

Fort Bend County
General Information

Formula Application 2023
5311-2023-FT BEND-00043

Application Instructions	<u>Application Instructions</u>
Agency Name	Fort Bend County
Person to be contacted regarding this application	
First Name *	Pamela
Last Name *	LeBrane
Phone Number *	(281) 243-6702
Email Address *	pamela.lebrane@fortbendcountytexas.gov
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 (FBC) will use funds for purchase of service, software, surveillance and miscellaneous equipment, project administration and operating expenses.

FBC provides general public demand response and commuter services. All services operate Monday through Friday (excluding County Holidays). Demand Response services operate to accommodate the first drop-off by 8:00 am and last pick-up by 5:00 pm. 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.

FBC provides additional services such as the Ambassador Program wherein passenger assistants help passengers with disabilities to and from their destinations. FBC continues to plan with human service agency transportation providers within the County and continues to stay involved in the region's public transportation efforts.

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.

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

The proposed projects will support the continuation of existing public transportation services to address the needs of individuals and families in the Fort Bend County service area. FBC regularly communicates with its riders through surveys, and public comments, and stays in touch with corporations and businesses that are the destination of commute riders. Although ridership has not reached pre-COVID levels, ridership continues to increase.

3. Describe the anticipated benefits of the project. *

Fort Bend County services bring a better quality of life to individuals, families, communities, and businesses from every walk of life by providing options to get to work, go to school, visit friends, or get to a doctor's appointment.

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

A formal bid process was completed for purchase of service and ambassador services.

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

Vendor Name	Description of goods/services
TransDev (formerly First Transit)	Purchase of Service
Transit Safety and Security Solutions	Bus Attendants

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

06/21/2023

Attachments
Upload any additional documents relevant to this application per the application's instructions.

Description	Upload
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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 need for the project. Specifically, identify how the project was selected and summarize the anticipated service improvements and/or project benefits to your area.
N/A

Identify the vehicle type(s) to be purchased.

If not applicable, select N/A NA

(press the save button for additional rows)

Enter License and VIN of vehicle to be replaced/rebuilt

License #	VIN	Mileage	Replace/Rebuild	Reason to select this vehicle
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Note: vehicles must meet useful life standards to be considered for replacement

4. Identify the vehicle type(s) to be purchased.
(press the save button for additional rows)

Vehicle type to be purchased	Replacement or Expansion?	ADA Accessible	Reason to select this vehicle
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Yes No

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

Yes No N/A

Upload an approved copy of Form PTN-116 Request to Purchase Non-Accessible Vehicle(s) in the field provided below.

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.
Other capital expenses include Capital Cost of Contracting for all general public transit services already operated by the County. FBC contracts with TransDev (formerly First Transit) to provide transportation services.

Other capital expenses outlined in this application include software, software maintenance fees, surveillance and security equipment, and 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.
FBC will use funds in support of existing transit services

Attachments

Upload any additional documents relevant to this application per the application's instructions.

Description	Upload
FBC Brochure	https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/829357_345804-FBT ServicesBrochureUpdated.pdf
Greenway Map	https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/829357_345804_2-G reenwayRouteMap_Updated.pdf

Galleria Map	https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/829357_345804_3-GalleriaRouteMap_Updated.pdf
TMC Map	https://apps2.txdot.gov/apps/egrants2/egrants2_uploads/829357_345804_4-TMCRouteMap_Updated.pdf

As an authorized official of the Fort Bend County

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 and technical capacity 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.

This includes but is 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.

- ✓ By checking and completing this document I certify that the above statements are true and that I have the authority to sign this document.

Name

KP George

Title

County Judge

Date

6/20/2023

Will this project involve construction, alteration, repair, or purchase of buildings, structures, or other real property? *

[] Yes [✓] No

[]

Identify **completed** phases and describe the activities that have taken place for those phases. Identify actual costs per phase and funding sources. *

Phase	Activities which have taken place	Cost	Funding Source
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3b.

Phase	Activities in progress	Cost	Funding Source	Amount Committed
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3c. Describe **future** activities, by project phase. For each phase provide the estimated cost, secured funding sources and amounts, and funds being requested. *

Describe how amounts were determined.

Upload Funding Source Material

Description	Upload
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Maps

Description	Upload
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5. Do you own or rent the property? * If renting, upload a copy of the lease.
() Own () Rent/Lease () Location not selected

- 5a.

Does TxDOT PTN have a lien on this property?
- ☐

Yes

☐

No
- 5b.

Are there any other liens on the property?
- ☐

Yes

☐

No
6.

Do you have an existing Categorical Exclusion (CE) that was approved by FTA for this project?
- ☐

Yes

☐

No
7.

Do you plan on any joint development or incidental use including leasing space to other parties?
- ☐

Yes

☐

No
8.

Is the facility located within a known flood plain? *
- ☐

Yes

☐

No

☐

Location not selected

Description

Description

Upload

Agency Name

Fort Bend County

Program Type

5311

Does this budget include indirect costs? *

Yes ☒ No

If yes, please enter the Indirect Rate

%

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

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								
	# of Units	Award Amount	State Match	Local Match	In-Kind Match	Total Funds	Match Ratio	TDC
		\$96,655	\$24,164			\$120,819		0
Description	Scope							
Acquisition - Acquisitioned Software - 11.42.08		Award Amount						
		\$24,400	State Match			Total Funds		TDC
			\$6,100			\$30,500		0
Description	Scope							
Acquisition - Surveillance/Security - 11.42.09		Award Amount						
		\$8,800	State Match			Total Funds		TDC
			\$2,200			\$11,000		0
Description	Scope							
Acquisition - Miscellaneous Equipment - 11.42.20		Award Amount						
		\$11,904	State Match			Total Funds		TDC
			\$2,676			\$14,580		0
Description	Scope							
Project Administration - 11.79.00		Award Amount						
		\$71,164	State Match			Total Funds		TDC
			\$17,791			\$88,955		0
Description	Scope							
Operating - 30.09.01		Award Amount						
		\$241,212	State Match			Total Funds		TDC
			\$241,213			\$482,425		0
		Award Amount	State Match	Local Match	In-Kind Match	Total Funds		TDC
Subtotal:		\$454,135	\$294,144	\$0	\$0	\$748,279		0

WE ARE FBT

The mission of Fort Bend Transit (FBT) is to provide safe and efficient public transportation services while maintaining service quality and customer satisfaction.

FBT is proud to offer two distinct services for Fort Bend County:

Commuter Service



Demand Response Service



Every day we aim to deliver and continue to grow on the expectations of those we serve by providing **convenient** access to public transit; **affordable** public transit; **safe** public transit; and **reliable** public transit to and from your destination.

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance (42 U.S.C. Section 2000d).

Fort Bend County is committed to ensuring that no individual who uses our services is excluded from participation, denied benefits, or discriminated against. If you believe you have been subjected to discrimination, you may file a complaint by calling the Fort Bend Transit Civil Rights Officer at 281-633-7433.

You may send a written complaint to Fort Bend Transit Department, ATTN: Civil Rights Officer, 301 Jackson St., Richmond, TX 77469, or via email at transit@fbctx.gov.

Complaints may also be filed with the following organization no later than 180 days after the date of the alleged discrimination: Federal Transit Administration, Office of Civil Rights, ATTN: Complaint Team, East Building, 5th Floor - TCR, 1200 New Jersey Avenue, SE, Washington, DC 20590.



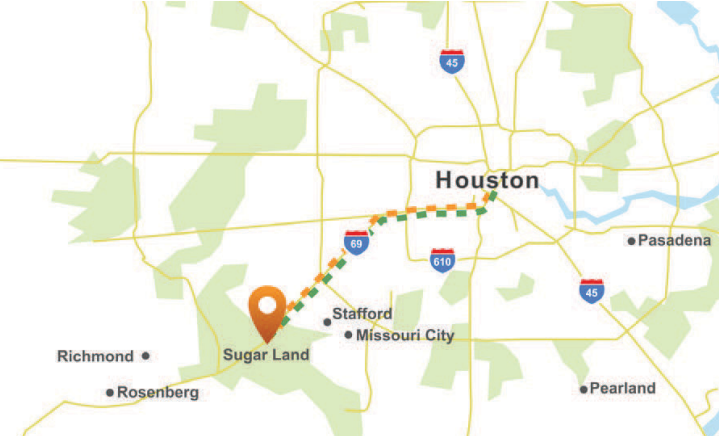
Physical Address: 3737 Bamore Road
Rosenberg, TX 77471

Mailing Address: 301 Jackson Street
Richmond, TX 77469

(281) 633-RIDE (7433)
transit@fortbendcountytexas.gov
www.FBCTransit.org

Fort Bend County Public Transportation Services





Commuter Services

FBT's Commuter Park and Ride provides week-day service to the Texas Medical Center (TMC), Greenway Plaza, and the Galleria. Services begin as early as 4:30 a.m. and end as late as 9:00 p.m.

Park and Ride Locations can be found at:

- » Fort Bend County Fairgrounds
- » University of Houston — Sugar Land
- » AMC Theater First Colony

For additional information on park and ride locations, as well as pricing, route schedules and maps, visit www.FBCTransit.org.

Demand Response

Service Information

Demand Reponse is a curb-to-curb service with pick-ups limited to within Fort Bend County. Drop-offs are allowed up to one mile outside the county line. If you require assistance with boarding or exiting the bus, this must be requested when your trip is scheduled.

To schedule a ride:

Call (281) 633-RIDE (7433)

Monday – Friday, 8:00 a.m. to 5:00 p.m.

Please have the following information ready to give to our reservationists:

- » Your name and/or Client ID#
- » Home address
- » Telephone number
- » Pick-up and drop-off address
- » Appointment time and/or pick-up time

5 Things to Know Before You Ride

- » We do not offer same day rides.
- » Reservations can be made at least one day in advance, or up to 30 days in advance.
- » This is a shared ride service.
- » Trips are scheduled based on time and space availability.
- » Bus service is not provided on County observed holidays. A complete list of holidays, as well as our Passenger Guidelines, can be found on our website www.FBCTransit.org.

Canceling a Trip

- » Call reservations as soon as possible.
- » Cancellations made the same day as your trip will be considered a “late cancel.”
- » Six or more no-shows, cancels-at-door, and/or late cancels within a 90-day period may result in a 30-day suspension from service.

When Riding the Bus

- » Passengers must be ready 15 minutes before their scheduled pick-up. Please note the bus may arrive up to 15 minutes after your pick-up time. Not being ready or canceling at the door will count against our suspension policy.
- » All passengers must wear seatbelts.
- » An approved seat restraint must be provided for children 40 lbs or less.
- » Passengers 12 years or younger must be accompanied by an adult 18 years or older.

ONLY \$1.00 each way

Demand Response is \$1.00 per person per one-way trip. All passengers are required to pay, unless riding solely as a personal care assistant.





FORT BEND

TRANSIT

a smarter way to travel

TMC Commuter Park & Ride Service Map

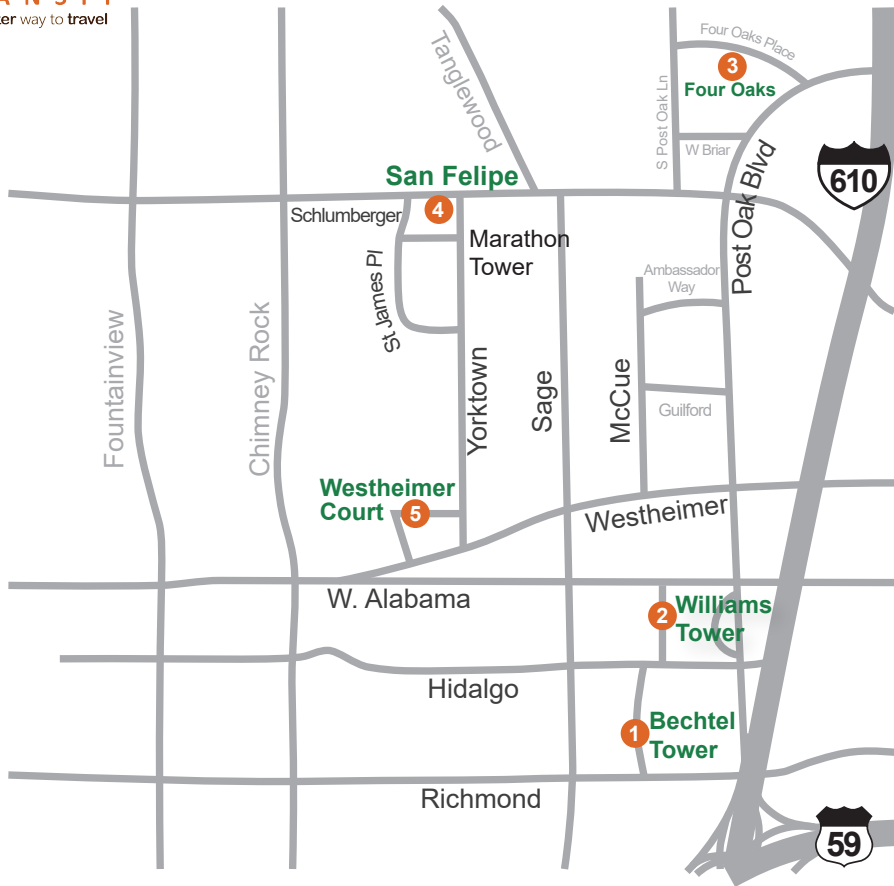
● Indicates FBT Service Stops





Galleria Commuter Park & Ride Service Map

● Indicates FBT Service Stops



● Indicates FBT Service Stops