## Part I: Applicant Information

Legal Name of Applicant:   Wake County				
Applicant's Congress	ional District (If Applicant's city is included in more than one district, enter			
primary district only)	: 13			
· · · · · · · · · · · · · · · · · · ·	f Applicant has offices in more than one county, list county where main office is			
located):	ppinearie has offices in more than one country, has country where main office is			
Address:	220 Swinburne Street			
City, State, Zip:	Raleigh, NC, 27610			
Federal Taxpayer	56-000347			
ID Number:				
Doing Business As	Wake County			
(DBA) Name:				
Applicant's DUNS Number (Unique 9-Digit number issued by Dun & Bradstreet. May be obtained free of charge at:				
http://fedgov.dnb.com/webform): 808888694				
Parent Agency DUNS Number: 808888694				
Applicant's Service Area's Congressional District (If service area is included in more than one district,				
enter primary district	t only):13			
Project's Service Area	a (list the county or counties that will be served by the proposed project):			

Project Manager and Contact Information					
Name of Project Manager:	Anita Davis-Haywood				
Title:	Transportation Services Manager				
Address:					
	220 Swinburne Street, P.O. Box 46	833, Ra	leigh NC 27610		
E-mail:	Anita.davis@wakegov.com				
Phone Number:	919-250-3829				
Mobile Phone Number:	919-623-2163	FAX:	919-212-7667		
Alternative Co	ntact Information (in absence of Pro	oject M	anager)		
Name:	Alicia Arnold				
E-mail:	Alicia.Arnold@wakegov.com				
Phone Number:	919-856-5268				

Current Vehicle Inventory (enter number in fleet)						
Vans Vans/Lifts 40 Sedans or						
	Minivans					
LTV's		LTV's/Lifts	2	Buses		

Table 1: Vehicles/capital to be replaced or rehabbed/refurbished with this request

Asset (model year, manufacturer, model or	VIN or Fleet ID	Revenue	Revenue	Current
variant)		miles from	hours from	mile(as of
		Vehicle	Vehicle	July 1,
		Replacement	Replacement	2017) age
		Plan (as of	Plan (as of	
		July 1, 2017)	July 1, 2017)	
VAN FORD ECONOLINE E350 14	194502	20,721	2,430.2	156,184
VAN FORD ECONOLINE E350 14	170003	48,171	2,236.8	152,542
VAN FORD ECONOLINE E350 14	170303	51163	2,447.6	151,039
VAN FORD ECONOLINE E350 14	169203	42,355	2,007.22	145,689
VAN FORD ECONOLINE E350 14	169103	46,385	2,258.42	146,107
VAN FORD ECONOLINE E350 14	170203	40,671	2,001.07	133,972
VAN FORD ECONOLINE E350 14	169703	38,060	1,808.48	133,743
VAN FORD ECONOLINE E350 14	169003	43,865	2,058.65	131,635

Table 2: Vehicles/capital that have been disposed up to and including FY16

Asset (model year, manufacturer, model or	VIN or Fleet ID	Disposition	Revenue	Revenue
variant)		Date	miles at	hours at
			disposition	disposition
1FTDS3EL5BDA94534	170502	8/3/2016	2,689,415	10,830
1FTDS3EL8BDA98240	169902	8/3/2016	3,552,411	10,448
1FDFE45S29DA44080	174901	8/31/2016	1,805,668	9,083
1FTDS3EL1BDA98239	169402	12/5/2016	2,280,639	8,871
1FTDS3EL4BDB31735	171702	12/5/2016	2,808,643	10,116
1FTDS3EL7BDA94535	170402	12/5/2016	1,554,617	10,676
1FTDS3EL8BDA98237	170902	12/5/2016	3,308,372	10,420
1FTDS3EL8BDB31740	169502	12/5/2016	3,660,396	10,038
1FTDS3ELXBDB31738	171302	12/5/2016	2,583,271	10,341
I1FTDS3EL3BDA94533	170102	12/5/2016	2,001,809	9,065
1FTDS3EL1ADA22602	168502	12/9/2016	1,853,708	6,291
I1FTDS3EL2ADA22642	168702	12/9/2016	2,559,001	9,815
I1FTDS3EL6ADA22644	168802	12/9/2016	3,197,383	6,291
I1FTDS3ELXBDA98238	169302	12/9/2016	2,855,872	6,675
1FTDS3EL1BDB31739	171202	2/27/2017	3,911,046	10,341
1FTDS3EL6BDB31736	171502	2/27/2017	3,027,820	9,838
1FTDS3EL8BDB31737	171402	2/27/2017	2,196,200	9,184
1FTDS3EL0BDB31733	168202	6/13/2017	2,323,006	10,341

The project conforms to FTA's spare ratio guidelines. **×** Yes □ No □ Unsure

Average Fleet Age (in Years)	2 years
Average Fleet Age ( <b>in Miles</b>	100,294
as of July 1, 2017)	
Spare Ratio	0/less than 50 vehicles

Explanation We	_	at are operational each day. W	e do not have enough vans
	sistance Transparency Act (FFA efive most highly compensated	TA) mandates the disclosure of officers of an entity if:	the names and total
federal gove Those rever The public of	ernment (all federal sources, no nues were greater than \$25M; a	nd rmation through Securities and	
	ect "Yes" if they are subject to a ATA and "No" if they are not suborting.	1 1745	⊠ No
•	ation Reporting: If "Yes" is selec ers of the Applicant.	ted above, enter the Names and	d Compensation amounts
<u>Full Name</u>		<u>Total (</u>	<u>Compensation</u>
1		\$	
2		\$	
3			
4			
5			
Part II: Project II	nformation		
and/or rural serv apply for one yea It will be necessar Eligible projects n	ice area. Duplicate projects with ar of funding only. If a project is by to reapply and go through ano hay be funded using 5310, 5311, be project's funding after the applementation.	lication for all capital projects for thin service areas will not be fur selected, funding for subsequen other competitive process for sub 5339 or a combination of the the lication has been reviewed and a	nded. Applicants can t years is not guaranteed. sequent years' funding. ree funding sources. PTD
Project Name	Vehicle Replacemen	nt	

Type(s) of Capital Project (vehicle replacement, purchase of service, equipment, etc). Describe the project(s) to be funded.		icle Replacement. Wake County is asking for funds to replace 9 icles with Lift Vans.
	•	FY 2019
Federal Amount Request	ed =	\$
State Amount Request	ed =	\$466,164.15
Local match amou	ınt =	\$51,796.02
Total project co	ost =	\$517,960.17

#### Part III: Project Criteria

Address each of the evaluation criteria separately, demonstrating how the project responds to each criterion. Each proposer is encouraged to demonstrate the responsiveness of a project to all of the appropriate selection criteria with the most relevant information that the proposer can provide, regardless of whether such information has been specifically requested, or identified. Please be thorough, yet concise in the response.

#### III-1. Threshold Criteria

- a. Does the applicant have the technical capacity to administer the project?
  - **×** Yes □ No Explain your answer in the box below.

Wake Coordinated Transportation Services has 3 internal Transportation staff positions dedicated full time to the running the system, as well as 2 other Housing and Transportation staff positions who assist with the system. In addition, we have excellent maintenance staff, vendors and software to administer the system smoothly. WCTS has been operating for many years.

b. Describe the qualifications of the key personnel assigned to the project and the percentage of time each person will be involved in the project. Will the applicant need to hire additional personnel to support the project?

Key Transportation personnel have qualifications in transportation program management, transportation analysis, Medicaid transportation operations, customer service, financial management, and accounting. These personnel will be involved in the project 100% of their time. Other Housing and Transportation personnel bring additional planning, financial management, and accounting skills, and will spend approximately 50% of their time on the project.

c. Does applicant have adequate financial and management systems in place to ensure adequate reporting and project oversight? ★ Yes ☐ No Explain your answer in the box below.

Wake County has been reporting on the use of our funds for years. We have internal financial and management systems that correspond to the reporting requirements of the state and federal governments.

d. Has the source of local match been identified in a current budget or has it been approved by the agency's governing body in a future budget? What is the source of the match (e.g., agency reserves, capital replacement fund, municipal general fund, private partnership, etc.)? If the match is not from the applicant agency but another party, has that party committed the match in writing? Provide documentation of the commitment of local match from an outside party. Explain your answer in the box below.

The local match is built into the future budget and is derived from earned revenue.

e. Further describe the matching funds, including amount and source of the match (agency reserves, capital replacement budget, municipal general fund, private partnership, etc). List each source individually. If the matching funds are not committed, identify their source and anticipated award date. [Add/Remove Lines as necessary − place the cursor in the bottom row then right click → "Insert" → "Insert Rows Below" to add more lines to the following table]

Source	Amount	Date awarded or available
Earned Revenue	\$51,296.02	FY19

- f. Were FTA funds awarded to this project in previous years? ★Yes ☐No
- g. Describe the intended service area that will benefit from your proposed project. Include pertinent demographic information about the service area in your answer. It should be clear from your description where your project's target population lives in a small urban or rural area of North Carolina.

The service area is all of Wake County. 11.2 % of the population is below the Federal Poverty Level, 12% of the population below age 65 does not have access to health insurance, and 5.3% of the population under age 65 have some kind of disability. Wake County has some rural areas and some urban areas. WCTS serves the rural population that has limited access to other forms of transportation. In addition, trips to medical appointments for low income individuals receiving Medicaid, trips for employment purposes, and trips for people who are elderly or disabled are performed throughout the

County.			

h. Estimate the annual number of unduplicated passengers who will be served or the number of one-way trips that will be provided from the proposed project.

Unduplicated		One-way trips	253,814
Passengers			
Fully Allocated Cost per	\$36.86		
Trip			

List items included in the fully allocated cost per trip?

Vendor costs, Vendor Lift maintenance charges, Seon camera costs, Other vehicle costs, Radio airtime, Vehicle repairs, 15% Admin match, Taxes, tags, licenses, 10% Capital Match, City of Raleigh license and maintenance at facility, Contingency

#### III-2. Project Readiness

a. Describe the project plan <u>in detail</u> and provide a timeline and milestones for the completion of the project. This description should completely describe what you want to accomplish and how you are going to accomplish it if you receive the requested funding. The applicant may wish to attach the following documents with the application but these documents are not required: maps, pictures, marketing plans, draft brochures, charts or graphs and/or route schedules that support the request for funding, demonstrate the need or illustrate the applicant's preparation. If the applicant is working in partnership with or coordinating with other agencies or organizations, letters of support from these agencies or organizations may be attached with the application. Your detailed answer should be one half to one whole page long.

The project plan is to utilize the 9 requested replacement vehicles to replace older vehicles in our fleet of 42 vans. We want to accomplish safe, reliable transportation to residents within our service area. We serve rural general public, people making trips for employment or doctors appointments paid for by Medicaid, and elderly or disabled people making trips for various types of purposes. The timeline is: the vehicles will be put into service when they are received, and we anticipate that this date will be in the beginning of FY20. There is no set completion date for the project, as the vehicles will be used for their useful life.

b. Describe the applicant's preparedness to manage the project.

Wake Coordinated Transportation Services has 3 internal Transportation staff positions dedicated full time to the running the system, as well as three other Housing and Transportation staff positions who assist with the system. In addition, we have excellent maintenance staff, vendors and software to administer the system smoothly. WCTS has been operating for many years, and we are prepared to transition to the replacement vehicles when they arrive in FY20.

#### III-3. Project Monitoring

a. Describe the method that will be used to monitor and evaluate the success of this project. List the measurable indicators of success.

Success of the project will be evaluated by having more vans in good condition and in operation on a daily basis. Measurable indicators of success will be: Number of vans in operation, On time performance, commendations or complaints.

b. Describe how the project relates to any federal or other programs that the applicant operates and, if applicable, how the applicant plans to use these resources to leverage this project.

WCTS receives ROAP grant funding and Medicaid funding to cover part of the operational cost of

Х below.

🗷 Yes	Explain
□ No	We operate the services through our ROAP grants, our Medicaid reimbursements, 5307
□ N/A	FTA Grants, Wake Transit Bus Operations Agreements, and our earned revenue.

Part IV: Budget Information

Provide a general line-item budget for the total project, with enough detail to describe the various key components of the project. Since it is possible that projects may be partially funded, the budget should provide for the minimum amount necessary to fund specific project components of independent utility. [Add/Remove Lines as necessary using prior instructions]. A detailed budget needs to be submitted via Partner Connect.

Project Stages with Independent Utility and Description	Federal Amount	State Amount	Local Share	Total Cost
una Description			Silure	
	Requested	Requested		
1. 9 Replacement Vehicles		\$466,164.15	\$51,796.02	\$517,960.17
2.				
3.				
4.				
Project Totals				\$506,449

#### **Capital Budgets**

All rural transportation systems will be eligible for capital assistance funds. A Capital Replacement Schedule is included in Appendix A of this document. ASSETS THAT HAVE MET USEFUL LIFE WILL NOT AUTOMATICALLY BE REPLACED. The Capital Replacement Schedule represents the minimum threshold for replacement consideration unless the applicant can document that a capital item has a history of mechanical failure, is un-repairable or that it is financially prohibitive to repair the item. Only transit systems with in-house maintenance shops may apply for replacement support vehicles.

**Expansion Vehicles and Replacements** – For FY2018, expansion vehicles are not an eligible Capital expense.

Other Capital, Advanced Technology and Baseline Technology — Applicants should consult the Capital Replacement Schedule before requesting any replacements of Other Capital or Advanced/Baseline Technology. Appendix B lists the minimum specifications for technology items. New Advanced Technology users must have completed the Advanced Technology Pre-Application process with ITRE. Current Advanced Technology users may request to replace existing Advanced Technology items as necessary. Any system requesting expansion vehicles should also request vehicle security and surveillance equipment and any other advanced technology items currently used. The applicant must provide one (1) retail estimate per item if they request funding to replace or purchase Other Capital or Advanced/Baseline Technology. The estimate will determine the amount of funding recommended by the reviewer. Some Object Codes in the Other Capital and Baseline Technology budgets include the maximum cost in which PTD will participate. Requests for funding cannot exceed these amounts per item. The applicant is required to enter written justification in Section II for Advanced/Baseline Technology; Radio Equipment; and Telephone Equipment.

# Appendix A CAPITAL REPLACEMENT SCHEDULE

**Note:** Assets that have met their useful life will <u>not</u> automatically be replaced. This schedule represents the minimum threshold for replacement consideration. Listed capital items are illustrative and not exhaustive. **Effective 7/1/2012** 

CAPITAL ITEMS	MINIMUM	MINIMUM DOCUMENTATION REP	
CAPITAL ITEMS  MAJOR FACILITY REMOVATIONS AND	REQUIREMENTS	CONSIDERATION	
MAJOR FACILITY RENOVATIONS AND NEW CONSTRUCTION	40 years		
Building Purchase		Note: Major Renovation involves the purc	
• Facility Construction		existing building and complete refurbishing	
- 11-11-1		building. Needs Assessment required. P	
		would be required.	
OFFICE FURNITURE	12 Years	·	
■ Desk ■ Chairs		o 1 retail estimate	
■ Bookcase ■ Conference Table		<ul> <li>Description of need for replacement</li> </ul>	
■ File Cabinet ■ Safe (Fireproof) (25 yrs.)			
OFFICE EQUIPMENT	5 Years		
■ Fax Machine ■ Calculator		o 1 retail estimate	
■ Copier ■ Etc.		<ul> <li>Description of need for replacement</li> </ul>	
AUDIO VISUAL EQUIPMENT	10 Years		
■ VCR/DVD ■ Camcorder		o 1 retail estimate	
■ TV ■ Etc.		<ul> <li>Description of need for replacement</li> </ul>	
BASELINE TECHNOLOGY	5 Years		
■ Computer ■ Laptop (Includes		o 1 retail estimate	
Projector)*		o Description of need for replacement in i	
■ Printer ■ Server		project description	
■ Scanner (6 yrs.)		* Will be considered if needed for presenta	
SECURITY & SURVELLIENCE	7 Years		
<ul><li>Video (facility and vehicles)</li></ul>		o 1 retail estimate	
<ul><li>Cameras</li><li>Wireless unit</li></ul>		<ul> <li>Description of need for replacement</li> </ul>	
■ DVR ■ Antenna			
COMMUNICATIONS EQUIPMENT	6 Years		
Radio units Antenna		o 1 retail estimate	
■Base Station ■Repeater		Description of need for replacement in i	
•Cell phones		project description	
MAINTENANCE EQUIPMENT & FIXTURES	12 Years		
■ Roller cabinets ■ Diagnostic equip		o Only Systems with in-house Maintenand	
<ul><li>Portable tool stands</li><li>Lift truck</li></ul>		eligible	
■ Compressors- (5 yrs.) ■ Engine stands		o 1 retail estimate	
■ Hoists- (10 yrs.) ■ Brake lathes			
■ Bus washers- (10-15 yrs.) ■ Etc.			
SUPPORT VEHICLES			
■ Trucks – Light Duty (under 12,500 lbs. g.v.w.)	7 Years	o Only Systems with in-house maintenance	
		eligible	
		o 1 retail estimate & Justification for repla	
REVENUE VEHICLES			
Vans			
■ Center Aisle Van (2010 or older)		Updated PTMS	
■ Mini-Van	115,000 miles	o Current VUD	
Conversion Van or Lift Van		o Once required fleet size has been detern	
Buses  Light Town (LV) high (LTV)		the capital assessment process, vehicles designated for disposition and not be el	
Light Transit Vehicle (LTV)	145,000 miles	replacement.	
20-28 ft body on cut-a-way chassis	7 1/20112 211	replacement.	
Medium (Medium duty chassis) Over 28 ft body on truck chassis	7 Years or P <b>age</b> ( <b>9</b> 0 miles	Revised 07-24-17	
Medium (Heavy Duty Chassis)	10 Years or	Neviseu 07-24-17	
30-35 ft.	350,000 miles		
Large (Heavy Duty Chassis)	12 years or		

#### Appendix B

## **FY2018 Technology Specifications:**

(to be used as guideline for minimum standards only) Standards for Hardware, Software and Networking

These are MINIMUM standards only. NCDOT guidelines require that each computer last at least 5 years. If you plan on installing automated scheduling software or other technologies during the lifetime of the computer, please consult with the appropriate resource to determine minimum requirements.

**Desktop** 

<b>Operating System:</b>	Windows 7				
Processor:	Intel I5-750				
Memory:	4.0GB or higher				
Hard Drive (s):	80G, partitioned so C: drive is for programs and D: drive is for				
	data				
Software:	Microsoft Office Professional 2010				
Video Card:	GeForce GTS250 1GB/Radeon HD4850 512MB				
Network Card:	100/1000 Mbps				
UPS Backup/Surge	Multi-outlet AC Surge Protector with power supply backup (if				
<b>Protection:</b>	necessary)				
Multimedia Devices:	Pair of desktop speakers (if not included with monitor),				
	Microphone, optional Camera				
Monitor:	Any standard monitor capable of display in 1024x768 or greater.				
	Purchase larger monitors if required by specific applications.				
Other Drives:	CD/DVD ROM Drive				
<b>Anti-Virus Software:</b>	Any industry standard anti-virus software				
Service Program:	3-year warranty with on-site service				
C	Network				
Configuration:	100/1000 MB using switches (no hubs), TCP/IP Protocol				
Server					
All server specifications as	re minimums only. Servers should be expandable to enable increases				
in memory, processors, ha	rd drive, etc.				
<b>Operating System:</b>	Microsoft Windows Server 2008				
<b>Database Software:</b>	Microsoft SQL Server 2005 SP2 or 2008 Standard (if necessary)				
Network Card:	(2) 100/1000 MB				
<b>Processor Type:</b>	Intel Xenon 2.5Ghz or higher				
Memory:	12 GB				
Hard Drive(s):	300 GB				
Monitor:	15" or larger				
<b>Graphics Card:</b>	64MB or greater				
Other Drives:	CD/DVD ROM				
Anti-Virus Software:	Any industry standard anti-virus software				
Service Program:	Any industry standard anti-virus software  3-year warranty with on-site service  Revised 07-24-17				