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November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Meeting Announcement

The Columbia, Hamilton and Suwannee County Transportation Disadvantaged Coordinating Board will meet Wednesday, November 18, 2015 at 10:00 a.m. in the **Library Meeting Room of the Suwannee River Regional Library located at 1848 Ohio Avenue South, Live Oak, Florida (location map attached).**

Attached is the meeting agenda and supporting materials. If you have any questions, please do not hesitate to contact me at extension 110.

**Please contact Suwannee Valley Transit Authority at 386.362.5332 if you need transportation to and from the meeting.**

#### Attachments

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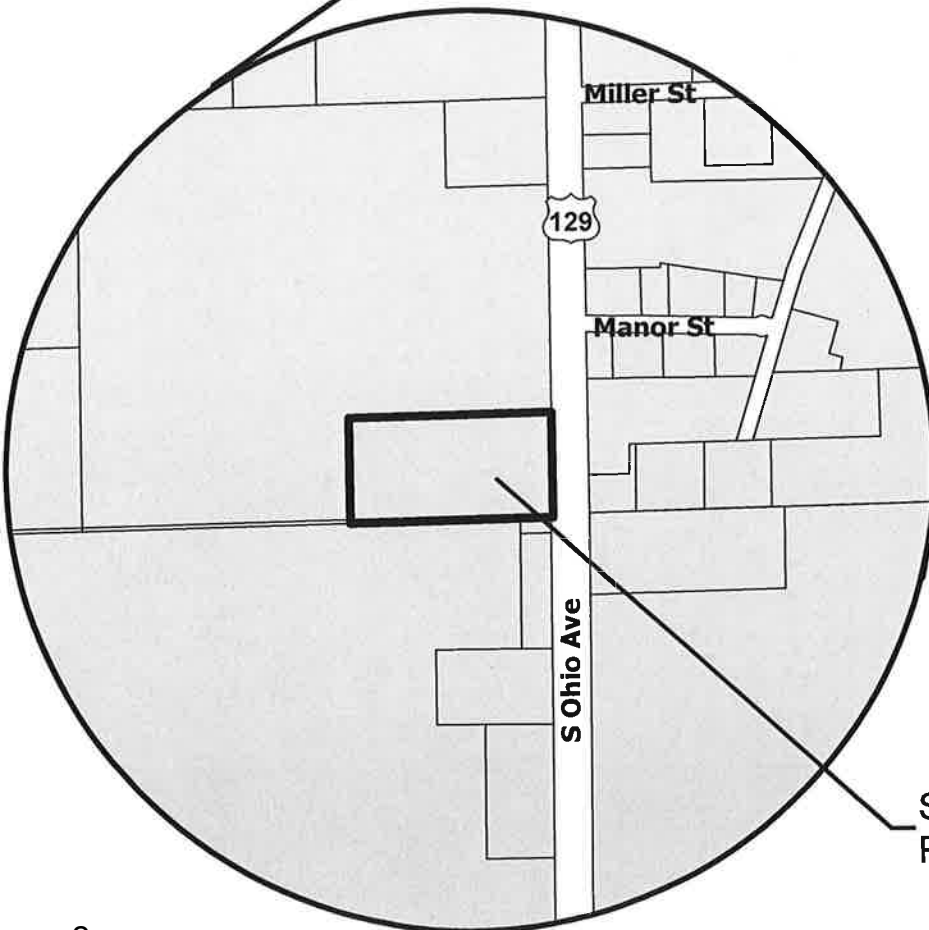
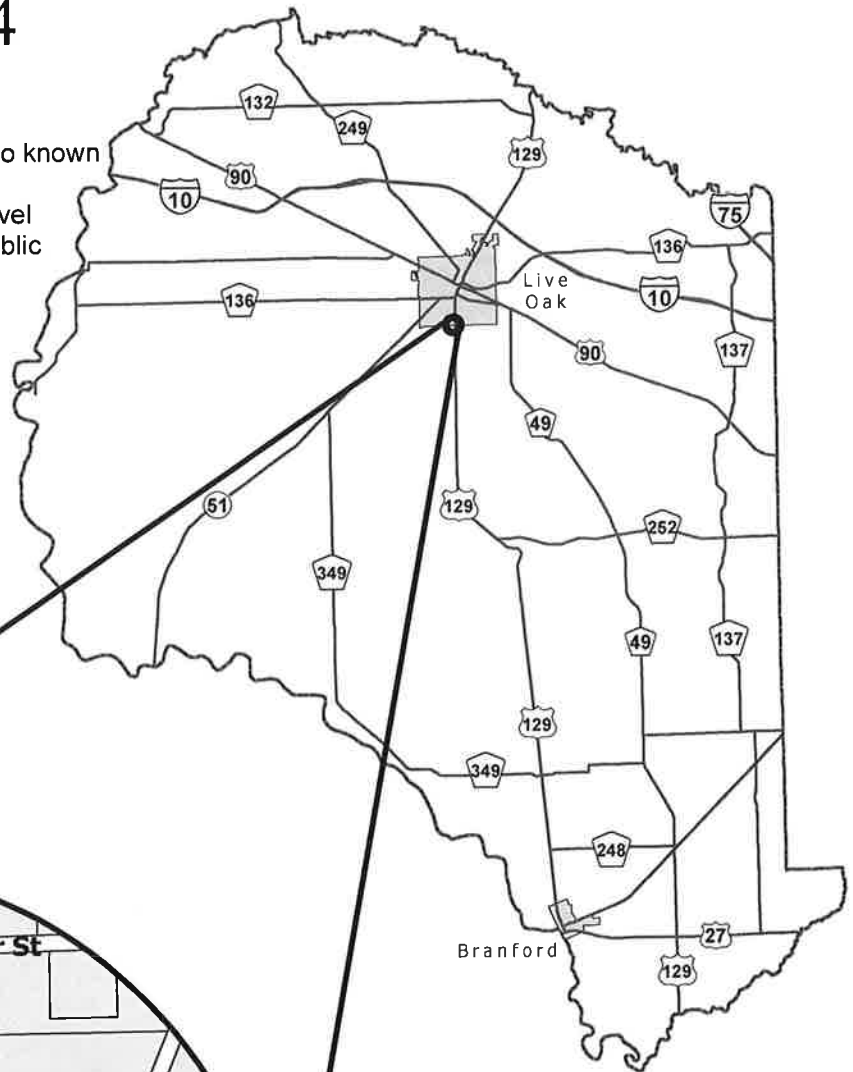
Dedicated to improving the quality of life of the Region's citizens,  
by coordinating growth management, protecting regional resources,  
promoting economic development and providing technical services to local governments.

# Suwannee County Public Library

## 1848 South Ohio Ave

### Live Oak, Florida 32064

Directions: From the intersection of U.S. Highway 90 (also known as Howard St) and U.S. Highway 129 (also known as Ohio Ave) in the City of Live Oak, head South onto U.S. Highway 129 (also known as South Ohio Ave) travel approximately 1.5 miles and the Suwannee County Public Library will be on the right, on the Western side of U.S. Highway 129 (also known as South Ohio Ave).



1 inch = 600 feet

Suwannee County  
Public Library





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**COLUMBIA, HAMILTON AND SUWANNEE  
TRANSPORTATION DISADVANTAGED COORDINATING BOARD  
MEETING ANNOUNCEMENT AND AGENDA**

**Library Meeting Room  
Suwannee River Regional Library  
1848 Ohio Avenue South  
Live Oak, Florida**

**Wednesday  
November 18, 2015  
10:00 a.m.**

**I. BUSINESS MEETING – CALL TO ORDER**

**A. Invocation**

**B. Pledge of Allegiance**

**C. Introductions**

**D. Approval of the Meeting Agenda**

**ACTION REQUIRED**

**E. Approval of the August 12, 2015  
Minutes**

**Page 7**

**ACTION REQUIRED**

**II. UNFINISHED BUSINESS**

**A. Chair Recommendation Reconsideration**

**Page 15**

**ACTION REQUIRED**

The Board needs to decide whether to reconsider the recommendation of Commissioner Bashaw to serve as the Board's Chair

**III. NEW BUSINESS**

**A. Community Transportation Coordinator  
Designation**

**Page 17**

**ACTION REQUIRED**

The Board needs to recommend the process to be used to designate the Community Transportation Coordinator for Columbia, Hamilton and Suwannee Counties

**B. Annual Performance Evaluation Page 19 ACTION REQUIRED**

The Board needs to review and approve Suwannee Valley Transit Authority's annual performance evaluation

**C. Annual Operations Reports Page 63 NO ACTION REQUIRED**

The Board needs to review the 2014/15 Annual Operations Reports

**D. Rural Area Capital Assistance Program Grant Awards Page 113 NO ACTION REQUIRED**

Enclosed is information concerning the Rural Area Capital Assistance Program Grant awards

**E. Operations Reports Page 119 NO ACTION REQUIRED**

**IV. OTHER BUSINESS**

**A. Comments**

- 1. Members**
- 2. Citizens**

**V. FUTURE MEETING DATES**

1. February 17, 2016 at 10:00 a.m. in Jasper, Florida
2. May 18, 2016 at 10:00 a.m. in Lake City, Florida
3. August 10, 2016 at 10:00 a.m. in Live Oak, Florida
4. November 16, 2016 at 10:00 a.m. in Jasper Florida

If you have any questions concerning the enclosed materials, please do not hesitate to contact Lynn Godfrey, Senior Planner, at 1.800.226.0690, extension 110.

**COLUMBIA, HAMILTON AND SUWANNEE  
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

<b>MEMBER/REPRESENTING</b>	<b>ALTERNATE/REPRESENTING</b>
Commissioner Bucky Nash Local Elected Official/Chair Grievance Committee Member	Not Applicable
Commissioner Beth Burnam - Vice-Chair Local Elected Official	Not Applicable
Commissioner Bashaw Local Elected Official	Not Applicable
Sandra Collins Florida Department of Transportation Grievance Committee Member	Janell Damato Florida Department of Transportation
Kay Tice Florida Department of Children and Families	Jaime Sanchez-Bianchi Florida Department of Children and Families
Jeff Aboumrard Florida Department of Education	Allison Gill Florida Department of Education
Bruce Evans Florida Department of Elder Affairs	Dwight Law Florida Department of Elder Affairs
Deweese Ogden Florida Agency for Health Care Administration	Vacant Florida Agency for Health Care Administration
Sheryl Rehberg Regional Workforce Board	Jeannie Carr Regional Workforce Board
Matthew Pearson Florida Association for Community Action Term ending June 30, 2017 Grievance Committee Member	Vacant Florida Association for Community Action Term ending June 30, 2017
Daniel Taylor Public Education	Vacant Public Education
Bo Beauchemin Veterans Term ending June 30, 2017	Ellis A. Gray, III Veterans Term ending June 30, 2017
Sandra Pauwels Citizen Advocate Term ending June 30, 2018	Louie Goodin Citizen Advocate Term ending June 30, 2018
Richard Bryant Citizen Advocate - User Term ending June 30, 2018	LJ Johnson Citizen Advocate - User Term ending June 30, 2018
Ralph Kitchens Persons with Disabilities Term ending June 30, 2018 Grievance Committee Member	Vacant Persons with Disabilities Term ending June 30, 2018
Reverend Charles Burke Elderly Term ending June 30, 2017	Vacant Elderly Term ending June 30, 2017
Sandra Buck-Camp Medical Community Term ending June 30, 2016	Vacant Medical Community Term ending June 30, 2016
Colleen Cody Children at Risk Term ending June 30, 2016	Audre J. Washington Children at Risk Term ending June 30, 2016
Vacant Private Transit Term ending June 30, 2016	Vacant Private Transit Term ending June 30, 2016

Note: Unless specified, members and alternates serve at the pleasure of the North Central Florida Regional Planning Council.



**COLUMBIA, HAMILTON AND SUWANNEE  
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

**MEETING MINUTES**

Madison Meeting Room  
Florida Department of Transportation  
District II Office  
Lake City, Florida

Wednesday  
August 12, 2015  
10:00 a.m.

**VOTING MEMBERS PRESENT**

Commissioner Bucky Nash, Chairman  
Jeff Aboumrad, Florida Department of Education  
Commissioner Jason Bashaw, Suwannee County Local Elected Official  
Bo Beauchemin, Veterans Representative  
Jaime Sanchez-Bianchi representing Kay Tice, Florida Department of Children and Families  
Sandra Buck-Camp, Medical Community Representative  
Commissioner Beth Burnam, Hamilton County Local Elected Official  
Jeannie Carr representing Sheryl Rehberg, Workforce Development Board  
Sandra Collins, Florida Department of Transportation  
Keith Hatcher, Public Education Representative  
LJ Johnson representing Richard Bryant, Citizen Advocate-User  
Ralph Kitchens, Persons with Disabilities Representative  
Sandra Pauwels, Citizen Advocate  
Matthew Pearson, Florida Association for Community Action Representative  
Deweece Ogden, Florida Agency for Health Care Administration – Medicaid

**VOTING MEMBERS ABSENT**

Reverend Charles Burke, Elderly Representative  
Colleen Cody, Children at Risk Representative  
Bruce Evans, Florida Department of Elder Affairs

**OTHERS PRESENT**

Teresa Fortner, Suwannee Valley Transit Authority  
Sarai King, Suwannee Valley Transit Authority  
Stew Lilker, Columbia County Observer  
Commissioner Larry Sessions, Suwannee Valley Transit Authority

**STAFF PRESENT**

Lynn Godfrey, North Central Florida Regional Planning Council

**I. BUSINESS MEETING CALL TO ORDER**

Chairman Nash called the meeting to order at 10:10 a.m.

**A. Invocation**

Commissioner Sessions gave the invocation.

**B. Pledge of Allegiance**

Chair Nash led the Board in reciting the Pledge of Allegiance.

**C. Introductions**

Chairman Nash asked everyone to introduce themselves.

**D. Approval of the Meeting Agenda**

**ACTION: Matthew Pearson moved to approve the meeting agenda. LJ Johnson seconded; motion passed unanimously.**

**E. Approval of the June 17, 2015 Meeting Minutes**

Ms. Sandra Buck Camp stated that Page 4 D. Fiscal Year 2015/16 Trip & Equipment Grant Application first paragraph should be corrected to state Fiscal Year 2015/16 not 2015/15.

Ms. Godfrey apologized for the error.

**ACTION: Sandra Buck-Camp moved to approve the June 17, 2015 minutes with the noted correction. Ralph Kitchens seconded; motion passed unanimously.**

**II. UNFINISHED BUSINESS**

**A. Florida's Coordinated Transportation System Trip Eligibility**

Ms. Lynn Godfrey, North Central Florida Regional Planning Council Senior Planner, stated that Chairman Nash asked staff to research and provide the Board with Florida's Coordinated Transportation System trip eligibility requirements. She said information regarding trip eligibility under Florida's Coordinated Transportation System is included in the meeting packet.



Mr. LJ Johnson asked if staff contacted Mr. Steve Holmes, Florida Commission for the Transportation Disadvantaged Executive Director, about his Medicaid eligibility.

Ms. Godfrey said she contacted Mr. Holmes and Mr. Holmes informed her that Mr. Johnson is required to enroll in Florida's Managed Medical Care Program.

Mr. Johnson said it was his understanding he could opt out of the Managed Medical Care Program because he is eligible for Medicare and Veterans services.

Ms. Deweece Ogden explained that Medicaid beneficiaries who have private health insurance may opt out of the Managed Medical Care Program. She said beneficiaries who have a relationship with their medical provider that no other medical provider can provide may also opt out of the Managed Medical Care Program. She asked Mr. Johnson to contact her for further assistance.

**III. A. Bylaws**

Ms. Godfrey stated that the Board needs to review and approve the Bylaws.

**ACTION: Ralph Kitchens moved to approve the Bylaws. Sandra Buck-Camp seconded; motion passed unanimously.**

**B. Grievance Procedures**

Ms. Godfrey stated that the Board needs to review and approve the Grievance Procedures. She said staff recommends deleting the reference to the Medicaid Program Grievance System since Medicaid Program transportation is no longer coordinated through Florida's Coordinated Transportation System.

**ACTION: Sandra Buck-Camp moved to approve the Grievance Procedures as amended. Ralph Kitchens seconded; motion passed unanimously.**

**C. Elect Vice-Chair**

Ms. Godfrey stated that Chapter I. F. (2) of the Board's Bylaws requires the Board to elect a Vice-Chair annually. She said the Vice-Chair must be one of the Local Elected Official Representatives from Columbia, Hamilton or Suwannee Counties. She said Commissioner Beth Burnam is currently serving as the Board's Vice-Chair.

**ACTION: Ralph Kitchens moved to re-elect Commissioner Beth Burnam the Board's Vice-Chair. Sandra Buck-Camp seconded; motion passed unanimously.**

**D. Recommend Chair**

Ms. Godfrey stated that the Board's Bylaws require the Board to annually recommend a Chair to the North Central Florida Regional Planning Council.

**ACTION: Sandra Collins moved to recommend the North Central Florida Regional Planning Council appoint Commissioner Jason Bashaw as the Board's Chair. Bo Beauchemin seconded.**

Mr. Ralph Kitchens opposed Commissioner Bashaw's nomination because Commissioner Bashaw is Chair of the Suwannee Valley Transit Authority Board of Directors.

**AMENDED MOTION: LJ Johnson moved to recommend the North Central Florida Regional Planning Council reappoint Commissioner Bucky Nash as the Board's Chair. Sandra Buck-Camp seconded; motion failed 3 to 12.**

**Original motion passed 12 to 3.**

**E. Appoint Grievance Committee Member**

Ms. Godfrey stated that the Chair needs to appoint a member to the Grievance Committee due to Mr. Andrew Singer's resignation from the Board.

Chair Nash appointed Ms. Deweece Ogden to the Grievance Committee.

**F. Rural Area Capital Assistance Program Grant Application**

Ms. Godfrey stated that Suwannee Valley Transit Authority has applied for Rural Area Capital Assistance Program Grant funds. She said the Board must review Suwannee Valley Transit Authority's grant application in order to receive these grant funds.

Commissioner Larry Sessions said Suwannee Valley Transit Authority is applying to purchase a replacement vehicle.

The Board reviewed the grant application.

**G. Florida Commission for the Transportation Disadvantaged 2015 Awards**

Ms. Godfrey stated that the Florida Commission for the Transportation Disadvantaged is seeking nominations for their 2015 awards. She said a list of award and criteria are included in the meeting packet. She said the Board can submit nominations or Board members may submit nominations independently.

**ACTION:** Commissioner Jason Bashaw moved to nominate the North Central Florida Regional Planning Council to receive the Designated Official Planning Agency of the Year award. Matthew Pearson seconded; motion passed unanimously.

**H. Operations Reports**

Commissioner Sessions discussed Suwannee Valley Transit Authority's operations reports.

Mr. Jeff Aboumrad asked why medical trips were denied under the Transportation Disadvantaged Program.

Ms. Sarai King explained that the denied medical trips were rescheduled.

**IV. OTHER BUSINESS**

**A. Comments**

**1. Members**

Mr. Matthew Pearson thanked Commissioner Nash for his service as Chair.

Mr. Keith Hatcher said he may be changing positions with the Columbia County School Board and may resign from the Board.

The Board thanked Mr. Hatcher for his service on the Board.

Ms. Jeannie Carr asked if Suwannee Valley Transit Authority has any plans to operate a route in Lake City.

Commissioner Sessions said they would like to see how the new route in Live Oak works out before starting another route in Lake City. He also said Suwannee Valley Transit Authority will need funding assistance to start a new route.

Ms. Sandra Buck-Camp thanked Commissioner Nash for his service as Chair. She also asked about coordinating the Suwannee Valley Transit Authority Board of Directors' meetings with the Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board meetings.

Commissioner Nash explained that the Suwannee Valley Transit Authority Board of Directors meets the second Tuesday of the month before the Transportation Disadvantaged Coordinating Board meetings. He said this allows the Transportation Disadvantaged Coordinating Board to be informed of what the Suwannee Valley Transit Authority Board of Directors is planning.

Ms. Deweece Ogden said she is glad to be serving on the Board and is willing to answer any questions regarding Florida's Managed Medical Care Program.

Ms. Sandra Collins thanked Commissioner Nash and Mr. Hatcher for their service on the Board. She also commended Commissioner Sessions and the Suwannee Valley Transit Authority staff for the excellent job they are doing. She welcomed Ms. Ogden as a member of the Board.

Commissioner Bashaw stated that change is never easy and he thought the dissent to his nomination as Chair of the Board was good. He said he sees positive change at Suwannee Valley Transit under Commissioner Session's leadership. He thanked Commissioner Nash for serving as Chair during a time of turmoil at Suwannee Valley Transit Authority. He also thanked Mr. Hatcher for his service on the Board. He welcomed Ms. Ogden to the Board. He apologized if he offended anyone and said he appreciated Mr. Lilker reporting on issues concerning Columbia County.

Mr. LJ Johnson thanked Mr. Stew Lilker for attending the meetings.

## **2. Citizens**

Mr. Stew Lilker, Columbia County Observer, asked if Suwannee Valley Transit Authority could provide him with their total administrative costs and operating costs. He also noted that Chapter 218, Florida Statutes requires Suwannee Valley Transit Authority to appoint an Audit Committee to select an auditor to conduct their annual audit. He questioned if Suwannee Valley Transit Authority followed Chapter 218, Florida Statute requirements.

Commissioner Bashaw stated that Suwannee Valley Transit Authority wants to be open to the public concerning its decisions and activities. He said they will research audit requirements and make sure they are in compliance with Florida law.

**V. FUTURE MEETING DATE**

Chairman Nash announced the next meeting will be held November 18, 2015 at 10:00 a.m. in Live Oak, Florida.

**ADJOURNMENT**

The meeting adjourned at 11:25 a.m.

\_\_\_\_\_  
Commissioner Bucky Nash, Chair  
Columbia, Hamilton and Suwannee  
Transportation Disadvantaged Coordinating Board

\_\_\_\_\_  
Date





**II.A**

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November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Chair Recommendation Reconsideration

**RECOMMENDATION:**

**Decide whether to reconsider the recommendation for Commissioner Jason Bashaw to serve as the Board's Chair.**

**BACKGROUND:**

Chapter I. F. (1) of the Board's Bylaws requires the North Central Florida Regional Planning Council, serving as the Designated Official Planning Agency, appoint the Chair for all Board meetings. The appointed Chair shall be an elected official from one of the counties in the designated service area.

According to the Board's Bylaws, the Board shall annually recommend a Chair to the Council. The Chair shall serve until their elected term of office has expired or otherwise replaced by the Council.

At the August 12, 2015 meeting, the Board recommended the Council appoint Commissioner Jason Bashaw, Suwannee County Local Elected Official, to serve as Chair. Ms. Sandra Buck-Camp, Mr. LJ Johnson, Mr. Ralph Kitchens and Mr. Stew Lilker attended the October 22, 2015 Council Executive Committee meeting. They alleged that proper voting procedures were not followed by the Board concerning the recommendation to appoint Commissioner Bashaw as the Board's Chair.

The Council Executive Committee deferred appointing Commissioner Bashaw as Chair and requested the Board to decide whether to reconsider its recommendation. The Council Executive Committee also requested that all votes concerning this matter be by roll call.

In order to reconsider the vote to recommend Commissioner Bashaw as Board Chair, two Board members on the prevailing side of the motion to recommend the appointment of Commissioner Bashaw at the August 12, 2015 Board meeting would need to make a motion and second to a motion to have the recommendation reconsidered. If such a motion to reconsider is properly made and seconded, a majority of Board members would need to vote to reconsider the recommendation. If the vote to reconsider does not pass, the original vote to recommend Commissioner Bashaw as the Board's Chair would stand as approved by the Board at its August 12, 2015 meeting.

If you have any questions concerning this matter, please contact me at extension 110.

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November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Community Transportation Coordinator Designation

**RECOMMENDATION:**

**Recommend the North Central Florida Regional Planning Council use either a non-competitive or competitive selection process to designate the Community Transportation Coordinator for Columbia, Hamilton and Suwannee Counties.**

**BACKGROUND:**

Suwannee Valley Transit Authority is the designated Community Transportation Coordinator for the Columbia, Hamilton and Suwannee multi-county service area. Suwannee Valley Transit Authority's Memorandum of Agreement with the Florida Commission for the Transportation Disadvantaged will expire June 30, 2016.

Rule 41-2.010 (2) of the Florida Administrative Code allows the selection of Community Transportation Coordinators without competitive acquisition upon the recommendation of the Designated Official Planning Agency. Section 287.057(3) (e), Florida Statutes allows the Florida Commission for the Transportation Disadvantaged to designate a governmental entity, such as the Suwannee Valley Transit Authority, as the Community Transportation Coordinator without using a competitive selection process.

At its March 6, 2013 meeting, the Columbia County Transportation Disadvantaged Coordinating Board recommended that the North Central Florida Regional Planning Council, serving as the Designated Official Planning Agency, use a competitive selection process to recommend the Columbia County Community Transportation Coordinator at the end of Suwannee Valley Transit Authority's agreement period. The Hamilton County and Suwannee County Transportation Disadvantaged Coordinating Boards did not make recommendations concerning the selection of the Community Transportation Coordinator for Hamilton County or Suwannee County. Since the recommendation was made by the Columbia County Transportation Disadvantaged Coordinating Board, Columbia, Hamilton and Suwannee Counties were designated a multi-county service area by the Florida Commission for the Transportation Disadvantaged.

At its October 22, 2015 meeting, the Council Executive Committee deferred authorizing the process to be used to designate the Community Transportation Coordinator for Columbia, Hamilton and Suwannee Counties and requested the Board recommend whether to use a competitive or non-competitive process.

If the competitive procurement process is used, the Council will accept proposals from qualified agencies or firms for the award of a contract to coordinate transportation services for the transportation disadvantaged in the Columbia, Hamilton and Suwannee multi-county service area. A Technical Review Committee will be appointed by the Council's Executive Director to assign points and rank the proposals. The proposals and rankings by the Technical Review Committee will be provided to the Transportation Disadvantaged Coordinating Board for review. The Board may provide non-binding comments concerning the proposals to the Council.

The Council will review the recommendations of the Technical Review Committee, and any comments provided by the Board, and forward a recommendation for the selection of Community Transportation Coordinator to the Florida Commission for the Transportation Disadvantaged including any terms of designation. The Florida Commission for the Transportation Disadvantaged will make the final designation.

If the Council uses the non-competitive selection process, the Council at a minimum must provide the following information to the Florida Commission for the Transportation Disadvantaged to determine whether a recommended governmental entity is qualified to be Community Transportation Coordinator:

1. Fiscal resources and accounting system techniques to be used in the agency's audit trail;
2. Organizational structure and key personnel;
3. Financial experience and recent financial audit;
4. Ability to coordinate multiple agency transportation;
5. Compliance with the Americans With Disabilities Act;
6. Compliance with federal and state safety regulations; and
7. Compliance with federal and state substance abuse regulations.

If you have any questions concerning this matter, please do not hesitate to contact me.



**III.B.**

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November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Annual Performance Evaluation

RECOMMENDATION

**Approve the Suwannee Valley Transit Authority's annual performance evaluation.**

BACKGROUND

The Board is required to annually evaluate the transportation services provided by Suwannee Valley Transit Authority. Attached is Suwannee Valley Transit Authority's draft annual performance evaluation. If you have any questions concerning the attached evaluation, please contact me at extension 110.

Attachment

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# COMMUNITY TRANSPORTATION COORDINATOR EVALUATION WORKBOOK

Florida Commission for the



## Transportation Disadvantaged

Community Transportation Coordinator: Suwannee Valley Transit Authority

Counties: Columbia, Hamilton and Suwannee

Address: 1907 Voyles Street, Live Oak, FL 32060

Contact: Larry Sessions, Administrator Phone: 386-362-5332

Review period: July 1, 2014 - June 30, 2015



# Community Transportation Coordinator Annual Performance Evaluation

Approved by the  
Columbia, Hamilton and Suwannee  
Transportation Disadvantaged Coordinating Board

2009 NW 67th Place  
Gainesville, FL 32653-1603  
[www.ncfrpc.org/mtpo](http://www.ncfrpc.org/mtpo)  
352.955.2000

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**Bucky Nash, Chair**

with Assistance from



North Central Florida Regional Planning Council  
2009 NW 67th Place  
Gainesville, FL 32653-1603  
[www.ncfrpc.org](http://www.ncfrpc.org)  
352.955.2200

November 18, 2015

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<b>I. FINDINGS AND RECOMMENDATIONS</b>
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**A. General**

**Areas of Noncompliance: None**

**Recommendations: None**

**B. Chapter 427, Florida Statutes**

**Areas of Noncompliance: None**

**Recommendations: None**

**C. Rule 41-2, Florida Administrative Code**

**Areas of Noncompliance: None**

**Recommendations: None**

**D. On Site Observation**

**Areas of Noncompliance: None**

**Recommendations: None**



## GENERAL

1. What was the designation date of the Community Transportation Coordinator?  
1/01/12
2. What is the complaint process?  
Suwannee Valley Transit Authority's complaint process is attached.
3. Does the community transportation coordinator have a complaint form?  
☒ Yes (attached) ☐ No
4. Does the form have a section for resolution of the complaint?  
☒ Yes ☐ No
5. Is a summary of complaints given to the Transportation Disadvantaged Board on a regular basis?  
☒ Yes ☐ No
6. When is the dissatisfied party referred to the Florida Commission for the Transportation Disadvantaged Helpline?  
If Suwannee Valley Transit Authority staff are unable to resolve a complaint, the complainant will be referred to the Transportation Disadvantaged Helpline.
7. When a complaint is forwarded from the Transportation Disadvantaged Helpline, is the complaint entered into the local complaint file/process?  
☒ Yes ☐ No
8. Does the Community Transportation Coordinator provide written rider/beneficiary information or brochures to inform riders/beneficiaries about transportation disadvantaged services?  
☒ Yes (attached) ☐ No
9. Does the rider/ beneficiary information or brochure list the Transportation Disadvantaged Helpline phone number?  
☒ Yes ☐ No
10. Does the rider/ beneficiary information or brochure list the complaint procedure?  
☒ Yes ☐ No
11. What is the eligibility process for Transportation Disadvantaged sponsored riders?  
Individuals needing transportation assistance from Florida's Transportation Disadvantaged Program must complete an eligibility application (attached).
13. Does the Community Transportation Coordinator have a contract or agreement with the Regional Workforce Board?  
☒ Yes ☐ No  
Suwannee Valley Transit Authority notifies the Regional Workforce Board of vacant positions. The Regional Workforce Board posts Suwannee Valley Transit Authority job vacancies and takes job applications.
14. What innovative ideas have you implemented in your coordinated system?  
Suwannee Valley Transit Authority created a bus pass to allow passengers to pay fares in advance. Passengers are given a discount for purchasing 30 fares in advance. Suwannee Valley Transit Authority started operating a Commuter Assistance/Gateway College Route and a Live Oak Route.
15. Are there any areas where coordination can be improved?  
Transportation services provided through Florida's Managed Medical Care Program.

16. What barriers are there to the coordinated system?  
Florida's Managed Medical Care Program does not provide transportation through Florida's Coordinated Transportation System is a barrier.
17. Are there any areas that the Community Transportation Coordinator feels the Florida Commission for the Transportation Disadvantaged should be aware of or assist with?  
Work to coordinate Florida's Managed Medical Care Program Transportation.
18. What funding agencies does the Florida Commission for the Transportation Disadvantaged need to work closely with in order to facilitate a better coordinated system?.  
Florida Agency for Health Care Administration
19. How are you marketing the voluntary dollar?  
Information about the voluntary dollar is posted on Suwannee Valley Transit Authority's website and Facebook page.

Attachment 2A

SUWANNEE VALLEY TRANSIT AUTHORITY (SVTA)

COMPLAINT AND GRIEVANCE PROCEDURE

**OFFICIAL SERVICE COMPLAINT**

Service complaints are routine incidents that occur on a daily basis, and can be reported to the driver, dispatcher, or other individuals involved with daily SVTA operations. However, for a service complaint to be "Official", it MUST be reported to the SVTA Director of Operations and it must be in writing within 15 calendar days following the date of occurrence. Forms for this purpose are contained in this procedure, and may be obtained by contacting SVTA administrative offices. Official Complaint forms may be received via email, fax, or picked up in person. Official written complaints are typically addressed and resolved within a reasonable time period suitable to the complainant. The complaint and grievance process for Medicaid related services provided by SVTA is different, and covered under SVTA's Medicaid Beneficiary Handbook for Columbia, Hamilton and Suwannee Counties, OR by the procedure by any one of the four (4) future Medicaid managed medical care providers.

The SVTA Director of Operations will maintain a log documenting each complaint. SVTA will conduct a review of each complaint, and based on evidence collected, note for the record if the complaint is found by SVTA to be valid or if the complaint is unfounded or not valid. At the LCB's quarterly meeting, SVTA will provide the LCB a summary of all complaints received and actions taken.

Service Complaints may include but are not limited to:

- Late trips (late pickup, drop-off or missed appointment)
- No-show by transportation operator
- No-show by client
- Client behavior
- Driver behavior
- Passenger discomfort
- Service denial (refused service to client without an explanation as to why, i.e., lack of Transportation Disadvantaged funds, etc. The CTC desires to have the opportunity to address these complaints, but recognizes the rider's right to complain directly to the state ombudsman. The CTC must make every effort to quickly and completely address every complaint, and include the complete details of resolution on the report.

**FILING A COMPLAINT WITH THE SVTA**

A rider of the Suwannee Valley Transit Authority (SVTA) may file an official written complaint in writing within 15 calendar days about their experience with SVTA.

The Complainant must file the official complaint in writing. Written official complaints can be sent to:

SVTA - Director of Operations  
1907 Voyles St., SW  
Live Oak Florida, 32064

by mail, FAX, or emailed to the SVTA Director of Operations. Although oral complaints or compliments may be called into SVTA at (386) 362-5332 during normal business hours, the ONLY complaints that will be logged, researched and reported are the official written complaints to the SVTA Director of Operations.

Written complaints may be anonymous. However, for a complaint to be official, the complainant must provide the following:

1. The full name and complete address of the complainant;
2. A statement of the grounds for the grievance and be supplemented by supporting documentation and detailed information such as pickup and drop-off addresses/locations, date of service, times, made in a clear and concise manner;
3. An explanation of the relief desired by the Complainant.

Upon receiving the official written complaint, the SVTA Director of Operations will make reasonable efforts to contact the Complainant no later than the end of the next business day. The Director of Operations will make three documented attempts to contact the complainant. After the third attempt, if no contact is made, the complainant will need to call back if they wish to pursue

the official complaint. SVTA has a time limit of fifteen (15) calendar days upon which to accept an official written complaint, but the sooner the official written complaint is filed after the incident, the better SVTA can respond with appropriate resolutions.

Upon receiving the official written complaint, the Director of Operations will:

- 1) Contact all parties involved to obtain statements; and
- 2) Research the complaint and gather all relevant evidence that may be available; and
- 3) Review and evaluate the evidence; and
- 4) Based on the evidence collected, formulate a decision and a recommendation. and
- 5) Issue a report.

The Director will forward the report to the Administrator of SVTA for a ruling and/or determination.

Suwannee Valley Transit Authority will respond to the complainant within thirty (30) calendar days after the filing of the official complaint.

Suwannee Valley Transit Authority will render the findings in writing and notify the complainant, giving to the complainant an explanation of the facts that lead to Suwannee Valley Transit Authority's decision and, if applicable, information as to what actions were taken to bring about a resolution.

Based on the findings, if appropriate, SVTA will review its policies and procedures to see if adjustments are justified.

SVTA will maintain a complaint log for official written complaints. The SVTA complaint log is 'public information' and will be released to any requestor as such. All documents pertaining to the grievance process will be made available, upon request, in a format accessible to persons with disabilities.

The SVTA complaint log will be a part of the SVTA packet sent to the Local Coordinating Board's quarterly meetings.

#### **SUSPENSION RECONSIDERATION HEARING (For Non-Sponsored Program Only)**

If a Non-sponsored program public rider has been issued a notice of suspension by Suwannee Valley Transit Authority, they have fifteen (15) calendar days from the date of issuance of suspension notice to request a reconsideration hearing on the suspension. If a reconsideration hearing is requested, the hearing will be held by the Local Coordinating Board Grievance Subcommittee. Service suspensions for other Agency programs (like Medicaid) will follow the terms and conditions related to the Agency/Program contract for services, if applicable.

Requests for reconsideration must be in writing and delivered to:

Suwannee Valley Transit Authority, Director of Operations  
1907 Voyles Street, S.W.  
Live Oak, FL 32064

And

NCFRPC  
Transportation Disadvantaged Program  
Local Coordinating Board Grievance Subcommittee  
2009 N.W. 67 Place, Suite A  
Gainesville, Florida 32653-1603

The written request must include the name, address and telephone number of the person who is requesting the hearing and a statement as to why his or her riding privileges should not be suspended. If the request is not received within fifteen (15) calendar days from the issue date of the suspension, the suspension will not be heard.

Upon receipt of letter requesting the reconsideration hearing, a hearing shall be held within 15 calendar days. The North Central Florida Regional Planning Council will advise the person requesting the reconsideration hearing by return correspondence of the date, time and location of the hearing.



## SVTA Official Complaint/Grievance Form

Page 1 of

Date Received

by:

<div style="display: flex; justify-content: space-between; font-size: 0.8em;"> <span>Page 1 of 1</span> <span>Date Received: _____</span> </div>	
<b>Section I: Complainant/Grievant</b>	
Name: _____	
Physical Address: _____	
Mailing Address (if different): _____	
Contact Phone #: _____	Email: _____
<b>Section II: Person and Organization the Complaint/Grievance is about</b>	
Organization: _____	
Person(s): _____	
Telephone number (if known): _____	
<b>Section III: Complaint/Grievance</b>	
<p>Explain as clear as possible what your complaint/grievance is. Describe all persons who were involved. Include the name and contact information of the person(s) involved (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form or attach other relevant information.</p> <p>Date of Problem, Complaint or Grievance (Day, Month, Year): _____</p> <p>My complaint/grievance is: _____</p>	

Under the penalties of perjury, I hereby certify the above statements to be true. Signature and date required below.

Signature

Date \_\_\_\_\_

**Please submit this form in person, or mail to the address below:**

SVTA,  
1907 Voyles St., SW  
Live Oak, Florida, 32064

SVTA TDSP Operational Element – 2/12/2014

Page 4 of 4

### WHO IS ELIGIBLE / HOW

**MEDICAID:** State and Federal funding source for non-emergency medical transportation. Must have a valid Medicaid number reflecting eligibility for transportation. Riders are responsible for a \$1 co-pay for each one way trip. If you do not have your \$1 co-pay when you board an SVTA vehicle, you will be transported, but you will be billed for your \$1 co-pay.

**TDTF RIDERS (Transportation Disadvantaged Trust Fund):** This Trust Fund is a state grant for those in need of transportation to medical appointments, but who have no means of transportation and who do not qualify for other programs. In order to qualify to ride under TDTF, you must fill out a TDTF Eligibility form. This form can be mailed to you or you can obtain it from your Professional Bus Operator on your first ride. Basic qualifications include, but are not limited to: no operating vehicle or no other means of transportation. The \$1 co-pay **MUST** be paid to the Bus Operator prior to boarding.

**OTHER PAYMENT PROVISIONS:** SVTA can also transport the public under standard fare. This means the rider pays a flat rate for certain trips, whether it is in or out of your county. To learn the rates for a specific trip, please call the SVTA main office at (386) 362-5332 and speak with the Operator.

**SVTA RIDER CODE OF CONDUCT:** Rider is required to follow these rules of conduct to insure everyone's safety:

- ♦ Use of tobacco, alcohol or illegal drugs are not permitted while on vehicles.
- ♦ Eating & drinking are not permitted on vehicle unless medically necessary.
- ♦ Riders who appear to be under the influence of alcohol or drugs will not be permitted to board.
- ♦ Abusive, threatening, obscene language or discourtesy of any kind will not be tolerated. Riders may not create a hostile scene.
- ♦ Riders are responsible for \$1 co-pay and must have exact change.
- ♦ Rider must not engage the driver in conversation or distract the driver in any way.
- ♦ Rider must use earphones when using personal listening devices.
- ♦ Rider may not ask Driver to make special stops during transport.
- ♦ Rider is responsible for all personal items. SVTA is not responsible for missing or lost items or misplaced property.
- ♦ Riders must use seat belts if available and wheel chairs must be properly secured and fastened before SVTA vehicle can move.
- ♦ Wheelchairs and walking devices must be in good repair.
- ♦ Riders who need special assistance must have an escort. The escort must be over 18 and must be available at all times to aid the rider as needed.

SUWANNEE VALLEY TRANSIT AUTHORITY  
1907 VOYLES STREET, S.W.  
LIVE OAK, FLORIDA 32064

## **SUWANNEE VALLEY TRANSIT AUTHORITY**

### **RIDER'S GUIDE**



#### **TELEPHONE NUMBER REFERENCE:**

**SVTA OFFICE:** (386) 362-5332  
M-F 8am to 5pm  
Closed weekends and all federal holidays.  
1-800-258-7267

**TO MAKE A TRIP RESERVATION**  
M-F 8am to 5pm  
(386) 362-5332 EXT. 2 /

**AFTER HOURS TRANSPORTATION:**  
(386) 362-5332  
**LISTEN TO and FOLLOW DIRECTIONS**

**TO FILE A COMPLIMENT or COMPLAINT**  
(386) 362-5332 or (800) 983-2435



### SVTA RIDER'S QUICK REFERENCE GUIDE

This Rider's Guide is a quick reference document only. For details about the policies and procedures for riding SVTA, refer to the *SVTA Rider's Handbook*.

The Suwannee Valley Transit Authority (SVTA) is a public transit agency serving the citizens of Columbia, Hamilton and Suwannee Counties. SVTA is governed by the SVTA Board of Directors. Two County Commissioners from each of the three counties make up the SVTA Board of Directors.

### STATE'S DESIGNATED CTC

SVTA is the state's designated 'Community Transportation Coordinator' (CTC), meaning that SVTA is the transportation agency for non-emergency medical transportation for Medicaid and the state's Transportation Disadvantaged (TD). For Medicaid sponsored, non-emergency medical transportation or for TD transportation, call the numbers located on the front of this brochure. All non-emergency transportation is done by way of public and shared ride transportation. SVTA is fully ADA compliant, serving ambulatory, wheelchair and stretcher riders. If you need stretcher service, you must obtain an originally signed authorization letter from your physician. A copy may be faxed to (386) 364-7834. The original letter must be given to the transport driver before boarding.

### COMMUNITY DISASTER EMERGENCY PROCEDURES

During a community disaster, SVTA will work with the Emergency Operations Center (EOC) of your county to transport residents to designated evacuation shelters. All routine transportation will be suspended during times of state declared disaster.



### ESCORTS and SERVICE ANIMALS

If you use a wheelchair or other mobility device, you must be able to move around with your device under your own power. If you need assistance in moving about (i.e. you cannot roll your wheelchair without assistance, or walk to the vehicle without help, you must have an escort with you. The escort must be at least 18 years of age and fully capable to help you move about and assist you in case of an emergency. The escort must stay with you while you are on the SVTA vehicle. SVTA does NOT provide escorts. If you have an escort to help you, s/he is exempt from the \$1 co-pay. Service Animals may accompany a rider. Rider is responsible for animal's hygiene and behavior.

### may be CERTIFICATION

SVTA is safety and security certified by the Florida Department of Transportation. SVTA meets state / federal safety requirements for Public Transportation under Florida Administrative Code (FAC) 14-90.



### TO MAKE A RESERVATION

Trip reservations must be made at least 3 business days in advance of the day you need transportation. Trip reservations are taken weekdays from 8am to 7pm. Call (386) 362-5332 ext. 2 to make a reservation. When you call, you must have all required information ready, such as the doctor or treatment facility's name, address, phone, date and time of appointment. The Reservationist cannot look up this information for you. When your reservation is logged, you will be given a confirmation number. Keep this number as it is proof that you made an appointment. SVTA is not responsible for missed appointments because you did not call in on time or did not provide correct information. SVTA takes hundreds of calls a day, so you may experience a wait time to speak to a Reservationist. Peak



hours are from 10am to 2pm. Call for your reservation as soon as you become aware of your appointments. The Reservationist will help you in making your reservation.

### SUBSCRIPTION TRIPS

If you have an appointment that will continue for an extended period of time (i.e. physical therapy or dialysis treatment) SVTA can set up a Subscription. This will put you on a schedule for the duration of your treatment so you will not have to call in each time. Pick up and drop off locations must be the same throughout the subscription.

### TO CANCEL A RESERVATION

Please notify SVTA if you must cancel your scheduled trip. Call (386) 362-5332 ext. 6341. If you do not cancel within 24 hours, you will be considered a NO SHOW.

### THE DAY OF YOUR TRIP

You must be ready to board your SVTA Transport vehicle when it arrives at your location. The Driver cannot wait for more than 5 minutes as the s/he must move onto pick up the next rider. SVTA recommends that you be ready at least two (2) hours ahead of your expected pick up time. If you require an escort to help you move about, that escort must be ready to board with you.

### NO SHOWS

A NO SHOW occurs when the driver arrives to pick you up and you are not ready to board the SVTA transport. You will be considered a NO SHOW if you do not cancel your reservation 24 hours prior to your scheduled pick up time. If you are a NO SHOW or if you cancel when the SVTA vehicle arrives, all your trips for that day will be cancelled as well. Please see the Rider's Handbook regarding NO SHOWS.

### AFTER APPOINTMENT PICK UP

If you were not given an 'after appointment pick up time', you will be considered a 'will call'. This means that when you are finished with your appointment, call the (386) 362-5332 ext. 6341 and tell us that you are ready for pick up. SVTA will send the nearest available transport for your return home.

### PUBLIC TRANSPORTATION & SHARE RIDE

SVTA does its best to get you to your appointment on time with minimal wait times. SVTA is public transportation only and uses a shared ride program, meaning that others will share your ride. SVTA covers a 2,300 square mile area and serves over 8,000 riders. In order to get everyone to their appointment on time, you may have a very early pick up time. You may be on the transport vehicle for up to 2 hours or longer. You may have to wait for your transport for up to 2 hours or more, depending on your pickup point within the 3 counties. You must be prepared to wait, so bring appropriate provisions: water, snacks, medications, personal hygiene items & reading materials.

### COMPLIMENTS

### COMPLAINTS & GRIEVANCES

SVTA strives to provide safe professional service. If you have a compliment or complaint, please call (386) 362-5332 or (800) 983-2435. If you are a TD or Medicaid Rider, the initial complaint must be filed within 15 business days. Medicaid has strict time frames for filing a complaint, grievance, appeal or request for a Fair Hearing. Refer to the SVTA Rider's Handbook on how to file a complaint, grievance, appeal or request for Fair Hearing.

### PRIVACY

SVTA complies with all federal and state privacy laws, including HIPPA. SVTA will never share your information with anyone who is not authorized by law to have it. You MUST keep SVTA updated with your address, telephone number and emergency contact information. You must have a current SVTA registration form on file and it must be updated every January. SVTA is not responsible for missed appointments because you have not updated your contact information with us. Always refer to your SVTA Rider's Handbook for detailed information.

**SUWANNEE VALLEY TRANSIT AUTHORITY**

**TRANSPORTATION DISADVANTAGED ASSESSMENT SCREENING FORM: 2014**

NOTE: **ALL BLANKS** must be completed and handwriting must be legible or form will be denied.

**Section 1 - IDENTIFYING INFORMATION**

MEDICAID# \_\_\_\_\_ S.S. # \_\_\_\_\_ PHONE # \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MI: \_\_\_\_\_ GENDER: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ APT# \_\_\_\_\_

NAME OF SUB-DIVISION OR APARTMENT COMPLEX: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_-\_\_\_\_

**Section 2 - Household Member Information**

TOTAL # OF PERSONS IN YOUR HOUSEHOLD \_\_\_\_\_ TOTAL MONTHLY HOUSEHOLD INCOME \_\_\_\_\_

HOUSEHOLD MEMBER & TOTAL HOUSEHOLD INCOME: Please list **ALL** household members, include yourself. List any type of income received. Examples are SSI, disability, cash assistance, employment and retirement.

NAME & RELATIONSHIP	AGE	MO. INCOME	DRIV LIC (Y/N)	RECEIVE FOOD STAMPS (Y/N)
_____	____	\$ _____	_____	_____
_____	____	\$ _____	_____	_____
_____	____	\$ _____	_____	_____
_____	____	\$ _____	_____	_____

**Section 3 - Availability of Transportation**

1. Do you have a Driver License? YES: \_\_\_\_\_ NO: \_\_\_\_\_ DL#: \_\_\_\_\_
2. What type of vehicle do you own? Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ N/A: \_\_\_\_\_
3. If approved, how long will the transportation services be needed? (Please explain below.)  
\_\_\_\_\_  
\_\_\_\_\_

4. Does any other member of your household own a vehicle? YES: \_\_\_\_\_ NO: \_\_\_\_\_
5. Could anyone in your household, family or friends transport you to your appointments? YES: \_\_\_\_\_ NO: \_\_\_\_\_ If no, why not? \_\_\_\_\_  
\_\_\_\_\_
6. How are you currently being transported to your appointments? \_\_\_\_\_  
\_\_\_\_\_

**\*\*Must provide written documentation why the car is not available to you for transport\*\***

7. Are you aware that you are required to pay a co-payment of \$1 each way for this program and that if you do not pay, you cannot ride? YES: \_\_\_\_\_ NO: \_\_\_\_\_
8. Are you a veteran? YES: \_\_\_\_\_ NO: \_\_\_\_\_ If yes, please provide us with a copy of your DD214 or DD215 for verification.
9. If so, do you receive VA benefits for transportation? YES: \_\_\_\_\_ NO: \_\_\_\_\_



**Section 4 - Information About Recurring Medical Appointments**

Main Purpose of Appointment: \_\_\_\_\_

Dialysis: \_\_\_\_\_ Oncology: \_\_\_\_\_ Physical Therapy: \_\_\_\_\_ Other: \_\_\_\_\_

Anticipated Appointment Time: \_\_\_\_\_ Length of Appointment: \_\_\_\_\_ Days of Week: \_\_\_\_\_

Anticipated Appointment Time: \_\_\_\_\_ Length of Appointment: \_\_\_\_\_ Days of Week: \_\_\_\_\_

**Section 5 - Special Needs**

Please check or list any special needs, services or modes of transportation you require during transportation:

Escort: \_\_\_\_\_ Powered Wheelchair: \_\_\_\_\_ Stretcher: \_\_\_\_\_ Manual Wheelchair: \_\_\_\_\_ Walker: \_\_\_\_\_

Respirator: \_\_\_\_\_ Service Animal: \_\_\_\_\_ Cane: \_\_\_\_\_ Other: \_\_\_\_\_

**Section 6 - Certification and Acknowledgement**

I understand and affirm that the information provided in this application for CTD Medical Non-Emergency Transportation (NET) services is true and correct, to the best of my knowledge, and will be kept confidential and shared only with medical and transportation professionals involved in evaluating and determining my needs for transportation to and from medical appointments. I understand that providing false or misleading information, or making fraudulent claims, or making false statements on behalf of others constitutes a felony under the laws of the State of Florida. SVTA will prosecute offenders and/or pursue civil action to recover costs incurred from false claims or criminal acts.

NOTE: Transportation is wholly dependent on available TD funds each day.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Suwannee Valley Transit Authority  
1907 Voyles St, SW  
Live Oak, FL 32064  
(386) 362-5332

**OFFICIAL USE ONLY**

**DO NOT WRITE IN THIS SPACE**

New Application: \_\_\_\_\_ Recertification: \_\_\_\_\_ TD: \_\_\_\_\_ Other: \_\_\_\_\_

Approved Date: \_\_\_\_\_ Denied Date: \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Worker: \_\_\_\_\_ Date: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Suwannee Valley Transit Authority

Transporte Desventaja Evaluación Forma De Detección: 2014

Nota: Todos los espacios en blanco deben ser completadas y escritura debe ser legible o formulario será negado.

**Sección 1 - INFORMACIÓN DE IDENTIFICACIÓN**

MEDICAID # \_\_\_\_\_ S.S.# \_\_\_\_\_ TELÉFONO# \_\_\_\_\_ FECHA DE NACIMIENTO \_\_\_/\_\_\_/\_\_\_

APELLIDO \_\_\_\_\_ PRIMER \_\_\_\_\_  
NOMBRE \_\_\_\_\_ INICIALMEDIA \_\_\_\_\_ GÉNERO \_\_\_\_\_

DIRECCIÓN DE LA CALLE \_\_\_\_\_

APT# \_\_\_\_\_

NOMBRE DE LA SUBDIVISIÓN O APARTAMENTO COMPLEJO \_\_\_\_\_ LA  
CIUDAD \_\_\_\_\_ EL CONDADO \_\_\_\_\_ EL ESTADO \_\_\_\_\_ CÓDIGO \_\_\_\_\_

**SECCIÓN 2 - INFORMACIÓN DE MIEMBRO DE LA FAMILIA**

NÚMERO TOTAL DE PERSONAS EN SU HOGAR: \_\_\_\_\_

INGRESOS MENSUALES TOTAL:\$ \_\_\_\_\_

**MIEMBROS DEL HOUSEHOLE & TOTAL DE LOS INGRESOS DE LOS HOGARES:** Por favor una lista de todos los miembros del hogar. Incluyen usted y cualquier tipo de ingreso recibido. Los ejemplos son SSI, discapacidad, asistencia en efectivo, empleo y jubilación.

NOMBRE Y RELACIÓN EDAD / EL INGRESO MENSUAL / LICENCIA (S/N) / ESTAMPILLAS DE COMIDA (S/N)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Sección 3- Disponibilidad de Transporte**

1 ¿Tiene una licencia de manejar? Si:\_\_\_ No:\_\_\_ Licencia# \_\_\_\_\_

2. ¿Qué tipo de vehículo tiene? Año:\_\_\_\_\_ Marca:\_\_\_\_\_ Modelo:\_\_\_\_\_ N/A:\_\_\_\_\_

3. Si se aprueba ¿cuánto tiempo necesitaría los servicios del transporte? (Por favor explique abajo)

\_\_\_\_\_

4. ¿Alguna otra miembros de su hogar propio vehículo? Si \_\_\_\_\_ No \_\_\_\_\_

¿5.El podría alguien en su hogar, familia o un amigo te transportará a sus citas? Si \_\_\_ No \_\_\_

6. ¿Cómo usted actualmente se transportan a su cita? \_\_\_\_\_

**\*\* Debe proporcionar los documentos escritos por qué el cuidado no está disponible para el transporte \*\***

7. ¿es consciente de que tiene que pagar un co-pago de \$1 por cada camino para este programa, y que si no paga, no puede subir? Si:\_\_\_\_ No:\_\_\_\_

8. ¿Es usted un velem? Si:\_\_\_\_ No:\_\_\_\_ En caso afirmativo, por favor nos proporcione una copia de su DD214 o DD215 para verificación.

9. Si es así, ¿recibe beneficios de VA para el transporte? Si\_\_\_\_ No\_\_\_\_

**Sección 4- Información Sobre las citas Médicas Periódicas**

Principal objetivo de la cita: \_\_\_\_\_

Diálisis\_\_\_\_\_ Oncología\_\_\_\_\_ Terapia física\_\_\_\_\_ Otro\_\_\_\_\_

Hora de la cita prevista:\_\_\_\_\_ Duración de citas:\_\_\_\_\_ Días de semana:\_\_\_\_\_

**Sección 5- Especial Necesita**

Por favor, revise o lista alguna necesidad especial, servicios o modos de transporte que necesita durante el transporte:

Escolta:\_\_\_\_ Silla de ruedas eléctrica\_\_\_\_ Camilla\_\_\_\_

Silla Manual\_\_\_\_ Caminante\_\_\_\_ Respirador\_\_\_\_

Animal de servicio\_\_\_\_ Bastón\_\_\_\_ Otro:\_\_\_\_\_

**Sección 6 - Certificación Y Reconocimiento**

Entender y afirmar que la información proporcionada en esta solicitud para servicios de transporte de no-emergencia médica CTD (NET) es verdadera y correcta, a lo mejor de mi conocimiento y se mantendrá confidencial y compartido sólo con profesionales médicos y de transporte involucrado en la evaluación y determinación de mis necesidades de transporte hacia y desde las citas médicas. Entiendo que proveer falsa información, engañosa o haciendo slaims fraudulentos o hacer declaraciones falsas en nombre de otros constituye un delito bajo las leyes del estado de la Florida. Delinquentes feos voluntad presecute y / o acción civil monedero para recuperar los costos incurridos de flase reclamos o actos delictivos.

Firma \_\_\_\_\_ Fecha \_\_\_\_\_

Suwannee Valley Transit Authority 1907 Voyles St, SW Live Oak Fl 32064

(386)362-5332

OFFICIAL USE ONLY DO NOT WRITE IN THE SPACE	
New Application: _____	Recertification: _____ TD: _____ Medicaid: _____ TMS: _____ Other: _____
Approved Date: _____	Denied Date: _____ reason for Denial: _____
Worker: _____	Date: _____ Supervisor: _____ Date: _____

**SUWANNEE VALLEY TRANSIT AUTHORITY**  
**TRANSPORTATION DISADVANTAGED ASSESSMENT SCREENING FORM: 2015**

**SECTION 1-PERSONAL INFORMATION**

LAST NAME: [REDACTED] FIRST NAME: [REDACTED] MI: [REDACTED]  
PHYSICAL ADDRESS: [REDACTED] CITY: Fort White ZIP CODE: 32038  
MAILING ADDRESS: [REDACTED] CITY: Fort White ZIP CODE: 32038  
SUBDIVISION NAME: [REDACTED] HOME TELEPHONE #: [REDACTED]  
WORK #: [REDACTED] CELL PHONE #: [REDACTED] EMAIL ADDRESS: [REDACTED]  
MEDICAID# [REDACTED] DATE OF BIRTH: [REDACTED] GENDER (M/F): F  
SOCIAL SECURITY #: [REDACTED] ARE YOU A VETERAN? Yes No  
EMERGENCY CONTACT: [REDACTED] RELATIONSHIP: Nephew  
HOME TELEPHONE #: [REDACTED] WORK #: [REDACTED] CELL #: [REDACTED]

**HOUSEHOLD MEMBERS**

Please list ALL household members, include yourself. You may use the back of the form or attach a separate sheet of paper if additional space is needed.

NAME	AGE	RELATIONSHIP
[REDACTED]	[REDACTED]	<u>Self</u>

**SECTION 2-AVAILABILITY OF OTHER TRANSPORTATION**

1. What type of vehicle do you own? Year: [REDACTED] Make: [REDACTED] Model: (N/A)
2. Is there a reason why you cannot drive your car? Yes No If yes please tell us if the reason is medical or is it because you are having vehicle trouble. N/A
3. Does any other member of your household own a vehicle? Yes No
4. Could anyone in your household, family or friends transport you to your appointments? YES: NO ✓ If no, please explain why not? I live in an assisted living facility that doesn't have a vehicle for transport.
5. How are you currently being transported to your appointments?  
SVTA - Trenton SVTA - Chiefland
6. Are you aware that you are required to pay a co-payment of \$1 each way for this program and that if you do not pay, you cannot ride? YES: ✓ NO: [REDACTED]
7. Are you enrolled in any other programs that will pay for or provide you with transportation services? Yes ✓ No  
If yes please provide the name [REDACTED]



### SECTION 3 - COMMON DESTINATIONS

Please list all hospitals, doctors, medical facilities, employment, educational or any other locations that you visit on a regular basis. Please use the back of the form if you need additional space or attach a separate sheet of paper.

DESTINATION	ADDRESS	# VISITS PER MONTH
Fresenius	Hill Lake City	12
Cincinnati Internal med.	1130 NW 64th Terr. #101	1 in 3 months
<del>Dr. S. J. J. J.</del>		1 in 6 months
Account Physicians	4340 Newbury Rd G-Amsville	every 3 months

\*I understand there is a 3 bag limit when going grocery shopping. If you do not follow this rule we will not transport you to the grocery store. Initial Here: [Signature]

### SECTION 4 - SPECIAL NEEDS

Please check or list any special needs you may require during transportation:

Escort: \_\_\_\_\_ Powered Wheelchair: \_\_\_\_\_ Manual Wheelchair: ☒ Walker: ☒ Cane: \_\_\_\_\_  
 Stretcher: \_\_\_\_\_ Respirator: \_\_\_\_\_ Service Animal: \_\_\_\_\_ Other: \_\_\_\_\_

Do you have any other needs/conditions that we need to be aware of in order to transport you safely? ☐ Yes ☒ No  
 If yes, please explain \_\_\_\_\_

### SECTION 5 - INCOME AND EXPENSES

Monthly Income:  
 Job Income \$ N/A SSI \$ [Redacted] Retirement Income \$ N/A Food Stamps \$ N/A  
 TANF (Cash Assistance) \$ N/A Other \$ [Redacted]

Total Household Income \$ [Redacted]

Monthly Expenses:  
 Mortgage/Rent \$ [Redacted] Utilities \$ [Redacted] Vehicle Payment \$ [Redacted] Groceries \$ [Redacted] Cable \$ [Redacted]  
 Telephone \$ [Redacted] Cell Phone \$ [Redacted] Medical \$ [Redacted] Pharmacy \$ [Redacted]  
 Home Insurance \$ [Redacted] Car Insurance \$ [Redacted] Fuel \$ 9.00 Other \$ [Redacted]

Total Monthly Household Expenses \$ [Redacted]

**IN 6-CERTIFICATION AND ACKNOWLEDGEMENT**

I understand and affirm that the information provided in this application for Non-Emergency Transportation (NET) services is true and correct, to the best of my knowledge, and will be kept confidential and shared only with medical and transportation professionals involved in evaluating and determining my needs for transportation to and from eligible services as well as appointments. I understand that providing false or misleading information, or making fraudulent claims, or making false statements on behalf of others constitutes a felony under the laws of the State of Florida. SVTA will prosecute offenders and/or pursue civil action to recover costs incurred from false claims or criminal acts. NOTE: Transportation is wholly dependent on available TD funds each day.

APPLICANT SIGNATURE: \_\_\_\_\_

DATE: 10/9/2015

PLEASE MAKE SURE THIS FORM IS FILLED OUT COMPLETELY AND SIGNED. AN INCOMPLETE APPLICATION WILL BE REJECTED

Please mail this form to:  
Suwannee Valley Transit Authority  
1907 Voyles St, SW  
Live Oak, FL 32064  
(386) 362-5332

PLEASE ALLOW 7 BUSINESS DAYS TO PROCESS YOUR APPLICATION. PLEASE CALL SUWANNEE VALLEY TRANSIT AUTHORITY AT 386-362-5332 OR 1-800-258-7267 TO SEE IF YOU QUALIFY AND TO SCHEDULE TRANSPORTATION SERVICES.

THE TRANSPORTATION DISADVANTAGED APPLICATION WILL BE RENEWED ON AN ANNUAL BASIS.

**OFFICIAL USE ONLY**

DO NOT WRITE IN THIS SPACE

New Application: \_\_\_\_\_ Recertification: \_\_\_\_\_ TD: \_\_\_\_\_ Other: \_\_\_\_\_

Approved Date: \_\_\_\_\_ Denied Date: \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Worker: \_\_\_\_\_ Date: \_\_\_\_\_ Supervisor: SEK Date: 10-5-15



## SUWANNEE VALLEY TRANSIT AUTHORITY

HOME ABOUT RIDING WITH SVTA CODE OF CONDUCT FORMS GALLERY CONTACT

### OUR NEW LIVE OAK ROUTE



**LIVE OAK CITY BUS ROUTE**

**SUWANNEE VALLEY TRANSIT AUTHORITY**

**BEGINNING July 20, 2015**

**CONTINUOUS SERVICE 7:00 AM - 3:00 PM**

**\$1.00 EACH TIME YOU BOARD THE TROLLEY**  
OR A MONTHLY BUS PASS MAY BE PURCHASED FOR \$27.50

**CONTACT OUR OFFICE FOR DETAILS**

**RIDERS MUST PRESENT THE BUS PASS EACH TIME THEY BOARD OR HAVE EXACT FARE!**

**DRIVER CARRIES NO CASH**

**STOPS TO INCLUDE, BUT NOT LIMITED TO:**

1. Suwannee Valley Transit Authority	10. The Meadows Apartments
2. Shands Live Oak Regional Medical Center	11. Suwannee Health Care Center
3. Tara Vista	12. Jerry Price Care Center
4. West Coast	13. Live Oak Plaza
5. Village Oaks Apartments	14. John B. Allen Community Park and Recreation Center
6. First Federal Apartments	15. First Office
7. State Oaks Apartments	16. Courthouse/County Office
8. Suwannee Institute Technical Center	17. Lane's Home Improvement
9. Public Supervisor Plaza	18. Mid-Major Apartments
10. Suwannee River Regional Library	19. Wal-Mart Supercenter Plaza
11. Lane-A-Lot Plaza	20. Suwannee County Health Department

Contact SVTA at (904) 963-5122 for additional information  
3907 Virginia Street, SW Live Oak, FL 32064



HARVEY  
Driver #134



JEOVANY  
Driver #144





## SUWANNEE VALLEY TRANSIT AUTHORITY

HOME

ABOUT

RIDING WITH SVTA

CODE OF CONDUCT

FORMS

GALLERY

CONTACT

## COMMUTER ASSISTANCE/GATEWAY COLLEGE ROUTE

**car-free carefree!**  
and working smart people between Live Oak and Lake City

**Schedule**

Route	Live Oak	Lake City
Monday - Friday	6:30 AM	7:56 AM
Monday - Friday	4:30 PM	5:46 PM

**Find out more about our service**

**Find out more about our service**

### Suwannee Valley Transit Authority Launches Inter-City Transit Service between Live Oak and Lake City

**Live Oak:** Residents of Live Oak have a new and inexpensive transportation option available to them.

Suwannee Valley Transit Authority (SVTA) recently launched a new public transit service that connects Live Oak to Lake City. The service operates Monday through Friday. Morning service begins at 6:30 am from SVTA's offices at 1907 Voyles Street and arrives at Florida Gateway College at 7:56 am with stops in between. The afternoon service picks up at Gateway College at 4:30 pm and arrives in Live Oak at 5:46 pm.

The fare for the service is \$1 per trip.

This new transit service was designed specifically for work commuters and students who need reliable and affordable transportation to get to work and school. But, the service is open to anyone.

For more information, contact SVTA at 800-258-7267 or visit their website at [www.ridesvta.com](http://www.ridesvta.com).

#### Live Oak > Lake City Express Route



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**COMPLIANCE WITH CHAPTER 427, FLORIDA STATUTES**

1. Are the Community Transportation Coordinator subcontracts uniform?  
☐ Yes ☐ No ☒ Not applicable
2. Is the Florida Commission for the Transportation Disadvantaged standard contract utilized?  
☐ Yes ☐ No ☒ Not applicable
3. Do the contracts include performance standards for the transportation operators and coordination contractors?  
☐ Yes ☐ No ☒ Not applicable
4. Do the contracts include the proper language concerning payment to subcontractors?  
☐ Yes ☐ No ☒ Not applicable
5. Were the following items submitted on time?  
  
Annual Operating Report  
  
☒ Yes ☐ No  
  
Memorandum of Agreement  
  
☒ Yes ☐ No  
  
Transportation Disadvantaged Service Plan  
  
☒ Yes ☐ No  
  
Transportation Disadvantaged Trust Fund Grant Application  
  
☒ Yes ☐ No  
  
Other grant applications  
  
☒ Yes ☐ No
6. Does the Community Transportation Coordinator monitor its subcontractors and how often is monitoring conducted?  
☐ Yes ☐ No ☒ Not applicable
7. Is a written report issued to the operator?  
☐ Yes ☐ No ☒ Not applicable
8. What type of monitoring does the Community Transportation Coordinator perform on its coordination contractors and how often is it conducted?  
No coordination contractors



# **COMPLIANCE WITH RULE 41-2 FLORIDA ADMINISTRATIVE CODE**

1. How is the Community Transportation Coordinator using school buses in the coordinated system?  
Suwannee Valley Transit Authority does not have contracts with the School Boards to use their vehicles.
2. How is the Community Transportation Coordinator using fixed route public transportation services in the coordinated system?  
Not applicable
3. Is there a goal for transferring passengers from paratransit to transit?  
☐ Yes   ☐ No   ☒ Not applicable
4. What are the minimum liability insurance requirements? \$200,00/\$300,000
5. What are the minimum liability insurance requirements in the operator and coordination contracts? \$200,000/\$300,000
6. Does the minimum liability insurance requirements exceed \$1 million per incident?  
☐ Yes   ☒ No

Standards	Comments
Local toll free phone number must be posted in all vehicles.	Suwannee Valley Transit Authority posts local toll free phone number in all vehicles.
Vehicle Cleanliness	Suwannee Valley Transit Authority cleans all vehicles (interior/exterior) at least once a week.
Passenger/Trip Database	Suwannee Valley Transit Authority maintains a passenger/trip database.
Adequate seating	Suwannee Valley Transit Authority provides adequate seating for all passengers.
Driver Identification	Suwannee Valley Transit Authority's drivers wear uniforms, with name tags and a Suwannee Valley Transit Authority identification badge.
Passenger Assistance	Suwannee Valley Transit Authority requires drivers to provide passengers with boarding and exiting assistance.
Smoking, Eating and Drinking	Eating and drinking on board vehicles is prohibited unless medically necessary or for trips that have extended wait or travel times.
Two-way Communications	Suwannee Valley Transit Authority and subcontracted operators are required to have an effective two-way communication system.
Air Conditioning/Heating	All vehicles have working air conditioners and heaters.
Billing Requirements	Suwannee Valley Transit Authority subcontracts do not include a requirement that all bills be paid within 7 working days to subcontractors after receipt of said payment by Suwannee Valley Transit Authority in accordance with Section 287.0585, Florida Statutes.

Transport of Escorts and dependent children policy	Children 14 and under will be required to be accompanied by an escort who is over 18 years of age. Any passenger that is not able to be self-sufficient (maneuver about on their own; maintain control of bodily functions; provide hygiene care for oneself) must have an escort present at all times while riding on Suwannee Valley Transit Authority vehicles. Escorts must be able to provide the necessary assistance to the passenger in the event of any need. Escorts must remain with the passenger while on a Suwannee Valley Transit Authority vehicle and aid the passenger as required. Escorts will be transported at the regular co-pay rate.
Use, Responsibility, and cost of child restraint devices	All passengers under the age of 4 and/or under 50 pounds will be required to use an approved child restraint device, or otherwise be in compliance with state regulations at the time. This device shall be provided by the child's escort, and it must be clean and sanitized.
Out-of-Service Area trips	Suwannee Valley Transit Authority requires medical provider certification for any out of county trip and will make efforts to assist the rider and/or his physician in securing appointments within the region.
CPR/1st Aid	<p>All vehicles operating in the coordinated system shall be equipped with first aid kits and bio-hazard ("spill") kits as required by State and Federal regulations. It is Suwannee Valley Transit Authority's goal for all drivers to be certified in First Aid by a recognized first aid training program within 6 months of employment.</p> <p>Drivers are required to be trained in cardiopulmonary resuscitation. All Suwannee Valley Transit Authority drivers shall maintain a current Cardiopulmonary Resuscitation/First Aid certificate.</p>
Driver Criminal Background Screening	Suwannee Valley Transit Authority requires all drivers in the coordinated system to have a criminal background check with local law enforcement and the Florida Department of Law Enforcement prior to hire. Suwannee Valley Transit Authority will check the Motor Vehicle Report of each driver prior to hire, and on a routine and systematic basis.
Passenger Property	Passengers are allowed to have personal property which they can place in their lap or stow under the seat. The size of personal property is restricted to what can be held by the passenger or stowed in an area not to interfere with other passengers or becomes a safety hazard. No animals, with the exception of service animals, will be transported. All oxygen must be portable, self-administered and secured. Drivers cannot assist with oxygen needs.
Advance reservation requirements	Trips must be scheduled three (3) weekdays in advance of the day of appointment. Hospital discharges or other urgent trips must be arranged by calling the afterhours phone number.

Pick-up Window	<p>Passengers shall be picked up two hours before or one hour after their scheduled pick-up time. Passengers will be given pick-up times when they make their trip reservations.</p> <p>Return Trips: Passengers will be picked up 0-60 minutes after their scheduled return pick-up time. For example: 5:00 p.m. return pick-up time, driver should arrive between 5:00 p.m. and 6:00 p.m. Passengers who do not schedule return trip pickup times, will be given a return pick-up time of 90 minutes after the scheduled drop off time.</p> <p>Will Call Return Pick-Up: A "will-call" return pick-up will be offered when a passenger is not ready at their requested return trip pick-up time. As a courtesy, Suwannee Valley Transit Authority will dispatch a vehicle back to their return trip pick-up location within two hours of the time the "will-call" request was made.</p>
----------------	---

Measurable Standards/Goals	Standard/Goal	Is the Community Transportation Coordinator meeting the Standard?
Fixed Route Public Transit Ridership	Not applicable	Not applicable
On-time performance	90%	Yes
Accidents	No more than 1/100,000 miles	Yes
Roadcalls	No more than 7 roadcalls/100,000 miles	Yes
Complaints	No more than 1/1,000 trips.	Yes
Call-Hold Time	No established standard for call hold time.	Not applicable





**Commission for the Transportation Disadvantaged  
NET Safety Compliance and Emergency Management  
Self Certification**

THIS CERTIFIES CALENDAR YEAR 2014

DATE: May 1, 2014

SUBCONTRACTED TRANSPORTATION PROVIDER: Suwannee Valley Transit Authority

ADDRESS: 1907 Voyles Street, SW Live Oak, FL 32064

In accordance with the Medicaid Non-Emergency Transportation Subcontracted Transportation Provider (STP) Contract with the Commission for the Transportation Disadvantaged, the above STP, hereby certifies to the following:

1. The adoption of a System Safety Program Plan and a Security Program Plan (a.k.a. Emergency Management Plan) based on established standards set forth in *Rule Chapter 14.90, F.A.C.* Such plans ensure the continuation of appropriate services during an emergency, including but not limited to localized acts of nature, accidents, and technological and/or attached-related emergencies, both natural and manmade;
2. Compliance with its adopted System Safety Program Plan and Security Program Plan, including:
  - a. Safety inspections of all service vehicles;
  - b. Applicable Drug and Alcohol procedures, including training and monitoring;
  - c. Driver Training and Monitoring.
3. Compliance with requirement of monitoring subcontracted operators;
4. Compliance with maintenance of support documentation for plans, inspections, training and monitoring, and that said documentation is available upon request by an authorized representative of the Commission or the Agency for Health Care Administration.

I understand that providing false information may result in an unfavorable action by the Commission.

Signature: Teresa Fortner

Name: Teresa Fortner  
(Type or Print)

Title: Administrator



**Florida Department of Transportation**

**RICK SCOTT**  
GOVERNOR

1109 S. Marion Avenue MS 2018  
Lake City, FL 32025

**JIM BOXOLD**  
SECRETARY

June 26, 2015

Larry Sessions  
Administrator  
Suwannee Valley Transit Authority  
1907 Voyles Street  
Live Oak, Florida 32060

**Re: Suwannee Valley Transit Authority Annual Site Visit Review - Letter of Compliance**

Dear Mr. Sessions,

I'm pleased to notify you that the Department has completed the Annual Site Visit Review, January 2015 and we find your agency to be in compliance with State and Federal requirements. Thank you for addressing the findings from the subject review and subsequently communicating the completion of corrective actions through June 11, 2015.

We appreciate the level of support and cooperation received from the agency's staff during the Annual Site Visit review and also noted your efforts in addressing the requirements set forth by the Department's Procedures. We will be scheduling our next Site Visit per Department's Procedures. If you have any questions or would like to discuss any concerns in the meantime please contact me at (386) 961-7870 or [sandra.collins@dot.state.fl.us](mailto:sandra.collins@dot.state.fl.us). We look forward to continuing to work with your agency in your efforts to serve transportation needs of your constituents.

Sincerely,

Sandra Collins  
Programs Coordinator  
Florida Department of Transportation  
District Two - Lake City  
Phone: (386) 961-7870  
Email: [sandra.collins@dot.state.fl.us](mailto:sandra.collins@dot.state.fl.us)

cc: Doreen Joyner-Howard (FDOT), Janell Damato (FDOT), Thee Perry (FDOT), Santanu Roy (HDR, Inc.), Micah Gilliom (HDR, Inc.), Lauren Adams (HDR, Inc.)

[www.dot.state.fl.us](http://www.dot.state.fl.us)



**Bus Transit System Annual Safety and Security Certification**

*Certifying Compliance with Rule 14-90, FAC to the  
Florida Department of Transportation (FDOT)*

Certification Date (Current): 2015

Certification Year: (Previous): 2014

Name and Address of Bus Transit System: Suwannee Valley Transit  
1907 Voyles Street, SW  
Live Oak, FL 32064

***The Bus Transit System (Agency) named above hereby certifies the following:***

1. *The Agency has adopted a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) pursuant to the standards set forth in Rule Chapter 14-90, Florida Administrative Code.*
2. *The Agency is in compliance with its adopted SSPP and SPP.*
3. *The Agency has performed annual safety inspections on all operational vehicles in accordance with Rule Chapter 14-90, Florida Administrative Code.*
4. *The Agency has conducted reviews of SSPP and SPP and the plans are up to date.*

Blue Ink Signature: Teresa Fortner Date: 1/6/15  
(Individual Responsible for Assurance of Compliance)

Name: Teresa Fortner Title: Administrator

Name and address of entity(ies) which has (have) performed bus safety inspections and security assessments:

Name: Suwannee Valley Transit Authority

Address: 1907 Voyles Street, SW, Live Oak, FL 32064

Name of Qualified Mechanic who Performed Annual Inspections: Merrill Wayne Blevins

***\* Note: Please do not edit or otherwise change this form.***

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION  
**CERTIFICATE OF COMPLIANCE**

725-030-10  
TRANSIT  
12/01

for a  
SECTION 5311 SUBRECIPIENT  
(Certifying compliance with 49 CFR Parts 40, 655)  
To  
Florida Department of Transportation

DATE 1/1/2015

Section 5311 Subrecipient Information:

AGENCY NAME: Suwannee Valley Transit Auth

ADDRESS: 1907 Voyles Street, SW Live Oak, FL

PHONE: (386) 352-5332

FDOT District Office Information:

NAME: Doreen Joyner-Howard, AICP

ADDRESS: 2196 Edison Avenue, Jacksonville, FL

PHONE: 904-380-5650

I, Teresa Fortner (Name) Administrator (Title)

hereby certify that Suwannee Valley Transit Authority (Name of Subrecipient) and its applicable

contractor(s) (listing attached hereto) for Suwannee Valley Transit Authority (Name of Subrecipient)

has (have) established and implemented an anti-drug and alcohol misuse prevention program in accordance with the provisions of 49 CFR Parts 40 and 655 as amended. I further certify that the employee training conducted under this part meets the requirements of 49 CFR Parts 40 and 655 as amended.

Teresa Fortner  
Signature

Attachment: (Applicable Contractor(s) - Name, Address, Phone #, Contact Person)

### ON-SITE OBSERVATION OF THE SYSTEM

1. Date of Observation:  
11/9/15
2. Please list any special guests that were present:  
None
3. Location:  
Live Oak Route
4. Number of Passengers picked up/dropped off  
Ambulatory:  
5  
  
Non-Ambulatory  
0
5. Was the driver on time?  
☒ Yes  
☐ No If no, how many minutes late/early?
6. Did the driver provide any passenger assistance?  
☐ Yes  
☐ No  
☒ Not Applicable
7. Was the driver wearing any identification?  
☒ Yes  
☐ No
8. Was the vehicle neat and clean, and free from dirt, torn upholstery, damaged or broken seats, protruding metal or other objects?  
☒ Yes  
☐ No
9. Is there a sign posted on the interior of the vehicle with both a local phone number and the Transportation Disadvantaged Helpline for comments/complaints/commendations?  
☒ Yes  
☐ No
12. Did the vehicle have working heat and air conditioning?  
☒ Yes  
☐ No
13. If used, was the lift in good working order?  
☐ Yes  
☐ No  
☒ Not Applicable
14. Was there safe and appropriate seating for all passengers?  
☒ Yes  
☐ No

## PASSENGER SURVEYS

**How often do your ride?**

Daily 7 days/week	1-2 Times/Week	3-5 Times/Week	Other
0	3	0	2

**Have you been denied transportation services?**

Yes

No

**What is your trip purpose?**

Medical	Education/Training	Employment	Other
5	0	0	0

**Do you have concerns with your service?**

Yes 5

No 0

**What types of concerns do you have?**

Late Trips	Driver Behavior	Availability	Vehicle Condition	Customer Service	Cost

**LEVEL OF COST**

**FLCTD  
Annual Operations Report  
Section VII: Expense Sources**

County: <b>Columbia</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section VII: Financial Data</b>			
<b>2. Expense Sources</b>			
<b>Expense Item</b>	<b>Community Transportation Coordinator</b>	<b>Coordination Contractor</b>	<b>TOTAL EXPENSES</b>
Labor (501):	\$495,076.00	\$10,049.00	\$505,125.00
Fringe Benefits (502):	\$162,379.00	\$0.00	\$162,379.00
Services (503):	\$28,849.00	\$0.00	\$28,849.00
Materials and Supplies Cons. (504):	\$140,591.00	\$0.00	\$140,591.00
Utilities (505):	\$18,435.00	\$0.00	\$18,435.00
Casualty and Liability (506):	\$46,403.00	\$13,476.00	\$59,879.00
Taxes (507):	\$280.00	\$0.00	\$280.00
<b>Purchased Transportation Services (508)</b>			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$9,452.00	\$0.00	\$9,452.00
Miscellaneous (509):	\$2,894.00	\$0.00	\$2,894.00
Interest (511):	\$1,286.00	\$0.00	\$1,286.00
Leases and Rentals (512):	\$6,317.00	\$0.00	\$6,317.00
Annual Depreciation (513):	\$260,595.00	\$0.00	\$260,595.00
Contributed Services (530):	\$0.00	\$0.00	\$0.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
<b>GRAND TOTAL:</b>	<b>\$1,172,557.00</b>	<b>\$23,525.00</b>	<b>\$1,196,082.00</b>



**FLCTD**  
**Annual Operations Report**  
**Section VII: Expense Sources**

County: <b>Hamilton</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
Status: <b>Ready</b>			
Section VII: Financial Data			
2. Expense Sources			
Expense Item	Community Transportation Coordinator	Coordination Contractor	TOTAL EXPENSES
Labor (501):	\$54,458.00	\$0.00	\$54,458.00
Fringe Benefits (502):	\$17,862.00	\$0.00	\$17,862.00
Services (503):	\$3,173.00	\$0.00	\$3,173.00
Materials and Supplies Cons. (504):	\$15,465.00	\$0.00	\$15,465.00
Utilities (505):	\$2,028.00	\$0.00	\$2,028.00
Casualty and Liability (506):	\$5,104.00	\$0.00	\$5,104.00
Taxes (507):	\$31.00	\$0.00	\$31.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$1,040.00	\$0.00	\$1,040.00
Miscellaneous (509):	\$318.00	\$0.00	\$318.00
Interest (511):	\$141.00	\$0.00	\$141.00
Leases and Rentals (512):	\$695.00	\$0.00	\$695.00
Annual Depreciation (513):	\$28,665.00	\$0.00	\$28,665.00
Contributed Services (530):	\$0.00	\$0.00	\$0.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
GRAND TOTAL:	\$128,980.00	\$0.00	\$128,980.00



**FLCTD**  
**Annual Operations Report**  
**Section VII: Expense Sources**

County: Suwannee		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Submitted to FLCTD			
Section VII: Financial Data			
2. Expense Sources			
Expense Item	Community Transportation Coordinator	Coordination Contractor	TOTAL EXPENSES
Labor (501):	\$173,277.00	\$48,326.00	\$221,603.00
Fringe Benefits (502):	\$56,833.00	\$1,908.00	\$58,741.00
Services (503):	\$10,097.00	\$0.00	\$10,097.00
Materials and Supplies Cons. (504):	\$49,207.00	\$37.00	\$49,244.00
Utilities (505):	\$6,452.00	\$0.00	\$6,452.00
Casualty and Liability (506):	\$16,241.00	\$4,786.00	\$21,027.00
Taxes (507):	\$98.00	\$0.00	\$98.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$3,308.00	\$0.00	\$3,308.00
Miscellaneous (509):	\$1,013.00	\$0.00	\$1,013.00
Interest (511):	\$450.00	\$0.00	\$450.00
Leases and Rentals (512):	\$2,211.00	\$0.00	\$2,211.00
Annual Depreciation (513):	\$91,208.00	\$0.00	\$91,208.00
Contributed Services (530):	\$0.00	\$0.00	\$0.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
GRAND TOTAL:	\$410,395.00	\$55,057.00	\$465,452.00

## COMPETITION

1. Inventory of Transportation Operators in the Service Area

	Transportation Providers Available	Transportation Providers Contracted in the System.
Private Non-Profit	1	0
Private For-Profit	5	0
Government	0	0
Public Transit Agency	1	1
Total	7	1

2. How many of the operators are coordination contractors? 0

3. Does the Community Transportation Coordinator have a competitive procurement process?  
☒ Yes  
☐ No

4. What methods have been used in selection of the transportation operators?

<input type="checkbox"/>	Low bid
<input type="checkbox"/>	Requests for qualifications
<input type="checkbox"/>	Negotiation only

<input checked="" type="checkbox"/>	Requests for proposals
<input type="checkbox"/>	Requests for interested parties
<input type="checkbox"/>	

## COORDINATION

1. Public Information – How is public information distributed about transportation services in the community?

All plans for providing transportation disadvantaged services are coordinated.

2. Eligibility – How is passenger eligibility coordinated for local transportation services?

Suwannee Valley Transit Authority determines passenger eligibility with the exception of passengers using Florida's Managed Medical Care Program transportation.

3. Call Intake – To what extent is transportation coordinated to ensure that a user can reach a Reservationist on the first call?

Individuals call Suwannee Valley Transit Authority to schedule all trips with the exception of passengers using Florida's Managed Medical Care Program transportation.

4. Reservations –How is the duplication of a reservation prevented?

Suwannee Valley Transit Authority handles all trip reservations with the exception of passengers using Florida's Managed Medical Care Program transportation.

5. Trip Allocation – How is the allocation of trip requests to providers coordinated?

Suwannee Valley Transit Authority handles all trip allocations with the exception of passengers using Florida's Managed Medical Care Program transportation.

6. Scheduling – How is the trip assignment to vehicles coordinated?

Suwannee Valley Transit Authority schedules all trips with the exception of passengers using Florida's Managed Medical Care Program transportation.

7. General Service Monitoring – How is the overseeing of transportation operators coordinated?

Suwannee Valley Transit Authority does not subcontract service.



# Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

## Annual Evaluation Team

Scott R. Koons, AICP, Executive Director

\*\* Marlie Sanderson, AICP, Director of Transportation Planning

\* Lynn Franson-Godfrey, AICP, Senior Planner

\* Primary Responsibility  
\*\* Secondary Responsibility



Use the QR Reader App  
on your smart phone to  
visit our website!

## Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

2009 NW 67th Place, Gainesville, FL 32653-1603

[www.ncfrpc.org/td](http://www.ncfrpc.org/td)



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---

2009 NW 67th Place, Gainesville, FL 32653-1603 • 352.955.2200

November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: 2014-2015 Annual Operations Reports

**RECOMMENDATION**

**Review the 2014/2015 Annual Operations Reports for Columbia, Hamilton and Suwannee Counties.**

**BACKGROUND**

Suwannee Valley Transit Authority is required to submit annual operations reports for Columbia, Hamilton and Suwannee Counties to the Florida Commission for the Transportation Disadvantaged by September 15 of each year. Attached are the Fiscal Year 2014-2015 Annual Operations Reports. If you have any questions concerning the attached report, please contact me at extension 110.

**Attachments**

t:\lynn\td2015\colhamsuw\memos\lor.docx

Dedicated to improving the quality of life of the Region's citizens,  
by coordinating growth management, protecting regional resources,  
promoting economic development and providing technical services to local governments.





# FLCTD

## Annual Operations Report

### Section I: Face Sheet

<b>County:</b> Columbia	<b>Fiscal Year:</b> July 1, 2014 - June 30, 2015
<b>Status:</b> Submitted to FLCTD	
<b>Report Date:</b>	09/09/2015
<b>Period Covered:</b>	July 1, 2014 - June 30, 2015
<b>Coordinator's Name:</b>	Suwannee Valley Transit Authority
<b>Address:</b>	1907 Voyles Street, S.W.
<b>City:</b>	Live Oak
<b>Zip Code:</b>	32064
<b>Service Area:</b>	Columbia
<b>Contact Person:</b>	Larry Sessions/Felonzie Raggins
<b>Title:</b>	Administrator/Deputy Finance Manager
<b>Phone:</b>	(386) 362 - 5332
<b>Fax:</b>	(386) 219 - 0157
<b>Email:</b>	<a href="mailto:larry.sessions@ridesvta.com">larry.sessions@ridesvta.com</a>
<b>Network Type:</b>	Partial Brokerage
<b>Organization Type:</b>	Public Transit Authority
<b>CTC Certification:</b>  I, Larry Sessions, as the authorized Community Transportation Coordinator (CTC) Representative, hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions.	
<b>CTC Representative (signature)</b> <hr style="width: 30%; margin-left: 0;"/>	
<b>LCB Statement:</b>  I, _____, as the local Coordinating Board Chairperson, hereby, certify in accordance with Rule 41-2.007(7) F.S. that the local Coordinating Board has reviewed this report and the Planning Agency has received a copy.	
<b>LCB Signature</b> <hr style="width: 30%; margin-left: 0;"/>	

# **FLCTD**

## **Annual Operations Report**

### **Section II: General Info**

County: **Columbia**

Fiscal Year: **July 1, 2014 - June 30, 2015**

Status: **Submitted to FLCTD**

#### **Section II: Coordinated System General Information**

##### **1. Provider Listing (include the CTC, if the CTC provides transportation services)**

Number of Private Non-Profits: 1

Number of Private For-Profits: 0

##### **Public Entities:**

School Board: 0

Municipality: 0

County: 0

Transit Authority: 1

Other: 0

**Total: 2**

##### **2. How many of the providers listed in 1 are coordination contractors?**

1

# FLCTD

## Annual Operations Report

### Section III: Passenger Trip Info

County: <b>Columbia</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section III: Passenger Trip Information</b>			
<b>1a. One-Way Passenger Trips</b>			
<b>Type of Service</b>	<b>Service Area</b>		
<b>Fixed Route/Fixed Schedule</b>	<b>Within</b>	<b>Outside</b>	<b>Total</b>
Daily Trip Tickets	0	0	0
Weekly Passes	0	0	0
Monthly Passes	0	0	0
<b>Deviated Fixed Route Service</b>	0	0	0
<b>Paratransit</b>			
Ambulatory	25915	186	26101
Non-Ambulatory	2455	14	2469
Stretcher	4	0	4
<b>Other Services</b>			
School Board Trips	0	0	0
Total Trips	28374	200	28574
<b>1b. How many of the total trips were provided by contracted transportation providers (do not include the CTC, if the CTC provides transportation services)?</b>			0
<b>1c. How many of the total trips were provided by coordination contractors?</b>			2822
<b>2. One-Way Trips by Funding Source</b>			
Agency for Health Care Administration	2580		
Agency for Persons with Disabilities	4756		
Agency for Workforce Innovation	0		
Commission for the Transportation Disadvantaged	11965		
Department of Children and Families	0		
Department of Community Affairs	0		
Department of Education	0		
Department of Elder Affairs	2542		
Department of Health	4		

Department of Juvenile Justice	0
Florida Department of Transportation	0
Local Government	281
Local Non-Government	6445
Other Federal Programs	1
<b>Total:</b>	28574
<b>3. One-Way Trips by Passenger Type</b>	
Was this information obtained by sampling?	no
<b>Elderly</b>	
Low Income:	0
Disabled:	0
Low Income and Disabled:	0
Other:	10616
<b>Children</b>	
Low Income:	0
Disabled:	0
Low Income and Disabled:	0
Other:	135
<b>Other</b>	
Low Income:	0
Disabled:	0
Low Income and Disabled:	0
Other:	17823
<b>Total:</b>	28574
<b>4. One-Way Passenger Trips - by Purpose</b>	
Was this information obtained by sampling?	no
Medical Purpose	13189
Employment Purpose	4735
Education/Training/Daycare Purpose	56
Nutritional Purpose	2618
Life-Sustaining/Other Purpose	7976
<b>Total:</b>	28574
<b>5. Unduplicated Passenger Head Count</b>	
5a. Paratransit/Deviated Fixed Route/ School Brd	651

5b. Fixed Route	0
<b>Total:</b>	651
<b>6. Number of Unmet Trip Requests</b>	17
<b>Unmet Trip Requests by Type of Trip</b>	
Unmet Medical	12
Unmet Employment	2
Unmet Education/Training/Daycare	0
Unmet Nutritional	0
Unmet Life-Sustaining/Other	3
<b>Reason Trip was Denied (Optional)</b>	
Lack of Funding:	0
Lack of Vehicle Availability:	0
Lack of Driver Availability:	0
Other:	17
<b>7.) Number of Passenger No-shows</b>	343
<b>Passenger No-Shows by Funding Source (optional)</b>	
CTD:	257
AHCA:	3
AWI:	0
DCF:	0
APD:	57
DOE:	0
DOEA:	0
Other:	26
<b>8. Complaints</b>	
Complaints by Service	9
Complaints by Policy	0
Complaints by Vehicle	0
Complaints by Other	0
<b>Complaint Total:</b>	9
<b>9. Commendations</b>	
Commendations by CTC	8

Commendations by Transportation Providers	0
Commendations by Coordination Contractors	0
<b>Total Commendations:</b>	<b>8</b>

# FLCTD

## Annual Operations Report

### Section IV: Vehicle Info

County: <b>Columbia</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section IV: Vehicle Information</b>			
<b>1. Mileage Information</b>			
	<b>Vehicle Miles</b>		<b>Revenue Miles</b>
CTC:	376630		337385
Transportation Providers:	0		0
Coordination Contractors:	39059		39059
School Bus Utilization Agreement:	0		0
<b>Total:</b>	415689		376444
<b>2. Roadcalls</b>			
	0		
<b>3. Accidents</b>			
	<b>Chargeable</b>		<b>Non-Chargeable</b>
Total Accidents Person Only:	0		0
Total Accidents Vehicle Only:	0		2
Total Accidents Person & Vehicle:	0		0
<b>Total Accidents:</b>	0		2
<b>Grand Total:</b>	2		
<b>4. Total Number of Vehicles</b>			
	27		
	<b>Count</b>	<b>Percentage</b>	
a. Total vehicles that are wheelchair accessible:	27	100.00%	
b. Total vehicles that are stretcher equipped:	1	3.00%	

# FLCTD

## Annual Operations Report

### Section V: Employee Info

County: <b>Columbia</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section V: Employee Information</b>			
<b>1. CTC and Transportation Provider Employee Information</b>			
			<b>Hours</b>
Full-Time Drivers	9		13788
Part-Time Drivers	3		1606
Volunteer Drivers	0		0
<b>Total Hours:</b>			15394
Maintenance Employees	3		
Dispatchers	1		
Schedulers	1		
Call Intake/Reserv./Cust. Serv.	1		
Other Operations Employees	0		
			<b>Hours</b>
Other Volunteers	0		0
Administrative Support	3		
Management Employees	1		
<b>Total</b>	<b>22</b>		
<b>2. Coordination Contractors Employee Information</b>			
			<b>Hours</b>
Full-Time Drivers	0		0
Part-Time Drivers	4		1117
Volunteer Drivers	0		0
<b>Total Hours:</b>			1117
Maintenance Employees	0		
Dispatchers	0		
Schedulers	0		
Call Intake/Reserv./Cust. Serv.	0		



Other Operations Employees	0	
		<b>Hours</b>
Other Volunteers	0	0
Administrative Support	2	
Management Employees	0	
<b>Total</b>	6	
		<b>TOTAL HOURS: 16511</b>

# FLCTD

## Annual Operations Report

### Section VI: Revenue Sources

County: <b>Columbia</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section VI: Financial Data</b>			
<b>1. Detailed Revenue and Trips Provided by Funding Source</b>			
<b>Revenue Source</b>	<b>CTC and Transportation Providers</b>	<b>Coordination Contractors</b>	<b>TOTAL REVENUES</b>
<b>Agency for Health Care Administration</b>			
Medicaid Non-Emergency	\$68,080.00	\$0.00	\$68,080.00
Medicaid Non-Emergency (under fixed fee service with AHCA)	\$114,668.00	\$0.00	\$114,668.00
<b>Agency for Persons with Disabilities</b>			
Comm Care for Dis Adults/Aging & Adult Services	\$0.00	\$0.00	\$0.00
Developmental Services	\$54,476.00	\$0.00	\$54,476.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Agency for Workforce Innovation</b>			
WAGES/Workforce Board	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Commission for the Transportation Disadvantaged</b>			
Non-Sponsored Trip Program	\$347,175.00	\$0.00	\$347,175.00

Non-Sponsored Cap. Equip.	\$0.00	\$0.00	\$0.00
Rural Capital Equip.	\$14,726.00	\$0.00	\$14,726.00
TD Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Children and Families</b>			
Alcohol, Drug Abuse & Mental Health Program	\$0.00	\$0.00	\$0.00
Family Safety & Preservation	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Community Affairs</b>			
Community Services	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Education</b>			
Carl Perkins Vocational Ed. Act	\$0.00	\$0.00	\$0.00
Division of Blind Services	\$0.00	\$0.00	\$0.00
Vocational Rehabilitation	\$0.00	\$0.00	\$0.00
Day Care Programs	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Elder Affairs</b>			
Older Americans Act	\$0.00	\$9,329.00	\$9,329.00
Community Care for the Elderly	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Health</b>			
Children's Medical Services	\$0.00	\$0.00	\$0.00
Office of Disability Deter.	\$130.00	\$0.00	\$130.00

County Public Health Unit	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Juvenile Justice</b>			
(specify)	\$0.00	\$0.00	\$0.00
<b>Department of Transportation</b>			
49 USC 5307 (Section 9)	\$0.00	\$0.00	\$0.00
49 USC 5310 (Section 16)	\$41,796.00	\$0.00	\$41,796.00
49 USC 5311 (Section 18)	\$197,902.00	\$0.00	\$197,902.00
49 USC 5311(f) (Section 18i)	\$0.00	\$0.00	\$0.00
Block Grant	\$0.00	\$0.00	\$0.00
Service Development	\$0.00	\$0.00	\$0.00
Commuter Assistance Program	\$4,988.00	\$0.00	\$4,988.00
Other DOT (Specify)	\$0.00	\$0.00	\$0.00
<b>Local Government</b>			
School Board Service	\$0.00	\$0.00	\$0.00
Complementary ADA Service	\$0.00	\$0.00	\$0.00
County Cash	\$74,492.00	\$0.00	\$74,492.00
County In-Kind	\$0.00	\$932.00	\$932.00
City Cash	\$0.00	\$932.00	\$932.00
City In-Kind	\$0.00	\$0.00	\$0.00
Other Cash (specify)	\$0.00	\$0.00	\$0.00
Other In-Kind (specify)	\$0.00	\$0.00	\$0.00
<b>Local Non-Government</b>			
Farebox	\$11,195.00	\$0.00	\$11,195.00

Donations, Contributions	\$0.00	\$3,332.00	\$3,332.00
In-Kind Services	\$0.00	\$0.00	\$0.00
Other Non-Government	\$3,350.00	\$0.00	\$3,350.00
<b>Other Federal or State Programs</b>			
(specify)Dept of Revenue	\$10,030.00	\$0.00	\$10,030.00
(specify)UW	\$0.00	\$9,000.00	\$9,000.00
(specify)	\$0.00	\$0.00	\$0.00
<b>GRAND TOTAL:</b>	\$943,008.00	\$23,525.00	\$966,533.00

# FLCTD

## Annual Operations Report

### Section VII: Expense Sources

County: Columbia		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Submitted to FLCTD			
Section VII: Financial Data			
2. Expense Sources			
Expense Item	Community Transportation Coordinator	Coordination Contractor	TOTAL EXPENSES
Labor (501):	\$495,076.00	\$10,049.00	\$505,125.00
Fringe Benefits (502):	\$162,379.00	\$0.00	\$162,379.00
Services (503):	\$28,849.00	\$0.00	\$28,849.00
Materials and Supplies Cons. (504):	\$140,591.00	\$0.00	\$140,591.00
Utilities (505):	\$18,435.00	\$0.00	\$18,435.00
Casualty and Liability (506):	\$46,403.00	\$13,476.00	\$59,879.00
Taxes (507):	\$280.00	\$0.00	\$280.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$9,452.00	\$0.00	\$9,452.00
Miscellaneous (509):	\$2,894.00	\$0.00	\$2,894.00
Interest (511):	\$1,286.00	\$0.00	\$1,286.00
Leases and Rentals (512):	\$6,317.00	\$0.00	\$6,317.00
Annual Depreciation (513):	\$260,595.00	\$0.00	\$260,595.00
Contributed Services (530):	\$0.00	\$0.00	\$0.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
GRAND TOTAL:	\$1,172,557.00	\$23,525.00	\$1,196,082.00

**PERFORMANCE TRENDS - SUWANNEE VALLEY TRANSIT AUTHORITY  
COLUMBIA, COUNTY**

PERFORMANCE STANDARD	MEASURE	Fiscal Year 2012/2013	Fiscal Year 2013/2014	Fiscal Year 2014/2015	Percent Change 2013/2014 - 2014/2015
TOTAL SERVICE	Passenger Trips	52,623	58,206	28,574	-51%
	Revenue Vehicle Miles	660,001	436,492	376,444	-14%
	Vehicle Miles	777,569	633,993	415,689	-34%
SERVICE EFFECTIVENESS	Passenger Trips/Revenue Vehicle Mile	0.08	0.13	0.08	-43%
	Average Miles Per Trip	15	11	15	34%
	Passenger Trips/Vehicle Mile	0.07	0.09	0.07	-25%
	Revenue Vehicle Miles/Vehicle Miles	0.85	0.69	0.91	32%
COST EFFECTIVENESS & EFFICIENCY	Revenue	\$2,213,929	\$1,386,837	\$966,533	-30%
	Expenses	\$2,154,991	\$1,863,948	\$1,196,082	-36%
	Cost/Passenger Trip	\$40.95	\$32.02	\$41.86	31%
	Cost/Vehicle Mile	\$2.77	\$2.94	\$2.88	-2%
	Cost/Vehicle	\$82,884	\$71,690	\$44,299	-38%
VEHICLE UTILIZATION	Vehicles	26	26	27	4%
	Passenger Trips/Vehicle	2,024	2,239	1,058	-53%
	Vehicle Miles/Vehicle	29,907	24,384	15,396	-37%
	Revenue Vehicle Miles/Total Vehicles	25,385	16,788	13,942	-17%
SAFETY	Accidents	1	0	2	#DIV/0!
	Accidents/100,000 Miles	0.13	0	0.48	#DIV/0!
SERVICE AVAILABILITY	Average Vehicle Miles Between Roadcalls	388,785	316,997	207,845	-34%
	No Shows	2,810	2,810	343	-88%
	Roadcalls	2	2	2	0%
	Trip Denials	48	12	17	42%

Source: Suwannee Valley Transit Authority Annual Operations Reports





# FLCTD

## Annual Operations Report

### Section I: Face Sheet

County: <b>Hamilton</b>	Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>
<b>Status: Ready</b>	
<b>Report Date:</b>	09/11/2015
<b>Period Covered:</b>	July 1, 2014 - June 30, 2015
<b>Coordinator's Name:</b>	Suwannee Valley Transit Authority
<b>Address:</b>	1907 Voyles Street, S. W.
<b>City:</b>	Live Oak
<b>Zip Code:</b>	32064
<b>Service Area:</b>	Hamilton
<b>Contact Person:</b>	Larry Sessions/Felonzie Raggins
<b>Title:</b>	Administrator / Deputy Finance Director
<b>Phone:</b>	(386) 362 - 5332
<b>Fax:</b>	(386) 219 - 0157
<b>Email:</b>	larry.sessions@ridesvta.com
<b>Network Type:</b>	Partial Brokerage
<b>Organization Type:</b>	Public Transit Authority
<b>CTC Certification:</b>	
<p>I, Larry Sessions, as the authorized Community Transportation Coordinator (CTC) Representative, hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions.</p>	
<b>CTC Representative (signature)</b>	
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/>	
<b>LCB Statement:</b>	
<p>I, _____, as the local Coordinating Board Chairperson, hereby, certify in accordance with Rule 41-2.007(7) F.S. that the local Coordinating Board has reviewed this report and the Planning Agency has received a copy.</p>	
<b>LCB Signature</b>	
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/>	

# **FLCTD**

## **Annual Operations Report**

### **Section II: General Info**

County: **Hamilton**

Fiscal Year: **July 1, 2014 - June 30, 2015**

Status: **Ready**

#### **Section II: Coordinated System General Information**

##### **1. Provider Listing (include the CTC, if the CTC provides transportation services)**

Number of Private Non-Profits: 0

Number of Private For-Profits: 0

##### **Public Entities:**

School Board: 0

Municipality: 0

County: 0

Transit Authority: 1

Other: 0

**Total: 1**

##### **2. How many of the providers listed in 1 are coordination contractors?**

0

# FLCTD

## Annual Operations Report

### Section III: Passenger Trip Info

County: <b>Hamilton</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Ready</b>			
<b>Section III: Passenger Trip Information</b>			
<b>1a. One-Way Passenger Trips</b>			
<b>Type of Service</b>	<b>Service Area</b>		
<b>Fixed Route/Fixed Schedule</b>	<b>Within</b>	<b>Outside</b>	<b>Total</b>
Daily Trip Tickets	0	0	0
Weekly Passes	0	0	0
Monthly Passes	0	0	0
<b>Deviated Fixed Route Service</b>	0	0	0
<b>Paratransit</b>			
Ambulatory	3660	38	3698
Non-Ambulatory	500	3	503
Stretcher	1	0	1
<b>Other Services</b>			
School Board Trips	0	0	0
Total Trips	4161	41	4202
<b>1b. How many of the total trips were provided by contracted transportation providers (do not include the CTC, if the CTC provides transportation services)?</b>			0
<b>1c. How many of the total trips were provided by coordination contractors?</b>			0
<b>2. One-Way Trips by Funding Source</b>			
Agency for Health Care Administration			524
Agency for Persons with Disabilities			523
Agency for Workforce Innovation			0
Commission for the Transportation Disadvantaged			2437
Department of Children and Families			0
Department of Community Affairs			0
Department of Education			1
Department of Elder Affairs			0
Department of Health			1

Department of Juvenile Justice	0
Florida Department of Transportation	0
Local Government	1
Local Non-Government	714
Other Federal Programs	1
<b>Total:</b>	4202
<b>3. One-Way Trips by Passenger Type</b>	
Was this information obtained by sampling?	no
<b>Elderly</b>	
Low Income:	0
Disabled:	261
Low Income and Disabled:	1009
Other:	0
<b>Children</b>	
Low Income:	0
Disabled:	3
Low Income and Disabled:	15
Other:	0
<b>Other</b>	
Low Income:	3
Disabled:	314
Low Income and Disabled:	1797
Other:	800
<b>Total:</b>	4202
<b>4. One-Way Passenger Trips - by Purpose</b>	
Was this information obtained by sampling?	no
Medical Purpose	2280
Employment Purpose	964
Education/Training/Daycare Purpose	12
Nutritional Purpose	15
Life-Sustaining/Other Purpose	931
<b>Total:</b>	4202
<b>5. Unduplicated Passenger Head Count</b>	
5a. Paratransit/Deviated Fixed Route/ School Brd	118

5b. Fixed Route	0
<b>Total:</b>	118
<b>6. Number of Unmet Trip Requests</b>	5
<b>Unmet Trip Requests by Type of Trip</b>	
Unmet Medical	3
Unmet Employment	1
Unmet Education/Training/Daycare	0
Unmet Nutritional	0
Unmet Life-Sustaining/Other	1
<b>Reason Trip was Denied (Optional)</b>	
Lack of Funding:	2
Lack of Vehicle Availability:	0
Lack of Driver Availability:	0
Other:	3
<b>7.) Number of Passenger No-shows</b>	70
<b>Passenger No-Shows by Funding Source (optional)</b>	
CTD:	52
AHCA:	1
AWI:	0
DCF:	0
APD:	12
DOE:	0
DOEA:	0
Other:	5
<b>8. Complaints</b>	
Complaints by Service	1
Complaints by Policy	0
Complaints by Vehicle	0
Complaints by Other	0
<b>Complaint Total:</b>	1
<b>9. Commendations</b>	
Commendations by CTC	1

Commendations by Transportation Providers	0
Commendations by Coordination Contractors	0
<b>Total Commendations:</b>	<b>1</b>

# FLCTD

## Annual Operations Report

### Section IV: Vehicle Info

County: <b>Hamilton</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
Status: <b>Ready</b>			
Section IV: Vehicle Information			
<b>1. Mileage Information</b>			
	<b>Vehicle Miles</b>		<b>Revenue Miles</b>
CTC:	57243		47814
Transportation Providers:	0		0
Coordination Contractors:	0		0
School Bus Utilization Agreement:	0		0
<b>Total:</b>	57243		47814
<b>2. Roadcalls</b>			
	0		
<b>3. Accidents</b>			
	<b>Chargeable</b>		<b>Non-Chargeable</b>
Total Accidents Person Only:	0		0
Total Accidents Vehicle Only:	0		0
Total Accidents Person & Vehicle:	0		0
<b>Total Accidents:</b>	0		0
<b>Grand Total:</b>	0		
<b>4. Total Number of Vehicles</b>			
	4		
		<b>Count</b>	<b>Percentage</b>
a. Total vehicles that are wheelchair accessible:		3	75.00%
b. Total vehicles that are stretcher equipped:		1	25.00%

# FLCTD

## Annual Operations Report

### Section V: Employee Info

County: <b>Hamilton</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
Status: <b>Ready</b>			
<b>Section V: Employee Information</b>			
<b>1. CTC and Transportation Provider Employee Information</b>			
			<b>Hours</b>
Full-Time Drivers	2		2809
Part-Time Drivers	1		327
Volunteer Drivers	0		0
<b>Total Hours:</b>			3136
Maintenance Employees	1		
Dispatchers	0		
Schedulers	0		
Call Intake/Reserv./Cust. Serv.	0		
Other Operations Employees	0		
			<b>Hours</b>
Other Volunteers	0		0
Administrative Support	1		
Management Employees	1		
<b>Total</b>	<b>6</b>		
<b>2. Coordination Contractors Employee Information</b>			
			<b>Hours</b>
Full-Time Drivers	0		0
Part-Time Drivers	0		0
Volunteer Drivers	0		0
<b>Total Hours:</b>			0
Maintenance Employees	0		
Dispatchers	0		
Schedulers	0		
Call Intake/Reserv./Cust. Serv.	0		



Other Operations Employees	0	
		<b>Hours</b>
Other Volunteers	0	0
Administrative Support	0	
Management Employees	0	
<b>Total</b>	0	
		<b>TOTAL HOURS: 3136</b>

# FLCTD

## Annual Operations Report

### Section VI: Revenue Sources

County: <b>Hamilton</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Ready</b>			
<b>Section VI: Financial Data</b>			
<b>1. Detailed Revenue and Trips Provided by Funding Source</b>			
<b>Revenue Source</b>	<b>CTC and Transportation Providers</b>	<b>Coordination Contractors</b>	<b>TOTAL REVENUES</b>
<b>Agency for Health Care Administration</b>			
Medicaid Non-Emergency	\$7,489.00	\$0.00	\$7,489.00
Medicaid Non-Emergency (under fixed fee service with AHCA)	\$12,614.00	\$0.00	\$12,614.00
<b>Agency for Persons with Disabilities</b>			
Comm Care for Dis Adults/Aging & Adult Services	\$0.00	\$0.00	\$0.00
Developmental Services	\$5,992.00	\$0.00	\$5,992.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Agency for Workforce Innovation</b>			
WAGES/Workforce Board	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Commission for the Transportation Disadvantaged</b>			
Non-Sponsored Trip Program	\$70,721.00	\$0.00	\$70,721.00

Non-Sponsored Cap. Equip.	\$0.00	\$0.00	\$0.00
Rural Capital Equip.	\$3,000.00	\$0.00	\$3,000.00
TD Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Children and Families</b>			
Alcohol, Drug Abuse & Mental Health Program	\$0.00	\$0.00	\$0.00
Family Safety & Preservation	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Community Affairs</b>			
Community Services	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Education</b>			
Carl Perkins Vocational Ed. Act	\$0.00	\$0.00	\$0.00
Division of Blind Services	\$0.00	\$0.00	\$0.00
Vocational Rehabilitation	\$82.00	\$0.00	\$82.00
Day Care Programs	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Elder Affairs</b>			
Older Americans Act	\$0.00	\$0.00	\$0.00
Community Care for the Elderly	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Health</b>			
Children's Medical Services	\$0.00	\$0.00	\$0.00
Office of Disability Deter.	\$14.00	\$0.00	\$14.00

County Public Health Unit	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Juvenile Justice</b>			
(specify)	\$0.00	\$0.00	\$0.00
<b>Department of Transportation</b>			
49 USC 5307 (Section 9)	\$0.00	\$0.00	\$0.00
49 USC 5310 (Section 16)	\$8,514.00	\$0.00	\$8,514.00
49 USC 5311 (Section 18)	\$40,314.00	\$0.00	\$40,314.00
49 USC 5311(f) (Section 18i)	\$0.00	\$0.00	\$0.00
Block Grant	\$0.00	\$0.00	\$0.00
Service Development	\$0.00	\$0.00	\$0.00
Commuter Assistance Program	\$549.00	\$0.00	\$549.00
Other DOT (Specify)	\$0.00	\$0.00	\$0.00
<b>Local Government</b>			
School Board Service	\$0.00	\$0.00	\$0.00
Complementary ADA Service	\$0.00	\$0.00	\$0.00
County Cash	\$15,603.00	\$0.00	\$15,603.00
County In-Kind	\$0.00	\$0.00	\$0.00
City Cash	\$0.00	\$0.00	\$0.00
City In-Kind	\$0.00	\$0.00	\$0.00
Other Cash (specify)	\$0.00	\$0.00	\$0.00
Other In-Kind (specify)	\$0.00	\$0.00	\$0.00
<b>Local Non-Government</b>			
Farebox	\$2,281.00	\$0.00	\$2,281.00

Donations, Contributions	\$14.00	\$0.00	\$14.00
In-Kind Services	\$0.00	\$0.00	\$0.00
Other Non-Government	\$1,653.00	\$0.00	\$1,653.00
<b>Other Federal or State Programs</b>			
(specify)Dept of Revenue	\$2,043.00	\$0.00	\$2,043.00
(specify)UW	\$0.00	\$9,000.00	\$9,000.00
(specify)	\$0.00	\$0.00	\$0.00
<b>GRAND TOTAL:</b>	\$170,883.00	\$9,000.00	\$179,883.00

# FLCTD

## Annual Operations Report

### Section VII: Expense Sources

County: <b>Hamilton</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Ready</b>			
<b>Section VII: Financial Data</b>			
<b>2. Expense Sources</b>			
<b>Expense Item</b>	<b>Community Transportation Coordinator</b>	<b>Coordination Contractor</b>	<b>TOTAL EXPENSES</b>
Labor (501):	\$54,458.00	\$0.00	\$54,458.00
Fringe Benefits (502):	\$17,862.00	\$0.00	\$17,862.00
Services (503):	\$3,173.00	\$0.00	\$3,173.00
Materials and Supplies Cons. (504):	\$15,465.00	\$0.00	\$15,465.00
Utilities (505):	\$2,028.00	\$0.00	\$2,028.00
Casualty and Liability (506):	\$5,104.00	\$0.00	\$5,104.00
Taxes (507):	\$31.00	\$0.00	\$31.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$1,040.00	\$0.00	\$1,040.00
Miscellaneous (509):	\$318.00	\$0.00	\$318.00
Interest (511):	\$141.00	\$0.00	\$141.00
Leases and Rentals (512):	\$695.00	\$0.00	\$695.00
Annual Depreciation (513):	\$28,665.00	\$0.00	\$28,665.00
Contributed Services (530):	\$0.00	\$0.00	\$0.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
<b>GRAND TOTAL:</b>	\$128,980.00	\$0.00	\$128,980.00

**PERFORMANCE TRENDS - SUWANNEE VALLEY TRANSIT AUTHORITY  
HAMILTON, COUNTY**

PERFORMANCE STANDARD	MEASURE	Fiscal Year 2012/2013	Fiscal Year 2013/2014	Fiscal Year 2014/2015	Percent Change (2013/2014 - 2014/2015)
TOTAL SERVICE	Passenger Trips	18,548	12,749	4,202	-203%
	Revenue Vehicle Miles	232,626	403,096	47,814	-743%
	Vehicle Miles	274,066	674,846	57,243	-1079%
	Driver Hours	16,280	19,400	3,136	-519%
	Passenger Trips/Revenue Vehicle Miles	0.08	0.03	0.09	64%
SERVICE EFFECTIVENESS	Passenger Trips/Vehicle Miles	0.07	0.02	0.07	74%
	Passenger Trips/DriverHours	1.14	0.66	1.34	51%
	Revenue Vehicle Miles/Vehicle Miles	0.85	0.60	0.84	28%
	Revenue	\$780,330.00	\$963,486.00	\$179,883.00	-436%
COST EFFECTIVENESS & EFFICIENCY	Expenses	\$759,557.00	\$931,975.00	\$128,980.00	-623%
	Cost/Passenger Trip	\$40.95	\$73.10	\$30.69	-138%
	Cost/Vehicle Mile	\$2.77	\$1.38	\$2.25	39%
	Cost/Vehicle	\$84,395.22	\$116,496.88	\$32,245.00	-261%
	Cost/Driver Hour	\$46.66	\$48.04	\$41.13	-17%
	Vehicles	9	8	4	-100%
	Passenger Trips/Vehicle	2,061	1,594	1,051	-52%
VEHICLE UTILIZATION	Total Vehicle Miles/Vehicle	30,452	84,356	14,311	-489%
	Revenue Vehicle Miles/Vehicle	25,847	50,387	11,954	-322%
	Vehicle Miles/Driver Hour	17	35	18	-91%
	Revenue Vehicle Miles/Driver Hour	14	21	15	-36%
	Vehicle Hours/Vehicle	1,809	2,425	784	-209%
	Accidents	0	0	0	#DIV/0!
	Accidents/100,000 Miles	0	0	0	#DIV/0!
SAFETY	Miles Between Roadcalls	272,138	272,138	57,243	-375%
	No Shows	542	108	70	-54%
	Roadcalls	1	0	0	#DIV/0!
	Trip Denials	9	16	5	-220%
SERVICE AVAILABILITY					

Source: Suwannee Valley Transit Authority Annual Operations Reports





# FLCTD

## Annual Operations Report

### Section I: Face Sheet

County: <b>Suwannee</b>	Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>
<b>Status: Submitted to FLCTD</b>	
<b>Report Date:</b>	09/11/2015
<b>Period Covered:</b>	July 1, 2014 - June 30, 2015
<b>Coordinator's Name:</b>	Suwannee Valley Transit Authority
<b>Address:</b>	1907 Voyles Street, S.W.
<b>City:</b>	Live Oak
<b>Zip Code:</b>	32064
<b>Service Area:</b>	Suwannee
<b>Contact Person:</b>	Larry Sessions/Felonzie Raggins
<b>Title:</b>	Administrator / Deputy Finance Director
<b>Phone:</b>	(386) 362 - 5332
<b>Fax:</b>	(386) 219 - 0157
<b>Email:</b>	larry.sessions@ridesvta.com
<b>Network Type:</b>	Partial Brokerage
<b>Organization Type:</b>	Public Transit Authority
<b>CTC Certification:</b>	
<p>I, Larry Sessions, as the authorized Community Transportation Coordinator (CTC) Representative, hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions.</p>	
<b>CTC Representative (signature)</b>	
<div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>	
<b>LCB Statement:</b>	
<p>I, _____, as the local Coordinating Board Chairperson, hereby, certify in accordance with Rule 41-2.007(7) F.S. that the local Coordinating Board has reviewed this report and the Planning Agency has received a copy.</p>	
<b>LCB Signature</b>	
<div style="border-bottom: 1px solid black; height: 1.2em; width: 100%;"></div>	

**FLCTD**  
**Annual Operations Report**  
**Section II: General Info**

County: **Suwannee**

Fiscal Year: **July 1, 2014 - June 30, 2015**

Status: **Submitted to FLCTD**

**Section II: Coordinated System General Information**

**1. Provider Listing (include the CTC, if the CTC provides transportation services)**

Number of Private Non-Profits: **1**

Number of Private For-Profits: **0**

**Public Entities:**

School Board: **0**

Municipality: **0**

County: **0**

Transit Authority: **1**

Other: **0**

**Total: 2**

**2. How many of the providers listed in 1 are coordination contractors?**

**1**

# FLCTD

## Annual Operations Report

### Section III: Passenger Trip Info

County: <b>Suwannee</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section III: Passenger Trip Information</b>			
<b>1a. One-Way Passenger Trips</b>			
<b>Type of Service</b>	<b>Service Area</b>		
<b>Fixed Route/Fixed Schedule</b>	<b>Within</b>	<b>Outside</b>	<b>Total</b>
Daily Trip Tickets	0	0	0
Weekly Passes	0	0	0
Monthly Passes	0	0	0
<b>Deviated Fixed Route Service</b>	0	0	0
<b>Paratransit</b>			
Ambulatory	21265	120	21385
Non-Ambulatory	2197	9	2206
Stretcher	1	0	1
<b>Other Services</b>			
School Board Trips	0	0	0
Total Trips	23463	129	23592
<b>1b. How many of the total trips were provided by contracted transportation providers (do not include the CTC, if the CTC provides transportation services)?</b>			0
<b>1c. How many of the total trips were provided by coordination contractors?</b>			10225
<b>2. One-Way Trips by Funding Source</b>			
Agency for Health Care Administration	1668		
Agency for Persons with Disabilities	11890		
Agency for Workforce Innovation	0		
Commission for the Transportation Disadvantaged	7755		
Department of Children and Families	0		
Department of Community Affairs	0		
Department of Education	3		
Department of Elder Affairs	0		
Department of Health	1		

Department of Juvenile Justice	0
Florida Department of Transportation	0
Local Government	1
Local Non-Government	2273
Other Federal Programs	1
<b>Total:</b>	23592
<b>3. One-Way Trips by Passenger Type</b>	
Was this information obtained by sampling?	no
<b>Elderly</b>	
Low Income:	0
Disabled:	832
Low Income and Disabled:	3209
Other:	0
<b>Children</b>	
Low Income:	0
Disabled:	11
Low Income and Disabled:	47
Other:	0
<b>Other</b>	
Low Income:	8
Disabled:	11222
Low Income and Disabled:	5717
Other:	2546
<b>Total:</b>	23592
<b>4. One-Way Passenger Trips - by Purpose</b>	
Was this information obtained by sampling?	no
Medical Purpose	7253
Employment Purpose	3069
Education/Training/Daycare Purpose	10261
Nutritional Purpose	49
Life-Sustaining/Other Purpose	2960
<b>Total:</b>	23592
<b>5. Unduplicated Passenger Head Count</b>	
5a. Paratransit/Deviated Fixed Route/ School Brd	405

5b. Fixed Route	0
<b>Total:</b>	405
<b>6. Number of Unmet Trip Requests</b>	10
<b>Unmet Trip Requests by Type of Trip</b>	
Unmet Medical	8
Unmet Employment	1
Unmet Education/Training/Daycare	0
Unmet Nutritional	0
Unmet Life-Sustaining/Other	1
<b>Reason Trip was Denied (Optional)</b>	
Lack of Funding:	6
Lack of Vehicle Availability:	0
Lack of Driver Availability:	0
Other:	4
<b>7.) Number of Passenger No-shows</b>	223
<b>Passenger No-Shows by Funding Source (optional)</b>	
CTD:	166
AHCA:	1
AWI:	0
DCF:	0
APD:	37
DOE:	0
DOEA:	0
Other:	19
<b>8. Complaints</b>	
Complaints by Service	5
Complaints by Policy	0
Complaints by Vehicle	0
Complaints by Other	0
<b>Complaint Total:</b>	5
<b>9. Commendations</b>	
Commendations by CTC	4

Commendations by Transportation Providers	0
Commendations by Coordination Contractors	0
<b>Total Commendations:</b>	<b>4</b>

# FLCTD

## Annual Operations Report

### Section IV: Vehicle Info

County: <b>Suwannee</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section IV: Vehicle Information</b>			
<b>1. Mileage Information</b>			
	<b>Vehicle Miles</b>		<b>Revenue Miles</b>
CTC:	182139		152136
Transportation Providers:	0		0
Coordination Contractors:	75360		64056
School Bus Utilization Agreement:	0		0
<b>Total:</b>	257499		216192
<b>2. Roadcalls</b>			
	2		
<b>3. Accidents</b>			
	<b>Chargeable</b>		<b>Non-Chargeable</b>
Total Accidents Person Only:	0		0
Total Accidents Vehicle Only:	0		0
Total Accidents Person & Vehicle:	0		0
<b>Total Accidents:</b>	0		0
<b>Grand Total:</b>	0		
<b>4. Total Number of Vehicles</b>			
	19		
		<b>Count</b>	<b>Percentage</b>
a. Total vehicles that are wheelchair accessible:		16	84.00%
b. Total vehicles that are stretcher equipped:		1	5.00%

# FLCTD

## Annual Operations Report

### Section V: Employee Info

County: <b>Suwannee</b>		Fiscal Year: <b>July 1, 2014 - June 30, 2015</b>	
<b>Status: Submitted to FLCTD</b>			
<b>Section V: Employee Information</b>			
<b>1. CTC and Transportation Provider Employee Information</b>			
			<b>Hours</b>
Full-Time Drivers	6		8937
Part-Time Drivers	2		1041
Volunteer Drivers	0		0
<b>Total Hours:</b>			9978
Maintenance Employees	1		
Dispatchers	1		
Schedulers	1		
Call Intake/Reserv./Cust. Serv.	1		
Other Operations Employees	0		
			<b>Hours</b>
Other Volunteers	0		0
Administrative Support	2		
Management Employees	1		
<b>Total</b>	<b>15</b>		
<b>2. Coordination Contractors Employee Information</b>			
			<b>Hours</b>
Full-Time Drivers	0		0
Part-Time Drivers	5		3120
Volunteer Drivers	0		0
<b>Total Hours:</b>			3120
Maintenance Employees	0		
Dispatchers	0		
Schedulers	0		
Call Intake/Reserv./Cust. Serv.	0		



Other Operations Employees	0	
		<b>Hours</b>
Other Volunteers	0	0
Administrative Support	1	
Management Employees	1	
<b>Total</b>	7	
		<b>TOTAL HOURS: 13098</b>

# FLCTD

## Annual Operations Report

### Section VI: Revenue Sources

County: Suwannee		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Submitted to FLCTD			
Section VI: Financial Data			
1. Detailed Revenue and Trips Provided by Funding Source			
Revenue Source	CTC and Transportation Providers	Coordination Contractors	TOTAL REVENUES
Agency for Health Care Administration			
Medicaid Non-Emergency	\$23,828.00	\$0.00	\$23,828.00
Medicaid Non-Emergency (under fixed fee service with AHCA)	\$40,134.00	\$0.00	\$40,134.00
Agency for Persons with Disabilities			
Comm Care for Dis Adults/Aging & Adult Services	\$0.00	\$0.00	\$0.00
Developmental Services	\$19,067.00	\$122,977.00	\$142,044.00
Other (specify)	\$0.00	\$0.00	\$0.00
Agency for Workforce Innovation			
WAGES/Workforce Board	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
Commission for the Transportation Disadvantaged			
Non-Sponsored Trip Program	\$225,022.00	\$0.00	\$225,022.00

Non-Sponsored Cap. Equip.	\$0.00	\$0.00	\$0.00
Rural Capital Equip.	\$9,545.00	\$0.00	\$9,545.00
TD Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Children and Families</b>			
Alcohol, Drug Abuse & Mental Health Program	\$0.00	\$0.00	\$0.00
Family Safety & Preservation	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Community Affairs</b>			
Community Services	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Education</b>			
Carl Perkins Vocational Ed. Act	\$0.00	\$0.00	\$0.00
Division of Blind Services	\$0.00	\$0.00	\$0.00
Vocational Rehabilitation	\$262.00	\$0.00	\$262.00
Day Care Programs	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Elder Affairs</b>			
Older Americans Act	\$0.00	\$0.00	\$0.00
Community Care for the Elderly	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Health</b>			
Children's Medical Services	\$0.00	\$0.00	\$0.00
Office of Disability Deter.	\$46.00	\$0.00	\$46.00

County Public Health Unit	\$0.00	\$0.00	\$0.00
Other (specify)	\$0.00	\$0.00	\$0.00
<b>Department of Juvenile Justice</b>			
(specify)	\$0.00	\$0.00	\$0.00
<b>Department of Transportation</b>			
49 USC 5307 (Section 9)	\$0.00	\$0.00	\$0.00
49 USC 5310 (Section 16)	\$27,090.00	\$0.00	\$27,090.00
49 USC 5311 (Section 18)	\$128,270.00	\$0.00	\$128,270.00
49 USC 5311(f) (Section 18i)	\$0.00	\$0.00	\$0.00
Block Grant	\$0.00	\$0.00	\$0.00
Service Development	\$0.00	\$0.00	\$0.00
Commuter Assistance Program	\$1,746.00	\$0.00	\$1,746.00
Other DOT (Specify)	\$0.00	\$0.00	\$0.00
<b>Local Government</b>			
School Board Service	\$0.00	\$0.00	\$0.00
Complementary ADA Service	\$0.00	\$0.00	\$0.00
County Cash	\$49,647.00	\$0.00	\$49,647.00
County In-Kind	\$0.00	\$0.00	\$0.00
City Cash	\$0.00	\$0.00	\$0.00
City In-Kind	\$0.00	\$0.00	\$0.00
Other Cash (specify)	\$0.00	\$0.00	\$0.00
Other In-Kind (specify)	\$0.00	\$0.00	\$0.00
<b>Local Non-Government</b>			
Farebox	\$7,256.00	\$0.00	\$7,256.00

Donations, Contributions	\$44.00	\$0.00	\$44.00
In-Kind Services	\$0.00	\$0.00	\$0.00
Other Non-Government	\$5,259.00	\$0.00	\$5,259.00
<b>Other Federal or State Programs</b>			
(specify)Dept of Revenue	\$6,501.00	\$0.00	\$6,501.00
(specify)	\$0.00	\$0.00	\$0.00
(specify)	\$0.00	\$0.00	\$0.00
<b>GRAND TOTAL:</b>	\$543,717.00	\$122,977.00	\$666,694.00

# FLCTD

## Annual Operations Report

### Section VII: Expense Sources

County: Suwannee		Fiscal Year: July 1, 2014 - June 30, 2015	
Status: Submitted to FLCTD			
Section VII: Financial Data			
2. Expense Sources			
Expense Item	Community Transportation Coordinator	Coordination Contractor	TOTAL EXPENSES
Labor (501):	\$173,277.00	\$48,326.00	\$221,603.00
Fringe Benefits (502):	\$56,833.00	\$1,908.00	\$58,741.00
Services (503):	\$10,097.00	\$0.00	\$10,097.00
Materials and Supplies Cons. (504):	\$49,207.00	\$37.00	\$49,244.00
Utilities (505):	\$6,452.00	\$0.00	\$6,452.00
Casualty and Liability (506):	\$16,241.00	\$4,786.00	\$21,027.00
Taxes (507):	\$98.00	\$0.00	\$98.00
Purchased Transportation Services (508)			
Bus Pass Expenses:	\$0.00	\$0.00	\$0.00
School Bus Expenses:	\$0.00	\$0.00	\$0.00
Other:	\$3,308.00	\$0.00	\$3,308.00
Miscellaneous (509):	\$1,013.00	\$0.00	\$1,013.00
Interest (511):	\$450.00	\$0.00	\$450.00
Leases and Rentals (512):	\$2,211.00	\$0.00	\$2,211.00
Annual Depreciation (513):	\$91,208.00	\$0.00	\$91,208.00
Contributed Services (530):	\$0.00	\$0.00	\$0.00
Allocated Indirect Expenses:	\$0.00	\$0.00	\$0.00
GRAND TOTAL:	\$410,395.00	\$55,057.00	\$465,452.00

**PERFORMANCE TRENDS - SUWANNEE VALLEY TRANSIT AUTHORITY  
SUWANNEE COUNTY**

PERFORMANCE STANDARD	MEASURE	Fiscal Year 2012/13	Fiscal Year 2013/14	Fiscal Year 2014/15	Percent Change 2013/14-2014/15
TOTAL SERVICE	Passenger Trips	25,047	21,264	23,592	10%
	Revenue Vehicle Miles	314,136	279,595	216,192	-29%
	Vehicle Miles	370,095	406,502	257,499	-58%
SERVICE EFFECTIVENESS	Average Miles per Trip	14.78	19.12	10.91	-75%
	Passenger Trips/Revenue Vehicle Miles	0.08	0.08	0.11	30%
	Passenger Trips/Vehicle Miles	0.07	0.05	0.09	43%
	Revenue Vehicle Miles/Vehicle Miles	0.85	0.69	0.84	18%
COST EFFECTIVENESS & EFFICIENCY	Revenue	\$1,053,751	\$983,925	\$666,694	-48%
	Expenses	\$1,025,697	\$931,974	\$465,452	-100%
	Cost/Passenger Trip	\$40.95	\$43.83	\$19.73	-122%
	Cost/Vehicle Mile	\$2.77	\$2.29	\$1.81	-27%
	Cost/Vehicle	\$85,474.75	\$62,131.60	\$24,497.47	-154%
VEHICLE UTILIZATION	Vehicles	12	15	19	21%
	Passenger Trips/Vehicle	2,087	1,418	1,242	-14%
	Vehicle Miles/Total Vehicle	30,841	27,100	13,553	-100%
	Revenue Vehicle Miles/Vehicle	26,178	18,640	11,379	-64%
SAFETY	Accidents	0	1	0	#DIV/0!
	Accidents/100,000 Miles	0.00	0.25	0.00	#DIV/0!
SERVICE AVAILABILITY	Miles Between Roadcalls	370,095	#DIV/0!	128,750	#DIV/0!
	No Shows	731	890	223	-299%
	Roadcalls	1	0	2	100%
	Trip Denials	14	31	10	-210%

Source: Suwannee Valley Transit Authority Annual Operations Reports







November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Rural Area Capital Assistance Program Grant Awards

RECOMMENDATION

**For information only. No action required.**

BACKGROUND

The Rural Area Capital Assistance Grant Program is administered by the Florida Commission for the Transportation Disadvantaged. Grant funds awarded by this program can be used to address capital transportation needs in rural areas of the State. Eligible applicants are designated Community Transportation Coordinators.

Attached are the grant awards approved by the Florida Commission for the Transportation Disadvantaged. If you have any questions concerning this matter, please do not hesitate to contact me.

**Attachment**

t:\lynn\td2015\colhamsuw\memos\rcagawards.docx



**State of Florida**  
**Commission for the Transportation Disadvantaged**  
**Commission Business Meeting**

**MEETING DATE:** September 8, 2015

**AGENDA ITEM:**

VI. 2015 Shirley Conroy Rural Area Capital Assistance Program Grant Award Recommendations

**BACKGROUND INFORMATION:**

The Department of Transportation authorizes a transfer of \$1.4 million to the Transportation Disadvantaged Trust Fund in its 5-year work program. The purpose of the allocation is to assist rural areas with the purchase of capital equipment.

Grant Application packages were emailed to eligible applicants on July 17, 2015, with a deadline of August 14, 2015. The Shirley Conroy Rural Area Capital Assistance Program Grant Subcommittee met on August 28, 2015. In attendance were Commissioner Mike Willingham (via conference call); Agency Advisors Diane Harris, Erin Schepers, and Bob Westbrook; Sheri Powers and Bill Hearndon from Commission staff. Twenty-two applications were submitted totaling \$2,287,466.59. The committee reviewed all capital equipment requests and the award recommendations are attached.

With decreased projected revenues for FY2015-16, FDOT Secretary Boxold permitted the Commission to move funding, if necessary, from the capital grant program to the Trip and Equipment Grant fund to keep that grant whole and not affect statewide Trip and Equipment Grant allocations. Because of the potential one time funding shift, contingency projects have also been identified to implement pending funding availability later in the fiscal year.

**ATTACHMENTS:**

2015 Shirley Conroy Rural Area Capital Equipment Support Grant Recommendations

**EXECUTIVE DIRECTOR RECOMMENDATION/MOTION:**

Recommend that the Commission approve the Shirley Conroy Rural Area Capital Assistance Program Grant Sub-Committee Report.



Steve Holmes

Executive Director

Date: September 8, 2015

**ACTION TAKEN AT MEETING:**



2015-16 Shirley Conroy Rural Area Capital Assistance Program Grant Summary										
County	Applicant Name	Agency Type / System Type	Capital Equipment Requested (Prioritized as listed)	Staff Notes	Total Project Cost (100%)	TD Dollar Amount (90% or 100% REDI)	Funding	Contingency Funding	Not Funding	Committee Recommended Projects to Fund
Alachua	MV Contract Transportation, Inc.	For-Profit Urban	Two 12 ambulatory 2 wheelchair cutaways 14,500 GVWR V10 Gas 23 foot (\$72,000 each)	Replacing two 2003 buses with 247,938 miles and 248,272 miles.	\$144,000.00	\$129,600.00			\$129,600.00	
Baker	Baker County Council on Aging, Inc.	Non-Profit Rural	1) Set of four Wireless Portable Lifts (54,000 lb) \$26,138 2) 18,000 lb capacity short jack stand \$2,774 3) WPLS Light Kit (2) LED Flood lights \$714 4) 40,000 lb capacity tall jack stand \$1,514	(Requesting waiver of match due to REDI.)	\$31,140.00	\$31,140.00		\$31,140.00		Contingency fund all requested projects.
Bay	Bay County Board of County Commissioners	Govt Urban	1) In-Car video camera system and wireless downloading infrastructure \$21,095 2) Office furniture \$27,622 3) Audio/video equipment and installation \$13,057 4) Video security system for transit facility \$13,674 5) Dispatch console with software \$10,856	Safety, training, and facility equipment.	\$86,304.00	\$77,673.60			\$77,673.60	
Calhoun	Calhoun County Senior Citizens Association, Inc.	Non-Profit Rural	One 2 wheelchair paratransit vehicle with AM/FM stereo, front and rear heat/air, hawkkeye, altro flooring, and any other otopns as needed. 22 foot or longer gasoline bus with Braun lift, 8 ambulatory seats and 2 wheelchair positions.	Replacing a 2009 cutaway with over 147,000 miles.	\$70,199.00	\$63,179.10		\$63,179.10		Contingency fund all requested projects.
Clay	Clay County Council on Aging	Non-Profit Rural	1) Three Ford Flex Crossovers or Toyota minivans with radio, Mobile Data Terminal, and related equipment (\$35,579 each) 2) Three computers with dual monitors (\$1,500 each). (Computer quote and pricing is for two computers.)	Expanding capacity with fuel efficient vehicles with lower capacities. No mention of use of computers/monitors.	\$109,890.00	\$98,901.00	\$64,042.20		\$34,858.80	Fund two vehicles.
Collier	Collier County Board of County Commissioners	Govt Urban	One Gaval cutaway vehicle with 5 wheelchair positions, equipped with wheelchair lift, vehicle has capacity for 12 passengers seating (including cameras, ITS system, etc.) and one two-way radio.	Replacing an unspecified vehicle within their current fleet. Did not include order form in grant application.	\$108,728.00	\$97,855.20			\$97,855.20	
Columbia, Hamilton, Suwannee	Suwannee Valley Transit Authority	Govt Rural	1) One 2014 23 foot Ford gasoline cutaway with wheelchair lift (\$79,394) 2) One computer server with software (\$11,473.63) 3) One 2015 Dodge Caravan (\$22,662)	Replacement of aging fleet and computer server. REQUESTING WAIVER OF MATCH DUE TO REDI.	\$113,529.63	\$113,529.63	\$22,662.00	\$79,394.00	\$11,473.63	Fund Dodge Caravan. contingency fund cutaway vehicle.
Dixie, Gilchrist	Suwannee River Economic Council, Inc.	Non-Profit Rural	One small cutaway van (gas).	Replacing a 2009 cutaway with 185,685 miles. (Requesting waiver of match due to REDI.)	\$65,000.00	\$65,000.00	\$65,000.00			Fund the project as requested.
Gadsden, Jefferson	Big Bend Transit, Inc.	Non-Profit Rural	Two 23 foot cutaway buses (12 ambulatory, 2 wheelchair passengers), wheelchair lifts, wheelchair securements, gasoline vehicles.	Replacing a 2008 bus with 215,820 miles and a 2009 bus with 280,764 miles. Did not include order form in grant application.	\$143,000.00	\$128,700.00	\$64,350.00		\$64,350.00	Fund one vehicle.
Glades, Hendry	Good Wheels, Inc.	Non-Profit Rural	Three paratransit buses (diesel).	Replacing three 2007 buses with 312,000, 345,000, and 364,000 miles. (Requesting waiver of match due to REDI.)	\$245,799.00	\$245,799.00	\$163,866.00		\$81,933.00	Fund two vehicles.
Gulf	Gulf County Association for Retarded Citizens, Inc.	Non-Profit Rural	1) One gasoline powered highly fuel efficient 4-door passenger vehicle (\$22,000) 2) Security system equipment including a replacement DVR, cellular communicator device two additional surveillance cameras. (\$2,500)	Expansion of fleet with a smaller capacity vehicle and replacement of 2009 facility security camera system. Requesting wavier of match due to REDI.	\$24,500.00	\$24,500.00	\$22,000.00		\$2,500.00	Fund one vehicle.

2015-16 Shirley Conroy Rural Area Capital Assistance Program Grant Summary										Committee Recommended Projects to Fund
County	Applicant Name	Agency Type / System Type	Capital Equipment Requested (Prioritized as listed)	Staff Notes	Total Project Cost (100%)	TD Dollar Amount (90% or 100% REDI)	Funding	Contingency Funding	Not Funding	
Hardee, Highlands, Okeechobee	MV Contract Transportation, Inc.	For Profit Rural	Three Ford 6 ambulatory 2 wheelchair cutaways 11,500 GVWR 21 foot 5.4 L Gas.	New CTC for the service area effective November 1, 2015. Three 2012 MV-1 vehicles to be transferred (1 eligible for retirement, 2 at 50,000 miles). Vehicles to be used to replace contractor vehicles with high ages and mileages.	\$216,000.00	\$194,400.00	\$129,600.00		\$64,800.00	Fund two vehicles.
Hernando	Mid-Florida Community Services, Inc.	Non-Profit Rural	Two 21 foot cutaway transit vehicles with two wheelchair positions side load with onboard cameras, security systems, and reverse camera and monitoring systems and interior/exterior signage for both.	Replacement of two 2008 buses (three indicated on vehicle inventory with mileages greater than 176,628).	\$181,000.00	\$162,900.00	\$81,450.00		\$81,450.00	Fund one vehicle.
Jackson	Jackson County Transportation, Inc, dba Jtrans	Non-Profit Rural	Two 2015 22 foot cutaway buses, gasoline, 14 ambulatory (\$65,664 each).	Replacing two 2010 vehicles with 87,985 miles and 130,228 miles. (Requesting waiver of match due to REDI.)	\$131,328.00	\$131,328.00	\$65,664.00		\$65,664.00	Fund one vehicle.
Lafayette	Suwannee River Economic Council, Inc.	Non-Profit Rural	MV-1 (gas).	Replacing a 2003 van with 116,990 miles.	\$50,000.00	\$45,000.00	\$45,000.00			Fund the project as requested.
Leon	StarMetro / City of Tallahassee	Govt Urban	Two ADA compliant Dodge Grand Caravan SE 6,050 GVWR 202.5 inches 3.6 L V-6 Gas powered Sure-Lok Titan and Q'Straint securement systems, camera security system, driver safety partition, power rear sliding doors, Motorola XTL 2500 radio.	Expansion of fleet.	\$95,074.00	\$85,566.60			\$85,566.60	
Levy	Levy County Board of County Commissioners dba Levy County Transit	Govt Rural	One 23' Ford 6.8 V10 Gas Engine Turtle Top Bus 12 seats and 2 wheelchair positions.	Replacing a 2006 bus with 384,552 miles and increasing capacity. (Requesting waiver of match due to REDI.)	\$73,259.00	\$73,259.00	\$73,259.00			Fund the project as requested.
Liberty	Liberty County Board of County Commissioners / Liberty County Transit	Govt Rural	Low floor minivan with folding seats (including radio safety equipment, and lettering)	Replacing a 2010 Dodge Caravan 115,807 miles.	\$49,057.00	\$44,151.30		\$44,151.30		Contingency fund all requested projects.
Orange, Osceola, Seminole	Central Florida Regional Transportation Authority / LYNX	Govt Urban	Three Odyssey Fareboxes 30 inches super short.	For improved efficiency on flex routes.	\$40,017.00	\$36,015.30			\$36,015.30	
Putnam	Ride Solution, Inc.	Non-Profit Rural	Three Mobility Ventures LLC DX Model MV-1 (\$47,498 each).	Expansion of fleet with lower capacity vehicles.	\$142,494.00	\$128,244.60	\$85,496.40		\$42,748.20	Fund two vehicles.
Union	Suwannee River Economic Council, Inc.	Non-Profit Rural	1) One small cutaway van (gas) \$65,000 2) One MV-1 (gas) \$50,000	SREC is a new CTC for Union County. When the previous provider left, only one TD funded vehicle was eligible for transition from the prior CTC to SREC. (Requesting waiver of match due to REDI.)	\$115,000.00	\$115,000.00	\$115,000.00			Fund the project as requested.
Wakulla	Wakulla County Transportation	Non-Profit Rural	1) One Mobility Ventures DX Model 6,600 GVWR 205 inches 4.6 L V-8 Gas with Lettering (\$46,948) 2) Four Samsung ATIV One 7 Curved 27" all-in- one Intel Core i5 8GB Memory (\$5,199.96)	Replacing a 2007 van with 276,373 miles.	\$52,147.96	\$46,933.16	\$46,933.16			Fund the project as requested.
Total					\$2,287,466.59	\$2,138,675.49	\$1,044,322.76	\$217,864.40	\$876,488.33	



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November 10, 2015

TO: Columbia, Hamilton and Suwannee Transportation Disadvantaged Coordinating Board  
 FROM: Lynn Godfrey, AICP, Senior Planner  
 SUBJECT: Operations Reports

#### RECOMMENDATION

**No action required. This agenda item is for information only.**

#### BACKGROUND

Attached are the following reports:

1. Suwannee Valley Transit Authority Operations Report;
2. Fiscal Year 2015/16 Transportation Disadvantaged Trust Fund Status Report;
3. Complaint Report; and
4. Unmet Transportation Needs Report.

If you have any questions regarding the attached information, please contact me.

#### Attachments

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QUARTERLY OPERATING REPORT  
COLUMBIA HAMILTON SUWANNEE  
JULY AUGUST SEPT 2015

JAN (CK)

OPERATING DATA	OPERATOR										TOTAL
	SVTA JULY	SVTA AUGUST	SVTA SFPTEMRFR								
TOTAL TRIPS	2,654	2,752	2,870	0	0	0	0	0	0	0	8,276
Arc of N FL	497	504	501	0	0	0	0	0	0	0	1,502
TD Trust Fund	2,008	2,103	2,204	0	0	0	0	0	0	0	6,315
Vocational Rehabilitation	0	0	0	0	0	0	0	0	0	0	0
Disability Determination	0	0	0	0	0	0	0	0	0	0	0
Ryan White	0	0	2	0	0	0	0	0	0	0	2
Acess 2 Care	36	25	18	0	0	0	0	0	0	0	79
Other	113	120	145	0	0	0	0	0	0	0	378
									VERIFIED		8,276
TOTAL DOLLARS INVOICED	66,211	66,263	66,084	0	0	0	0	0	0	0	\$198,557.52
Arc of N FL	5,763	5,917	5,811	0	0	0	0	0	0	0	\$17,490.60
TD Trust Fund	59,929	59,913	59,913	0	0	0	0	0	0	0	\$179,755.00
Vocational Rehabilitation	0	0	0	0	0	0	0	0	0	0	\$0.00
Disability Determination	0	0	0	0	0	0	0	0	0	0	\$0.00
Ryan White	0	0	65	0	0	0	0	0	0	0	\$65.20
Acess 2 Care	520	432	295	0	0	0	0	0	0	0	\$1,246.72
Other	0	0	0	0	0	0	0	0	0	0	\$0.00
									VERIFIED		\$198,567.52
TRIP PURPOSE	-	-	-	-	-	-	-	-	-	-	-
Adult Daycare	1	0	2	0	0	0	0	0	0	0	3
Day Treatment	29	30	24	0	0	0	0	0	0	0	83
Dialysis	480	442	472	0	0	0	0	0	0	0	1,394
Education/Training	812	828	852	0	0	0	0	0	0	0	2,492
Medical/Life Sustaining	835	887	934	0	0	0	0	0	0	0	2,656
Nutrition	236	239	255	0	0	0	0	0	0	0	730
Other	46	68	65	0	0	0	0	0	0	0	179
Pharmacy	18	20	12	0	0	0	0	0	0	0	50
Shopping	92	115	117	0	0	0	0	0	0	0	324
Eligibility	0	0	0	0	0	0	0	0	0	0	0
Social	34	73	68	0	0	0	0	0	0	0	175
Substance Abuse Treatment	0	0	0	0	0	0	0	0	0	0	0
Volunteer	14	10	15	0	0	0	0	0	0	0	39
Work	57	40	54	0	0	0	0	0	0	0	151
	2,654	2,752	2,870						verified		8,276
NUMBER OF TRIPS DENIED	6	6	4	0	0	0	0	0	0	0	16

COLUMBIA		HAMILTON		SUWANNEE	
JULY 2015		JULY 2015		JULY 2015	
AMBULATORY	\$19,338.98	AMBULATORY	\$11,397.46	AMBULATORY	\$27,656.24
WC	\$4,296.89	WC	\$0.00	WC	\$7,419.53
TOTAL BILLED TO CTD	\$23,635.87	TOTAL BILLED TO CTD	\$11,397.46	TOTAL BILLED TO CTD	\$35,075.77
AUGUST 2015		AUGUST 2015		AUGUST 2015	
AMBULATORY	\$19,538.30	AMBULATORY	\$11,102.13	AMBULATORY	\$20,751.23
WC	\$4,955.14	WC	\$198.58	WC	\$7,710.98
TOTAL BILLED TO CTD	\$24,493.44	TOTAL BILLED TO CTD	\$11,300.71	TOTAL BILLED TO CTD	\$28,462.21
SEPTEMBER 2015		SEPTEMBER 2015		SEPTEMBER 2015	
AMBULATORY	\$20,251.47	AMBULATORY	\$12,275.15	AMBULATORY	\$20,794.09
WC	\$6,641.19	WC	\$0.00	WC	\$6,549.82
TOTAL BILLED TO CTD	\$26,892.66	TOTAL BILLED TO CTD	\$12,275.15	TOTAL BILLED TO CTD	\$27,343.91
TOTAL BILLED TO CTD	\$75,021.97	TOTAL BILLED TO CTD	\$34,973.32	TOTAL BILLED TO CTD	\$90,881.89

\*\*\*THIS REPORTS REFLECTS ONLY WHAT WAS BILLED TO CTD. IT DOES NOT SHOW THE ACTUAL AMOUNT RECEIVED FROM CTD OR THE ACTUAL REMAINING BALANCE OF THE NON SPONSORED GRANT.

COMPLAINT'S POC	386-330-2525
COUNTY OF RESIDENCE	Driver did not help her with her wheel chair or luggage bringing it off her porch.
COMPLAINT'S ISSUE	Spoke to the driver who stated that she took the wheelchair with bag off porch and helped Ms. Haas to board the bus. Video showed driver did everything correctly and safely helping passenger.
SVTA'S ACTION TAKEN	No corrective action needed.
RESOLUTION	
COMPLAINT #	2015_12
DATE OF COMPLAINT	7/00/2015
TIME OF COMPLAINT	
COMPLAINANT'S NAME	Niece said that driver 134 did not attempt to help load [REDACTED].
COMPLAINT'S POC	
COUNTY OF RESIDENCE	Wrote it in employees record and had driver sign that he would be getting out to assist if needed.
COMPLAINT'S ISSUE	Spoke with driver, driver said that 3 of [REDACTED] folks were helping her into the bus and he didn't honestly know how he could have helped in the limited space. I told the driver that he needed to get out and be ready to assist regardless.
SVTA'S ACTION TAKEN	
RESOLUTION	
COMPLAINT #	2015_13
DATE OF COMPLAINT	7/31/2015
TIME OF COMPLAINT	12:01
COMPLAINANT'S NAME	[REDACTED]
COMPLAINT'S POC	
COMPLAINT'S ISSUE	Said that driver in bus # 44 cut off a couple of vehicles.
SVTA'S ACTION TAKEN	Spoke to [REDACTED] spoke to the driver and pulled the video from 7/31/15
RESOLUTION	Reviewed video did not show any incident for the entire day. driver did not admit anything happened either. Documented incident in drivers file and reminded driver that safety is paramount!
COMPLAINT #	2015_14
DATE OF COMPLAINT	8/12/2015
TIME OF COMPLAINT	14:35
COMPLAINANT'S NAME	[REDACTED]'s niece
COMPLAINT'S POC	
COMPLAINT'S ISSUE	Mr. [REDACTED] missed his appointment
SVTA'S ACTION TAKEN	Checked with driver and dispatch. Program did not allow enough time for driver to get to the appointment on time. Also gave a fare credit to Mr. [REDACTED]
RESOLUTION	Added 30 minutes to program for pickup.
COMPLAINT #	
DATE OF COMPLAINT	
TIME OF COMPLAINT	
COMPLAINANT'S NAME	
COMPLAINT'S POC	
COMPLAINT'S ISSUE	
SVTA'S ACTION TAKEN	
RESOLUTION	
COMPLAINT #	
DATE OF COMPLAINT	
TIME OF COMPLAINT	
COMPLAINANT'S NAME	
COMPLAINT'S POC	
COMPLAINT'S ISSUE	
SVTA'S ACTION TAKEN	
RESOLUTION	
COMPLAINT #	
DATE OF COMPLAINT	
TIME OF COMPLAINT	
COMPLAINANT'S NAME	
COMPLAINT'S POC	
COMPLAINT'S ISSUE	

EMPLOYEE NAME/#	125 (Debbie) & 139 (Julie)
COMMENDATION #	2015_12
DATE OF COMMENDATION	<del>End of Sept</del> 9/3/15
TIME OF COMMENDATION	
RIDER NAME	<del>XXXXXXXXXX</del>
COMMENDATION MADE BY	<del>XXXXXXXXXX</del>
CONTACT #	386-3 <del>XXXXXXXXXX</del>
RIDER'S COUNTY OF RESIDENCE	<del>Harbison</del> Columbia
COMMENDATION TAKEN BY	Teresa & Billy
COMMENDATION	Complimented Debbie and Julie. They were very nice. He stated that all of SVTA employees are the best! He appreciates our service and is very, very happy to have transportation to the VA. He also stated how depressed he has been, but to be able to get out and has made a huge difference in his state of mind.
EMPLOYEE NAME/#	Harvey, Gina, Jeovany
COMMENDATION #	2015_13
DATE OF COMMENDATION	09/14/15
TIME OF COMMENDATION	
RIDER NAME	<del>XXXXXXXXXX</del>
COMMENDATION MADE BY	<del>XXXXXXXXXX</del>
CONTACT #	
RIDER'S COUNTY OF RESIDENCE	Suwannee
COMMENDATION TAKEN BY	DD Raggins
COMMENDATION	Rider wanted to compliment all of the Live Oak drivers for doing such a great job.
EMPLOYEE NAME/#	Thad & Johnny
COMMENDATION #	2015_14
DATE OF COMMENDATION	10/01/15
TIME OF COMMENDATION	3:25
RIDER NAME	Ms. <del>XXXXXXXXXX</del>
COMMENDATION MADE BY	Ms. <del>XXXXXXXXXX</del>
CONTACT #	386-7 <del>XXXXXXXXXX</del>
RIDER'S COUNTY OF RESIDENCE	Columbia
COMMENDATION TAKEN BY	Gloria
COMMENDATION	Called to say how wonderful our service is. She wanted to thank the two drivers that transported her mother. Johnny pick up Ms. <del>XXXXXX</del> and Thad took her back home. She kept stating how wonderful our services at SVTA along with our drivers are.
EMPLOYEE NAME/#	Gina
COMMENDATION #	2015_15
DATE OF COMMENDATION	10/22/15
TIME OF COMMENDATION	
RIDER NAME	<del>XXXXXXXXXX</del>
COMMENDATION MADE BY	<del>XXXXXXXXXX</del>
CONTACT #	
RIDER'S COUNTY OF RESIDENCE	Columbia
COMMENDATION TAKEN BY	Ken Kaemmer
COMMENDATION	<del>XXXXXXXXXX</del> rode from Lake City to Gainesville with Gina. She wanted to commend Gina on doing an awesome job.
EMPLOYEE NAME/#	Multiple
COMMENDATION #	2015_16
DATE OF COMMENDATION	10/27/15
TIME OF COMMENDATION	3:00pm
RIDER NAME	<del>XXXXXXXXXX</del>
COMMENDATION MADE BY	<del>XXXXXXXXXX</del>
CONTACT #	386- <del>XXXXXXXXXX</del>
RIDER'S COUNTY OF RESIDENCE	Columbia
COMMENDATION TAKEN BY	Teresa

35

COMMENDATION	<p>██████████ called to say that another rider's mother came up to our vehicle and complained to him about having to work around his dialysis chair time. She told him that SVTA's Dispatch was rude to her and told her that her daughter would have to work around ██████████'s schedule. ██████████ wanted to make us aware of the incident. He stated that he did not believe that Dispatch was rude to her. He said that they have never been anything but professional to him. He wanted to call and give us a compliment.</p>
EMPLOYEE NAME/#	
COMMENDATION #	
DATE OF COMMENDATION	
TIME OF COMMENDATION	
RIDER NAME	
COMMENDATION MADE BY	
CONTACT #	
RIDER'S COUNTY OF RESIDENCE	
COMMENDATION TAKEN BY	
COMMENDATION	

## UNMET TRIP NEEDS

JULY 2015			
DATE	FROM	TO	REASON
07/07/15	LAKE CITY	LAKE CITY	NO TD FUNDS AVAILABLE
07/08/15	FORT WHITE	GAINESVILLE	NO TD FUNDS AVAILABLE
07/08/15	LAKE CITY	LAKE CITY	NO TD FUNDS AVAILABLE
07/22/15	LIVE OAK	LIVE OAK	SAME DAY REQUEST/NO DRIVER AVAILABLE
07/23/15	JASPER	GAINESVILLE	ROUTE FULL FOR THIS DAY
07/30/15	LAKE CITY	GAINESVILLE	ROUTE FULL FOR THIS DAY

AUGUST 2015			
DATE	FROM	TO	REASON
08/06/15	LAKE CITY	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST AFTER SCHEDULE SET
08/07/15	LAKE CITY	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST AFTER SCHEDULE SET
08/21/15	WHITE SPRINGS	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST AFTER SCHEDULE SET
08/24/15	LAKE CITY	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST AFTER SCHEDULE SET
08/25/15	LAKE CITY	LAKE CITY	SCHEDULE FULL /NEXT DAY REQUEST
08/26/15	JASPER	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST

SEPTEMBER 2015			
DATE	FROM	TO	REASON
09/08/15	LAKE CITY	LAKE CITY	NO TD FUNDS AVAILABLE
09/11/15	LAKE CITY	LAKE CITY	2:45 PM APPOINTMENT/LATEST APPT. TIME ALLOWED 2:00 PM
09/22/15	LAKE CITY	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST AFTER SCHEDULE SET
09/24/15	LIVE OAK	LAKE CITY	SCHEDULE FULL/NEXT DAY REQUEST AFTER SCHEDULE SET



# ATTENDANCE RECORD

## COLUMBIA, HAMILTON AND SUWANNEE TRANSPORTATION DISADVANTAGED COORDINATING BOARD

MEMBER/ORGANIZATION	NAME	11/12/14	2/11/15	6/17/15	8/12/15
Chair	Commissioner Bucky Nash	P	P	P	P
Hamilton County Elected Official	Commissioner Beth Burnam	P	P	A	P
Suwannee County Elected Official	Commissioner Bashaw				P
Florida Department of Transportation	Sandra Collins	P	P	P	P
Alternate Member	Janell Damato	A	A	A	A
Florida Department of Children and Families	Kay Tice	A	A	A	A
Alternate Member	Jaime Sanchez-Bianchi	P	P	P	P
Florida Agency for Health Care Administration	Deweese Ogden				P
Alternate Member	Vacant				
Florida Department of Education	Jeffrey Aboumrad	P	A	P	P
Alternate Member	Allison Gill	A	P	A	A
Public Education	Daniel Taylor				
Alternate Member	Vacant				
Florida Department of Elder Affairs	Bruce Evans	A	P	A	A
Alternate Member	Dwight Law	P	A	P	P
Citizen Advocate	Sandra Pauwels				P
Alternate Member	Louie Goodin	A	A	A	A
Citizen Advocate - User	Richard Bryant				A
Alternate Member	LJ Johnson	P	P	P	P
Elderly	Reverend Charles Burke	P	P	A	A
Alternate Member	Vacant				
Veterans	Bo Beauchemin				P
Alternate Member	Ellis Gray, III	A	P	A	A
Persons with Disabilities	Ralph P. Kitchens Jr.	P	P	P	P
Alternate Member	Vacant				
Florida Association of Community Action	Matthew Pearson	P	A	P	P
Alternate Member	Vacant				
Children at Risk	Colleen Cody	A	A	P	A
Alternate Member	Audre J. Washington	A	A	A	A
Private Transit	Vacant				
Alternate Member	Vacant				
Regional Workforce Board	Sheryl Rehberg	P	P	A	A
Alternate Member	Jeannie Carr	P	A	P	P
Medical Community	Sandra Buck-Camp	P	P	P	P
Alternate Member	Vacant				

LEGEND KEY: P-Present A-Absent -Not Applicable (newly appointed member)

ATTENDANCE POLICY: The North Central Florida Regional Planning Council shall review and consider rescinding the appointment of any voting member of the Board who fails to attend three consecutive meetings.