

KNOXVILLE REGIONAL TRANSPORTATION PLANNING ORGANIZATION
FTA – Section 5310
Enhanced Mobility for Seniors & Individuals with Disabilities
Grant Funding Application

Introduction

This is an application to receive Federal Transit Administration (FTA) Section 5310 Enhanced Mobility for Seniors & Persons with Disabilities funding. Applications that are incomplete or do not contain adequate supporting documentation will not be considered. This application is for both operating projects and capital projects (vans, mini-buses). However, only certain sections must be completed for each type of application. So, please read the application carefully.

Please refer to the companion set of instructions and the additional information linked on the TPO website. This additional information includes the vehicle list and prices, vehicle options list, Human Services Transportation Coordination Plan, Program Management Plan, and the deadline for submitting applications. Applicants are encouraged to contact the TPO staff if you have any questions.

AGENCY INFORMATION (ALL APPLICANTS)

Agency Name	
Contact Person Name	
Title	
Phone Number	
E-mail	
Address	
City, State, Zip Code	
Website	
Is the Agency A	Local Government Public Transit Operator Private Non-Profit
Agency DUNS Number	
Project Type	Capital Operating
Total Project Cost	
Amount of FTA (Federal) Grant Funding Needed	

Application Instructions

The application contains eleven sections. Please refer to the table to determine which sections must be completed. Some sections are required by all applicants, while others depend on whether you are applying for capital/vehicle funding or operating funding. If you are submitting both a capital/vehicle project and an operating project you must fill out separate applications. If you are asking for multiple vehicles, you only need to fill out one capital funding application. If you are seeking funding for mobility management activities, you will complete the operating sections of the application (even though FTA considers mobility management activities a capital expense). If you are applying for both operating and mobility management funding you need only to fill out one operating funding application.

SECTION #	WHICH SECTION TO COMPLETE
1 OVERVIEW OF AGENCY	ALL APPLICANTS
2 PROJECT DESCRIPTION	ALL APPLICANTS
3 PROJECT NEED	ALL APPLICANTS
4 SPECIFIC PERFORMANCE & EVALUATION	ALL APPLICANTS
5 IMPLEMENTATION OF CAPITAL PROJECTS	CAPITAL/VEHICLE APPLICANTS ONLY
6 IMPLEMENTATION OF OPERATING PROJECTS	OPERATING & MOBILITY MANAGEMENT APPLICANTS ONLY
7 ORGANIZATIONAL PREPAREDNESS & TECHNICAL CAPACITY	ALL APPLICANTS
8 OUTREACH & COORDINATION	ALL APPLICANTS
9 VEHICLE BUDGET (ATTACH SEPERATELY)	CAPITAL/VEHICLE APPLICANTS ONLY
10 OPERATING BUDGET (ATTACH SEPERATELY)	OPERATING PROJECTS ONLY & MOBILITY MANAGEMENT APPLICANTS ONLY
11 ADDITIONAL INFORMATION NEEDED	ALL APPLICANTS

SECTION 1 – OVERVIEW OF AGENCY (ALL APPLICANTS)

Please provide a *brief* overview of the proposing agency, a description of services provided, who is eligible for services, and service area. This is to provide a general picture of the overall proposing agency, its mission, and the services it provides. Project specific information will be included in the next section.

Answer:

SECTION 2 – PROJECT DESCRIPTION (ALL APPLICANTS)

Please provide a detailed description of the proposed project. Please include:

- A description of the type of project: operation of a service, mobility management activities, acquisition of vehicle(s), or other type of project(s).
- Outline who would be eligible for the proposed project.
- Describe the geographic service area, specific to this project.
- Provide the estimated number of people the project will serve annually.
- Provide the estimated number of one way trips that will be provided annually.

Please Note: if you are asking for funding for multiple vehicles, be sure you state the number of vehicles needed and be sure the estimated number of people/trips served/provided annually is a **per vehicle total**.

- State the term of project (if operating services or mobility management activities). You can use general time periods such as: six months, one year, two years, etc.

Please Note: There is no need to provide cost(s), a budget, or funding information in this section as these items will be addressed later in application.

Answer:

SECTION 3 – PROJECT NEED (ALL APPLICANTS)

Please describe/indicate the following:

- How will this project improve the quality of transportation services for seniors and/or individuals with disabilities? Give examples.
- Reference the stated need or goal this project meets as outlined in the Human Services Transportation Coordination Plan (HSTCP) [**Required, see HSTCP link on TPO website**].
Please Note: If you cannot find an exact need or goal that fits the proposed project in the HSTCP, then discuss how the project is in-keeping with the types of needs and goals identified in the HSTCP.
- How does the proposed project align with the overarching mission of your organization?
- List any innovative approaches that will be employed for this project.
- If you have received Section 5310 funding from the TPO before and this is a continuation or a similar project, discuss the success of the past project and tell why you need additional funding. If you have received Section 5310 funding for a vehicle(s) before and are asking for more, discuss the need for an additional vehicle(s) and how the previously funded vehicle(s) is/are currently being utilized.

Answer:

SECTION 4 – SPECIFIC PERFORMANCE & EVALUATION (ALL APPLICANTS)

Please describe/indicate the following:

- Outline any specific goals/outcomes you have for the proposed project. Goals/outcomes should be measurable.
- Describe how you plan on monitoring and evaluating the progress in meeting the stated goals/outcomes, including any performance measures.
- If you have received 5310 funding from the TPO before and this is a continuation or a similar project (including the purchase of vehicles), discuss how you evaluated the past success of the project (vehicles).

Answer:

SECTION 5 – IMPLEMENTATION (CAPITAL/VEHICLE PURCHASE APPLICANTS ONLY)

Please describe/indicate the following:

- What type of vehicle(s) are you seeking to purchase [**Select from TDOT MTR Vehicle Bid List link on TPO website**]?

Please Note: Do not worry about funding or cost(s) in this section, budget information will be addressed in a later section.

Please Note: Purchasing off of the TDOT MTR Vehicle Bid List is ***mandatory***, unless you can prove you have FTA purchasing expertise.

- Explain why you need this type of vehicle(s). Describe the type of services the vehicle(s) will be used to provide.
- How many vehicles are you seeking to purchase? If you are seeking multiple vehicles explain why they are needed.
- Review the list of vehicle extras or options [**See options spreadsheet(s) link on TPO website**]. Many applicants just select the base vehicle. However, if there are any extras or options that are critical to the type of vehicle(s) you need, you can select them. If you are selecting extras or options, please justify why they are needed. Remember cost(s) will be shown in a later section.
- Is the vehicle(s) for replacement or expansion?
Please Note: if this is a replacement you ***must*** provide information on the vehicle(s) being replaced, including year, model, make, and VIN number. If you have been awarded funding for replacement vehicle(s) before, either through the TPO or the Tennessee Department of Transportation, the replacement vehicle can only be listed once in any FTA grant.
- Who will be managing the initial purchasing/grant management part of the project (give ***brief*** bio)?
- From time-to-time, it is permitted to conduct your own bid for vehicles. However, any agency proposing this must: (1) have experience in FTA procurement and (2) have pre-approval by the TPO. If you are interested in this option, please contact the TPO ***before*** proceeding with this application.
- ***DO NOT*** include mobility management activities type projects in this capital section. Mobility management activity projects should be listed in the operating sections of this application.

Answer:

Answer Continued:

SECTION 6 – IMPLEMENTATION (OPERATING & MOBILITY MANAGEMENT PROJECTS ONLY)

Please describe the following:

- A work plan delineating the tasks (or milestones) to be conducted and a timeline for completing those tasks (use generic months, i.e. Month 1, Month 2).
Please Note: Do not worry about cost(s) or funding at this question, budget information will be addressed later in the application.
- Who will be managing the project (give **brief** bio stating experience)?
- Provide a staffing plan listing who will perform each task, include a **brief** bio for each person. Estimate what **percent** of each staff (listed) time will be charged to project budget.
- If you are apply for both operating and mobility management funding, be sure you show that you have a clear understanding of the types of activities that are eligible for mobility management funding. Also, be sure the two different types of work activities (Operating, Mobility Management) are clearly broken-out (or hours allocated) in the proposed work plan.

Answer:

SECTION 7 – ORGANIZATIONAL PREPAREDNESS & TECHNICAL CAPACITY (ALL APPLICANTS)

Please describe/indicate the following:

- Describe how your agency has the necessary operational and technical capacity to carry out the tasks as outlined in the project?
- Provide a statement of the agency’s ability to implement and sustain the proposed project.
- How will your agency guarantee that the vehicle(s) purchased will continued to be used for this specific project?
- Describe your agency’s ability to be sure the vehicle(s) are properly maintained.
- Describe your agency’s ability to meet deadlines for submitting quarterly reports to TPO (this includes invoicing (if applicable), status reports, ridership, or usage data reports).

Answer:

SECTION 8 – OUTREACH & COORDINATION (ALL APPLICANTS)

Please describe/indicate the following:

- Describe any external outreach efforts to promote awareness of the proposed project. If the project is strictly for your agency's clients, describe how the program will be promoted internally. If the project is open to the public, describe how you will notify potential users.
- If funding is being used for mobility management activities, describe how your management functions will work with regards to outside and/or internal clients (to your organization).
- If any coordination can occur with other social service agencies or public transit agencies, describe how this might happen.
- Is this project new or does it supplement an existing program/service?

Answer:

SECTION 9 – VEHICLE BUDGET (CAPITAL/VEHICLE APPLICANTS ONLY)

Develop separately and attach with application submission a detailed budget outlining costs and funding. The budget can be constructed in Word or Excel, but be sure it is formatted so it can be easily printed. An example budget is provided [See link on TPO website]. Be sure to include:

- From the TDOT MTR Vehicle Bid List [See list link on TPO website] select the vehicle you want. On the budget sheet, list the name or type of vehicle and provide a line item titled – Vehicle Base Cost (show cost).
- Review the list of extras or options [See spreadsheet link on TPO website]. Many applicants just select the base vehicle. However, if there are any extras or options that are critical to the type of vehicle(s) your agency needs, you can select them. On the budget sheet, list ***each*** option(s) or extra(s) selected and the corresponding cost(s). Then, sum all the cost(s) associated with the option(s) selected into one sub-total line item (called Vehicle Options Cost).
- Sum the Vehicle Base Cost and the Vehicle Options Cost line items together for a – Total Cost per Vehicle – line item.
- Multiply the Total Cost per Vehicle by the number of vehicles you are proposing to purchase and put that amount in a – Total Cost – line item.
- If you are selecting more than one type of vehicle, repeat the steps above for each vehicle type. Be sure to keep each vehicle type and any options selected separate from any other vehicle type you have selected. You may want to differentiate the vehicles in the budget sheet by labeling them Vehicle(s) Type #1 and Vehicle(s) Type #2, etc. And, be sure each type of vehicle’s Total Cost is listed separately on the budget sheet (so the reviewer can easily identify that there are more than one type of vehicle being selected). Then, sum up the Total Cost(s) associated with each vehicle into one – Total Project Cost – line item.
- Break out the Total Project Cost by federal (80%) and local match (20%) dollars.
- If you are proposing another type of capital project besides the purchase of a vehicle(s), outline project details with line item costs. Break out the Total Project Cost by federal (80%) and local match (20%) dollars. Be sure, at the end, there is this final breakdown that clearly shows federal funding needed and the required local match funding needed.
- Attach a letter that (1) certifies matching funding is available and (2) commits the agency to providing the entire purchase amount up front (grant funds portion will be reimbursed). Please be sure the letter includes the amount of and source(s) for the local the match. If you cannot pay for the entire purchase up front please contact the TPO to explore if there are other funding options. Review the local match section, including the potential for other grant dollars, in the additional instructions provided [See link on TPO website].
- From time-to-time it is permitted to bid your own vehicle(s). However, any agency proposing this must: (1) have experience in FTA procurement and (2) have pre-approval by the TPO. If you are interested in this option, please contact the TPO **before** proceeding with this application.
- ***DO NOT*** include any mobility management costs in this section. Mobility management costs should be included in the operating budget section of the application.

SECTION 10 – OPERATING BUDGET (OPERATING & MOBILITY MANAGEMENT PROJECTS ONLY)

Develop separately and attach with application submission a detailed budget outlining costs and funding. The budget can be constructed in Word or Excel, but be sure it is formatted so it can be easily printed. Be sure to include:

- A budget with separate line items for labor cost(s), fringe-benefit cost(s), other direct cost(s), indirect cost(s), and travel cost(s), etc. (if applicable).
- Cost allocation Plan (if applicable).
- If you are applying an Indirect Cost Rate, has it been approved by an official cognizant agency?
- If you are utilizing funding for **mobility management activities**, you may fund those at either the Operating (50%/50%) or Capital (80%/20%) reimbursement funding rate. This provision is only for mobility management activities and what rate they are reimbursed at is up to the applicant. General operating activities must be funded at the 50%/50% rate. If you have any questions please see the **FTA Section 5310 Circular [see Circular linked on TPO website]** or call the TPO staff.
- Sum all the various line items for a – Total Project Cost – line item. If the project utilizes both operating funding (50%/50% rate) and mobility management activities funding (80%/20% rate), those costs should total into two separate line items (i.e. Operations Total Cost line item, Mobility Management Total Cost line item). As these two activities can be reimbursed at different federal rates, it is **extremely important** that the budget (charges and invoicing) clearly defines each eligible work item/task and associated cost(s) and reflects those in the correct budget line item (Operations or Mobility Management). If you are showing mobility management activities but only seeking the 50%/50% reimbursement rate, you should still show those costs broken out in the budget, but they can be as a sub-total to the Operation Total Cost line item.
- If you are utilizing funding for **operations**, break out the Operations Total Cost line item by federal (50%) and local match (50%) dollars.
- If you are utilizing funding for **mobility management activities**, break out the Mobility Management Total Cost line item by federal (80%) and local match (20%).
- If the project utilizes both operating funding and mobility management activities funding, add the two totals together for a – Project Total Cost line item.
- Be sure, at the end of the budget sheet, there is a final statement that clearly shows federal funding needed and the required local match funding needed.
- A letter that (1) certifies matching funding is available and (2) states the agency can provide the services up front, being reimbursed upon submission and processing of quarterly invoices per the contract. Please be sure the letter includes the amount of and source(s) for the local the match. Review the local match section, including the potential for other grant dollars, in the additional instructions provided [**See link on TPO website**].

SECTION 11 – ADDITIONAL INFORMATION TO BE SUBMITTED (ALL APPLICANTS)

The TPO reserves the right to request additional information about each applicant's proposal or to allow a brief presentation on the proposal. Please be sure you submit the following information.

Please Note: If you have received funding from the TPO before these documents may already be on file. Please check with the TPO staff to see which items you may need to update.

- Certification/letter stating agency's status as a private nonprofit organization, a human resource agency, or an eligible local government (public transit agency)
- Most recent agency audit (must be within 3 years)
- Letter (from Cognizant Agency) approving Indirect Cost Rate (only required from those using an Indirect Cost Rate in operating or mobility management activities projects)
- List of members of the governing body (Board) and contact information (if not in the audit)
- Policy and Procedures, Employee Handbook, excerpts of separate documents that demonstrate compliance with the following federal requirements:
 - Title VI - Civil Rights policies/practices, Written Complaint Process
 - Equal Employment Opportunity (EEO) Program or policies/practices
 - Americans with Disabilities Program or policies/practices
 - Drug Free Workplace and Drug and Alcohol Testing Program/policies
- Certification of equivalent services (only required from public transit providers)
- Safety and security plan/practices (only required from public transit providers)

Additional requirements for vehicles:

- Written Vehicle Maintenance Plan (VMP). The FTA requires a separate VMP. The VMP does not have to be overly complicated and long. It may simply reflect the manufacturer suggested maintenance schedule that comes with the vehicle. If this is the first vehicle, you may submit a VMP after you receive the manufacturer suggested maintenance schedule to use as a resource. But, a separate VMP must be submitted.
- Any written transportation policies
- Vehicle inventory of all vehicles (make, model, year, accessible vs. non-accessible)

Contact Information:

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Please review the additional instructions and all the other supporting documents that are linked with this application on the TPO website.