Service Area	<input type="checkbox"/> Rural <input type="checkbox"/> Urban <input type="checkbox"/> Both
1. Legal Name of Applicant's Organization/ Agency :	
2. Name/Title of Person(s) Authorized to sign legal agreements or contracts	
3. Contact Information:	<div style="margin-left: 20px;"> <u>Primary Contact:</u> </div> <div style="margin-left: 40px;"> Title: _____ Address: _____ City: _____ Zip Code _____ Phone: _____ FAX: _____ E-mail: _____ Web Site Address (if any): _____ </div> <div style="margin-left: 20px; margin-top: 10px;"> <u>Alternate Contact:</u> </div> <div style="margin-left: 40px;"> Title: _____ Address: _____ City: _____ Zip Code _____ Phone: _____ FAX: _____ E-mail: _____ </div>
4. Transportation Provider Name <i>(if different from above)</i>	
Contact:	
Title:	
Address:	
City:	_____ Zip Code _____
Phone:	_____ FAX: _____
E-mail:	
Web Site Address (if any):	

APPLICATION SECTION 3: ORGANIZATION & PROJECT DESCRIPTION

This part of the application is divided into several sections, each covering a different aspect of your system and its management. Applicants are urged to provide thorough but concise answers to the questions.

A. ORGANIZATION

1. **Is your organization a recipient under any of the following programs?**
 Section 5307 Section 5310 Section 5311 Section 5317 N/A

2. **List the federal money received by your agency in the last three fiscal years.**
 2006 \$ 2007 \$ 2008 \$ N/A

3. **Provide a brief description of your agency's primary mission, including a mission statement if available.**

4. **Provide the structure of your organization.** Provide information on Board Members, employees, and volunteers. Identify the employees job titles (drivers, counselors, etc.), whether they drive, and indicate full time or part time employment. Be sure to identify employees with grant-specific job duties (accountant, program manager etc.). Attach an organizational chart in Section 6 of the application.

5. **Please describe your agency's experience and qualification in providing passenger transportation. Please include current service area(s), days, and hours of operation.**

6. **Does your organization currently have adequate staffing and resources to carry out your proposed project?** Yes No
 If no, please explain.

7. **Describe your organization's experience in and ability to address federal requirements such as reporting requirements, record keeping, competitive purchasing, bookkeeping, documentation, and invoicing as required by federal regulations.**

8. **Applicant History: Please list all previous Section 5316 or 5317 Awards received by your agency by grant year.**

9. **Has your agency conducted any evaluation on previously awarded Section 5316 or 5317 projects for success or possible improvements?** Yes No N/A
 If yes, Please describe.
 If no, why not?

B. PROJECT DESCRIPTION *Mobility Management projects only fill out through B.6. of this section and skip to Section E- Coordination.

1. **List your project type:** Capital Operating Both

Is your service Trip-based Information-Based Capital

- Trip-based (fixed route, flexible route, shuttle/feeder service, demand response, user-side subsidy vouchers, or vanpool)
- Information-based (mobility manager, one-stop center referral, trip planning, one-on-one or group transit training, internet-based information, info materials/marketing)
- Capital Investment (vehicle for individual, vehicle for agency, vanpool, car-sharing, ITS-related hardware/software, other capital projects)

2. **List the Federal share amount requested for your project:**

Capital \$ Operating \$ TOTAL FEDERAL REQUEST \$

3. **Funding will be used for the following:**

New Service Continuation of Service Expansion of Existing Service

4. **Provide a complete and detailed description of your project. Indicate changes to your existing service or anticipated project start date if applicable. Describe the operational characteristics of the proposed service (fares, days and hours of operation, types of service).**

5. **Briefly describe how your project will impact new transportation service areas, and describe your agency's ability to provide public transportation alternatives beyond ADA requirements to assist individuals with disabilities.**

6. **Please describe why the transit service provided by existing public or private transit operators is unavailable, insufficient, or inappropriate to meet the needs of individuals with disabilities proposed to be served through this application.**

**Mobility Management projects only - skip to Section E- Coordination*

7. **Please list the average daily, monthly and annual number of rides (one-way trips) currently provided (if any) and the number estimated to be provided as a result of the New Freedom project submitted.**

Daily: One-Way Trips Current Estimated after project

Monthly: One-Way Trips Current Estimated after project

Annual: One-Way Trips Current Estimated after project

8. **Describe target population(s) to be served, how the consumer will be involved in the planning/design of the service(s), how the service(s) will be marketed to this target population, and how will they access the service(s)?**

C. NEED FOR SERVICE

1. How many current annual passenger trips are provided by your agency?
2. What is the intended distribution of trips (%) for agency clients/passengers?

TRIP PURPOSE	Percent (Total must equal 100%)
Medical	
Employment	
Education/Training	
Service Appointments	
Other	

3. How many days current service is operated, noting seasonal differences?

Operating Days per Week Operating Days per Month

Describe Seasonal Differences in Service

4. Vehicle Availability. How many vehicles are:

Available for passenger service? Required in your peak period?

5. Please list the non-deadhead vehicle service hours/ miles your agency provides.

Daily Service Hours Daily Service Miles
 Weekly Service Hours Annual Service Miles

6. Do you operate your vans on: Check all that apply

Weekdays Weeknights after 6pm Weekends

7. Can all requests for service be accommodated with the existing services?

Yes, all requests are accommodated.
 No, all requests are not accommodated. Explain.

8. For existing services, what is the average number of passengers carried per vehicle? (Divide your average daily ridership by the average number of daily vehicles in service, excluding back-up or spare vehicles).

Average number of riders per vehicle:

9. Please list the number and type of vehicles in your current fleet (Attach inventory list in section 6).

D. VEHICLE USE (FILL OUT ONLY IF REQUESTING A VEHICLE)

1. List the vehicle(s) type(s) being requested:
2. How will the requested vehicle be used?

Replace Existing – vehicle being replaced is a year with miles
Vehicle Description: VIN:

Does vehicle being replaced have wheelchair lift? Yes No

Service expansion.

Does the vehicle(s) requested have a wheelchair lift? Yes No

If not, please describe why:

3. If applying for a non-wheelchair vehicle, does the applicant have a recent wheelchair vehicle(s) in good working condition in the fleet or under contract?

Yes. If under contract- please explain:

No. If not, please indicate your agency's ability to provide equivalent levels and quality of service to all clients including individuals with disabilities.

4. Describe the service to be provided with the vehicle(s) requested in this application. Include service area, schedule, including hours per day and how many days per week the service will operate.

5. Describe your agency's ability to fund the operation and maintenance for the requested vehicle for at least four years or 100,000 miles.

6. What is the number of passenger trips expected on the vehicle requested?

Daily Weekly Annual

E. COORDINATION - The definition of human services transportation coordination is the sharing of resources to minimize redundancy and gaps; increase the quality and accessibility of services; and to assist agencies in fulfilling their mission. All agencies awarded Section 5316 funding will be expected to participate in local coordination activities.

1. Has your agency participated in your regional (MAG) Human Services Coordination Transportation Planning Process?

Yes No If no, please describe why not:

2. Please describe how your project is consistent with the coordination strategies in MAG's regional Human Services Coordination Transportation Plan.

3. Please indicate which page number in the Human Services Coordination Transportation Plan corresponds with your proposed project.

4. Please describe any coordination activities your agency has recently initiated or experienced, list the name(s) of the other agency(s) involved and include the impact to date on your and the other agency's operations due to this coordination. Include copies of any written or details of oral agreements to collaborate on service or other resource sharing.

5. Provide letters of support or opposition to your application (attach in Section 6- Support Documentation).

6. Please identify barriers to coordination that your agency is experiencing. Barriers may be found in a range of areas including but not limited to insurance, funding, capacity, and mission.

7. Please identify opportunities for coordination that your agency may be able to initiate with other agencies. This includes but is not limited to sharing vehicles, drivers, equipment, and training. This also may include a fleet management analysis to identify deadhead, or downtime, of vehicles and/or drivers.

8. For each of the following, check the box for which you presently coordinate or share with other agencies, and those which you are willing to evaluate in an effort to increase coordination.

	Currently Do	Would Consider
Sending our drivers to training held by others	<input type="checkbox"/>	<input type="checkbox"/>
Invite other drivers to attend our training	<input type="checkbox"/>	<input type="checkbox"/>
Share back up vehicles with other agencies	<input type="checkbox"/>	<input type="checkbox"/>
Provide our clients information on other services	<input type="checkbox"/>	<input type="checkbox"/>
Work with agencies to identify rides for our clients	<input type="checkbox"/>	<input type="checkbox"/>
Purchase rides for our clients on other services	<input type="checkbox"/>	<input type="checkbox"/>
Sell rides on our service to other agency clients	<input type="checkbox"/>	<input type="checkbox"/>
Participate in joint maintenance arrangement	<input type="checkbox"/>	<input type="checkbox"/>
Participate in joint or coordinated insurance pool	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

APPLICATION SECTION 4: PROJECT BUDGET & SUSTAINABILITY

In this section you will be asked to provide the budget information for the capital and operating costs associated with the project. Mobility Management projects including related staffing and support items should be noted under "Capital."

Please be thorough when providing line items within your budget. If listing personnel salaries, please indicate the anticipated hourly, weekly or monthly salary and the estimated number of hours. If listing a voucher program, please list the number of vouchers to be provided. For training, please list the number of persons to be trained. Include any narrative or justifications as necessary.

1. **Can this project be scaled to a more limited scope with less funding?**
 Yes No
If no, please explain.
If yes, please indicate how your project can be limited (funding, quantity, less hours, etc.)?
2. **Source & Sustainability-** Please discuss the availability of necessary matching funds for the proposed equipment or service. Enter the source of the local match funds. If LTAFII Funds are used as a local match, please identify this and the jurisdiction providing the funds. Indicate which local match sources are capable of sustaining the project after this funding year.
3. **What is the total operating budget for Transportation services for your agency?**
4. **Who will prepare and monitor the transportation budget?**
5. **Who will prepare and submit the required reports?**
6. **How much in federal funds (not just transportation) did your agency receive in FY2009** **Anticipated for FY2010?**
7. **Does your agency presently conduct an annual audit?**
 Yes No
If yes, is the audit required to meet the requirements of the Office and Management Budget A-133 audits for agencies receiving more than \$300,000 in federal funds?
 Yes No

BUDGET SUMMARY					
A. Capital (80/20)					
Federal Request Amount					\$ -
Local Match					\$ -
B. Operating (50/50)					
Federal Request Amount					\$ -
Local Match					\$ -
TOTAL FEDERAL REQUEST					\$ -
TOTAL LOCAL MATCH					\$ -

CAPITAL BUDGET DETAIL			
List capital expenses for all requested items. Mobility management projects are considered a capital cost and should be included on this request.			
Equipment:			
Requested Item	Quantity	Unit Cost	Subtotal
			\$0
			\$0
			\$0
Equipment Total			\$ -
Mobility Management:			
			\$0
			\$0
Mobility Mgmt Total			\$ -
TOTAL CAPITAL COST:			\$0
FTA 5316 Match Ratio 80/20			
Federal Share (not to exceed 80% of total)			\$0
Local Share			\$0
TOTAL COST			\$0
Match Funding Source: List each source and amount			
<i>Federal \$ may be used as a match source with the exception of DOT funds.</i>			
	Name of Source	Type of funding	Amount
1			\$0
2			\$0
3			\$0

FOR VEHICLES ONLY: Please identify as accurately as possible your anticipated annual operating budget for the vehicle. Use the example below as a guide to calculate your estimated annual costs.

Year	Estimated Amount	Source of Funding	Comments:
1			
2			
3			
4			

To calculate your annual operating budget for vehicles, consider the following example:

Items for consideration:	Per Week	Per Month	Per Year
Driver(s) Salaries	270.00	1,170.00	14,040.00
Other Staff Salaries	50.00	216.67	2,600.00
FICA	24.48	106.08	1,273.00
State Tax	1.71	7.41	88.90
Vehicle Insurance	41.54	180.00	2,160.00
Gas and Oil, miles per year	51.92	225.00	2,700.00
Repair and Maintenance	65.08	282.00	3,384.00
Vehicle License	.42	1.81	21.67
Indirect Admin Costs			
Other Costs * Indicate other costs not listed above			
TOTAL:	505.15	2,188.97	26,267.57

Year	Estimated Amount	Source of Funding	Comments:
1	26,267.57	Operating reserves	
2	27,000	Operating reserves	
3	28,000	Operating reserves	
4	28,500	Operating reserves	

OPERATING BUDGET DETAIL			
List operating expense details. All expenses must directly relate to grant activities for eligibility.			
OPERATING EXPENSES			
Personnel/ Voucher Program Operating Expenses:			
Salaries			\$0
Fringe Benefits			\$0
Voucher Program Expenses			\$0
Other Operating Expenses:			
Fuel and Oil			\$0
Tires, Parts, Maintenance			\$0
Vehicle Licenses, Insurance			\$0
Other Operating Expenses			\$0
OPERATING EXPENSES SUBTOTAL:			\$0
OPERATING REVENUES			
Fare Revenues			\$0
Other Operating Revenues			\$0
OPERATING REVENUES SUBTOTAL:			\$0
NET OPERATING COSTS			\$0
(Subtract operating revenue subtotal from operating expense subtotal)			
FTA 5317 Match Ratio 50/50			
Federal Share (not to exceed 50% of total)			\$0
Local Share			\$0
TOTAL OPERATING COST:			\$0
Match Funding Source: List each source and amount			
<i>Federal \$ may be used as a match source with the exception of DOT funds .</i>			
	Name of Source	Type of funding	Amount
1			\$0
2			\$0
3			\$0
Local Share Total:			\$0

APPLICATION SECTION 5: Project Summary

City of Phoenix PTD (Section 5317) Applications Projects Summary						
Applicant	Clientele & Services	Service Area	Project Abstract	# of Persons/ # of Trips to be served	Coordination Efforts	Applicant History
EXAMPLE: Trans-for-U Jane Doe, Operations Director 500 E. Main St. Phoenix, AZ 85000 602/256-2245 Email: jdoe@trans4u.org	Provide the type of clients you serve and the type of services provided.	Briefly describe the service area boundaries.	Provide a short summary of the project.	Annual passenger trips 1,510 Annual passengers served 891	Provide a description of your organization's coordination efforts in the area of human services transportation.	Provide a brief description of any previous 5316 or 5317 awards received.

APPLICATION SECTION 6: Support Documentation

In the section below please provide any support documentation for your project

- Service Area Map(s)
- Organizational Chart
- Vehicle Inventory List
- Support and/or Opposition Letters
- IRS 501(c)(3) letter (Non-profit agencies only)



Total Fleet Vehicle Inventory Instructions

Use the following vehicle condition and classification code table to fill in and complete the information on the total vehicle fleet inventory table. On the Total Fleet Vehicle Inventory list, please provide individual vehicle information on all vehicles used to carry passengers in your fleet.

VEHICLE CLASSIFICATION AND VEHICLE CONDITION CODE TABLES

(Use the following codes for completing the table on the next page.)

VEHICLE CLASSIFICATION TYPE	CODE
HEAVY DUTY 40 + FOOT BUSES	1
HEAVY DUTY 60 + FOOT BUSES	2
MEDIUM DUTY 20-30 FOOT BUSES OR MINI-BUSES	3
LIGHT DUTY 20-30 FOOT VANS (Larger Cutaways, and Maxi-Vans, etc.)	4
LIGHT DUTY 15-25 FOOT VANS (Small Cutaways, Mini-Vans , Small Maxi-Vans (including lift vans) & Suburbans)	5
SUPPORT VEHICLES (Sedans, Station Wagons, Pickups, etc.,)	6
NOTE: Vehicle footage is measured from bumper to bumper)	

VEHICLE CONDITION DEFINITIONS	CODE
EXCELLENT: Brand new or less than one year old, no major problems exist, or only routine preventative maintenance is required.	5
GOOD: Elements are in good working order, requiring only nominal or infrequent minor repairs.	4
ADEQUATE: Requires frequent minor repairs or infrequent major repairs. Elements are in adequate working order and the asset's usage can continue.	3
POOR: Requires frequent major repairs, elements are in poor working order, or asset is technologically dated and requires major retrofit. Future usage requires significant investment, which may or may not be cost-effective.	2
FAILURE: In sufficiently poor condition that continued use is impossible or non-cost-effective.	1

Application • Section 5317 New Freedom

CITY OF PHOENIX, PUBLIC TRANSIT DEPARTMENT

APPLICATION SECTION 7: 2009 Commitment to Strategies for FTA Section 5310, 5316 and 5317 applicants

SAFETEA-LU requires any agency applying for Section 5310 funds (Elderly Individuals and Individuals with Disabilities); Section 5316 funds (Job Access and Reverse Commute); and/or Section 5317 funds (New Freedom) funds; to respond to a locally derived human services transportation coordination plan. Agencies will demonstrate compliance with the 2009 MAG Human Services Coordination Transportation Plan Update as evidenced by the following:

- Attendance at designated human services transportation meetings to assist in the development and implementation of regional coordination planning.
- Compliance with information and data requests to aid in the collaborative efforts of the planning process.
- Demonstrated support and achievement of goals in the plan as appropriate and identified in the plan.

Agency data gathering and feedback is a valued part of the regional human services transportation coordination effort. Strategies identified in the coordination process are the collaborative effort of all participating agencies. A successful and relevant plan will assist the agencies in their mission to serve elderly persons, and persons with disabilities and low income.

I do hereby agree, on behalf of my organization, that we will actively support strategies developed in the plan in compliance with SAFETEA-LU regulations. Our participation will continue throughout the term of the grant.

If you have any questions about these strategies at any time during your grant term, please contact Amy St. Peter at the Maricopa Association of Governments by calling (602) 452-5049 or by emailing astpeter@mag.maricopa.gov.

Authorized Representative of Applicant:

Printed Name

Title

Signature

Organization

Date:

APPLICATION SECTION 8: Certifications and Assurances

This section contains federal certifications and assurances and forms required by the City of Phoenix which need to be completed and submitted as shown. The following forms must be included with the application for Section 5317 (New Freedom) funding. If any of the following forms (where applicable) are not submitted with your application, the application will be considered “incomplete” and will not be a part of the application review panel.

It is incumbent upon the Applicant/Subrecipient to be aware of its responsibilities and requirements included under any and all certifications and assurances. These are available for viewing at: http://www.fta.dot.gov/documents/2009-Certs-Appendix_A.pdf For all 49 USC Chapter 53 grant programs, the federal government considers City of Phoenix as *its* designated recipient and the City’s applicants as *its* subrecipients. Unless *explicitly* excused or stated otherwise (regarding applicant or grant type), the applicant should assume that all certifications and assurances are applicable to them. However, of particular interest will be Appendix “A” of this Federal Register, and especially the *New Freedom* section found within the above-linked document and this Handbook.

In some instances, responsibilities conferred upon the City of Phoenix – the FTA designated recipient– are applicable to the City of Phoenix applicants/subrecipients by implication or otherwise as an explicit City of Phoenix administrative determination. It is also worthwhile for applicants to familiarize themselves with other sections of the Certifications and Assurances which may have an impact on Section 5317 operations, even if comments do not appear to be specifically directed at 5317, e.g., the *Section 5310, Elderly Individuals & Individuals With Disabilities Formula Grant Program* section. Related assurances can be found in the following pages of this Handbook under *General Assurances–Section 5317 (New Freedom)*.

FEDERAL FISCAL YEAR 2009 FTA CERTIFICATIONS AND ASSURANCES
SIGNATURE PAGE

(Required of all Applicants applying for FTA assistance and all FTA recipients with an active capital or formula project)

AFFIRMATION OF APPLICANT

Name of Applicant (Organization):

Name and Title of Authorized Representative:

BY SIGNING BELOW, on behalf of the Applicant, I declare that the Applicant has duly authorized me to make these certifications and assurances and bind the Applicant's compliance. Thus, the Applicant agrees to comply with all Federal statutes, regulations, executive orders, and directives, and with the certifications and assurances as indicated on the foregoing page applicable to each application it makes to the Federal Transit Administration (FTA) in Federal Fiscal Year 2009.

FTA intends that the certifications and assurances the Applicant will view at http://www.fta.dot.gov/documents/2009-Certs-Appendix_A.pdf, as representative of the certifications and assurances in this document, should apply, as provided, to each project for which the Applicant seeks now, or may later, seek FTA assistance during Federal FY 2009.

The Applicant affirms the truthfulness and accuracy of the certifications and assurances it has made in the statements submitted herein with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. 3801 *et seq.*, and implementing U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31 apply to any certification, assurance or submission made to FTA. The criminal fraud provisions of 18 U.S.C. 1001 apply to any certification, assurance, or submission made in connection with a Federal public transportation program authorized in 49 U.S.C. chapter 53 or any other statute.

In signing this document, I declare under penalties of perjury that the foregoing certifications and assurances, and any other statements made by me on behalf of the Applicant are true and correct.

Authorized Representative of Applicant:

Print Name _____ Title: _____

Signature _____

Date: _____

AFFIRMATION OF APPLICANT'S ATTORNEY

*(Required of all Applicants applying for FTA assistance and all FTA recipients with an active capital or formula project)**

For (Name of Applicant/Organization):

As the undersigned Attorney for the above named Applicant, I hereby affirm to the City of Phoenix that it has authority under State, local, or tribal government law, as applicable, to make and comply with the certifications and assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the certifications and assurances have been legally made and constitute legal and binding obligations on the Applicant.

I further affirm to the Applicant that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these certifications and assurances, or of the performance of the project.

Attorney for Applicant:

Print Name: _____

Signature: _____

Date: _____

*Each Applicant for FTA financial assistance and each FTA Grantee with an active capital or formula project must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its signature in lieu of the Attorney's signature, provided the Applicant has on file this Affirmation, signed by the attorney and dated this Federal fiscal year.

ASSURANCE OF AUTHORITY OF THE APPLICANT AND ITS REPRESENTATIVE

*(Required of all Applicants applying for FTA assistance and all FTA recipients with an active capital or formula project)**

For (Name of Applicant/Organization):

The authorized representative of the Applicant and the attorney who sign these certifications, assurances, and agreements affirm that both the Applicant and its authorized representative have adequate authority under applicable state and local law and the Applicant's by-laws or internal rules to:

- (1) Execute and file the application for Federal assistance on behalf of the Applicant;
- (2) Execute and file the required certifications, assurances, and agreements on behalf of the Applicant binding the Applicant; and
- (3) Execute grant agreements and cooperative agreements with FTA on behalf of the Applicant.

Applicant's Authorized Representative:

Print Name: _____ Title: _____

Signature: _____

Date: _____

I further affirm to the Applicant that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these certifications and assurances, or of the performance of the project.

Attorney for Applicant:

Print Name: _____

Signature: _____

Date: _____

*Each Applicant for FTA financial assistance (except 49 U.S.C. 5312(b) assistance) and each FTA Grantee with an active capital or formula project must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its signature in lieu of the Attorney's signature, provided the Applicant has on file this Affirmation, signed by the attorney and dated this Federal fiscal year.

GENERAL ASSURANCES – SECTION 5317 New Freedom
(Required of all Applicants applying for FTA assistance and all FTA recipients with an active capital or formula project)

The City of Phoenix is required by the FTA to make the following assurances. The City of Phoenix, in turn, is requiring the Applicant/Subrecipient to read, understand, and agree to all applicable general assurances as it relates to the subrecipient and the Section 5317 Program.

THIS IS TO CERTIFY THAT _____
(Applicant/Organization Name)

agrees to follow all applicable assurances where applicable:

The Recipient agrees that the following provisions apply to New Freedom Program assistance authorized under 49 U.S.C. § 5317, and agrees to comply with the requirements thereof, except to the extent that FTA determines otherwise in writing:

a. General. Except to the extent that FTA determines otherwise in writing, the Recipient agrees to follow the most recent edition of FTA Circular, 9045.1, "New Freedom Program Guidance and Application Instructions," including any revisions thereto, and comply with the requirements of 49 U.S.C. § 5317 and other Federal laws and regulations that apply to the Project.

b. Participation of Subrecipients. The Recipient agrees to enter into a written agreement with each subrecipient participating in a New Freedom Project, that sets forth the subrecipient's responsibilities, and include appropriate clauses imposing requirements as necessary to assure that the subrecipient will not compromise the Recipient's compliance with the Federal requirements applicable to the Project and the Recipient's obligations under the Grant Agreement or Cooperative Agreement for the Project and the FTA Master Agreement.

Each Applicant for New Freedom Program assistance authorized under 49 U.S.C. 5317 must provide the following certifications on behalf of itself and any subrecipient that may be implementing its project. Unless FTA determines otherwise in writing, the Applicant itself is ultimately responsible for compliance with its certifications and assurances even though a subrecipient, lessee, third party contractor, or other participant may participate in that project. Consequently, in providing certifications and assurances that involve the compliance of its prospective subrecipients, the Applicant is strongly encouraged to take the appropriate measures, including but not limited to obtaining sufficient documentation from each subrecipient, to assure the validity of all certifications and assurances the Applicant has made to FTA. FTA may not award Federal assistance for the New Freedom Program until the Applicant provides these certifications by selecting Category "20."

A. As required by 49 U.S.C. 5317(e)(1), which makes the requirements of 49 U.S.C. 5310 applicable to New Freedom grants to the extent the Federal Transit Administrator or his or her designee determines appropriate, by 49 U.S.C. 5310(d)(1), which makes the requirements of 49 U.S.C. 5307 applicable to Elderly Individuals and Individuals with Disabilities Formula grants to the extent the Federal Transit Administrator or his or her

designee determines appropriate, and by 49 U.S.C. 5307(d)(1), the Applicant for New Freedom Program assistance authorized under 49 U.S.C. 5317 certifies and assures on behalf of itself and its subrecipients, if any, as follows:

- (1) In compliance with 49 U.S.C. 5307(d)(1)(A), the Applicant has or will have the legal, financial, and technical capacity to carry out its proposed program of projects, including the safety and security aspects of that program;
- (2) In compliance with 49 U.S.C. 5307(d)(1)(B), the Applicant has or will have satisfactory continuing control over the use of project equipment and facilities;
- (3) In compliance with 49 U.S.C. 5307(d)(1)(C), the Applicant will adequately maintain the project equipment and facilities;
- (4) In compliance with 49 U.S.C. 5307(d)(1)(E), the Applicant, in carrying out a procurement financed with Federal assistance authorized under 49 U.S.C. 5317: (1) will use competitive procurement (as defined or approved by FTA), (2) will not use exclusionary or discriminatory specifications in its procurements, (3) will comply with applicable Buy America laws, and (4) will comply with the general provisions for FTA assistance of 49 U.S.C. 5323 and the third party procurement requirements of 49 U.S.C. 5325;
- (5) The Applicant has or will have available and will provide the amount of funds required by 49 U.S.C. 5317(g) for the local share, and that those funds will be provided from approved non-Federal sources except as permitted by Federal law; and
- (6) In compliance with 49 U.S.C. 5307(d)(1)(H), the Applicant will comply with: (1) 49 U.S.C. 5301(a) (requirements for public transportation systems that maximize the safe, secure, and efficient mobility of individuals, minimize environmental impacts, and minimize transportation-related fuel consumption and reliance on foreign oil); (2) 49 U.S.C. 5301(d) (special efforts to design and provide public transportation for elderly individuals and individuals with disabilities); and (3) 49 U.S.C. 5303 through 5306 (planning and private enterprise requirements);

B. In compliance with 49 U.S.C. 5317(d), the Applicant certifies that (1) with respect to financial assistance authorized under 49 U.S.C. 5317(c)(1)(A), it will conduct in cooperation with the appropriate MPO an areawide solicitation for applications, and make awards on a competitive basis and (2) with respect to financial assistance authorized under 49 U.S.C. 5317(c)(1)(B) or 49 U.S.C. 5317(c)(1)(C), it will conduct a statewide solicitation for applications, and make awards on a competitive basis;

C. In compliance with 49 U.S.C. 5317(f)(2), the Applicant certifies that, before it transfers funds to a project funded under 49 U.S.C. 5336, that project has been or will have been coordinated with private nonprofit providers of services;

D. In compliance with 49 U.S.C. 5317(e)(2), the Applicant certifies that any allocations to subrecipients of financial assistance authorized under 49 U.S.C. 5317 will be distributed on a fair and equitable basis; and

E. In compliance with 49 U.S.C. 5317(f)(3), the Applicant certifies that: (1) projects it has selected or will select for assistance under that program were derived from a locally developed, coordinated public transit-human services transportation plan; and (2) the plan

was developed through a process that included representatives of public, private, and nonprofit transportation and human services providers and participation by the public

Applicant's Authorized Representative:

Print Name: _____ Title: _____

Signature: _____

Date: _____

CERTIFICATION FOR CIVIL RIGHTS COMPLAINT STATUS

(Required of all Applicants applying for FTA assistance and all FTA recipients with an active capital or formula project)

FTA's enabling legislation includes the non-discriminatory use of Federal funds by recipients of FTA assistance, including their sub-recipients and contractors. FTA ensures non-discrimination through oversight of grantee implementation of required civil rights regulations and policy. Compliance reviews and assessments are conducted to determine if the grantee's required efforts under [Title VI of the Civil Rights Act of 1964](#), (including aspects of Environmental Justice), [Equal Employment Opportunity](#) (EEO) program, [Disadvantaged Business Enterprise](#) (DBE) program, and the [Americans with Disabilities Act of 1990](#) (ADA) requirements are in compliance as represented to the FTA.

THIS IS TO CERTIFY THAT _____
(Applicant/Organization Name)

_____ I hereby certify that our organization does **NOT** have any pending Title VI (Civil Rights) complaints of discrimination filed against its transit program.

_____ I hereby certify that our organization **DOES** have _____ (provide number) pending Title VI (Civil Rights) complaints of discrimination filed against its transit program. This complaint(s), and its status, is briefly described below. The agency agrees it will keep the City of Phoenix informed of any changes in the status of that complaint(s).

_____ I hereby certify that our organization complies with all applicable Civil Rights requirements (Title VI, Americans with Disabilities Act, Disadvantaged Business Enterprise, and Equal Employment Opportunity).

Applicant's Authorized Representative:

Print Name: _____ Title: _____

Signature: _____

Date: _____

**CERTIFICATE OF COMPLIANCE WITH
MANUFACTURER'S MAINTENANCE SCHEDULE**
*(Required of all Applicants applying for FTA assistance and all
FTA recipients - if requesting a VEHICLE)*

THIS IS TO CERTIFY THAT _____
(Applicant/Organization Name)

agrees to abide by the vehicle manufacturer's schedule of maintenance, as a minimum, during the period this vehicle is operated in conjunction with the City of Phoenix, or its successor agency as designated under provisions of the New Freedom Program (49 U.S.C. § 5317 of the Federal Transit Act).

Applicant's Authorized Representative:

Print Name: _____ Title: _____

Signature: _____

Date: _____

CERTIFICATION OF RESTRICTIONS ON LOBBYING

(Required of all Applicants applying for more than \$100,000 in FTA assistance)

THIS IS TO CERTIFY THAT _____
(Applicant/Organization Name)

to the best of my knowledge and belief:

1. No Federal appropriated funds have been or will be paid by or on behalf of the Applicant to any person to influence or attempt to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress regarding the award of Federal assistance, or the extension, continuation, renewal, amendment, or modification of any Federal assistance agreement; and
 - a. If any funds other than Federal appropriated funds have been or will be paid to any person to influence or attempt to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any application for Federal assistance, the Applicant assures that it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," including information required by the instructions accompanying the form, which form may be amended to omit such information as authorized by 31 U.S.C. 1352.
 - b. The language of this certification shall be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, subagreements, contracts under grants, loans, and cooperative agreements).
2. The Applicant understands that this certification is a material representation of fact upon which reliance is placed by the Federal Government and that submission of this certification is a prerequisite for providing Federal assistance for a transaction covered by 31 U.S.C. 1352. The Applicant also understands that any person who fails to file a 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.

Applicant's Authorized Representative:

Print Name: _____ Title: _____

Signature: _____

Date: _____

APPLICATION SECTION 9: Applicant Resources

WEB SITES

To view the City of Phoenix/Mesa Urbanized Area Map- visit the MAG web site:

http://www.mag.maricopa.gov/pdf/cms.resource/FTA_5316-5317_Phoenix-Mesa_Urbanized-Area-Map98566.pdf

To view detailed maps of Urbanized Areas- visit the Census web site:

<http://ftp2.census.gov/geo/maps/urbanarea/uaoutline/UA2000/ua69184>

To obtain applications for small and rural urbanized areas- visit the ADOT web site:

<http://www.azdot.gov/PTD/Section5317.asp>

The Federal Transit Administration Circular provides significant guidance on the New Freedom program and all requirements for both designated and subrecipients. To view the FTA Circular for Section 5317- visit: http://www.fta.dot.gov/laws/circulars/leg_reg_6624.html

GLOSSARY OF TERMS

Applicant/Designated Recipient (for this application only) – The organization or entity submitting a grant application to the FTA on behalf of the sub recipient. The City of Phoenix is the “Applicant” to the FTA and the designated recipient of the awarded funds.

Applicant/Sub Recipient (for this application only) – The organization or entity submitting a grant application to the designated recipient for consideration in the competitive selection process. The organization submitting this application is the “Applicant” to the City of Phoenix and the sub recipient of the awarded funds.

Competitive Selection Process – A process to choose which projects will be funded. The process is conducted by the designated recipient of FTA funds in cooperation with the appropriate metropolitan planning organization (MPO). The projects selected must be derived from a Locally Developed, Coordinated Public Transit-Human Services Transportation Plan. (For the purposes of this application- the City of Phoenix is the designated recipient and conducts the competitive selection process).

Designated Recipient (For this application only) – Any local or state agency applying for and receiving grant funds directly from and authorized by FTA. City of Phoenix is the designated recipient for Section 5317–New Freedom for large urban areas over 200,000 population in Maricopa County.* (For rural/small urban areas under 200,000 population, ADOT is the FTA designated recipient.)

FTA – Federal Transit Administration, the implementing agency of the US Department of Transportation for all federal transit programs.

ITS (Intelligent Transportation Systems) – communications technology-driven equipment, hardware, software or other data formats or images designed to increase the quality, quality, or timeliness of information delivered or displayed to end user-customers or service providers on the status or other characteristics of a transportation system.

Job Access Project - Refers to a project relating to the development and maintenance of transportation services designed to transport welfare recipients and eligible low-income individuals to and from jobs and activities related to their employment.

JARC – Job Access & Reverse Commute – See Section 5316

Locally Developed, Coordinated Public Transit-Human Services Transportation Plan - A plan that identifies the transportation needs of individuals with disabilities, older adults, and people with low incomes, provides strategies for meeting those local needs, and prioritizes transportation services for funding and implementation.

Mobility Management – a short-range planning function comprised of personnel and/or equipment (data or communications hardware, software, etc.) designed to increase inter-agency coordination, i.e., typically for more than one agency or group.

MPO – Metropolitan Planning Organization – a regional planning agency representing a predominately urban area, encompassing all or part of a county. *For the purposes of the City of Phoenix's grant programs*, the “MPO” is the Maricopa Association of Governments.

New Freedom – the subject of this application, See Section 5317

Reverse Commute Project - Refers to a public transportation project designed to transport residents of urbanized areas and other than urbanized areas to suburban employment opportunities.

SAFETEA-LU – the federal authorizing legislation (by Congress) since 2005 of all surface transportation program funding including highway and transit, and which governs all FTA programs through at least September 2009, at which time new authorizing legislation is scheduled to take precedence.

Section 5316: Job Access & Reverse Commute - FTA program newly “formalized” under SAFETEA-LU administered by City of Phoenix for large urban areas over 200,000 in population in Maricopa County to assist low income individuals with work related transportation.

Section 5317: New Freedom - FTA formula grant program administered by City of Phoenix for large urban areas over 200,000 in population in Maricopa County – for new public transportation services and public transportation alternatives beyond those required by the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.) that assist individuals with disabilities with transportation, including transportation to and from jobs and employment support services.

Sub recipient (For this application) – Any recipient of grants or grant funding from the designated recipient which originated with a federal agency (e.g., FTA). Generally, a sub recipient is the applicant selected by the designated recipient to receive funding for their project.

Sample New Freedom Quarterly Progress Report

PROGRAM MEASURES REPORT

**# of One-Way
New Freedom Trips
This Quarter**

**# of One-Way
New Freedom Trips
Life to Date**

--	--

Provide a detailed description on the service provided this quarter that impact availability of transportation services for individuals with disabilities as a result of the projects implemented in the current reporting year. Examples include geographic coverage, service quality and/or service times.

Response:

Provide a detailed description on the additions or changes to environmental infrastructure (e.g. transportation facilities, side walks, etc.) technology, vehicles that impact availability of transportations services as a result of the projects implemented in the current reporting year.

Response:

Provide a qualitative description for the following program measure : Number of rides (one-way trips) provided for individuals with disabilities as a result of the New Freedom project(s) implemented in the current reporting period.

Response:

FINANCIAL STATUS REPORT

Accrued Costs Listing:

Open Purchase Order Balances and Invoices on hand not yet reimbursed by grant funds as of End of Quarter.

ALI CODE	VENDOR NAME	P.O. or Invoice Number	Amount
Grant			
Match			

MILESTONE STATUS REPORT					
CAPITAL – VEHICLES (80/20)					
Milestone Description	Original Est. Completion Date	Revised Est. Completion Date	Revision Number	Actual Completion Date	Manufacturer Code
RFP/IFB OUT FOR BID					
CONTRACT AWARDED					
FIRST VEHICLE DELIVERED					
ALL VEHICLES DELIVERED					
CONTRACT COMPLETE					
CAPITAL – MOBILITY MANAGEMENT (80/20)					
Milestone Description	Original Est. Completion Date	Revised Est. Completion Date	Revision Number	Actual Completion Date	Manufacturer Code
CONTRACT COMPLETE					
Detail Description:					
Revision # and reason:					
Progress:					
OPERATING (50/50)					
Milestone Description	Original Est. Completion Date	Revised Est. Completion Date	Revision Number	Actual Completion Date	Manufacturer Code
CONTRACT COMPLETE					
Detail Description:					
Revision # and reason:					
Progress:					

SAMPLE NEW FREEDOM ANNUAL DATA COLLECTION & SERVICE PROFILE REPORT

Data Collection

Please fill out a separate data collection form for each individual JARC or NF project or service.

- JARC-funded services in operation during FY 2008 (Oct 1, 2007 - Sep 30, 2008)
- NF-funded services in operation during FY 2008 (Oct 1, 2007 - Sep 30, 2008)

1. Is your service JARC or New Freedom? _____
2. Select the category that best describes your primary service goal. _____
 - (A) Expanded geographic coverage
 - (B) Extended hours or days of service
 - (C) Improved system capacity
 - (D) Improved access or improved connections
 - (E) Improved customer knowledge
3. Enter Name of Service: _____
4. Is your service trip-based, information-based, or capital? _____:
 - A) Trip-based (fixed route, flexible route, shuttle/feeder service, demand response, user-side subsidy vouchers, or vanpool)
 - B) Information-based (mobility manager, one-stop center referral, trip planning, one-on-one transit training, group transit training, internet-based information, info materials/marketing)
 - C) Capital Investment (vehicle for individual, vehicle for agency, vanpool, car-sharing, ITS-related hardware/software, other capital projects)
5. Sub Recipient Name: _____
Contact Name: _____
Contact Phone: _____
Contact Email: _____
6. Is the sub recipient also the service provider for this service? Yes / No
If not, please identify the agency name & contact information.
7. How many months was the service in operation? (Please estimate for federal fiscal years.)
FFY2008 _____
8. Select the category that best describes the geographic area where the service is provided.
FFY2008 _____
Neighborhood, City/Town, County, Region, State, Tribal land, or:
Multiple jurisdictions (Please describe) _____
Other (Please describe) _____

9. In what type of area is the service provided?
FFY2008 _____
A. Large urban (population over 200,000)
B. Medium urban (population between 50,000 and 200,000)
C. Small urban or rural (population below 50,000)
D. Multiple areas (Please describe) _____

10. Number of one way trips:
FFY2008 _____

11. Number of revenue hours:
FFY2008 _____

12. Number of vehicles in each size class, please enter all that apply.
FFY2008 _____

- 5 seats or fewer
- 6 -10 seats
- 11-15 seats
- 16 -25 seats
- 26-35 seats
- 36 seats or more

13. Number of targeted jobs (JARC Only):
FFY2007 _____ FFY2008 _____

14. Please indicate your methodology for calculating the number of jobs accessed (JARC Only):

JARC /New Freedom Service Profile Information

15. Service description – Provide a detailed description (1-2 paragraphs) of the service provided during FY 2008. Please indicate the route name and/or number, if available, and describe the route or service area, if applicable.
16. Evaluation – Describe how you have evaluated your project within your agency or organization. Identify relevant performance measures and benchmarks.
17. Accomplishments – Highlight your greatest accomplishments. Describe any especially successful or innovative elements.
18. Lessons learned – What advice would you give to someone else starting a service like yours? What do you wish you had known when you started the service?

FEDERAL PROGRAM REFERENCES

- a. Federal Transit Laws, Title 49, United States Code, Chapter 53.
- b. Federal-aid highway and surface transportation laws, Title 23, United States Code.
- c. Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users, (SAFETEA-LU) (Pub. L. 109-59, 119 Stat. 1144, Aug. 10, 2005).
- d. Transportation Equity Act for the 21st Century (TEA-21) (Pub. L. 105-178, 112 Stat. 107, June 9, 1998).
- e. Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA) (Pub. L. 102-240, 105 Stat. 1914, Dec. 18, 1991).
- f. Federal Public Transportation Act of 1978 (Pub. L. 95-599, Nov. 6, 1978).
- g. Americans with Disabilities Act of 1990, as amended, 42 U.S.C. 12101 et seq.
- h. Government Performance Results Act of 1993, as amended (Pub. L. 103-62, 107 Stat. 285, Aug. 3, 1993).
- i. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794.
- j. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000d.
- k. Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. 2000e.
- l. Clean Air Act, as amended, 42 U.S.C. 7401 et seq.
- m. Section 404 of the Clean Water Act, as amended, 33 U.S.C. 1344.
- n. Policy on Lands, Wildlife, and Waterfowl Refuges, and Historic Sites, 49 U.S.C. 303.
- o. Section 106 of the National Historic Preservation Act, 16 U.S.C. 470f.
- p. Internal Revenue Code, Non-profit Organizations, 26 U.S.C. 501.
- q. Lobbying Restrictions, 31 U.S.C. 1352.
- r. Disadvantaged Business Enterprises, 23 U.S.C. 101 note.
- s. Congressional Declaration of Policy Respecting Insular Areas, 48 U.S.C. 1469a.
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- t. Program Fraud Civil Remedies Act, 31 U.S.C. 3801 et seq.

- u. Uniform Relocation Assistance and Real Property Acquisitions Policies Act of 1970, as amended, 42 U.S.C. 4601, et seq.
 - v. Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq.
 - w. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq.
 - x. National Environmental Policy Act of 1969, as amended, 42 U.S.C. 4321 et seq.
 - y. Federal Funding Accountability and Transparency Act of 2006 (Pub. L 109–282, 120 Stat. 1186, Sept. 26, 2006).
 - z. Davis-Bacon Act, as amended, 40 U.S.C. 3141 et seq.
 - aa. Drug-Free Workplace Act of 1988, as amended, 41 U.S.C. 701 et seq.
 - bb. U.S. DOT regulations, “Organization and Delegation of Powers and Duties,” 49 CFR part 1.
 - cc. U.S. DOT regulations, “Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments,” 49 CFR part 18.
 - dd. U.S. DOT regulations, “Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations,” 49 CFR part 19.
 - ee. U.S. DOT regulations, “New Restrictions on Lobbying,” 49 CFR part 20.
 - ff. U.S. DOT regulations, “Nondiscrimination in Federally-Assisted Programs of the Department of Transportation—Effectuation of Title VI of the Civil Rights Act of 1964,” 49 CFR part 21.
 - gg. U.S. DOT regulations, “Uniform Relocation Assistance and Real Property Acquisition for Federal and Federally-Assisted Programs,” 49 CFR part 24.
 - hh. U.S. DOT regulations “Nondiscrimination on the Basis of Sex in Education Programs or Activities Receiving Federal Financial Assistance,” 49 CFR part 25.
 - ii. U.S. DOT regulations, “Participation by Disadvantaged Business Enterprises in Department of Transportation Financial Assistance Programs,” 49 CFR part 26.
 - jj. U.S. DOT regulations, “Nondiscrimination on the Basis of Disability in Programs or Activities Receiving Federal Financial Assistance,” 49 CFR part 27.
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- kk. U.S. DOT regulations, “Governmentwide Debarment and Suspension (Nonprocurement),” 49 CFR part 29.
- ll. U.S. DOT regulations, “Governmentwide Requirements for Drug-Free Workplace (Financial Assistance),” 49 CFR part 32.
- mm. U.S. DOT regulations, “Transportation Services for Individuals with Disabilities (ADA),” 49 CFR part 37.
- nn. U.S. DOT regulations, “Americans with Disabilities Act (ADA) Accessibility Specifications for Transportation Vehicles,” 49 CFR part 38.
- oo. U.S. DOT regulations, “Procedures for Transportation Workplace Drug and Alcohol Testing Programs,” 49 CFR part 40.
- pp. FTA regulations, 49 CFR Subtitle B Chapter VI.
- qq. Joint Federal Highway Administration/FTA regulations, “Planning Assistance and Standards,” 23 CFR part 450 and 49 CFR part 613.
- rr. Joint Federal Highway Administration/FTA regulations, “Environmental Impact and Related Procedures,” 23 CFR part 771 and 49 CFR part 622.
- ss. Federal Motor Carrier Safety Administration regulations, “Controlled Substances and Alcohol Use and Testing,” 49 CFR part 382.
- tt. U.S. Department of Treasury regulations, “Rules and Procedures for Efficient Federal-State Funds Transfers,” 31 CFR part 205.
- uu. U.S. Environmental Protection Agency regulations, “Determining Conformity of Federal Actions to State or Federal Implementation Plans,” 40 CFR part 93.
- vv. Executive Order 12372, “Intergovernmental Review of Federal Programs,” July 14, 1982.
- ww. Executive Order 12898, “Federal Actions To Address Environmental Justice in Minority Populations and Low-Income Populations,” Feb. 11, 1994.
- xx. Executive Order 13217, “Community-Based Alternatives for Individuals with Disabilities,” June 18, 2001.
- yy. Executive Order 13330, “Human Service Transportation Coordination,” Feb. 24, 2004.
- zz. Office of Management and Budget Circular A–87, “Cost Principles for State, Local, and Indian Tribal Governments,” codified at 2 CFR part 225, Aug. 31, 2005.

- aaa. Office of Management and Budget Circular A-94, "Guidelines and Discount Rates for Benefit-Cost Analysis of Federal Programs," Oct. 29, 1992.
- bbb. Office of Management and Budget Circular A-122, "Cost Principles for Non-Profit Organizations," codified at 2 CFR part 230, Aug. 31, 2005.
- ccc. Office of Management and Budget Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations," June 23, 2003.
- ddd. U.S. Department of Transportation Order to Address Environmental Justice in Minority Populations and Low-Income Populations, 62 FR 18377 (Apr. 15, 1997).
- eee. U.S. DOT Policy Guidance Concerning Recipients' Responsibilities to Limited English Proficient (LEP) Persons, 70 FR 74087 (Dec. 14, 2005).
- fff. FTA Circular 4220.1E, "Third Party Contracting Requirements," June 19, 2003.
- ggg. FTA Circular 4702.1, "Title VI Program Guidelines for FTA Recipients," Oct. 1, 1998.
- hhh. FTA Circular 5010.1C, "Grant Management Guidelines," Oct. 1, 1998.
- iii. FTA Circular 9030.1C, "Urbanized Formula Program Guidance and Application Instructions," Oct. 1, 1998.
- jjj. U.S. General Services Administration, "Excluded Parties List System," www.epls.gov.
- kkk. FTA Master Agreement FTA MA(15), Oct. 1, 2008.
- III. FTA ECHO-Web System Operations Manual.
<http://www.fta.dot.gov/documents/ECHOWebGranteeUserManual.pdf>.
- mmm. *Olmstead v L.C.*, 527 U.S. 581 (1999).

*** Federal References may have been updated since the printing of the Circular.