

250

INTERAGENCY AGREEMENT
FOR
JOB ACCESS / REVERSE COMMUTE
AND
NEW FREEDOM
PROJECT IMPLEMENTATION
BETWEEN

FORT BEND COUNTY
AND
THE METROPOLITAN TRANSIT AUTHORITY
OF HARRIS COUNTY, TEXAS

MODIFICATION 01

THE STATE OF TEXAS

COUNTY OF HARRIS

This **Modification 01 to the Interagency Agreement** ("Agreement") is made and entered into on this 7 day of December, 2010, by and between **Fort Bend County**, a governmental entity, (herein after called "Fort Bend County" or "FBC") and the **Metropolitan Transit Authority of Harris County, Texas**, a metropolitan transit authority and public entity under the laws of the State of Texas, (hereinafter called "METRO").

RECITALS

WHEREAS, Fort Bend County and METRO entered into an interagency agreement for Job Access / Reverse Commute (JARC) and New Freedom (NF) project implementation, effective January 8, 2009 (the "Original Contract"), and

WHEREAS, Fort Bend County and METRO desire to amend the Original Contract to extend the contract term and to increase funding amounts.

NOW, THEREFORE, for and in consideration of the recitals, the Parties agree as follows:

12-10-10 copy received

IN WITNESS WHEREOF, the Parties have caused the Agreement to be executed as of the date first written below:

AGREEMENT

1. The first sentence of Section 2.6 of Article 2, Fort Bend County Obligations, of the Original Contract is amended to read as follows:

FBC shall provide for a quarterly Milestone Progress Report and a quarterly Financial Status Report for the JARC Project and the New Freedom Project as described in Exhibit 5-A and Exhibit 5-B Modification 01 within 15 business days after the close of each calendar quarter (March, June, September, December).

2. Section 4.1 of Article 4, payment, of the Original Contract, is amended to read as follows:

During the term of this Agreement, FBC will submit monthly invoices to METRO no later than the 45th business day following a month in which expenses were incurred by FBC in the amount(s) representing actual expenses for the JARC Project and the New Freedom Project. Each invoice shall include the amounts due for the services performed, subject to the eligible project expense percentage as set out in Exhibits 1 and 2. METRO shall review and notify FBC of any additional information necessary to approve such invoices within 10 calendar days of receipt. METRO shall not unreasonably delay approval of such invoices. METRO shall file for FTA reimbursement of the actual monthly expenses incurred by FBC for the JARC Project and the New Freedom Project within 15 days of approval of an FBC invoice. METRO will remit payment to FBC within thirty (30) days after receipt of reimbursement funding

from FTA for FBC expenses in the amounts and for the services described in the invoice(s), not to exceed the total assigned amount of **\$516,478** for the JARC Project and the total assigned amount of **\$779,853** for the New Freedom Project. METRO agrees to make payment with available FTA Section 5316 and FTA Section 5317 funds provided FTA has made such funds available to METRO for the fiscal year in which the payments are incurred and due, and in accordance with the approved Transportation Improvement Program. Fort Bend County shall be responsible for expending and documenting the amount of the Local Match as set out in Exhibits 1 and 2.

METRO shall have no obligation to make any payment to Fort Bend County unless METRO has received FTA Section 5316 funds and FTA Section 5317 funds for the applicable services.

3. Article 7, Term, of the Original Contract is amended to read as follows for all services effective after the Effective Date of this Modification No. 01:

Unless terminated sooner in accordance with this Agreement, the term of this Agreement shall begin on October 28, 2008 and shall terminate at the end of the third full calendar month following completion of the last major milestone covered by this Agreement, as specified in the most recently filed quarterly Milestone Progress Report.

4. Exhibits 2, 5-A and 5-B to the Original Contract are amended and replaced by those documents marked "Modification No. 01 Exhibit 2;" "Modification No. 01 Exhibit 5-A" and "Modification No. 01 Exhibit 5-B" as attached to this Modification No. 01 of the Original Contract, and are incorporated into the Original Contract for all purposes.

5. All other terms and conditions of the Original Contract remain unchanged. If there is a conflict between the Original Contract and the Modification No. 01, this Modification No. 01 shall prevail.

The Parties have caused this Modification No. 01 to be executed as of the Effective Date in duplicate originals, each having equal force, and has been executed on behalf of the Parties hereto as follows:

- a. It has on the ___ day of _____, 2010 been executed on behalf of Fort Bend County Transportation by _____.
- b. It has on the ___ day of _____, 2010 been executed on behalf of METRO by its President & Chief Executive Officer and attested by its Assistant Secretary, pursuant to Resolution 2010-49 of its Board of Directors authorizing such execution.

Fort Bend County

By: Robert Hebert
Robert E. Hebert, County Judge

Approved as to form:

Paul J. Stewart
Paul J. Stewart
Assistant County Attorney

Metropolitan Transit Authority of Harris
County, Texas

By: _____
George Greanias
President & Chief Executive Officer

Executed for and on behalf of the
Metropolitan Transit Authority pursuant
to Resolution No. 2007-97, passed by
the Board of Directors on November 15,
2007, and on file in the office of the
Assistant Secretary of METRO

Attest as to form:

Assistant Secretary

Approved as to form:

Alva Trevino
(Acting) General Counsel

Susan A. Bailey
Vice President / Finance

MODIFICATION NO. 01 EXHIBIT 2

PROJECT DESCRIPTION AND BUDGET

FORT BEND COUNTY NEW FREEDOM PROJECT

New Freedom Project Description: This project will provide funds for the acquisition costs of three (3) wheelchair accessible buses, service support, and stop attendants. The contracted service will operate daily, Monday through Friday (excluding Fort Bend County Holidays). One deadhead hour per bus per day will be allowed to meet Fort Bend County contractual obligations. Services will be designed to serve a targeted passenger population of persons with cognitive disabilities that live in the urban areas of Fort Bend County.

Currently, the Texana Center (the local Mental Health Mental Retardation authority for Fort Bend County) offers limited transportation services for individuals with cognitive disabilities; however, the service is only available for trips to Texana facilities for those individuals who are located near pick-up points or who can wait unattended at these locations. The existing demand-response service provided by FBC is at capacity during peak travel times and has limited space available during off-peak hours.

Two of the buses will be assigned to point deviation routes and the third bus will be utilized for expanded demand-response services in the urbanized area. Passenger attendants will be utilized to ensure that individuals with disabilities board the correct vehicles, to assist drivers with boarding and alighting of passengers, and to ensure that individuals with disabilities who could not ordinarily wait unattended at pick-up points are supervised. The transportation routes will provide direct access to medical facilities, recreational and day facilities, job sites, education and job training locales, and other destinations in Fort Bend County's urbanized area via connections to the existing public transportation services offered by Fort Bend County and METRO.

New Freedom funding will provide 80% of the eligible capital project expenses, and 50% of the eligible operating project expenses. Program partners include the ARC of Fort Bend, Fort Bend County, the George Foundation, and the United Way of Greater Houston; these agencies will provide the required local match for these grant funds.

Project Budget:

ALI	Account Name	FTA %	FTA \$\$	Local \$\$	Total \$\$
11.13.04	Purchase 3 vans	83%	\$180,911	\$ 37,054	\$217,965
11.13.15	Purchase 1 van	83%	37,350	7,650	45,000
11.71.12	Capital Cost Contracting – Capital	80%	174,002	43,501	217,503
11.80.00	Program management	100%	116,041	0	116,041
11.79.00	Program management	50%	150,549	150,549	301,098
30.09.01	Capital Cost Contracting – Operating	50%	121,000	121,000	242,000
	Total		\$779,853	\$359,754	\$1,139,607

MODIFICATION NO. 01 EXHIBIT 5 - A

PROJECT MILESTONES

JARC PROJECT

**HOUSTON METRO
Job Access Reverse Commute
Quarterly Project Status Report**

Reporting Agency: **Fort Bend County**

Grant #: **TX-37-X059**

Project Name: **WHEELS**

Date Submitted: _____

Report for the **Quarterly** period:

Starting Date _____

Ending Date _____

Section I. Accomplishments. Provide an update of revised estimated completion or actual completion dates for the milestones listed below.

Milestone	Budget	Current Est. Compl.	Rev'd Est. Compl/	Actual Compl.
11.13.04 Buy 2 30 ft bus service expansion (83%)	\$151,874			
RFP/IFB out for bid		05/18/07	02/28/09	11/25/09
Contract awarded		11/19/09	01/08/10	01/12/10
First vehicle delivered		04/01/09	10/15/10	
All vehicles delivered		05/01/09	10/31/10	
Contract complete		07/01/09	10/30/10	
11.71.12 Capital cost of contracting (80%)	\$265,025			
CCC start service		07/01/09	12/01/10	05/01/09
CCC complete service		08/31/11	06/30/12	
30.09.01 Capital cost of contracting (50%)	\$ 356,806			
Start service		07/01/09	12/15/10	
Complete service		08/31/11	06/30/12	

Also provide a bulleted list of project accomplishments as well as a description of their importance to the project.

Section II: Problems/Solutions (NOTE: Please attach any additional information that you feel should be a part of your report or that may be required to meet the deliverable requirements for tasks completed during this reporting period.)

<p>Problem(s) Identified</p> <p><i>(Please report anticipated or unanticipated problem(s) encountered and its effect on the progress of the project)</i></p>	
<p>Proposed Solution(s)</p> <p><i>(Please report any possible solution(s) to the problem(s) that were considered/encountered)</i></p>	
<p>Action(s) Conducted and Results</p> <p><i>(Please describe the action(s) taken to resolve the problem(s) and its effect)</i></p>	

_____ Date: _____
 Authorized Project Representative's Signature

MODIFICATION NO. 01 EXHIBIT 5 - A

PROJECT MILESTONES

NEW FREEDOM PROJECT

**HOUSTON METRO
New Freedom
Quarterly Project Status Report**

Reporting Agency: Fort Bend County

Grant #: TX-57-X006

Project Name: GAPS

Date Submitted: _____

Report for the **Quarterly** period:

Starting Date _____

Ending Date _____

Section I. Accomplishments. Provide an update of revised estimated completion or actual completion dates for the milestones listed below.

Milestone	Budget	Current Est. Compl.	Rev'd Est. Compl/	Actual Compl.
11.13.04 Buy 3 van service expansion (83%)	\$217,966			
RFP/IFB out for bid		05/21/07	11/25/09	11/25/09
Contract awarded		07/24/07	01/12/10	01/12/10
First vehicle delivered		08/31/09	10/15/10	
All vehicles delivered		06/30/11	10/31/10	
Contract complete		08/31/11	11/30/10	
11.13.15 Buy 1 van service expansion (83%)	\$45,000			
RFP/IFB out for bid		12/15/10		
Contract awarded		02/15/11	02/15/11	
First vehicle delivered		06/15/11	06/15/11	
All vehicles delivered		06/15/11	06/15/11	
Contract complete		07/15/11	07/15/11	
11.71.12 Capital cost of contracting (80%)	\$217,503			
CCC start service		11/30/09	05/01/09	05/01/09
CCC complete service		02/28/11	08/31/12	
30.09.01 Capital cost of contracting (50%)	\$242,000			
Final expenditure		02/28/11	08/31/12	
30.09.01 Operating (attendants / ambassadors / supervisor) (50%)	\$301,098			
Start general project management		01/01/10	12/01/10	
Complete general project management		08/31/11	08/31/12	
Start project management - attendants		07/01/10	12/01/10	
Complete project management - attendants		02/28/11	08/31/12	

11.80.00 Program administration (100%)	\$116,040			
Start project management		10/01/10		
Complete project management		03/31/11		

Also provide a bulleted list of project accomplishments as well as a description of their importance to the project.

Section II: Problems/Solutions (NOTE: Please attach any additional information that you feel should be a part of your report or that may be required to meet the deliverable requirements for tasks completed during this reporting period.)

<p>Problem(s) Identified</p> <p><i>(Please report anticipated or unanticipated problem(s) encountered and its effect on the progress of the project)</i></p>	
<p>Proposed Solution(s)</p> <p><i>(Please report any possible solution(s) to the problem(s) that were considered/encountered)</i></p>	

<p>Action(s) Conducted and Results</p> <p><i>(Please describe the action(s) taken to resolve the problem(s) and its effect)</i></p>	
---	--

_____ Date: _____
Authorized Project Representative's Signature

MODIFICATION NO. 01 EXHIBIT 5 - B
FINANCIAL STATUS REPORT

**FINANCIAL STATUS REPORT
(SHORT FORM)**

1. Federal Agency to which report is submitted: Federal Transit Admin.	2. Federal Grant #: TX-37-X059	OMB Appvl. Nr.	Page 2 of 7
---	--	-----------------------	-------------

3. Recipient Organization
 Fort Bend County
 12550 Emily Sourt, Suite 400
 Sugar Land, TX 77478

4. Employer ID Nr. 1-74-1998278-4	5. Recipient Acct Nr. N/A	6. Final Report Yes: No: <input checked="" type="checkbox"/>	7. Basis Accrual
---	-------------------------------------	--	----------------------------

8. Funding/Grant Period FROM: 08/12/08	9. Period Covered this Rpt. TO: 09/30/10	9. Period Covered this Rpt. FROM: 07/01/10	9. Period Covered this Rpt. TO: 09/30/10
--	--	--	--

10. Transactions	I	II	III
	Previously Reported	This Period	Cumulative
a. Cash on hand at beginning of period			
b. Cash receipts			
c. Cash disbursements			
d. Cash on hand (A + B - C)			\$0
e. Total Federal Funds Authorized			\$516,478
f. Federal Share of Expenditures	\$0	\$0	\$0
g. Recipient Share of Expenditures	\$0	\$0	\$0
h. Total Expenditures (F + G)	\$0	\$0	\$0
i. Federal share of Unliq Obligations			\$136,687
j. Recipient Share of Unliq Obligns			\$15,187
k. Total Unliquidated Obligations			\$151,874
l. Total Federal Share (F + I)			\$136,687
m. Unoblig'd Balance Federal Funds (E - L)			\$379,791
n. Total recipient share required			\$257,226
o. Remaining recipient share to be provided			\$242,039
p. Program income on hand at beginning			
q. Total federal program income earned			
r. Prog income expended...deduction alternative			
s. Prog income expended...addition alternative			
t. Prog inc expended...allowable op/cap exp			
u. Unexpended prog income (P + Q - R or S or T)			\$0

11. Indirect Rate	Base:	
Type of Rate: Final <input checked="" type="checkbox"/>	Amount charged:	
FROM: 10/01/09 TO: 09/30/10	Federal share:	
Rate:		

12. Remarks

13. Certification:
 I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.

Typed or printed name and title Edith L. Lowery Director, Grant Programs	Telephone 713-739-6925
Signature of Authorized Certifying Official <i>Edith L Lowery</i>	Date Report Submitted 10/25/10

TX-37-X059 FORT BEND COUNTY

100% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	0	0	0
Current period	0	0	0
LTD	0	0	0

80% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	0	0	0
Current period	0	0	0
LTD	0	0	0

83% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	0	0	0
Current period	0	0	0
LTD	0	0	0

50% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	0	0	0
Current period	0	0	0
LTD	0	0	0

TOTAL EXPENSES

	FTA \$	Local \$	Total \$
Prior period	0	0	0
Current period	0	0	0
LTD	0	0	0

UNLIQ OBLIGATIONS

	FTA \$	Local \$	Total \$
83%	0	0	0
80%	121,499	30,375	151,874
50%	0	0	0
Total	121,499	30,375	151,874

**FINANCIAL STATUS REPORT
(SHORT FORM)**

1. Federal Agency to which report is submitted: Federal Transit Admin.	2. Federal Grant #: TX-57-X006	OMB Appvl. Nr.	Page 2 of 6
---	--	-----------------------	-------------

3. Recipient Organization
 Fort Bend County
 12550 Emily Sourt, Suite 400
 Sugar Land, TX 77478

4. Employer ID Nr. 1-74-1998278-4	5. Recipient Acct Nr. N/A	6. Final Report Yes: No: XX	7. Basis Accrual
---	-------------------------------------	---------------------------------------	----------------------------

8. Funding/Grant Period FROM: 08/20/08	TO: 09/30/10	9. Period Covered this Rpt. FROM: 07/01/10	TO: 09/30/10
--	---------------------	--	---------------------

10. Transactions	I Previously Reported	II This Period	III Cumulative
a. Cash on hand at beginning of period			
b. Cash receipts			
c. Cash disbursements			
d. Cash on hand (A + B - C)			\$0
e. Total Federal Funds Authorized			\$779,853
f. Federal Share of Expenditures	\$15,148	\$31,298	\$46,446
g. Recipient Share of Expenditures	\$5,692	\$22,388	\$28,080
h. Total Expenditures (F + G)	\$15,217	\$59,309	\$74,526
i. Federal share of Unliq Obligations			\$180,911
j. Recipient Share of Unliq Obligns			\$37,054
k. Total Unliquidated Obligations			\$217,965
l. Total Federal Share (F + I)			\$227,357
m. Unoblig'd Balance Federal Funds (E - L)			\$552,496
n. Total recipient share required			\$359,754
o. Remaining recipient share to be provided			\$294,620
p. Program income on hand at beginning			\$0
q. Total federal program income earned			\$0
r. Prog income expended... deduction alternative			\$0
s. Prog income expended... addition alternative			\$0
t. Prog inc expended... allowable op/cap exp			\$0
u. Unxpended prog income (P + Q - R or S or T)			\$0
11. Indirect Rate	Base:		
Type of Rate: Final <u>XX</u>	Amount charged:		
FROM: 10/01/09 TO: 09/30/10	Federal share:		
Rate:			

12. Remarks

13. Certification:
 I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.

Typed or printed name and title Edith L. Lowery Director, Grant Programs	Telephone 713-739-6925
---	----------------------------------

Signature of Authorized Certifying Official <i>E Lowery</i>	Date Report Submitted 10/25/10
---	--

TX-57-X006 FORT BEND COUNTY

80% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	5,110	1,277	6,387
Current period	19,378	4,845	24,223
LTD	24,488	6,122	30,610
	24,488		

83% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	0	0	0
Current period	0	0	0
LTD	0	0	0
	0		

50% EXPENSES

	FTA \$	Local \$	Total \$
Prior period	4,415	4,415	8,830
Current period	17,543	17,543	35,086
LTD	21,958	21,958	43,916
	21,958		

TOTAL EXPENSES

	FTA \$	Local \$	Total \$
Prior period	9,525	5,692	15,217
Current period	36,921	22,388	59,309
LTD	46,446	28,080	74,526

UNLIQ OBLIGATIONS

	FTA \$	Local \$	Total \$
83%	180,911	37,054	217,965
80%	0	0	0
50%	0	0	0
Total	180,911	37,054	217,965

FINANCIAL STATUS REPORT

FTA
FTA
FTA

90%
80%
50%

Page 3 of 6
FORT BEND CTY

1-74-1998278-4
N/A
FINAL REPORT: NO

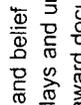
TX-57-X006 NEW FREEDOM
BASIS: ACCRUAL

FEDERAL TRANSIT ADMINISTRATION

FINANCIAL STATUS REPORT
METROPOLITAN TRANSIT AUTHORITY
OF HARRIS COUNTY
P. O. BOX 61429
HOUSTON, TEXAS 77208

PROGRAMS/FUNCTIONS/ACTIVITIES	PROJECT/GRANT PERIOD		PERIOD COVERED BY THIS REPORT	
	FROM: 08/20/08	TO: 09/30/10	FROM: 07/01/10	TO: 09/30/10
NET OUTLAYS PREVIOUSLY REPORTED	11.13.04	11.13.15	11.71.12	30.09.01
TOTAL OUTLAYS THIS REPORT	0	0	6,387	8,830
LESS: PROGRAM INCOME CREDITS	0	0	24,223	35,086
NET OUTLAYS THIS REPORT PERIOD	0	0	0	0
NET OUTLAYS TO DATE	0	0	24,223	35,086
LESS NON-FEDERAL SHARE OF OUTLAYS	0	0	30,610	43,916
TOTAL FEDERAL SHARE OF OUTLAYS	0	0	6,122	21,958
TOTAL UNLIQUIDATED OBLIGATIONS	217,965	0	24,488	21,958
LESS: NON-FEDERAL SHARE OF UNLIQUIDATED OBLIGATIONS SHOWN ABOVE	37,054	0	0	0
FEDERAL SHARE OF UNLIQ OBLIGS	180,911	0	0	0
TOTAL FEDERAL SHARE OF OUTLAYS AND UNLIQUIDATED OBLIGATIONS	180,911	0	24,488	21,958
TOTAL CUMULATIVE AMOUNT OF FEDERAL FUNDS AUTHORIZED	180,911	37,350	174,002	121,000
UNOBLIGATED BALANCE OF FEDERAL FUNDS	0	37,350	149,514	99,042
	Buy 3 vans 83%	Buy 1 minivan 83%	CCC-Cap 80%	CCC-Op 50%
	706A23	706A54	706A50	706A72
	180,911	37,350	174,002	121,000
	37,054	7,650	43,501	121,000
	217,965	45,000	217,503	242,000
	Approved FTA Budget	180,911	174,002	121,000
	Matching Share	37,054	43,501	121,000
	TOTAL	217,965	217,503	242,000
			Op / Attendants 50%	Planning 100%
			706A72	706A99
			150,549	116,041
			150,549	116,041
			301,098	116,041
			779,853	779,853
			359,754	359,754
			1,139,607	1,139,607

I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the proposes set forth in the award documents.


 Edith L. Lowery
 Director/Grant Programs
 10/25/10
 Date
 713-739-6925
 Telephone