

1223 - Transportation Assistance Program Capital Grant

Application Details

Funding Opportunity: 304-2021-2023 Consolidated Grant Program - Capital
Funding Opportunity Due Date: Oct 30, 2020 5:00 PM
Program Area: Consolidated Grant Program
Status: Editing
Stage: Final Application

Initial Submit Date:
Initially Submitted By:
Last Submit Date:
Last Submitted By:

Contact Information

Primary Contact Information

Name: Salutation **Ann** Middle Name **Lindblad**
First Name Last Name

Title: Grant Manager

Email*: alindblad@homage.org

Address*: 5026 196th St SW
Homage.org
Lynnwood Washington 98036-6102
City State/Province Postal Code/Zip

Phone*: (206) 300-4142 Ext.
Phone
####

Fax: ### ### ####

Organization Information

Legal Name*: Senior Services of Snohomish County/Homage

DBA Name*: Homage Senior Services

Organization Type*: Non Profit

DUNS #: 085192730
#####

Unique Entity Identifier (UEI):

Organization Website: (Please enter http://... for this field)

Physical Address*: 5026 196th st SW
Lynnwood Washington 98270-6102
City State/Province Postal Code/Zip

Mailing Address*: 5026 196th st SW

Lynnwood Washington 98036-6102
City State/Province Postal Code/Zip
5026 196th st SW

Remit to Address*:

Lynnwood Washington 98036-6102
City State/Province Postal Code/Zip

Phone*:

(425) 583-9709 Ext.
####

Fax:

####

Fiscal Year End

December

Last day of*:

1-Organization Contact Information

Organization Contact Information

Organization Director

Name*:

Steven McGraw
First Name Last Name

Chief Executive Officer smcgraw@homage.org
Title Email Address

Applicant Contact

Name*:

Ann Lindblad
First Name Last Name

Grant Manager alindblad@homage.org
Title Email Address

Project Contact

Name*:

Benjamin Kramer
First Name Last Name

General Manager - Transportation bkramer@homage.org
Title Email Address

2-Summary of Project Information

Summary of Project Information

Select the appropriate check box that best describes your project.

Capital Type*: Fleet replacement

Checking yes to federal funds means that your organization is willing and able to comply with the associated federal requirements. For full list see the Consolidated Grants Program Guidebook.

Willing to Accept FTA funds for the biennium*: Yes

Identify the areas this project will serve:
[Click Here](#) for the Legislative District map.

Legislative District(s)*: 01,10,32,38,39,44
Select all that apply

County(ies)*: Snohomish
Select all that apply

Dependency on Other Projects

Project Title

TAP Operating

3-Scope of Work

Project Description

Regional Transportation Planning Organization/Metropolitan Planning Organization who will be ranking this project?

Select the regional planning organization ranking this project from the drop-down menu.

RTPO/MPO*: Puget Sound Regional Council

Is this project primarily serving a rural area?*: Yes

Is this project primarily serving the Seattle, Tacoma, Everett urbanized area?*: No

Briefly and specifically describe what your project proposes to do (who, what, and where).


Proposed scope/description of the work.*:

The requested funding is to support the Transportation Assistance Program. This program is in need of specialized, ADA accessible vehicles to replace vehicles in its current fleet to provide transportation to seniors, those with disabilities, and low income residence in Snohomish County that do not have the benefit of using other public transportation options. New vehicles will replace 2 vehicles in the fleet to ensure completion of the critical programs and outcomes that are highlighted in the Consolidated Grant for Operations.

Why is this project needed, and how does this proposal address the need?

Describe why you are pursuing the proposed project. Include a description of the transportation problem that needs to be addressed, how the problem was identified, and how the proposed project will address the problem.

Need*:

Snohomish County has a diverse range of geographies and population density. The urbanized locations in the county and especially through the I-5 corridor are serviced by traditional transit and transportation options. Outside of the  of a mile service corridor for ADA paratransit as outlined by the FTA, the older residence and those with disabilities have few, and in many cases no options for transportation. Research has also shown that there are large gaps in transportation for those with low income.

Homage, through the agencies programs has its finger on the pulse of Snohomish County and the region and is aware of the many needs of the population therein. The Puget Sound Regional Council has also provided extensive research and resources documenting the need for special needs transportation in the region.

The Transportation Assistance Program provides white glove service to the underserved in Snohomish County. The program focuses on the populations of older citizens, those with disabilities, and low income residence that live outside of the ADA corridor, not qualifying for paratransit services, and who do not have other transportation options.

Describe coordination efforts with your regional planning organization.

Include details such as inclusion in regional plans, what prioritized strategies are being addressed, who was involved in defining the problem, other alternatives that were/are being considered for solving the problem, and demonstrations of local/regional support for implementing the proposed project.

Coordination Efforts*:

Transportation Assistance Program is included as part of the Puget Sound Regional Councils Special Needs Transportation Committee. Homage participates in the committee meetings. PSRC has also assisted in defining the needs in the region. Snohomish County also works with Homage, recognizing the needs for the service in the county and partnering with Homage to fulfill the service needs.

If the proposed project involves special needs transportation, how does the project advance efficiencies in, accessibility to, or coordination of transportation services provided to persons with special transportation needs?

To be eligible for funding for special needs transportation, [RCW 47.01.450](#) requires that applicants address how their project advances the efficiency, accessibility, and/or coordination of special needs transportation. Describe how your project advances these areas, and how you are going about developing these advancements.

Additionally, identify the special needs population to be served by this project.

Special Needs Transportation:

The Transportation Assistance Program provides accessibility to transportation services in Snohomish County to the residence that do not have other transportation options. Specifically, those who live outside of the ADA service corridor, are not able to ride public transportation, or are low income in areas with no other public transportation options. The program also coordinates with regional transit agencies to bring people outside of transit service areas into transfer points. This includes Community Transit, Skagit Transit, Island Transit, Everett Transit, and Sound Transit.

How will your organization measure whether the project is successful and improves the efficiency and effectiveness of public transportation? Identify data sources and monitoring processes. Explain how the project provides more efficient and effective transportation services to the target population(s) within the community. Describe strategies or steps to be taken if the project does not meet its performance targets.

Efficiency*:

The Transportation Assistance Program tracks multiple performance metrics. Ridership is tracked by unduplicated trips. On time performance is tracked to ensure customer satisfaction. People per revenue hour is tracked as a secondary performance metric to highlight efficiency of the routes created. Enrollment in the program is also tracked. These metrics are collected and tracked with the use of Ecolane software. The program provides transportation services that fill gaps in the public transportation system, ensuring the transportation needs of the region are met on a larger scale. If at any time the does not meet performance criteria the following steps will be taken. The General Manager will review data on a weekly basis to identify any problems in the system. Upon finding any criteria not being met, the general manager will meet with the supervisor of the program to determine the basis for the outcomes. After completing the analysis, a list of possible steps to correcting the negative outcomes will be compiled. The steps will have a timeline for completion and measurable outcomes. Data will continue to be reviewed on a daily basis.

Identify if your project connects to, coordinates with, leverages or enhances other modes of transportation in your service area (aviation, intercity bus or rail, park and rides, bicycle/pedestrian)?

Describe how this project supports and interacts with other modes of transportation in the project area. Does this service, equipment, or plan enhance other transportation or social services within your organization or among partners? What efficiencies within the service area will this project realize?

Other Modes of Transportation*:

The Transportation Assistance Program enhances the public transportation system in the service area. The service enhances transportation options provided by partners and other organizations in Snohomish County and region. By connecting people who have little or no service options in their area and transporting them to and from medical appointments, shopping, social interactions, housing, connecting them with other transportation options and other social services. Internally, the plan connects those in need with help with Medicare enrollment, peer support, food assistance, mental health screenings, and a multitude of other services provided by Homage. TAP will continue to provide the much-needed service to individuals in underserved areas of Snohomish county.

TAP currently connects with Community Transit, Skagit Transit, Everett Transit, Island Transit, and Sound Transit. TAP has the ability and desire to coordinate with other programs in the region to create connection points to help serve people in a wider service area.

Identify the project staff for this project. What type of experience do these individuals have with grant management?

Provide the names and experience of the key staff that will be working on this project, including their experience managing projects similar to the proposed project.

Project Staff*:

Steven McGraw, Chief Executive Officer. Steve holds a Master of Science in Clinical Psychology and Organizational Development from the University of Bridgeport. He has over two decades in executive level leadership in human services, healthcare, and educational sectors for local and international organizations.

Benjamin Kramer, General Manager of Transportation. Ben has over 16 years of experience in transportation. Experience includes management of multiple government and private sector contracts. He has 10 years in department level management for programs in vehicle maintenance, deviated fixed route operations, paratransit operations, and demand response. His time in the field also focused on safety protocols and regulations.

Arin Ricchiuti, Director of Finance. Arin has an Accounting degree from Central Washington University, and has 12 years of professional experience in non-profit accounting. She is responsible for the preparation of grant and agency budgets, financial reporting, contract compliance, management of the annual single audit, banking, risk management and IT for the organization.

Ramona Steel, TAP Manager. Mona worked as a care giver in rural Snohomish County for 28 years, giving her an opportunity to meet many of the riders of TAP. Mona became involved with the TAP program six years ago, moving into the program manager for the last 2 years.

HSTP Plans

Coordinated Public Transit - Human Services Transportation Plan	Page # or TBD
Puget Sound Regional Council	C-7, C-10, C-11

4-Capital Budget

Transit Vehicles

Replace or Expand	Vehicle Description	Useful Life	Passenger Seating	WC stations	Fuel Type	Quantity	Unit Cost	Total Project Cost	Requested Amount	Difference
Buy Replacements - Capital Bus	.15 Vans	5.00	09	2	Diesel	2.00	\$70,000.00	\$140,000.00	\$120,000.00	\$20,000.00

Equipment/facilities to support transit operations

Activity Type	ALI Description	Useful Life	Quantity	Unit Cost	Total Project Cost	Requested Amount	Difference
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No Data for Table

Equipment/facilities to support electrification and power distribution for transit operations

Activity Type	ALI Description	Useful Life	Quantity	Unit Cost	Total Project Cost	Requested Amount	Difference
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No Data for Table

Equipment/facilities to support transit passengers

Activity Type	ALI Description	Useful Life	Quantity	Unit Cost	Total Project Cost	Requested Amount	Difference
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No Data for Table

Match/Revenue Sources

Source	If Other, Please List	Amount
Local: Private Grant		\$20,000.00
		\$20,000.00

Match/Difference Total

Difference Total: \$20,000.00

Scalable

Is your project scalable?*: No

Specify the minimum funds needed and explain the scalability.: \$0.00

Describe the scalability of your project.:

ADA Accessibility

ADA Accessibility*:

Vans will include ADA mobility device lift. Two areas meet ADA requirements for wheel chair securement. The vehicles will meet or exceed 49 CFR Part 38 requirements.

Procurement Plan

Procurement Plan*:

Homage will obtain a minimum of three rate quotes from qualified sources by telephone, catalog or website and will utilize the Homage approved vendor list if applicable.

Other Sources

Other Sources*:

Private Foundation Grant from Boeing Employee Community Fund - \$20,000

Summary

Requested Amount

Vehicle Requested Amount:	\$120,000.00
Equipment Requested Amount:	\$0.00
TOTAL Requested Amount:	\$120,000.00

Match Amount

Match Amount:	\$20,000.00
Percentage of Match:	14.29%

Total

TOTAL PROJECT COST:	\$140,000.00
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5-Service Level

Project Service Level Information

Project Specific Information	1st fiscal yr. current biennium (Actual)	2nd fiscal yr. current biennium (Budgeted)	Current Biennium (Total of Actual and Budgeted)	Future Biennium 1 (Projected)	Percent of Change
Revenue Vehicle Hours	0.00	0.00	0.00	2460.00	0.0%
Revenue Vehicle Miles	0.00	0.00	0.00	32348.00	0.0%
<i>Passenger trips should be entered as whole numbers only.</i>					
Passenger Trips	0.00	0.00	0.00	3448.00	0.0%
Volunteer Hours	0.00	0.00	0.00	0.00	0.0%
					.00%

Project Service Level Description

Describe the methodology used to develop these estimates, including any assumptions used in their development.

How were service-level estimates developed?*

Service levels created by evaluating previous biennium usage and averaging across all vehicles.

6-Vehicle Replacement

Vehicle Replacement

Do you have a replacement vehicle?*: Yes
If yes, please complete the next section.

Vehicle Information

Vehicle Type	Remaining useful life (years)	Make/Model	Year	Vehicle Identification Number (VIN)	Current Status	Current Mileage
Light-duty Cutaway (Van Chassis)	-11	Ford E-450	2004	1FDFF4FS9HDC13833	Spare	287328
Van (Non-ADA)	-8	Chevrolet Uplander	2007	1GNDV33167D217362	Spare	167766

7-Milestones

Milestones

CAPITAL ACTIVITIES	Applicable?	Date (mm/yy)
EQUIPMENT		
Equipment - Request for Proposal/Information for Bid	N/A	
Equipment - Contract Award	N/A	
Equipment - Contract Complete	N/A	
VEHICLE - If you are purchasing a vehicle, you must complete all five vehicle milestones.		
Vehicle - Request for Proposal/Information for Bid	Yes	08/21
Vehicle - Contract Award	Yes	10/21
Vehicle - First Vehicle Received	Yes	01/22
Vehicle - All Vehicles Received	Yes	03/21
Vehicle - Contract Complete	Yes	06/25

8-Electricity and Biofuels Use

Electricity and Biofuels Use

[RCW 43.325.080](#) establishes a requirement for local governments to fuel their vehicles with electricity or biofuel by June 1, 2018, with certain exceptions and exemptions. WAC 194-29 further describes the decision-making criteria agencies should use in order to comply with the provisions of the law.

For projects that involve the purchase of vehicles, will the vehicles meet the requirements set forth in WAC 194-29 effective June 1, 2018? (PRACTICABLE USE OF ELECTRICITY AND BIOFUELS TO FUEL LOCAL GOVERNMENT VEHICLES, VESSELS, AND CONSTRUCTION EQUIPMENT)

WAC 194-29*: No

Electric or Hybrid: Does not meet your operational needs

Please Explain:

Electric and hybrid vehicles are currently not common or are non-existent in the vehicle platform needed for this service. If an electric vehicle was produced to meet the needs there would need to be further infrastructure needed to support charging.

Fueled in whole or in part by natural gas or propane: Does not meet your operational needs

Please Explain:

Homage has had the opportunity recently to use a propane converted vehicle. There are several reasons as to why this type of vehicle would not meet the needs of this service. Any vehicle procured would have to be upfitted from factory, adding a cost to the price of the vehicle. Fueling locations in Snohomish County are extremely limited and also poses safety issues if the vehicle needs to be refueled mid route due to a shorter range for propane vehicles.

9-Attachments

Attachments

Named Attachment	Required	Description	File Name	Type	Size	Upload Date
Copy of organization's most recent audit report (required)	✓	2019 Homage Audited Financial Statements	2019-1231 Homage-Senior Services FS-SAR 003 - Copy.pdf	pdf	461 KB	10/30/2020 11:24 AM
501(c) IRS Letter of Determination (For new non-profit applicants only)						
WUTC Certification (for new non-profit applicants who are direct service providers)						
Service area map (required)	✓	Homage Transportation service area is in white	Homage Transportation Service	pdf	399 KB	10/30/2020

Population density map (required)

✓ Snohomish County population density map provided by Puget Sound Regional Council.

[Area Map.pdf](#)

KB 02:15 PM

[sngrant2019-21-density-snohomish.pdf](#)

pdf 463 10/30/2020
KB 01:38 PM

Letters committing matching funds

In-kind match valuation proposal (if in-kind match will be used - not for capital projects)

Letters of support (combine into one file attachment - optional)

Letter of concurrence (for projects that operate in multiple planning regions)

10-Supplemental Information

Supplemental Information

Supplemental Information:

11-Certification

Certification

CERTIFICATION

I certify, to the best of my knowledge, that the information in this application packet is true and accurate and that this organization has the necessary fiscal, data collection and managerial capabilities to implement and manage the project associated with this application:

Certification*:

Yes

Authorized Person*:

Stephen McGraw
First Name Last Name

Title*:

Chief Executive Officer

Date*:

10/30/2020