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| Application Instructions                                 | <a href="#">Application Instructions</a> |
| Agency Name  | Fort Bend County                         |
| Person to be contacted regarding <b>this</b> application |  |
| First Name *   | Yvette                                   |
| Last Name *  | Maldonado                                |
| Phone Number *   | (281) 243-6722                           |
| Email Address *  | Yvette.Maldonado@fortbendcountytx.gov    |

Click [here](#) to download an Obligation Certification.

Obligation Certification \*

By checking this box, you are indicating that the service profile for this organization is accurate. \*

Project Service Area \*  Urban  Rural

If "Urban" is selected, please select the urbanized area.

**General Information**

1. Describe the proposed project(s) for which the funds will be used. \*

Fort Bend County provides general public demand response, deviated fixed route, and commuter services. All services operate Monday through Friday (excluding County Holidays). Demand Response services operate to accommodate first drop-off by 8:00 am and last pick-up by 5:00 pm. Deviated fixed route and commuter services operate in both the morning and evening as listed on the route schedules. Demand Response trips are provided within the County limits and/or to destinations in adjoining counties within one (1) mile of the Fort Bend County line. Advanced reservations are required and can be requested up to thirty (30) calendar days in advance. Requests are taken on a first come first serve basis. The County provides additional services such as the Ambassador Program wherein passenger assistants help passengers with disabilities to and from their destinations. The County also continues planning with human service agency transportation providers within the County and continues to stay involved in the regions public transportation efforts. The deviated fixed route services are limited to within the County limits with timed stops at designated locations within this area. Vehicles can deviate short distances from the route to pick-up and drop-off clients or to accommodate pick-up and drop-offs at high demand locations. Commuter services are provided to Greenway Plaza, Galleria, and Texas Medical Center areas of Houston from park and ride locations in Sugar Land and Rosenberg. The County is also in the process of constructing an additional park and ride facility along the Westpark Toll Road in northwest Fort Bend County. All services are provided via contract agreements and paid for with Federal and/or State funding received from the Texas Department of Transportation, FTA, H-GAC, and TCEQ. Other funding for these services is provided through the City of Sugar Land and the Development Corp of Richmond and Rosenberg as well as County local match dollars.

2. Provide a description of how the need/demand for the proposed project(s) was determined. \*

In 2005, Fort Bend County Public Transportation Department was formed providing Demand Response services within Fort Bend County and Commuter services going to the Greenway Plaza and Galleria areas . We have since added Commuter Services to the Texas Medical Center as well as Job Access Reverse Commute and New Freedom Services. Funding would provide continued service to individuals in rural areas as well as to individuals who might not have other means of transportation . The surrounding community benefit would be continuity of service to the riders in the areas Fort Bend County currently serves. As indicated in the project description, Fort Bend County has targeted multiple agencies, organizations, and institutions in the pursuit of coordinating existing transportation services and implementing new transportation services. Funding obtained will continue to support all of our coordination activities and projects.

3. Describe the anticipated benefits of the project. \*

In FY17, the County completed over 381,000 trips in the current provided service area. The County is helping to bring a better quality of life to individuals, families, communities, and businesses. Our services offer personal mobility and freedom for people from every walk of life by providing options to get to work, go to school, visit friends, or get to a doctor's appointment as well as a reduction in Vehicle Miles Traveled. The Project will not only directly reduce emissions by eliminating passenger-vehicles, but it will also reduce emission by alleviating congestion on the road.

4. Identify and describe methods to procure goods and/or services related to this project.

A formal bid process has been completed for purchase of service as well as the Ambassador program.

5. If vendors have been previously selected, complete the following (press the save button for additional rows).

| Vendor Name | Description of goods/services |
|-------------|-------------------------------|
|-------------|-------------------------------|

First Transit  
Parkwest

Purchase of Service  
Transportation Staffing Assistance

6. Is the proposed project is consistent with continuing, cooperating, and comprehensive regional transportation planning implemented in accordance with 49 U.S.C. §5301? \*

Yes No

## Obligation Certification

As an authorized official of the Fort Bend County  
(Organization Name)

**I certify to the following:**

1. The information presented in the application is true and accurate to the best of my knowledge.
2. I have not intentionally made any misstatements or misrepresented the facts.
3. The organization has the resources and technical capacity to support the project.
4. The organization has the resources to provide the required match.
5. The organization uses generally accepted accounting standards for its financial recordkeeping functions.
6. The organization will participate in a continuous, comprehensive dialogue throughout the life of the project including but not limited to:
  - ◆ On-site monitoring by TxDOT personnel
  - ◆ Timely submission of required reports
  - ◆ Timely written notification of events that will affect the outcome of the project.
7. The organization will comply with all applicable federal, state and local laws and regulations. This includes but is not limited to:
  - ◆ Annual Certifications and Assurances
  - ◆ Master grant agreements
  - ◆ Project grant agreements
  - ◆ Applicable federal program circulars and similar federal and state guidance
8. **Applicant Affirmation:** Compensation has not been received for participation in the preparation of the specifications for this call for projects.

Signed: \_\_\_\_\_



Printed/Typed Name: Robert E. Hebert

Title: County Judge

Date: 2-13-2018

**Vehicle Projects**

Vehicle projects include the purchase, rebuild and overhaul of vehicles.

1. Are Vehicle Capital expenses parts of the proposed project? \*

Yes No

2. Describe the scope of the project: for the purchase of a vehicle, identify if the vehicles will be used for expansion or replacement; for rebuild or overhaul, identify the vehicles to be rebuilt/overhauled or describe them by vehicle type. \*

Vehicle purchases are replacement vehicles for both the Commuter and Demand Response services. At this time funds are not expected to be budgeted until the County receives the VRM and Census award.

3. For each separate vehicle project, describe the need for the project. Specifically, identify how the project was selected and what service improvements and/or project benefits are to be addressed (press the save button for additional rows). \*

**Vehicle Project Description**

**Description of Project Need, Selection and Benefit**

Vehicle Replacement Plan

Vehicles are replaced according to the miles, age, and ability to perform services. Once a vehicle has reached it's useful life, a determination is made on whether the vehicle needs to be replaced or can remain in service.

4. If vehicles are proposed to be purchased, will the vehicles be ADA accessible. \*

**Note1:** A non-accessible vehicle requires a "waiver" with the Public Transportation Coordinator's endorsement prior to entering into a grant agreement.

**Note2:** All fixed route service vehicles are required by FTA to be accessible and will not be granted waivers.

If no, please upload an approved copy of Form PTN-116 Request to Purchase Non-Accessible Vehicle(s) in the field provided below.

Yes No N/A

Form PTN-116 upload

**Other Capital**

Other Capital includes, but is not limited to: shop equipment, communication and computer equipment, hardware and/or software, preventive maintenance, purchase of service, and other miscellaneous equipment. (Program limitations may apply.)

5. Are Other Capital expenses part of the proposed project description? \*

Yes No

6. Describe the scope of the Other Capital project in detail. \*

The other capital expenses outlined in this application include Capital Cost of Contracting for all general public demand response, deviated fixed route, and commuter services already operated by the County. The County currently contracts with First Transit to provide transportation services. According to FTA guidelines, 40% of the service contract is eligible as a capital cost of contracting without further explanation.

The other capital expenses outlined in this application include other items such as equipment (bus wraps) and other miscellaneous equipment.

7. Describe the need for the Other Capital project. Specifically, identify how the project was selected and what service improvements and/or project benefits are to be addressed. \*

The County will use the funds in support of existing transit services being provided.

**Attachments**

Please upload any additional documentation that you feel may be relevant to this application.

**Description**

**Upload**

|                               |   |
|-------------------------------|---|
| Purchase of Service Breakdown | <a href="https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477-FY185311PurchaseofServicebreakdown.pdf">https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477-FY185311PurchaseofServicebreakdown.pdf</a> |
| Demand Response Brochure      | <a href="https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_2-DemandReponseBrochure.pdf">https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_2-DemandReponseBrochure.pdf</a>                       |
| Greenway Plaza Brochure       | <a href="https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_3-GreenwayPlazaBrochure.pdf">https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_3-GreenwayPlazaBrochure.pdf</a>                       |
| Point Deviation Brochure      | <a href="https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_4-Richmond-RosenbergBrochure.pdf">https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_4-Richmond-RosenbergBrochure.pdf</a>             |
| TMC Brochure                  | <a href="https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_5-TMC.pdf">https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_5-TMC.pdf</a>   |
| Galleria Brochure             | <a href="https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_6-UptownGalleriaBrochure.pdf">https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/705477_6-UptownGalleriaBrochure.pdf</a>                     |

**Construction and Rehabilitation Projects**

Construction and Rehabilitation Projects can include the following phases:

Planning, Preliminary Engineering (including environmental review), Final Design and Real Estate Acquisition, Construction/Rehabilitation.

1. Are Construction and/or Rehabilitation related expenses part of the proposed project? \*

Yes  No

2. Identify the Construction and Rehabilitation project phases that will be included as part of the proposed project: \*

A. Planning

B. Preliminary Engineering

(including environmental review)

C. Final Design and Real Estate

Acquisition

D. Construction/Rehabilitation

If **C** or **D** are selected above, please upload a copy of your FTA Region 6 Categorical Exclusion Worksheet (if this project is not eligible as a categorical exclusion please contact your PTC):

FTA Region 6 Categorical Exclusion Worksheet

3. Describe the scope of the Construction and Rehabilitation project in detail. \*

4. Describe the need for the Construction and Rehabilitation project. Specifically, identify how the project was selected and what service improvements and/or project benefits are to be addressed. \*

5. Provide the facility location if available.

N/A

Address

City

State

Zip

6. Describe the facility including the facility function. \*

**Note:** Agencies must receive consultation with PTN prior to Construction and Rehabilitation projects. Consultation is necessary prior to the inclusion of Construction and Rehabilitation projects in a PGA.

**Budget and Milestones**

5311-2018-FT BEND-00017

**Agency Name** Fort Bend County

**Program Type** 5311

**Does this budget include indirect costs? \*** Yes  No

**If yes, please enter the Indirect Rate** %

**Attachments**

If this budget includes In-Kind funds please upload supporting documentation.

| Description | Upload |
|-------------|--------|
|             |        |

When entering budget line items, fill out a row and then press the save button for additional rows.

| Description   | Scope             | Fuel Type           |                    |                    |                      |                    |                    |
|---|-------------------|---------------------|--------------------|--------------------|----------------------|--------------------|--------------------|
| Third Party Contract Capital Cost of Contracting - 11.71.12 |                   |                     |                    |                    |                      |                    |                    |
|   | <b># of Units</b> | <b>Award Amount</b> | <b>State Match</b> | <b>Local Match</b> | <b>In-Kind Match</b> | <b>Total Funds</b> | <b>Match Ratio</b> |
|   | 1                 | \$80,608            |                    | \$20,152           |                      | \$100,760          | TDC<br>0           |
| Acquisition - Miscellaneous Equipment - 11.42.20            |                   |                     |                    |                    |                      |                    |                    |
|   | <b># of Units</b> | <b>Award Amount</b> |                    | <b>Local Match</b> |                      | <b>Total Funds</b> | <b>TDC</b>         |
|   | 1                 | \$15,300            |                    | \$3,825            |                      | \$19,125           | 0                  |
| Project Administration - 11.79.00                           |                   |                     |                    |                    |                      |                    |                    |
|   | <b># of Units</b> | <b>Award Amount</b> |                    | <b>Local Match</b> |                      | <b>Total Funds</b> | <b>TDC</b>         |
|   | 1                 | \$43,936            |                    | \$10,984           |                      | \$54,920           | 0                  |
| Operating - 30.09.01  |                   |                     |                    |                    |                      |                    |                    |
|   |                   | <b>Award Amount</b> |                    | <b>Local Match</b> |                      | <b>Total Funds</b> | <b>TDC</b>         |
|   |                   | \$121,016           |                    | \$121,016          |                      | \$242,032          | 0                  |
| <b>Subtotal:</b>  |                   | <b>Award Amount</b> | <b>State Match</b> | <b>Local Match</b> | <b>In-Kind Match</b> | <b>Total Funds</b> | <b>TDC</b>         |
|   |                   | \$260,860           | \$0                | \$155,977          | \$0                  | \$416,837          | 0                  |