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January 3, 2017

TO: Gilchrist County Transportation Disadvantaged Coordinating Board

FROM: Lynn Godfrey, AICP, Senior Planner

SUBJECT: Meeting Announcement

The Gilchrist County Transportation Disadvantaged Coordinating Board will meet **Wednesday, January 11, 2017 at 1:30 p.m.** in the meeting room of **Suwannee River Economic Council located at 1439 SW CR 307A** in Trenton, Florida (location map attached). All Board members are encouraged to attend.

If you would like to participate in the meeting via teleconference, the dial in number is: toll free 888.670.3525, conference code 6025675116. **Please note that a physical quorum of Board members must be present to constitute a quorum.**

Attached is the meeting agenda and supporting materials. If you have any questions, please do not hesitate to contact me at 1-800-226-0690 extension 110.

#### Attachments

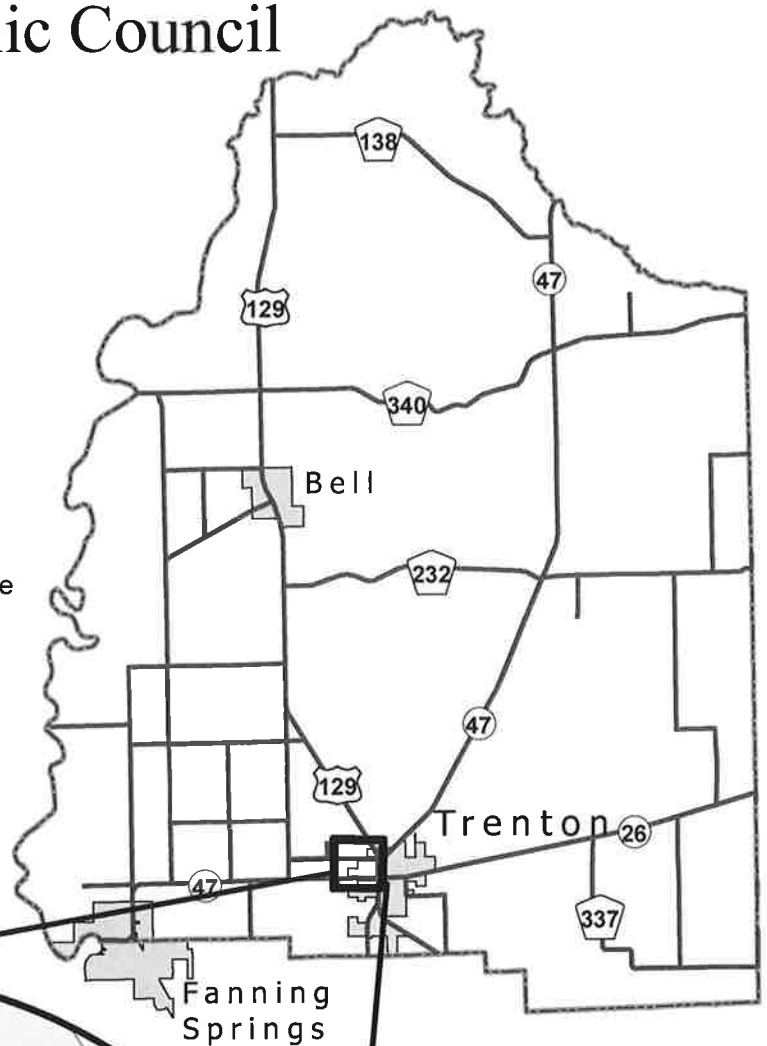
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Dedicated to improving the quality of life of the Region's citizens,  
by coordinating growth management, protecting regional resources,  
promoting economic development and providing technical services to local governments.

# Suwannee River Economic Council Meeting Facility 1439 SW CR 307A Trenton, Florida 32693

Directions: From the intersection of U.S. Highway 129 (also known as Main St) and SW County Road 307A (also known as NW 11th Ave) in the City of Trenton, head West onto SW County Road 307A (also known as NW 11th Ave), travel approximately 0.7 miles, and the Suwannee River Economic Council Meeting Facility will be on the left, on the South side of SW County Road 307A (also known as NW 11th Ave).

Suwannee River  
Economic Council  
Meeting Facility



1 inch = 1,250 feet





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**GILCHRIST COUNTY  
TRANSPORTATION DISADVANTAGED COORDINATING BOARD  
MEETING ANNOUNCEMENT AND AGENDA**

**Meeting Room**  
**Suwannee River Economic Council**  
**1439 SW CR 307A**  
**Trenton, Florida**

Wednesday  
January 11, 2017  
1:30 p.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 October 11, 2016 Minutes** **Page 7** **ACTION REQUIRED**

**II. UNFINISHED BUSINESS**

- A. Transportation Needs Survey** **Page 11** **NO ACTION REQUIRED**

**III. NEW BUSINESS**

- A. Gilchrist County Transportation Disadvantaged Service Plan Amendments** **Page 15** **ACTION REQUIRED**  
  
The Board needs to review and approve amendments to the Gilchrist County Transportation Disadvantaged Service Plan
- B. Suwannee River Economic Council Operations Reports** **Page 73** **NO ACTION REQUIRED**

#### **IV. OTHER BUSINESS**

##### **A. Comments**

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

#### **V. FUTURE MEETING DATES**

- A. April 12, 2017 at 1:30 p.m.**
- B. July 12, 2017 at 1:30 p.m.**
- C. October 5, 2017 at 1:30 p.m.**

\* Please note that this is a tentative meeting schedule, all dates and times are subject to change.

If you have any questions concerning the enclosed materials, please do not hesitate to contact me at 1-800-226-0690, extension 110.

**GILCHRIST COUNTY  
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

<b>MEMBER/REPRESENTING</b>	<b>ALTERNATE/REPRESENTING</b>
Commissioner Marion Poitevint Local Elected Official/Chair	Not Applicable
Sandra Collins Florida Department of Transportation Grievance Committee Member	Janell Damato Florida Department of Transportation
Debbie Andrews Florida Department of Children and Families	Vacant Florida Department of Children and Families
Vacant Florida Department of Education	Jeff Aboumrad Florida Department of Education
Vacant Florida Department of Elder Affairs	Vacant Florida Department of Elder Affairs
Deweese Ogden Florida Agency for Health Care Administration	Pamela Hagley Florida Agency for Health Care Administration
Jeannie Carr Regional Workforce Board Grievance Committee Member	Sifoa Nunu Regional Workforce Board
Vacant Florida Association for Community Action Term ending June 30, 2017	Vacant Florida Association for Community Action Term ending June 30, 2017
Michelle Walker-Crawford Public Education	Julie C. Thomas Public Education
Jim Mash Veterans Term ending June 30, 2017	Vacant Veterans Term ending June 30, 2017
Jeffrey Bradley Citizen Advocate Term ending June 30, 2018	Vacant Citizen Advocate Term ending June 30, 2018
Jim McCrone Citizen Advocate - User Term ending June 30, 2018	Vacant Citizen Advocate - User Term ending June 30, 2018
Leslie Esseck Persons with Disabilities Grievance Committee Member Term ending June 30, 2018	Vacant Persons with Disabilities Term ending June 30, 2018
Richard Esseck, Vice-Chair Elderly Grievance Committee Member Term ending June 30, 2017	Vacant Elderly Term ending June 30, 2017
Brittney Keeling Medical Community Term ending June 30, 2019	Krishna Stemple Medical Community Term ending June 30, 2019
Sandra Woodard Children at Risk Grievance Committee Member Term ending June 30, 2019	Brooke Ward Children at Risk Term ending June 30, 2019
Vacant Private Transit Term ending June 30, 2019	Vacant Private Transit Term ending June 30, 2019



**GILCHRIST COUNTY  
TRANSPORTATION DISADVANTAGED COORDINATING BOARD**

**MEETING MINUTES**

County Commissioners' Meeting Room  
Courthouse Annex  
Trenton, Florida

Wednesday  
October 12, 2016  
1:30 p.m.

**VOTING MEMBERS PRESENT**

Commissioner Marion Poitevint, Chair  
Jeff Aboumrad, Florida Department of Education Representative  
Jeffrey Bradley, Citizen Advocate  
Jeannie Carr, Regional Workforce Board Representative  
Leslie Esseck, Persons with Disabilities Representative  
Richard Esseck, Elderly Representative  
Brittney Keeling, Medical Community Representative  
Jim McCrone, Citizen Advocate-User Representative  
Sandra Woodard, Early Childhood Services Representative

**VOTING MEMBERS ABSENT**

Debbie Andrews, Florida Department of Children and Families  
Sandra Collins, Florida Department of Transportation Representative  
Michelle Walker-Crawford, Public Education Representative  
Jim Mash, Veterans Representative  
Deweece Ogden, Florida Agency for Health Care Administration Representative

**STAFF PRESENT**

Lynn Godfrey, North Central Florida Regional Planning Council

**I. BUSINESS MEETING CALL TO ORDER**

Chair Poitevint called the meeting to order at 1:30 p.m.

**A. Invocation**

Mr. Matthew Pearson gave the invocation.

**B. Pledge of Allegiance**

Sandra Woodard led the Board in reciting the Pledge of Allegiance.

**C. Introductions**

There were no introductions.

**D. Approval of the July 13, 2016 Meeting Minutes**

Richard Esseck noted that Jim Mash is incorrectly listed as both present and absent and Michelle Walker-Crawford is incorrectly listed as absent. He also asked that language be added to the minutes under the discussion of the Bylaws that the Bylaws can be amended at any meeting.

**ACTION: Sandra Woodard moved to approve the July 13, 2016 meeting minutes as corrected and with the notation about the Bylaws. Richard Esseck seconded; motion passed unanimously.**

**II. NEW BUSINESS**

**A. Annual Performance Evaluation**

Ms. Lynn Godfrey, North Central Florida Regional Planning Council Senior Planner, stated that the Board is required to evaluate Suwannee River Economic Council's performance as the Community Transportation Coordinator for Gilchrist County annually. She discussed Suwannee River Economic Council's draft performance.

The Board reviewed the draft annual performance evaluation.

**ACTION: Richard Esseck moved to approve Suwannee River Economic Council's annual performance evaluation. Sandra Woodard seconded; motion passed unanimously.**

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

Mr. Matthew Pearson, Suwannee River Economic Council Executive Director, discussed Suwannee River Economic Council's Rural Area Capital Assistance Program Grant application.

**ACTION: Richard Esseck moved to approve Suwannee River Economic Council's 2016/17 Rural Area Capital Assistance Program Grant application. Jeannie Carr seconded; motion passed unanimously.**



**C. 2015/16 Annual Operations Report**

Ms. Godfrey stated that Suwannee River Economic Council is required to submit an annual operations report to the Florida Commission for the Transportation Disadvantaged by September 15 of each year. She said the Board is required to review the Annual Operations Report.

The Board reviewed the Annual Operations Report.

Richard Esseck discussed the possibility of applying for additional grant funds. He suggested developing a needs survey to determine whether there is a need for additional transportation service in Gilchrist County.

The Board asked staff to draft a needs survey for the next meeting.

**D. Suwannee River Economic Council Operations Reports**

Mr. Matthew Pearson, Suwannee River Economic Council Executive Director, discussed the operations reports.

**III. OTHER BUSINESS**

**A. Comments**

**1. Members**

Mr. Jeffrey Bradley stated that he is going to nominate Jody Smith for the 2016 Driver of the Year Award. He asked if the Board would send a letter of support for his nomination.

**ACTION: Richard Esseck moved to send a letter of support for Jody Smith's nomination as Driver of the Year. Jeannie Carr seconded; motion passed unanimously.**

**2. Citizens**

There were no citizen comments.

**IV. FUTURE MEETING DATES**

Chair Poitevint stated that the next meeting of the Board is scheduled for Wednesday, January 11, 2016 at 1:30 p.m.

**ADJOURNMENT**

The meeting was adjourned at 2:30 p.m.

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Coordinating Board Chair

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Date

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**II . A .**  
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January 3, 2017

TO: Gilchrist County Transportation Disadvantaged Coordinating Board  
FROM: Lynn Godfrey, AICP, Senior Planner  
SUBJECT: Transportation Needs Survey

RECOMMENDATION

**Review the attached transportation needs survey.**

BACKGROUND

At its October 12, 2016 meeting, the Board asked staff to draft a transportation needs survey that may be used to determine if there is a need for additional public transportation service in Gilchrist County. Attached is a draft survey for the Board to review.

If you have any questions regarding the attached survey, please do not hesitate to contact me.

Attachment

t:\lynn\td2017\gilchrist\memos\draftsurvey.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.



## TRANSPORTATION NEEDS SURVEY

This short survey is sponsored by Suwannee River Economic Council and the Gilchrist County Transportation Disadvantaged Coordinating Board. We appreciate your help in learning more about the need for and use of public transportation services in Gilchrist County.

Please answer the questions below to the best of your ability. Thank you for your help!

**1. Does your household have a working vehicle?**

☐ Yes

☐ No

**2. Is anyone in your household able to operate a vehicle?**

☐ Yes

☐ No

**3. Are you aware of the transportation services provided by Suwannee River Economic Council?**

☐ Yes

☐ No

**4. Do you or anyone in your household use the transportation services provided by Suwannee River Economic Council?**

☐ Yes

☐ No

**5. Do you need transportation to get to the doctor, pharmacy, grocery store, work or other activities?**

☐ Yes

☐ No

**6. How often do you need transportation?**

☐ Daily

☐ Weekly

☐ Monthly







January 3, 2017

TO: Gilchrist County Transportation Disadvantaged Coordinating Board  
FROM: Lynn Godfrey, AICP, Senior Planner  
SUBJECT: Gilchrist County Transportation Disadvantaged Service Plan Amendments

**RECOMMENDATION**

**Approve the Gilchrist County Transportation Disadvantaged Service Plan amendments.**

**BACKGROUND**

Projects selected for funding under Moving Ahead for Progress in the 21st Century (MAP-21) Act programs must be derived from a Coordinated Public Transit-Human Services Transportation Plan. The Plan must be developed through a process that includes representatives of public, private, and nonprofit transportation and human services providers and participation by the public.

In addition, according to the Florida Administrative Code 41-2.011(6):

“In cooperation with the local Coordinating Board, the Community Transportation Coordinator shall review all applications for local government, federal and state transportation disadvantaged funds submitted from or planned for use in their designated service area.”

Attached are draft amendments to the Gilchrist County Transportation Disadvantaged Service Plan that meet the Federal and State requirements. Also, attached are Suwannee River Economic Council's applications for U.S.C. Section 5311 and 5339 grant funds.

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

Attachments

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### 3. Barriers to Coordination

Medicaid non-emergency transportation services are no longer coordinated through Florida's Coordinated Transportation System in Gilchrist County. In May 2014, the Florida Agency for Health Care Administration implemented Florida's Managed Medical Care Program. The Managed Medical Care Program requires Managed Medical Assistance Plans to provide transportation to their enrollees who have no other means of transportation available.

The Managed Medical Assistance Plans provide transportation services directly through their own network of transportation providers. According Chapter 2 of the Florida Agency for Health Care Administration Transportation Coverage, Limitations and Reimbursement Handbook, July 1997, "Medicaid is required by Chapter 427, Florida Statutes to purchase transportation services through the designated Community Transportation Coordinator, unless those services are not cost effective or the Community Transportation Coordinator does not coordinate Medicaid transportation services."

### 4. Needs Assessment

#### U.S.C. Section 5311 Grant Program

PROJECT	PROJECT YEAR	LOCATION	ESTIMATED COST	FUNDING SOURCE
Provide transportation services for the transportation disadvantaged.	2017/18	Gilchrist County	\$145,766 \$145,766	U.S.C. Section 5311  Suwannee River Economic Council

#### United States Code Section 5339 Grant Program

PROJECT	PROJECT YEAR	LOCATION	ESTIMATED COST	FUNDING SOURCE
Purchase one replacement vehicle	2017/18	Dixie/Gilchrist Counties	\$59,176.80 \$14,794.20	United States Code Section 5339  Florida Department of Transportation

#### Rural Area Capital Assistance Program

PROJECT	PROJECT YEAR	LOCATION	ESTIMATED COST	FUNDING SOURCE
Purchase scheduling software upgrade and mobile data terminals.	2014/15	Bradford, Gilchrist, Gilchrist and Lafayette Counties	\$31,500 \$3,500	Rural Area Capital Assistance Program Grant  Suwannee River Economic Council



*Suwannee River Economic Council, Inc.*  
*Post Office Box 70*  
*Live Oak, Florida 32064*

**GILCHRIST COUNTY**

**5311 OPERATING ASSISTANCE APPLICATION**

## **Applicant's Cover Letter**



**Suwannee River Economic Council, Inc.**

**Post Office Box 70  
Live Oak, Florida 32064**

**Administrative Office - Phone (386) 362-4115**

**Fax (386) 362-4078**

**E-Mail: [mattpearson@suwanneec.net](mailto:mattpearson@suwanneec.net)**

**Website: [www.srecinc.org](http://www.srecinc.org)**

**STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION**

**GRANT APPLICATION**

Suwannee River Economic Council, Inc. submits this Application for the Section 5311 Program Grant and agrees to comply with all assurances and exhibits attached hereto and by this reference made a part thereof, as itemized in the Checklist for Application Completeness.

Suwannee River Economic Council, Inc. further agrees, to the extent provided by law (in case of a government agency in accordance with Sections 129.07 and 768.28, Florida Statutes) to indemnify, defend and hold harmless the FDOT and all of its officers, agents and employees from any claim, loss, damage, cost, charge, or expense out of the non-compliance by the Agency, its officers, agents or employees, with any of the assurances stated in this Application.

This Application is submitted on this 1<sup>st</sup> day of December, 2016 with two (2) original resolutions or certified copies of the original resolution authorizing Matt Pearson, Executive Director to sign this Application.

Suwannee River Economic Council, Inc.

By 

Date 12/1/2016

Title: Executive Director

*Celebrating*

**SERVING**

**BRADFORD-COLUMBIA-DIXIE-GILCHRIST-HAMILTON-LAFAYETTE-LEVY-MADISON-PUTNAM-SUWANNEE-TAYLOR-UNION**

**"This institution is an equal opportunity provider and employer."**

**Funded in part through a grant by the State of Florida Department of Elder Affairs**

## **Governing Board's Resolution**

**RESOLUTION NUMBER: 092616 - Gilchrist County**

**THIS RESOLUTION** of the Suwannee River Economic Council, Inc. (hereinafter the "Applicant") authorizes the below named designee on behalf of the Applicant, to sign and submit grant application(s) required supporting documents, certifications and assurances to the Florida Department of Transportation, to accept grant award(s) from and to execute and administer related joint participation agreement(s) with the Florida Department of Transportation, and to purchase vehicles and/or equipment and/or expend grant funds pursuant to grant award(s).

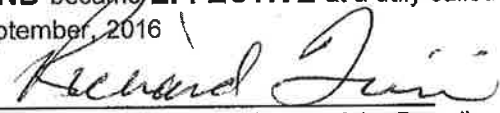
**WHEREAS**, the Applicant desires to and has the fiscal and managerial capability, matching funds and legal authority to apply for and accept grants and make purchases and/or expend funds pursuant to grant awards made by the Florida Department of Transportation as authorized by Chapter 341, Florida Statutes and/or by the Federal Transit Administration Act of 1964, as amended, including but not limited to 49 U.S.C Sections 5310 and 5311, where applicable.

**NOW, THEREFORE BE IT RESOLVED BY THE APPLICANT:**


1. The above recitals are true and correct and are incorporated herein as if fully set forth in the body of this Resolution.
2. This resolution applies to Federal Program(s) under 49 U.S.C. Section(s) Section 5311.
3. The submission of grant application(s) required supporting documents, certifications and assurances to the Florida Department of Transportation is approved.
4. Matt Pearson, Executive Director or his/her duly appointed successor in title is hereby designated and authorized to on behalf of the Applicant, sign and submit application(s) and all required supporting documents, give all required certifications and assurances, accept grant award(s) from and execute and administer related joint participation agreement(s) with the Florida Department of Transportation, purchase vehicles/equipment and/or expend grant funds pursuant to a grant award, unless and until this authorization is specifically rescinded and written notice thereof is sent by certified mail, return receipt requested, to and received by the Florida Department of Transportation at the following address:  
**Attention: Doreen Joyner-Howard, AICP, District Modal Development Manager, Florida Department of Transportation, 2198 Edison Avenue, MS 2812, Jacksonville, FL 32204-2730.**
5. N/A is also hereby designated and authorized to sign requests for Joint Participation Agreement Time Extensions as my be required.

The foregoing resolution was **DULY PASSED, ADOPTED AND** became **EFFECTIVE** at a duly called and convened meeting of the Applicant held on the 26th day of September, 2016

By:

  
(Original Signature, Chairman of the Board)  
Richard Tillis, President

**ATTEST:**

 (Stamp corporate seal here :)  
(Original Signature, Clerk/Secretary)  
Oleatha Harris, Secretary

## **Application for Federal Assistance Form 424**



Application for Federal Assistance SF-424		
<b>* 1. Type of Submission:</b> <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application		
<b>* 2. Type of Application:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision		
<b>* If Revision, select appropriate letter(s):</b> <input type="text"/> <b>* Other (Specify):</b> <input type="text"/>		
<b>3. Date Received:</b> N/A		
<b>4. Applicant Identifier:</b> N/A		
<b>5a. Federal Entity Identifier:</b> N/A		<b>5b. Federal Award Identifier:</b> <input type="text"/>
<b>State Use Only:</b>		
<b>6. Date Received by State:</b> <input type="text"/>		<b>7. State Application Identifier:</b> <input type="text"/>
<b>8. APPLICANT INFORMATION:</b>		
<b>* a. Legal Name:</b> Suwannee River Economic Council Inc.		
<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 59-1101989		<b>* c. Organizational DUNS:</b> 0402079040000
<b>d. Address:</b>		
<b>* Street1:</b> 1171 Nobles Ferry Rd.		
<b>Street2:</b> <input type="text"/>		
<b>* City:</b> Live Oak		
<b>County/Parish:</b> <input type="text"/>		
<b>* State:</b> Florida		
<b>Province:</b> <input type="text"/>		
<b>* Country:</b> USA: UNITED STATES		
<b>* Zip / Postal Code:</b> 32064		
<b>e. Organizational Unit:</b>		
<b>Department Name:</b> Administration		<b>Division Name:</b> <input type="text"/>
<b>f. Name and contact information of person to be contacted on matters involving this application:</b>		
<b>Prefix:</b> Mr.		<b>* First Name:</b> Matt
<b>Middle Name:</b> <input type="text"/>		
<b>* Last Name:</b> Pearson		
<b>Suffix:</b> <input type="text"/>		
<b>Title:</b> Executive Director		
<b>Organizational Affiliation:</b> <input type="text"/>		
<b>* Telephone Number:</b> 386.362.4115 x 223		<b>Fax Number:</b> 386.362.4078
<b>* Email:</b> mpearson@suwanneec.net		

**Application for Federal Assistance SF-424**

**\* 9. Type of Applicant 1: Select Applicant Type:**

M: Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) ▼

Type of Applicant 2: Select Applicant Type:

▼

Type of Applicant 3: Select Applicant Type:

▼

\* Other (specify):

**\* 10. Name of Federal Agency:**

Federal Transit Administration

**11. Catalog of Federal Domestic Assistance Number:**

20-509

CFDA Title:

**\* 12. Funding Opportunity Number:**

U.S.C Section 5311

\* Title:

Formula Grants for Rural Area Program

**13. Competition Identification Number:**

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

Gilchrist County

Add Attachment

Delete Attachment

View Attachment

**\* 15. Descriptive Title of Applicant's Project:**

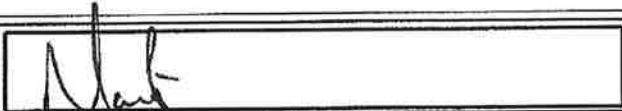
Provide Transportation Services for the Transportation Disadvantaged.

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

<b>Application for Federal Assistance SF-424</b>	
<b>16. Congressional Districts Of:</b>	
* a. Applicant: <input type="text" value="Third"/>	* b. Program/Project: <input type="text" value="Third"/>
Attach an additional list of Program/Project Congressional Districts if needed.	
<input type="text"/>	<input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<b>17. Proposed Project:</b>	
* a. Start Date: <input type="text" value="2017-10-01"/>	* b. End Date: <input type="text" value="2018-09-30"/>
<b>18. Estimated Funding (\$):</b>	
* a. Federal	<input type="text" value="145766"/>
* b. Applicant	<input type="text" value="0"/>
* c. State	<input type="text" value="0"/>
* d. Local	<input type="text" value="145766"/>
* e. Other	<input type="text" value="0"/>
* f. Program Income	<input type="text" value="0"/>
* g. TOTAL	<input type="text" value="291532"/>
<b>* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?</b>	
<input checked="" type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on <input type="text" value="2014-12-12"/>	
<input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review.	
<input type="checkbox"/> c. Program is not covered by E.O. 12372.	
<b>* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)</b>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes", provide explanation and attach	
<input type="text"/>	<input type="button" value="Add Attachment"/> <input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<b>21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)</b>	
<input checked="" type="checkbox"/> ** I AGREE	
<small>** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.</small>	
<b>Authorized Representative:</b>	
Prefix: <input type="text" value="Mr."/> ▼	* First Name: <input type="text" value="Matt"/>
Middle Name: <input type="text"/>	
* Last Name: <input type="text" value="Pearson"/>	
Suffix: <input type="text"/> ▼	
* Title: <input type="text" value="Executive Director"/>	
* Telephone Number: <input type="text" value="386.362.4115 x223"/>	Fax Number: <input type="text" value="386.362.4078"/>
* Email: <input type="text" value="mpearson@suwanneec.net"/>	
* Signature of Authorized Representative: 	* Date Signed: <input type="text" value="2016-12-01"/>

**Exhibit A**  
**Current System Description**

## Exhibit A

### Current System Description

1. What is a general overview of the organization including its mission, program goals, and objectives?

Suwannee River Economic Council, Inc. is a non-profit organization chartered in 1964 whose purpose is to provide services to low income and elderly citizens to alleviate poverty. SREC, Inc. currently is the state designated transportation provider in five rural North Florida counties including Dixie, Bradford, Gilchrist, Union and Lafayette County. A voluntary Board of Directors governs SREC, Inc. The Board employs an Executive Director who has normal CEO responsibilities with the agency and the many programs it administers. SREC, Inc. has four Program Directors providing direct supervision of the ongoing programs, including Transportation.

2. What is the organizational structure, type of operation, number of employees, and other pertinent organizational information? Include an organizational chart that shows the positions that are involved in the transit department.

As the Community Transportation Coordinator for five rural counties in North Florida, SREC, Inc. operates partial brokerages, with all trips provided by SREC, Inc. The exception to this is stretcher services which are contracted to a local government provider. SREC, Inc. provides mainly demand response services, and requires twenty-four hour notice for trip requests. SREC, Inc's Executive Director has direct oversight of the Director of Transportation, who in turn manages the Transportation Department. Currently, SREC, Inc. employs approximately twenty employees in the Transportation Department across five counties: Dixie County, Gilchrist County, Lafayette County, Bradford County, and Union County.

3. Who is responsible for insurance, training, management, and administration of the agency's transportation program?

SREC, Inc. uses the FDOT approved computer testing and training module to train drivers and staff. Administrative aspects of the Transportation Department, including but not limited to fleet inventory and maintenance, driver credentialing, insurance tracking, and record keeping, are led by the Director of Transportation.

4. Who provides maintenance for the vehicles? Is it outsourced? What type of Preventative Maintenance work does the agency do on-site?

SREC, Inc. uses private contractors to perform all vehicle maintenance, service, and repair. Preventative maintenance is accomplished through the 5,000 mile inspections which are done by private contractors as stated above.

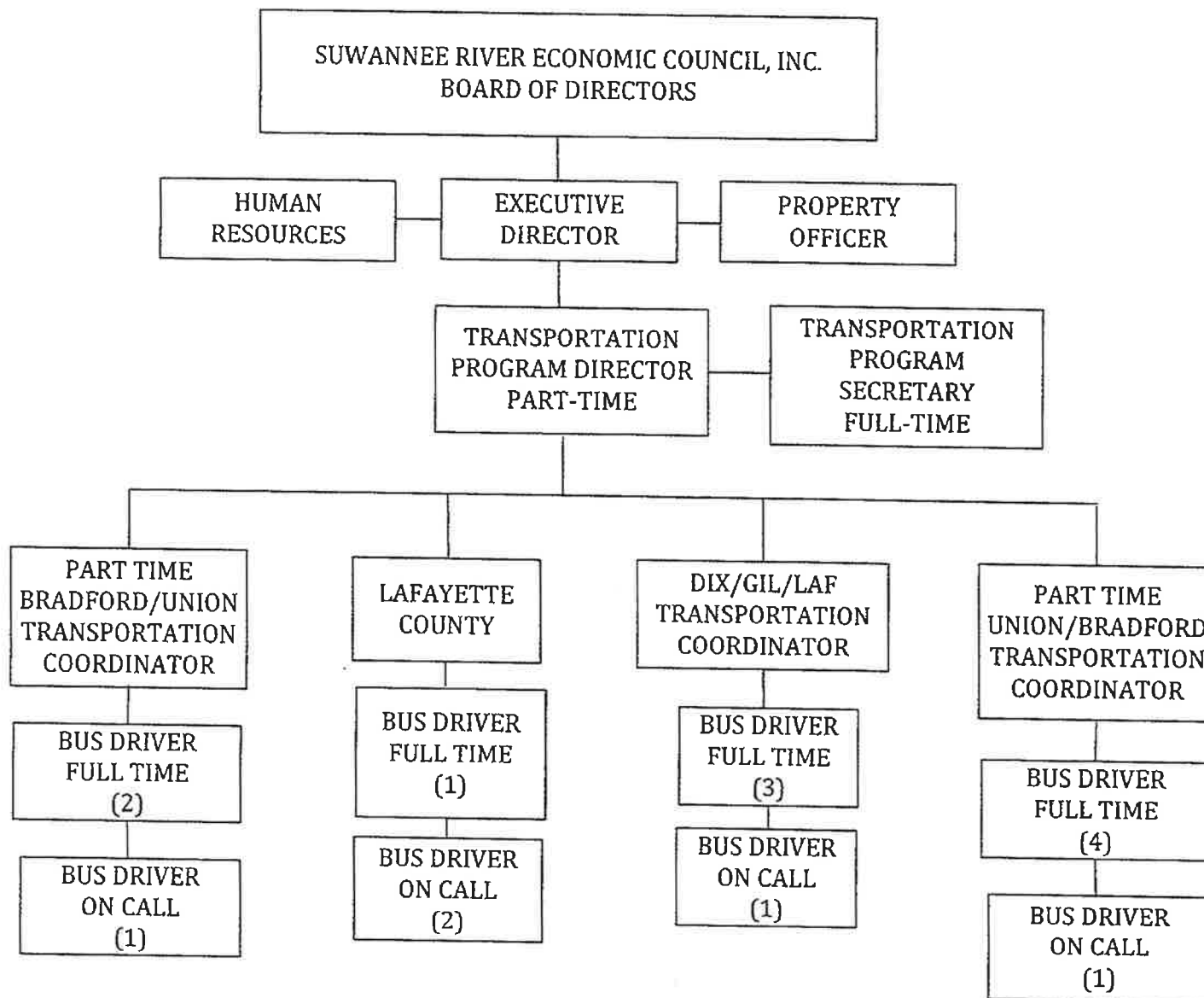
5. What is the agency's current number of transportation related employees?

Currently, SREC, Inc. employs approximately twenty employees in the Transportation Department across five counties: Dixie County, Gilchrist County, Lafayette County, Bradford County, and Union County.

6. What is a detailed description of service routes and ridership numbers?

Gilchrist County is an extremely rural community. Therefore minimal medical facilities are available to residents. The vast majority of medical appointments are made in Gainesville where facilities are more prevalent. Since it is over 40 miles to Gainesville where these appointments are necessary, SREC, Inc. makes two daily trips to Gainesville. There are routes running almost hourly to dialysis and local health care providers for local trips. SREC, Inc. anticipates providing over 4500 trips in the upcoming year for purposes such as medical, nutritional, shopping, and employment. However, due to funding restraints most of the transportation services provided are medically necessary.

**SUWANNEE RIVER ECONOMIC COUNCIL, INC  
TRANSPORATION PROGRAM  
ORGANIZATIONAL CHART**



**Exhibit A-1**  
**Fact Sheet**



## 1.6. EXHIBIT A-1: FACT SHEET

Name of Applicant: Suwannee River Economic Council, Inc.

	CURRENTLY	IF GRANT IS AWARDED
1. Number of one-way passenger trips.* <b>PER YEAR</b>	4504	4504
2. Number of individuals served unduplicated (first ride per rider per fiscal year). <b>PER YEAR**</b>	360	360
3. Number of vehicles used for this service. <b>ACTUAL</b>	8	8
4. Number of ambulatory seats. <b>AVERAGE PER VEHICLE</b> (Total ambulatory seats divided by total number of fleet vehicles)	8	8
5. Number of wheelchair positions. <b>AVERAGE PER VEHICLE</b> (Total wheelchair positions divided by total number of fleet vehicles)	2	2
6. Vehicle miles traveled. <b>PER YEAR</b>	66391	66391
7. Average vehicle miles <b>PER DAY</b>	238	238
8. Normal vehicle hours in operation. <b>PER DAY</b>	12	12
9. Normal number of days in operation. <b>PER WEEK</b>	6	6
10. Trip length (roundtrip). <b>AVERAGE</b>	25	25

Estimates are acceptable. The information listed should be specific to the Section 5311 funds and not agency wide.

\* One way passenger trip is the unit of service provided each time a passenger enters the vehicle, is transported, then exits the vehicle. Each different destination would constitute a passenger trip

\*\* The unduplicated riders are for current year and the subsequent year once the grant is awarded

**Exhibit B**  
**Proposed Project Description**

Exhibit B  
Proposed Project Description

1. Is the project to continue the existing level of services, to expand present service, or to provide new service? How will a grant award be used? If the grant is awarded, will the agency provide more hours? If the grant is awarded, will the agency provide service to a larger geographic area? If the grant is awarded, will the agency provide shorter headways? If the grant is awarded, will the agency provide more trips?

The requested 5311 funding should help maintain the existing levels of service currently being provided by continuing to offset the cost of services by providing necessary operating funding assistance. Due to the rural nature of Gilchrist County trip lengths are increased due to minimal medical facilities, therefore increase cost. However, with local Governments providing limited local resources and the continued reductions in the State Medicaid allocation, as well as reduction in the Transportation Disadvantaged Trust Funds, the 5311 program funding funds fill the gap and allow for transportation services to be provided in rural areas like Gilchrist County. Therefore the requested 5311 funding helps offset the cost of the entire transportation system and allows for continued transportation services to be provided to those in need in Gilchrist County.

2. If a grant award will be used to maintain services as described in Exhibit A, specifically explain how it will be used in the context of total service. Make sure to include information on how the agency will maintain adequate financial, maintenance, and operating records and comply with FTA reporting requirements including information for the Annual Program of Projects Status Reports, Milestone Activity Reports, NTD reporting, DBE reports etc.

Due to the nature of a rural area such as Gilchrist County and the need for transportation services to travel over 40 miles to medical facilities, multiple daily trips are required to cover these distances while also trying to balance the needs and physical limitations of the passengers whom we serve. It is imperative to operate the transportation services provided by SREC, Inc. as efficiently and economically as possible while maintaining that balance between business and compassion. The funding requested from 5311 funding will enable SREC, Inc. to continue tracking efficiency within the transportation system and maintain detailed recording and reporting throughout the program.

3. Give a detailed explanation of the need for the vehicle and provide evidence of the need.  
N/A

4. Will a grant award be used to replace existing equipment or purchase additional vehicles/equipment? Provide details.  
N/A

5. Identify vehicles/equipment being replaced and list them on the "Current Vehicle and Transportation Equipment Inventory" form (see page **Error! Bookmark not defined.**).  
N/A

6. If vehicles and/or equipment are proposed to be used by a lessee...  
N/A

7. Each applicant shall indicate whether they are a government authority or a private non-profit agency, provide a brief description of the project which includes the counties served, whether the applicant employees are represented by a union and if so represented the name and local number of the union.

Suwannee River Economic Council, Inc. is a private non-profit agency. The project will be in Gilchrist County. Employees are not represented by a union.

8. Who will drive the vehicle, number of drivers, CDL certifications? (If capital assistance is requested.)  
N/A

9. Fully explain your transportation program

- a. Service hours, planned service, routes and trip types  
SREC, Inc. provides transportation to Gilchrist County residents six days a week. While the dispatch office operates 8:00 am – 4:30 pm, drivers operate according to client need (medical appointments, etc.). Trips types vary, including but not limited to medical, nutritional, shopping, and employment.
- b. Staffing – include plan for training on vehicle equipment such as wheelchair lifts, etc.  
SREC, Inc. uses the FDOT approved computer testing and training module to train drivers and staff.
- c. Records maintenance  
Administrative aspects of the Transportation Department, including but not limited to fleet inventory and maintenance, driver credentialing, insurance tracking, and record keeping, are led by the Director of Transportation.
- d. Vehicle maintenance – who, what, when and where  
All maintenance is performed by private contractors for service. SREC, Inc. has no mechanics on staff. The SREC, Inc. current SSPP requires safety inspections to be performed every 5,000 miles. The checklist used by the mechanics is an FDOT approved checklist. Annual Inspections are performed annually and general maintenance is performed as needed if the driver reports an issue during the required daily inspection or if the van has a mechanical failure.
- e. CDL requirements  
N/A
- f. System Safety Program Plan (SSPP)  
SREC, Inc. has maintained excellent safety and training records and continues to provide safe efficient, cost effective services for the residents of Gilchrist County who need transportation services. SREC, Inc. has recently gone through the process of updating all safety records including the newly updated SSPP.

g. Drug free work place

SREC, Inc. has an established anti-drug and alcohol misuse prevention program that is implemented in accordance with FDOT regulations. This program is reviewed and updated on a regular basis with the most recent compliance certification this current year.

10. How do you currently fund the operations of your transit program?

Suwannee River Economic Council, Inc. utilizes a combination of funding sources including Section 5311, Commission for the Transportation Disadvantaged, and Medicaid.

11. If this grant is not fully funded, can you still proceed with this program?

Yes, but services would be drastically reduced.

12. **New agencies only:**

N/A

**Form B-1**

**Transit-related Operating and Administrative  
Expenses**

## 1.8. FORM B-1: TRANSIT-RELATED OPERATING AND ADMINISTRATIVE EXPENSES

Name of Applicant: Suwannee River Economic Council, Inc.

Name of Transit Program: Gilchrist County, FL

Applicant Fiscal period start and end dates: July 1, 2017 to June 30, 2018

State Fiscal period from: July 1, 2017 to June 30, 2018

EXPENSE CATEGORY	TOTAL EXPENSE	FTA ELIGIBLE EXPENSE
Labor (501)	\$86091	\$86091
Fringe and Benefits (502)	42010	42010
Services (503)	16055	16055
Materials and Supplies (504)	56653	56653
Vehicle Maintenance (504.01)	56812	56812
Utilities (505)	10890	10890
Insurance (506)	12208	12208
Licenses and Taxes (507)	156	156
Purchased Transit Service (508)	1862	1862
Miscellaneous (509)	1290	1290
Leases and Rentals (512)	4921	4921
Depreciation (513)	2584	2584
<b>TOTAL</b>	<b>\$291532</b>	<b>\$291532 (a)</b>

### SECTION 5311 GRANT REQUEST:

Total FTA Eligible Expenses (from Form B-1, above) **\$291532 (a)**

Rural Passenger Fares (from Form B-2) **\$ 0 (b)**

Operating Deficit **\$291532 (c)**

[FTA Eligible Expenses (a) minus Rural Passenger Fares (b)] (from Form B-2)

Section 5311 Request **\$ 145766 (d)**

(No more than 50% of Operating Deficit)

Grant Total All Revenues (from Form B-2) **\$291532 \*(e)**

**Note: If Grand Total Revenues (e) exceeds FTA Eligible Expenses (a), reduce the Section 5311 Request (d) by that amount.**

**Form B-2**

**Operating and Administrative Expense and Revenues**

**Grant Request**



## 1.9. FORM B-2: TRANSIT-RELATED OPERATING AND ADMINISTRATIVE REVENUES

Name of Applicant: Suwannee River Economic Council, Inc.

Name of Transit Program: Gilchrist County, FL

Applicant Fiscal period start and end dates: July 1, 2017 to June 30, 2018

State Fiscal period from July 1, 2017 to June 30, 2018

OPERATING REVENUE CATEGORY	TOTAL REVENUE	REVENUE USED AS FTA MATCH
Passenger Fares for Transit Service (401)	<b>Total= \$</b> <b>Rural =\$ 0 (b)</b>	
Special Transit Fares (402)		
School Bus Service Revenues (403)		
Freight Tariffs (404)		
Charter Service Revenues (405)		
Auxiliary Transportation Revenues (406)		
Non-transportation Revenues (407)		
<b>Total Operating Revenue</b>	<b>\$</b>	
OTHER REVENUE CATEGORY		
Taxes Levied directly by the Transit System (408)		
Local Cash Grants and Reimbursements (409)		
Local Special Fare Assistance (410)		
State Cash Grants and Reimbursements (411)	<b>205928</b>	<b>205928</b>
State Special Fare Assistance (412)		
Federal Cash Grants and Reimbursements (413)	<b>85604</b>	<b>85604</b>
Interest Income (414)		
Contributed Services (430)		
Contributed Cash (431)		
Subsidy from Other Sectors of Operations (440)		
<b>Total of Other Revenue</b>	<b>\$291532</b>	<b>291532</b>
<b>GRAND TOTAL ALL REVENUE</b>	<b>\$291532</b>	<b>\$291532 (e)</b>

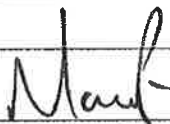
**Form B-3**  
**Proof of Local Match**

### 1.10. FORM B-3: PROOF OF LOCAL MATCH

Name of Applicant: Suwannee River Economic Council, Inc.

Sources and amounts of local share for the operating assistance being requested:

SOURCE:	AMOUNT:
Suwannee River Economic Council, Inc.	145766



(Signature of authorized representative)

Matt Pearson, Executive Director

(Name and title of authorized representative)

Attach documentation of match funds immediately behind this page. Proof may consist of, but not be limited to: Transportation Disadvantaged (TD) allocation, written statements from county commissions, state agencies, city managers, mayors, town councils, organizations, accounting firms and financial institutions.



*Suwannee River Economic Council, Inc.*  
*Post Office Box 70*  
*Live Oak, Florida 32064*

**DIXIE / GILCHRIST COUNTY**

**5339 CAPITAL ASSISTANCE APPLICATION**

## **Applicant's Cover Letter**



**Suwannee River Economic Council, Inc.**  
**Post Office Box 70**  
**Live Oak, Florida 32064**

**Administrative Office - Phone (386) 362-4115**

**Fax (386) 362-4078**

**E-Mail: [mattpearson@suwanneec.net](mailto:mattpearson@suwanneec.net)**

**Website: [www.srecinc.org](http://www.srecinc.org)**

**STATE OF FLORIDA**  
**DEPARTMENT OF TRANSPORTATION**  
**GRANT APPLICATION**

Suwannee River Economic Council, Inc. (agency name) submits this Application for the Section 5339 Program Grant and agrees to comply with all assurances and exhibits attached hereto and by this reference made a part thereof, as itemized in the Checklist for Application Completeness.

Suwannee River Economic Council, Inc. (agency name) further agrees, to the extent provided by law (in case of a government agency in accordance with Sections 129.07 and 768.28, Florida Statutes) to indemnify, defend and hold harmless the Department and all of its officers, agents and employees from any claim, loss, damage, cost, charge, or expense out of the non-compliance by the Agency, its officers, agents or employees, with any of the assurances stated in this Application.

This Application is submitted on this 1<sup>st</sup> day of December, 2016 with two (2) original resolutions or certified copies of the original resolution authorizing Matt Pearson, Executive Director (Name & Title) to sign this Application.

Agency Name: Suwannee River Economic Council, Inc.

By: Matt

Matt Pearson

Title: Executive Director

Date: 12/1/2016

*Celebrating*

**SERVING**

**BRADFORD-COLUMBIA-DIXIE-GILCHRIST-HAMILTON-LAFAYETTE-LEVY-MADISON-PUTNAM-SUWANNEE-TAYLOR-UNION**

**"This institution is an equal opportunity provider and employer."**

**Funded in part through a grant by the State of Florida Department of Elder Affairs**

## **Governing Board's Resolution**



**RESOLUTION NUMBER: 092616 - Dixie/Gilchrist County**

**THIS RESOLUTION** of the Suwannee River Economic Council, Inc. (hereinafter the "Applicant") authorizes the below named designee on behalf of the Applicant, to sign and submit grant application(s) required supporting documents, certifications and assurances to the Florida Department of Transportation, to accept grant award(s) from and to execute and administer related joint participation agreement(s) with the Florida Department of Transportation, and to purchase vehicles and/or equipment and/or expend grant funds pursuant to grant award(s).


**WHEREAS**, the Applicant desires to and has the fiscal and managerial capability, matching funds and legal authority to apply for and accept grants and make purchases and/or expend funds pursuant to grant awards made by the Florida Department of Transportation as authorized by Chapter 341, Florida Statutes and/or by the Federal Transit Administration Act of 1964, as amended, including but not limited to 49 U.S.C Sections 5310 and 5311, where applicable.

**NOW, THEREFORE BE IT RESOLVED BY THE APPLICANT:**


1. The above recitals are true and correct and are incorporated herein as if fully set forth in the body of this Resolution.
2. This resolution applies to Federal Program(s) under 49 U.S.C. Section(s) Section 5339.
3. The submission of grant application(s) required supporting documents, certifications and assurances to the Florida Department of Transportation is approved.
4. Matt Pearson, Executive Director or his/her duly appointed successor in title is hereby designated and authorized to on behalf of the Applicant, sign and submit application(s) and all required supporting documents, give all required certifications and assurances, accept grant award(s) from and execute and administer related joint participation agreement(s) with the Florida Department of Transportation, purchase vehicles/equipment and/or expend grant funds pursuant to a grant award, unless and until this authorization is specifically rescinded and written notice thereof is sent by certified mail, return receipt requested, to and received by the Florida Department of Transportation at the following address: **Attention: Doreen Joyner-Howard, AICP, District Modal Development Manager, Florida Department of Transportation, 2198 Edison Avenue, MS 2812, Jacksonville, FL 32204-2730.**
5. N/A is also hereby designated and authorized to sign requests for Joint Participation Agreement Time Extensions as my be required.

The foregoing resolution was **DULY PASSED, ADOPTED AND** became **EFFECTIVE** at a duly called and convened meeting of the Applicant held on the 26th day of September, 2016

By:

  
(Original Signature, Chairman of the Board)  
Richard Tillis, President

ATTEST:

 (Stamp corporate seal here :)  
(Original Signature, Clerk/Secretary)  
Oleatha Harris, Secretary

## **Application for Federal Assistance Form 424**

**Application for Federal Assistance SF-424**

**\* 1. Type of Submission:**

- ☐ Preapplication  
☒ Application  
☐ Changed/Corrected Application

**\* 2. Type of Application:**

- ☒ New  
☐ Continuation  
☐ Revision

**\* If Revision, select appropriate letter(s):**

**\* Other (Specify):**

**3. Date Received:**

N/A

**4. Applicant Identifier:**

N/A

**5a. Federal Entity Identifier:**

N/A

**5b. Federal Award Identifier:**

**State Use Only:**

**6. Date Received by State:**

**7. State Application Identifier:**

**8. APPLICANT INFORMATION:**

**\* a. Legal Name:** Suwannee River Economic Council Inc.

**\* b. Employer/Taxpayer Identification Number (EIN/TIN):**

59-1101989

**\* c. Organizational DUNS:**

0402079040000

**d. Address:**

**\* Street1:**

1171 Nobles Ferry Rd.

**Street2:**

**\* City:**

Live Oak

**County/Parish:**

**\* State:**

Florida

**Province:**

**\* Country:**

USA: UNITED STATES

**\* Zip / Postal Code:**

32064

**e. Organizational Unit:**

**Department Name:**

Administration

**Division Name:**

**f. Name and contact information of person to be contacted on matters involving this application:**

**Prefix:**

Mr.

**\* First Name:**

Matt

**Middle Name:**

**\* Last Name:**

Pearson

**Suffix:**

**Title:** Executive Director

**Organizational Affiliation:**

**\* Telephone Number:**

386.362.4115 x 223

**Fax Number:**

386.362.4078

**\* Email:**

mpearson@suwanneec.net

**Application for Federal Assistance SF-424**

**\* 9. Type of Applicant 1: Select Applicant Type:**

M: Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) ▼

**Type of Applicant 2: Select Applicant Type:**

▼

**Type of Applicant 3: Select Applicant Type:**

▼

\* Other (specify):

**\* 10. Name of Federal Agency:**

Federal Transit Administration

**11. Catalog of Federal Domestic Assistance Number:**

20-526

CFDA Title:

**\* 12. Funding Opportunity Number:**

U.S.C Section 5339

\* Title:

Rural Area Capital Assistance Program

**13. Competition Identification Number:**

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

Dixie / Gilchrist Counties

Add Attachment

Delete Attachment

View Attachment

**\* 15. Descriptive Title of Applicant's Project:**

Provide Transportation Services for the Transportation Disadvantaged.

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

**Application for Federal Assistance SF-424****16. Congressional Districts Of:**\* a. Applicant \* b. Program/Project 

Attach an additional list of Program/Project Congressional Districts If needed.

**17. Proposed Project:**\* a. Start Date: \* b. End Date: **18. Estimated Funding (\$):**

* a. Federal	<input type="text" value="59176.80"/>
* b. Applicant	<input type="text" value="0"/>
* c. State	<input type="text" value="14794.20"/>
* d. Local	<input type="text" value="0"/>
* e. Other	<input type="text" value="0"/>
* f. Program Income	<input type="text" value="0"/>
* g. TOTAL	<input type="text" value="73971"/>

**\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- ☒ a. This application was made available to the State under the Executive Order 12372 Process for review on
- ☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ☐ c. Program is not covered by E.O. 12372.

**\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**☐ Yes ☒ No

If "Yes", provide explanation and attach

**21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

☒ \*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

**Authorized Representative:**

Prefix:  \* First Name:

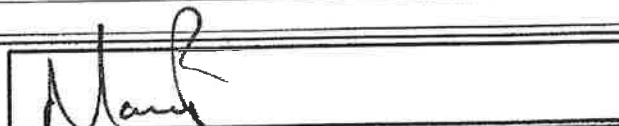
Middle Name:

\* Last Name:

Suffix:

\* Title: \* Telephone Number: Fax Number: \* Email: 

\* Signature of Authorized Representative:

\* Date Signed:

**Exhibit A**  
**Current System Description**

Exhibit A  
Current System Description

1. What is a general overview of the organization including its mission, program goals, and objectives?

Suwannee River Economic Council, Inc. is a non-profit organization chartered in 1964 whose purpose is to provide services to low income and elderly citizens to alleviate poverty. SREC, Inc. currently is the state designated transportation provider in five rural North Florida counties including Dixie, Bradford, Gilchrist, Union and Lafayette County. A voluntary Board of Directors governs SREC, Inc. The Board employs an Executive Director who has normal CEO responsibilities with the agency and the many programs it administers. SREC, Inc. has four Program Directors providing direct supervision of the ongoing programs, including Transportation.

2. What is the organizational structure, type of operation, number of employees, and other pertinent organizational information? Is the organization a government authority or a private non-profit agency? Include an organizational chart that shows the positions that are involved in the transit department.

As the Community Transportation Coordinator for five rural counties in North Florida, SREC, Inc. operates partial brokerages, with all trips provided by SREC, Inc. The exception to this is stretcher services which are contracted to a local government provider. SREC, Inc. provides mainly demand response services, and requires twenty-four hour notice for trip requests. SREC, Inc.'s Executive Director has direct oversight of the Director of Transportation, who in turn manages the Transportation Department. Currently, SREC, Inc. employs approximately twenty employees in the Transportation Department across five counties: Dixie County, Gilchrist County, Lafayette County, Bradford County, and Union County.

3. Who is responsible for insurance, training, management, and administration of the agency's transportation program?

SREC, Inc. uses the FDOT approved computer testing and training module to train drivers and staff. Administrative aspects of the Transportation Department, including but not limited to fleet inventory and maintenance, driver credentialing, insurance tracking, and record keeping, are led by the Director of Transportation.

4. Who provides maintenance for the vehicles? Is it outsourced? What type of preventative maintenance work does the agency do on-site?

SREC, Inc. uses private contractors to perform all vehicle maintenance, service, and repair. Preventative maintenance is accomplished through the 5,000 mile inspections which are done by private contractors as stated above.

5. What is the agency's current number of transportation related employees?

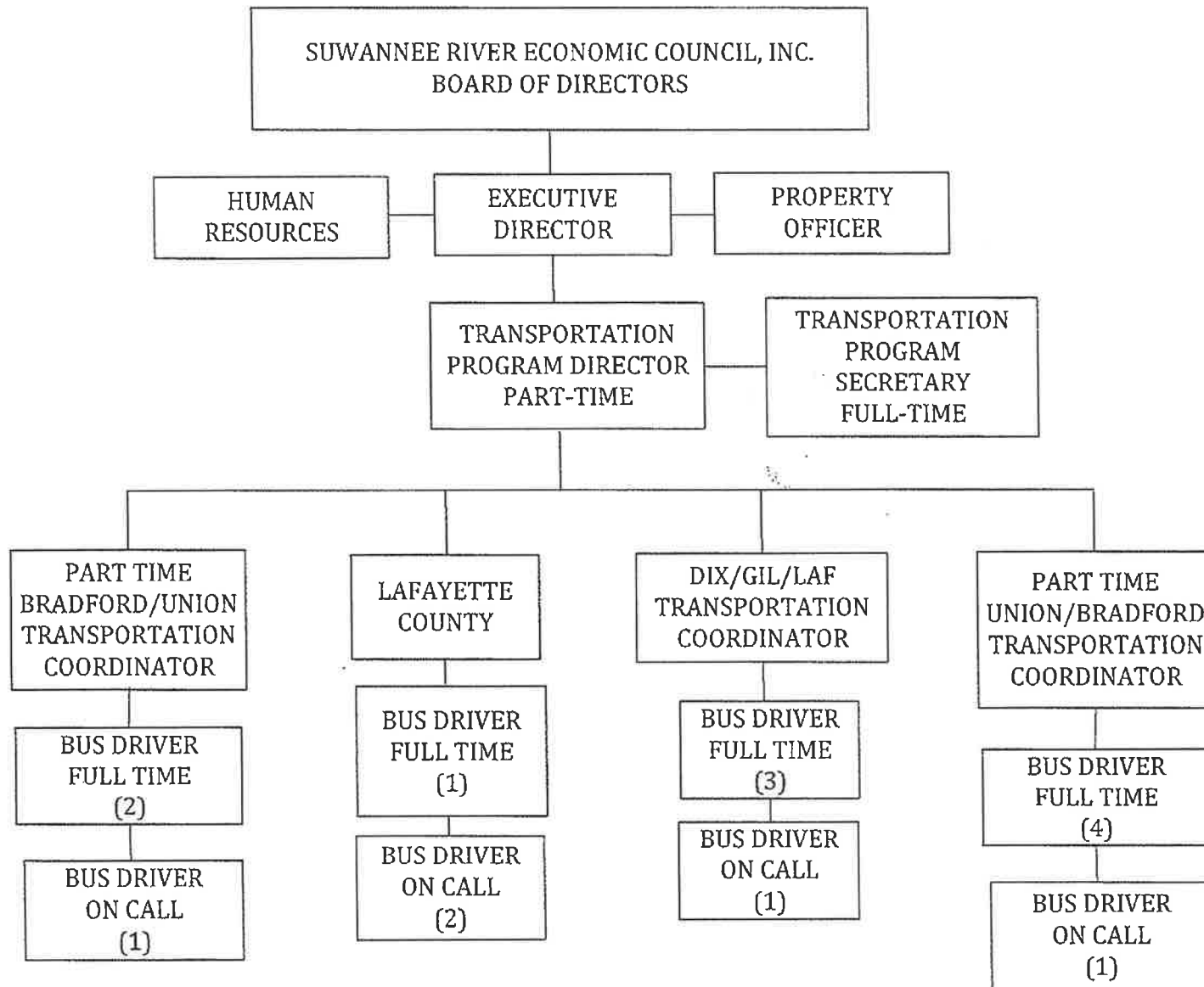
Currently, SREC, Inc. employs approximately twenty employees in the Transportation Department across five counties: Dixie County, Gilchrist County, Lafayette County, Bradford County, and Union County.

6. What is a detailed description of service routes and ridership numbers?

Dixie and Gilchrist Counties are extremely rural communities. Therefore minimal medical facilities are available to residents. The vast majority of medical appointments are made in Gainesville where facilities are more prevalent. Since it is over 40 miles to Gainesville where these appointments are necessary, SREC, Inc. makes two daily trips to Gainesville. There are routes running almost hourly to dialysis and local health care providers for local trips. SREC, Inc. anticipates providing over 11,200 trips in the upcoming year for purposes such as medical, nutritional, shopping, and employment. However, due to funding restraints most of the transportation services provided are medically necessary.



**SUWANNEE RIVER ECONOMIC COUNCIL, INC  
TRANSPORATION PROGRAM  
ORGANIZATIONAL CHART**



**Exhibit A-1**  
**Fact Sheet**

### 1.5. EXHIBIT A-1: FACTSHEET

Name of Applicant: Suwannee River Economic Council, Inc.

	CURRENTLY	IF GRANT IS AWARDED
1. Number of one-way passenger trips.* <b>PER YEAR</b>	11814	11814
2. Number of individuals served unduplicated (first ride per rider per fiscal year). <b>PER YEAR**</b>	746	746
3. Number of vehicles used for this service. <b>ACTUAL</b>	8	8
4. Number of ambulatory seats. <b>AVERAGE PER VEHICLE</b> (Total ambulatory seats divided by total number of fleet vehicles)	8	8
5. Number of wheelchair positions. <b>AVERAGE PER VEHICLE</b> (Total wheelchair positions divided by total number of fleet vehicles)	2	2
6. Vehicle Miles traveled. <b>PER YEAR</b>	195739	195739
7. Average vehicle miles <b>PER DAY</b>	625	625
8. Normal vehicle hours in operation. <b>PER DAY</b>	12	12
9. Normal number of days in operation. <b>PER WEEK</b>	6	6
10. Trip length (roundtrip). <b>AVERAGE</b>	42	42

Estimates are acceptable. The information listed should be specific to the Section 5339 funds and not agency wide.

\* One way passenger trip is the unit of service provided each time a passenger enters the vehicle, is transported, then exits the vehicle. Each different destination would constitute a passenger trip

\*\* The unduplicated riders are for current year and the subsequent year once the grant is awarded

**Exhibit B**  
**Proposed Project Description**

## **EXHIBIT B**

### **Proposed Project Description**

1. How will a grant award be used? More hours? Larger geographic area? Shorter headways? More trips? Please explain in detail.

Suwannee River Economic Council, Inc. plans to use these funds to purchase a wheelchair equipped van so that current levels of service can be continued. Dixie County is very rural and many of the roads are not paved. This has a direct effect on the lifespan of the vehicles being used. Therefore, it is imperative for the purchase of new vans to maintain current levels of service.

2. If a grand award will be used to construct bus related facilities specifically explain how it will be used in the context of total service.

Not applicable

3. If this grant application is for a vehicle/equipment, provide detailed explanation of the need for the vehicle and provide evidence of the need.

Current services that will be continued with the award of this grant include transporting residents of Dixie County to Alachua County twice per day. Since there are limited medical facilities in this rural area, trips to Alachua County are medically necessary. It is over 40 miles to Gainesville, the nearest area with medical services. Normally, the riders can expect a ride length of over an hour due to traffic and stops picking up other riders. Also, current services allow for Kidney Dialysis riders the opportunity for transport to and from their dialysis appointments. Currently, those riders are transported numerous times per day, six days per week. Also, current services include transporting elderly clients to meal sites for lunch and health education. These trips occur five days per week in Dixie and Gilchrist County. These are some examples of the numerous services provided by SREC, Inc. and its transportation programs.

4. If the grant application is for vehicle/equipment, is the intent to replace existing vehicle/equipment or purchase additional vehicles/equipment? Provide details.

The grant will be used to replace existing equipment. The grant process is normally 12 – 15 months from when the application is made until the vehicle is delivered. Therefore, the inventory vehicle miles have to be projected fifteen months ahead to show the age and mileage of the vans.

5. Identify vehicles/equipment being replaced and list them on the **“Current Vehicle and Transportation Equipment”** form provided elsewhere in this manual.

6. If the grant application is for vehicle/equipment describe how vehicles will be maintained without interruptions in service (who, what, where, and when).

All maintenance is performed by private contractors for service. SREC, Inc. has no mechanics on staff. The SREC, Inc. current SSPP requires safety inspections to be performed every 5,000 miles. The checklist used by the mechanics is a FDOT approved checklist. Annual Inspections are performed annually and general maintenance is performed as needed if the driver reports an issue during the required daily inspection or if the van has a mechanical failure.

7. If the grant application is for vehicle/equipment and if vehicles/equipment is proposed to be used by a lessee or private operator under contract to the applicant, identify the proposed lessee/operator.

N/A

8. How are you providing a service that the CTC cannot?

N/A

9. Who will drive the vehicle, number of drivers, CDL certifications?

All drivers employed by SREC, Inc. are in full compliance with FDOT regulations. Since all transit vehicles in the SREC, Inc. fleet are unqualified for CDL requirements, none of the drivers are required to carry a CDL. There are three (3) fulltime drivers and one (1) on-call driver.

10. If the grant application is for bus related facilities, please provide any pertinent documents that may be on record to make a determination on such things as reasonableness of cost...

N/A

11. If the grant application is for bus related facilities, please provide a full, detailed scope of the project...

N/A

## **Exhibit C**

### **Public Hearing and Publisher's Affidavit**

**N/A**

**Exhibit C-1**

**Operating and Administrative Expenses**



## 1.8. FORM C-1: OPERATING AND ADMINISTRATIVE EXPENSES

Name of Applicant: Suwannee River Economic Council, Inc.

Applicant Fiscal period start and end dates: July 1, 2017 to June 30, 2018

State Fiscal period from July 1, 2017 to June 30, 2018

EXPENSE CATEGORY	EXPENSE \$
Labor (501)	224641
Fringe and Benefits (502)	114849
Services (503)	41004
Materials and Supplies (504)	126096
Vehicle Maintenance (504.01)	88740
Utilities (505)	22450
Insurance (506)	28957
Licenses and Taxes (507)	2386
Purchased Transit Service (508)	21499
Miscellaneous (509)	3304
Leases and Rentals (512)	29141
Depreciation (513)	7894
<b>TOTAL EXPENSE</b>	<b>710961</b>

**Exhibit C-2**  
**Operating and Administrative Revenues**

### 1.9. FORM C-2: OPERATING AND ADMINISTRATIVE REVENUES

Name of Applicant: Suwannee River Economic Council, Inc.

Applicant Fiscal period start and end dates: July 1, 2017 to June 30, 2018

State Fiscal period from July 1, 2017 to June 30, 2018

OPERATING REVENUE CATEGORY	REVENUE \$
Passenger Fares for Transit Service (401)	
Special Transit Fares (402)	
Other (403 – 407) (identify by appropriate code)	
<b>TOTAL OPERATING REVENUE</b>	
<b>OTHER REVENUE CATEGORY</b>	
Taxes Levied Directly by the Transit System (408)	
Local Cash Grants and Reimbursements (409)	
Local Special Fare Assistance (410)	
State Cash Grants and Reimbursements (411)	<b>540581</b>
State Special Fare Assistance (412)	
Federal Cash Grants & Reimbursements (413)	<b>170380</b>
Interest Income (414)	
Contributed Services (430)	
Contributed Cash (431)	
Subsidy from Other Sectors of Operations (440)	
<b>TOTAL OF OTHER REVENUE</b>	<b>710961</b>
<b>GRAND TOTAL ALL REVENUE</b>	<b>710961</b>

**Form C-4**  
**Current Vehicle and Equipment Inventory**

## 1.1. FORM C-4: CURRENT VEHICLE AND TRANSPORTATION EQUIPMENT INVENTORY (A)

Name of Applicant: Suwannee River Economic Council, Inc. Date of Inventory: 11/21/16

Model Yr. (b)	Make/size /type (C)	FDOT control # or VIN (d)	Ramp or lift (specify)	Seats & W/C positions (i.e. 12+2)	Avg. miles/ Yr.	Current Mileage	Vehicle Status (Active/Spare/ Other)	Expected retirement date	Other equipment (e)	Funding source (f)
2010*	Chevy Cutaway	1GBJG31K19 1172261	Lift	8+2	21,296	127,777	Active	2015		FDOT 5310
2011	Chevy Cutaway	1GB3G2BG2 B1171025	Lift	8+2	20,418	102,092	Active	2017		TD-RC
2013	Chevy Cutaway	1GB3G2BG7 D1175852	Lift	8+2	38,699	116,097	Active	2018		FDOT 5310
2013	Chevy Cutaway	1GB3G2BG2 D1175641	Lift	8+2	36,086	108,257	Active	2018		TD-RC
2014	Chevy Cutaway	1GB3G2BG6 E1174790	Lift	8+2	39,404	78,807	Active	2019		TD-RC
2015	Ford Cutaway	1FDFE4FS9F DA35287	Lift	12+2	19,539	19,539	Active	2020		FDOT 5339
2015	Ford Cutaway	1FDFE4FS2F DA35292	Lift	12+2	18,906	18,906	Active	2020		TD-RC
2016	Ford Cutaway	1FDFE4FS8G DC55330	Lift	12+2	1,391	1,391	Active	2021		FDOT 5339

(a) Applicants must use this form.

(b) Identify vehicles to be replaced with this or other grant by placing an asterisk (\*) next to the model year. In Exhibit B of the application, provide the name of the lessee or contractor, if applicable.

(c) For example, Ford 22' bus; Dodge converted van.

(d) Show FDOT control number OR VIN if bought with grant through FDOT. If bought through other funding, list the complete VIN.

(e) Include computer hardware and software, copiers, printers, mobile radios, communication systems, etc.

(f) Identify the grant or other funding source used for purchasing the vehicle/equipment

**Form C-5**  
**Capital Request**

## 1.11. FORMC-5: CAPITAL REQUEST

### VEHICLE REQUEST

Name of Agency: Suwannee River Economic Council, Inc.

R or E (a) Replacement	Quantity 1	Description (b) <a href="http://www.tripsflorida.org">www.tripsflorida.org</a> Ford E350 6.8L gas, 23 ft., 12 amb. seats + 2 wc positions, wc lift	Estimated Cost \$73,971
Sub-total			\$73,971

(a) Replacement (R) or Expansion (E).

(b) Provide a brief description including the length and type vehicle, type of fuel, lift or ramp, number of seats and wheelchair positions. For example, 22' gasoline bus with lift, 12 ambulatory seats, and 2 wheelchair positions. Do not show the Make. **Any bus options that are part of purchasing the bus itself should be part of the vehicle request and NOT separated out under equipment.**

### EQUIPMENT REQUEST

If item requested is after-market, it is recommended to gather and retain at least two estimates for the equipment requested. Purchases must be approved at the local level and follow Procurement Guidelines.

	Number requested	Description (c)	Estimated Cost
Sub-total			\$

(c) Show mobile radios and identify the type of radio (i.e. two way radio or stereo radio), computer hardware/software, etc. under "Equipment Request."

**VEHICLE SUBTOTAL \$+ EQUIPMENT SUBTOTAL\$ = \$73,971 (x).**

**(x) X 80% = \$ 59,176.80 [This equals the Federal request. Show this amount on Form 424 in block 18(a)]**







**III.B.**

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January 3, 2017

TO: Gilchrist County Transportation Disadvantaged Coordinating Board  
FROM: Lynn Godfrey, AICP, Senior Planner  
SUBJECT: Suwannee River Economic Council - Operations Reports

RECOMMENDATION

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

BACKGROUND

Attached are the following reports for the Board's review:

1. July - September 2016 Operations Report;
2. Fiscal Year 2015/16 Transportation Disadvantaged Trust Fund Status Report;
3. July - September 2016 Complaint/Commendation Report; and
4. July - September 2016 Trip Denial Report.

If you have any questions regarding the attached reports, please do not hesitate to contact me.

**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.



**QUARTERLY OPERATING REPORT  
GILCHRIST COUNTY  
JULY - SEPTEMBER 2016**

OPERATING DATA	Suwannee River Economic Council	TOTAL
<b>NUMBER OF INVOICED TRIPS</b>	<b>1,054</b>	<b>1,054</b>
Aging Program - Title III-B	0	0
Florida Transportation Disadvantaged Program	791	791
Florida Managed Medical Care Program (Medicaid)	263	263
<b>TOTAL VEHICLE MILES</b>	<b>20,046</b>	<b>20,046</b>
<b>TOTAL REVENUE VEHICLE MILES</b>	<b>17,240</b>	<b>17,240</b>
<b>TOTAL VEHICLE HOURS</b>	<b>940</b>	<b>940</b>
<b>TOTAL DOLLARS INVOICED</b>	<b>\$48,958.70</b>	<b>\$48,958.70</b>
Aging Program - Title III-B	\$0.00	\$0.00
Florida Transportation Disadvantaged Program	\$29,458.35	\$29,458.35
Florida Managed Medical Care Program (Medicaid)	\$19,500.35	\$19,500.35
<b>AVERAGE COST PER TRIP</b>	<b>\$46.45</b>	<b>\$46.45</b>
Aging Program - Title III-B	#DIV/0!	#DIV/0!
Florida Transportation Disadvantaged Program	\$37.24	\$37.24
Florida Managed Medical Care Program (Medicaid)	\$74.15	\$74.15
<b>AVG. COST PER VEHICLE MILE</b>	<b>\$2.44</b>	<b>\$2.44</b>
<b>AVG. COST PER REVENUE VEHICLE MILE</b>	<b>\$2.84</b>	<b>\$2.84</b>
<b>AVG. COST PER VEHICLE HOUR</b>	<b>\$52.08</b>	<b>\$52.08</b>
<b>TRIP PURPOSE*</b>	<b>-</b>	<b>-</b>
Medical	1,054	1,054
Employment	0	0
Education/Training	0	0
Shopping	0	0
Meal Site	0	0
Recreation	0	0
<b>NUMBER OF TRIPS DENIED</b>	<b>0</b>	<b>0</b>
<b>NUMBER OF SINGLE PASSENGER TRIPS PROVIDED</b>	<b>20</b>	<b>20</b>
<b>% OF SINGLE PASSENGER TRIPS</b>	<b>2%</b>	<b>2%</b>
<b>NUMBER OF ACCIDENTS</b>	<b>0</b>	<b>0</b>
<b>NUMBER OF VEHICLES</b>	<b>7</b>	<b>7</b>
<b>AVERAGE TRIPS PER VEHICLE</b>	<b>151</b>	<b>151</b>
<b>AVERAGE MILES PER TRIP</b>	<b>19</b>	<b>19</b>
<b>NUMBER OF ROADCALLS</b>	<b>0</b>	<b>0</b>

**QUARTERLY OPERATING REPORT  
GILCHRIST COUNTY  
JULY - SEPTEMBER 2015**

OPERATING DATA	TOTAL
<b>NUMBER OF INVOICED TRIPS</b>	<b>1,126</b>
Aging Program - Title III-B	0
Florida Transportation Disadvantaged Program	798
Florida Managed Medical Care Program (Medicaid)	328
<b>TOTAL VEHICLE MILES</b>	<b>16,661</b>
<b>TOTAL REVENUE VEHICLE MILES</b>	<b>13,998</b>
<b>TOTAL VEHICLE HOURS</b>	<b>926</b>
<b>TOTAL DOLLARS INVOICED</b>	<b>\$46,906.29</b>
Aging Program - Title III-B	\$0.00
Florida Transportation Disadvantaged Program	\$28,015.24
Florida Managed Medical Care Program (Medicaid)	\$18,891.05
<b>AVERAGE COST PER TRIP</b>	<b>\$41.66</b>
Aging Program - Title III-B	#DIV/0!
Florida Transportation Disadvantaged Program	\$35.11
Florida Managed Medical Care Program (Medicaid)	\$57.59
<b>AVG. COST PER VEHICLE MILE</b>	<b>\$2.82</b>
<b>AVG. COST PER REVENUE VEHICLE MILE</b>	<b>\$3.35</b>
<b>AVG. COST PER VEHICLE HOUR</b>	<b>\$50.65</b>
<b>TRIP PURPOSE*</b>	<b>-</b>
Medical	1,126
Employment	0
Education/Training	0
Shopping	0
Meal Site	0
Recreation	0
<b>NUMBER OF TRIPS DENIED</b>	<b>0</b>
<b>NUMBER OF SINGLE PASSENGER TRIPS PROVIDED</b>	<b>23</b>
<b>% OF SINGLE PASSENGER TRIPS</b>	<b>2%</b>
<b>NUMBER OF ACCIDENTS</b>	<b>0</b>
<b>NUMBER OF VEHICLES</b>	<b>9</b>
<b>AVERAGE TRIPS PER VEHICLE</b>	<b>125</b>
<b>AVERAGE MILES PER TRIP</b>	<b>15</b>
<b>NUMBER OF ROADCALLS</b>	<b>0</b>

**Suwannee River Economic Council**

**Rates:**

**Ambulatory: \$1.71 per passenger mile**

**Wheelchair: \$2.93 per passenger mile**

**Stretcher: \$6.11 per passenger mile**

**2016-2017 TRANSPORTATION DISADVANTAGED TRUST FUND SUMMARY  
GILCHRIST COUNTY**

<b>MONTH/YEAR</b>	<b>CONTRACT AMOUNT</b>	<b>TOTAL DOLLARS SPENT</b>	<b>STATE FUNDS SPENT 90%</b>	<b>LOCAL MATCH 10%</b>	<b>TOTAL AMOUNT REMAINING</b>	<b>NUMBER OF TRIPS</b>	<b>AVERAGE COST PER TRIP</b>
Jul-16	\$133,695.00	\$11,140.51	\$10,026.46	\$1,114.05	\$122,554.49	303	\$36.77
Aug-16	-	\$11,141.21	\$10,027.09	\$1,114.12	#VALUE!	242	\$46.04
Sep-16	-	\$11,142.20	\$10,027.98	\$1,114.22	#VALUE!	264	\$42.21
Oct-16	-				#VALUE!		#DIV/0!
Nov-16	-				#VALUE!		#DIV/0!
Dec-16	-				#VALUE!		#DIV/0!
Jan-17	-				#VALUE!		#DIV/0!
Feb-17	-				#VALUE!		#DIV/0!
Mar-17	-				#VALUE!		#DIV/0!
Apr-17	-				#VALUE!		#DIV/0!
May-17	-				#VALUE!		#DIV/0!
Jun-17	-				#VALUE!		#DIV/0!
<b>TOTAL</b>	-	<b>\$33,423.92</b>	<b>\$30,081.53</b>	<b>\$3,342.39</b>	-	<b>809</b>	<b>\$41.32</b>

**GILCHRIST COUNTY  
SERVICE COMPLAINTS/COMMENDATIONS  
JULY - SEPTEMBER 2016**

<b>TYPE OF COMPLAINT</b>	<b>Suwannee River Economic Council</b>	<b>Resolved</b>
<b>Vehicle Condition</b>	0	-
<b>Driver's Behavior</b>	0	-
<b>Client Behavior</b>	0	-
<b>No Show by Client</b>	0	-
<b>Tardiness - Late pickup</b>	0	-
<b>Tardiness - Late dropoff</b>	0	-
<b>No Show by Operator</b>	0	-
<b>Dispatch/Scheduling</b>	0	-
<b>Other</b>	0	-
<b>TOTALS</b>	<b>0</b>	<b>-</b>
<b>COMMENDATIONS</b>	0	-

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**GILCHRIST COUNTY  
UNMET TRANSPORTATION NEEDS  
JULY - SEPTEMBER 2016**

<b>REASON FOR TRIP DENIAL</b>	<b>NUMBER OF TRIP DENIALS</b>
<b>Lack of Funding</b>	0
<b>Trip Purpose</b>	0
<b>Out of Service Area Trip</b>	0
<b>Insufficient Advance Notice</b>	0
<b>After Hours Trip Request</b>	0
<b>Weekend Trip Request</b>	0
<b>Other</b>	0
<b>TOTALS</b>	<b>0</b>

# ATTENDANCE RECORD

## GILCHRIST COUNTY TRANSPORTATION DISADVANTAGED COORDINATING BOARD

MEMBER/ORGANIZATION	NAME	1/13/2016	4/13/2016	7/13/2016	10/13/2016
Chair	Commissioner Marion Poitevint	P	P	P	P
Florida Department of Transportation	Sandra Collins	P	A	P	A
Alternate Member	Janell Damato	A	A	A	A
Florida Department of Children and Families	Debbie Andrews	A	A	A	A
Alternate Member	(Vacant)				
Florida Agency for Health Care Administration	Deweece Ogden	P	P	P	A
Alternate Member	Pamela Hagley	A	A	A	A
Florida Department of Education	Melinda Jordan		A	A	A
Alternate Member	Jeffrey Aboumrad	A	P	A	P
Public Education	Michelle Walker-Crawford	A	A	P	A
Alternate Member	Julie C. Thomas	A	A	A	A
Citizen Advocate	Jeffrey Bradley	P	P	P	P
Alternate Member	(Vacant)				
Citizen Advocate-User	James McCrone	P	A	A	P
Alternate Member	(Vacant)				
Elderly	Richard Esseck	P	P	P	P
Alternate Member	(Vacant)				
Veterans	Jim Mash	A	P	A	A
Alternate Member	(Vacant)				
Persons with Disabilities	Leslie Esseck	P	P	P	P
Alternate Member	(Vacant)				
Florida Department of Elder Affairs	Vacant				
Alternate Member	(Vacant)				
Children at Risk	Sandra Woodard			P	P
Alternate Member	Brooke Ward	A	A	A	A
Local Medical Community	Brittney Keeling	P	P	P	P
Alternate Member	Krishna Stemple	A	P	A	A
Regional Workforce Board	Jeannie Carr	P	P	P	P
Alternate Member	Sifoa Nunu	P	A	A	A

ATTENDANCE POLICY: According to Article III, Section 5 of the Coordinating Board bylaws:

"The North Central Florida Regional Planning Council shall review and consider rescinding

the appointment of any voting member on the Board who fails to attend three consecutive meetings."

