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2023 CALL FOR PROJECTS &

FUNDING APPLICATION

FOR THE SAN ANTONIO URBANIZED AREA ENHANCED MOBILITY OF SENIORS AND INDIVIDUALS WITH DISABILITIES FUNDING PROGRAM (SECTION 5310)



# Introduction

This application package is for the 2023 Call for Projects for funding under the Federal Transit Administration’s Enhanced Mobility of Seniors and Individuals with Disabilities Funding Program (Section 5310) for the San Antonio Urbanized Area.

The Section 5310 program is designed to provide funding for the purpose of meeting the transportation needs of older adults and people with disabilities when transportation services are unavailable, insufficient, or inappropriate to meeting those needs.

The program aims to improve mobility for seniors and individuals with disabilities by removing barriers to transportation service and expanding transportation mobility options. Federal funding under this program supports transportation services that planned, designed, and carried out to meet the special transportation needs of seniors and individuals with disabilities.

VIA Metropolitan Transit is the Designated Recipient of Section 5310 funding for the San Antonio Urbanized Area. As the Designated Recipient, VIA is responsible for developing a 5310 Program Management Plan, conducting a Call for Projects and developing the program of projects (POP), certifying that all projects are derived from the locally developed [coordinated](https://www.viainfo.net/wp-content/uploads/2023/03/Regionally-Coordinated-Transportation-Plan_April2022.pdf) plan, certifying fair and equitable distribution of funds, overseeing the implementation of projects, managing all aspects of grant distribution, and compliance oversight of all subrecipients receiving funds under this program.

Funds provided under the Section 5310 program are subject to all applicable federal rules and regulations described in FTA’s Award Management Circular ([FTA C 5010.1E](https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/regulations-and-guidance/fta-circulars/58051/5010-1e-circular-award-management-requirements-7-16-18.pdf)) and 5310 program requirements described in FTA’s Enhanced Mobility of Seniors and Individuals with Disabilities Program Guidance ([FTA C 9070.1G](https://www.transit.dot.gov/sites/fta.dot.gov/files/docs/C9070_1G_FINAL_circular_4-20-15%281%29.pdf)).

This 5310 funding application package includes information on funding availability, project eligibility, the application timeline, the application process and project evaluation criteria.

# Eligible Applicants

Eligible applicants for Section 5310 funding may include:

1. Private non-profit organizations; or
2. State or local government authorities that:
   1. a) are approved by a state to coordinate services for seniors and individuals with disabilities; or
   2. b) certify that there are no non-profit organizations readily available in the area to provide the service
3. Operators of public transportation services. Public transportation means regular, continuing, shared-ride transportation services that are open to the general public or open to a segment of the general public defined by age, disability, or low income.

# All applicants must have an active registration and Unique Entity Identifier in SAM.Gov

# Funding Availability

This Call for Projects offers funding to cover a 2-year budget period. The total amount of funding available for distribution is noted in the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Apportionment Year** | **FY2021** | **FY2022** | **Total** |
| San Antonio UZA Apportionment | $1,729,171 | $2,513,951 | **$4,243,122** |

|  |  |  |
| --- | --- | --- |
| Minimum Funding Towards Traditional Projects | 55% | $2,333,718 |
| Maximum Funding Towards Non-Traditional Projects | 45% | $1,909,405 |

# Project Eligibility

Eligible projects include both traditional capital investment and nontraditional investment beyond the Americans with Disabilities Act (ADA) complementary paratransit services.

At least 55% of the program funds must be used to support traditional Section 5310 projects. Traditional projects are those public transportation capital projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable. Examples of traditional capital projects include, but are not limited to:

a. Rolling stock and related activities for Section 5310-funded vehicles

(1) Acquisition of expansion or replacement buses or vans

(2) Vehicle rehabilitation or overhaul;

(3) Preventive maintenance;

(4) Radios and communication equipment; and

(5) Vehicle wheelchair lifts, ramps, and securement devices.

b. Passenger facilities related to Section 5310-funded vehicles

(1) Purchase and installation of benches, shelters, and other passenger amenities.

c. Support facilities and equipment for Section 5310-funded vehicles

(1) Extended warranties that do not exceed the industry standard;

(2) Computer hardware and software;

(3) Transit-related intelligent transportation systems (ITS);

(4) Dispatch systems; and

(5) Fare collection systems

d. Lease of equipment when lease is more cost effective than purchase

e. Acquisition of Transportation Services (“Purchase of Service”). To be eligible for capital reimbursement the services must be competitively procured.

f. Mobility Management. Mobility Management consists of short-range planning and management activities and projects for improving coordination among public transportation and other transportation service providers carried out by a recipient or subrecipient through an agreement entered into with a person, including a government entity, under 49 U.S.C. chapter 53 (other than

section 5309). Mobility management does not include operating public transportation services.

Up to 45% of the funds may be utilized for non-traditional projects. Non-traditional projects include capital and operating expenses for additional public transportation projects that exceed the minimum ADA requirements, improve access to fixed-route service and decrease reliance on ADA-complementary paratransit service, and/or provide alternatives to public transportation that assist individuals with disabilities and seniors with transportation needs.

Examples of nontraditional projects include, but are not limited to:

a. Exceed the ADA minimum requirements,

b. Improve access to fixed-route service and decrease reliance by persons with disabilities on ADA-

complementary paratransit service, or

c. Provide alternatives to public transportation that assist elderly persons and persons with disabilities with transportation.

For a complete list of eligible activities, please refer to FTA’s [Circular 9070.1G](https://www.transit.dot.gov/regulations-and-guidance/fta-circulars/enhanced-mobility-seniors-and-individuals-disabilities). This circular is also available on [VIA's 5310 webpage](https://www.viainfo.net/grant-5310/) for reference.

# Cost Sharing/Match Requirements

Applicants must certify that they have the legal authority to apply for Federal assistance and have the financial capacity to pay the non-federal share of the project cost. The maximum federal share for eligible capital projects, including Mobility Management, Preventive Maintenance, and Purchase of Service (if competitively procured) is 80% and the maximum share of operating projects is 50%. Applicants must provide corresponding local contributions of 20% and 50% respectively. Local contributions of a greater percentage is acceptable, however, this will have no effect on project selection.

Eligible sources of local match contribution include: State or Local appropriations, other eligible non-DOT federal funds, dedicated tax revenues, private donations, revenue from human service contracts, net income generated from advertising and concessions, and Transportation Development Credits\* when available.

\*Transportation Development Credits (TDCs) are a financing tool approved by the Federal Highway Administration that allows states to use federal obligation authority without the requirement of non-federal matching dollars. Applicants may request Transportation Development Credits (TDCs) in lieu of local match for non-operating projects only. VIA will submit a TDC request to the Texas Department of Transportation (TxDOT) on behalf of the applicant. TDCs are subject to approval by TxDOT and are not guaranteed. In addition, previously approved TDCs may not be extended beyond the terms of the original award. Applicants requesting TDCs must be prepared to provide local match in the event TDCs are denied and/or expired and not approved for an extension.

**Farebox revenue may not be used as local match.**

# Eligible Expenses and Reimbursement

Qualifying expenditures are reimbursed to the subrecipient by the FTA through the VIA Metropolitan Transit. All expenses must be incurred in accordance with federal guidelines, including FTA’s procurement guidelines. Please see VIA’s [Subrecipient Procurement Guidelines](https://www.viainfo.net/wp-content/uploads/2022/10/Subrecipient-Procurement-Guidelines-rev04-2022.pdf) for additional information regarding procurements. Reimbursement packages must be submitted with appropriate supporting documentation including detailed backup documentation for all eligible expenses. At a minimum the documentation shall include, but is not limited to, a completed Request for Reimbursement form (listing of all invoiced costs with vendors and payment dates), copies of paid invoices and proof of payment. Invoices paid by credit card must be accompanied by proof of payment to the creditor. All invoice packages will be audited by VIA staff for completion, accuracy, and compliance prior to processing the reimbursement.

# Map of Urbanized Area

All projects must benefit the San Antonio Urbanized Area (UZA). Trips must either originate or end in the UZA or provide connecting services to the UZA.

Figure 1: San Antonio Urbanized Area – 2020 Census

Map

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# Project Evaluation Criteria

All projects will be evaluated based on the selection criteria described below. Additional consideration will be given to the level of existing 5310 funding available to current subrecipients.

### Project Statement of Need (30 points)

Project applications should clearly state the need for the project and demonstrate how the project is consistent with the objectives of the grant program. The project application should indicate how the project will support existing transportation services and/or enhance services or accessibility for the urbanized area’s elderly and disabled populations. The application should also describe the connection between the project and the locally developed coordinated plan.

### Project Planning and Implementation (15 points)

For all projects, applicants must provide evidence of sufficient planning to implement and carry out the project including a description of the implementation steps and timelines for carrying out the plan. Applicant must describe details regarding any coordination and/or partnerships with other organizations including letters of support and/or commitment, if applicable.

### Project Budget and Financial Capacity (20 points)

Applicants must submit a complete project budget detailing anticipated project expenditures and revenues, including documentation of matching funds. The application should address long-term efforts and identify potential funding sources for sustaining the service beyond the grant period.

### Program Effectiveness and Evaluation (15 points)

Applicants must identify measurable and reportable outcomes to track the effectiveness of the project. The applicant should be prepared to monitor, evaluate, and report on the status and effectiveness of the project throughout the period of performance.

### Organizational Preparedness and Technical Capacity (25 points)

Projects should be a good fit in the applicant’s organization. The applicant must demonstrate that it has sufficient staffing resources with the technical experience to implement the project. In addition, the applicant must demonstrate management and technical capacity to comply with the rules and regulations of the program.

# Evaluation Criteria

|  |  |
| --- | --- |
| **Project Evaluation Criteria** | **Possible Points** |
| **Project Statement of Need** | **30** |
| Project is consistent with 5310 program objectives such as filling gaps in service, expanding service availability, increasing ridership, and improving quality of transportation and/or accessibility | 0 – 5 |
| Project supports continuation of existing transportation services designed to meet the needs of the elderly and disabled populations in the San Antonio UZA | 0 – 10 |
| Extent to which the project will increase or enhance the availability of transportation services for the elderly and disabled populations in the San Antonio UZA | 0 – 10 |
| Extent to which the project meets the need identified in the locally developed coordinated plan | 0 – 5 |
| **Project Planning and Implementation** | **15** |
| Applicant provides evidence of sufficient planning to begin the project promptly upon funding | 0 – 5 |
| Implementation plan is realistic and achievable | 0 – 5 |
| Applicant clearly defines coordination efforts and/or partnerships with other transportation providers or other relevant stakeholders and included letters of support/commitment | 0 – 5 |
| **Project Budget and Financial Capacity** | **20** |
| Proposed budget lines and requested amounts are reasonable and justifiable to carry out the  proposed project | 0 – 10 |
| Agency demonstrates financial capacity to meet local match requirements | 0 – 5 |
| Agency demonstrates continued commitment to the life of the project beyond the availability of  the requested grant resources | 0 – 5 |
| **Program Effectiveness and Evaluation** | **20** |
| Expected outcomes of the project are fully explained and consistent with the needs statement | 0 – 10 |
| Applicant identifies measurable indicators of success and describes appropriate methods for  monitoring quality control and effectiveness of the project | 0 – 10 |
| **Organizational Preparedness and Technical Capacity** | **15** |
| How closely does the proposed project align with the organization’s mission and objectives? | 0 – 5 |
| How experienced is the applicant staff in managing transportation projects and/or operating passenger transportation? | 0 – 5 |
| Applicant demonstrates managerial and technical capacity to meet all compliance and financial reporting requirements | 0 – 5 |
| **Total Score** | **0 - 100** |

# Application Process

**Applications are due to VIA Metropolitan Transit by 5:00pm (CST) April 14, 2023, by electronic submittal in PDF format to:** [**via.grants@viainfo.net**](mailto:via.grants@viainfo.net)

Applications submitted after the posted deadline **WILL NOT** be considered. All required attachments **MUST** accompany the original application.

Applicants may be asked to be contacted to present or provide additional clarifying information regarding the submitted application.

# Application Submission

The 5310 Call for Projects and project selection will adhere to the following schedule:

|  |  |
| --- | --- |
| 03/03/23 | Call for Projects Opens |
| 03/24/23 | Application Workshop (Virtual) |
| 04/14/23 | Applications Due by 5:00pm (CST) |
| Apr-May 2023 | Application Evaluations |
| May 2023 | Approval of Recommended Awards (est) |
| Jun-Jul 2023 | Subrecipient Agreements Executed (est) |

**Contact Information**

**Thadeus “TJ” Johnson, Senior Financial Analyst - Grants**

VIA Metropolitan Transit

818 W Myrtle St

San Antonio, TX 78212

210-362-2178

E-mail: [thadeus.johnson@viainfo.net](mailto:thadeus.johnson@viainfo.net)

**Christina Bune, Manager of Grants**

VIA Metropolitan Transit

818 W Myrtle St

San Antonio, TX 78212

210-362-2178

E-mail: [christina.bune@viainfo.net](mailto:christina.bune@viainfo.net)

**VIA 5310 Website:** <https://www.viainfo.net/grant-5310/>

**VIA Grants Team Email:** [via.grants@viainfo.net](mailto:via.grants@viainfo.net)

**5310 FUNDING APPLICATION**

**Agency Profile**

Organization Legal Name Click or tap here to enter text.

Organization D/BA (if applicable) Click or tap here to enter text.

Address Click or tap here to enter text.

City, State, Zip Click or tap here to enter text.

Main Phone Click or tap here to enter text.

Website Click or tap here to enter text.

Applicant Type (Please check one)

Private, non-profit organization

State or local governmental authority

Operator of public transportation services (privately owned)

Operator of public transportation services (publicly owned)

Years in Business Enter text. Years of Transit Experience Enter text.

Annual Operating Budget Click to enter text Annual Operating Budget for Transit Click to enter text

Total # of Employees Enter text Number of Employees Dedicated to Transit Enter text.

Unique Entity Identifier # Click to enter text SAM.Gov Expiration Date Enter text.

Authorized Official’s Name and Title Click or tap here to enter text.

Contact Person’s Name and Title Click or tap here to enter text.

Contact Person Phone # Click or tap here to enter text. Email Click or tap here to enter text.

Is your agency an existing recipient of Federal or State grant funding? Y / N

If yes, please mark all that apply

FTA Section 5307

FTA Section 5310

Other Federal Please specify

Other State Please specify

**Primary Purpose(s) of Organization**

The questions in this section are seeking information related to your organization as a whole, not the specific project(s) you are seeking funding for.

### Organization Mission Statement

### Click or tap here to enter text.

### Description of All Current Services Provided

### Click or tap here to enter text.

### Briefly describe the agency’s geographic service area

### Click or tap here to enter text.

### Please describe the agency’s current approach and resources for providing transportation services to the elderly and disabled population

### Click or tap here to enter text.

### Does your agency have dedicated transportation staff? Click or tap here to enter text.

**If yes above, how many?** Click or tap here to enter text.

If the answer above is yes and your agency has 50 or more transportation staff, your agency is required to have an Equal Employment Opportunity (EEO) Plan.

**Does your agency have an EEO Plan?**  N/A Yes No (if no, answer the question below)

If no, please indicate the date by which your agency will comply with this requirement Enter Date

**Does your agency have an adopted Title VI Plan?** Y / N

**Does your agency have an Americans with Disabilities Act (ADA) Plan?** Y / N

**If no to either of the above, please indicate the date by which your agency will be able to comply with this requirement:** Enter Date

**Does your agency provide Charter Services or School Bus Service?** Y / N

If yes, please describe how your agency will comply with FTA’s Charter and School Bus rules/regulations.

Y / N

**Project Narrative & Budget**

Please complete the Project Narrative questions below for your application. These questions closely align with the Project Selection Criteria identified on page 5 of this application document.

### Project Description

*Please use the space to provide an overview of the project(s) contained within with funding application. Including details on transportation days of operation and service hours, method of service delivery, fare cost, average current ridership and projected ridership (for operating and purchase of service projects) and a description of the geographical location(s) served by the project.*

Click or tap here to enter text.

### Project Needs

*Describe how the proposed project(s) are consistent with eligible 5310 program activities and objectives of the 5310 funding program.*

Click or tap here to enter text.

*If applicable, explain how the project supports continuation of existing transportation services designed to meet the needs of the elderly and disabled populations in the San Antonio UZA.*

Click or tap here to enter text.

*Describe how the proposed project(s) will increase or enhance accessibility and/or the availability of transportation services for the elderly and disabled populations in the San Antonio UZA.*

Click or tap here to enter text.

*What need(s) does the proposed project(s) address in the* [*coordinated plan*](https://www.viainfo.net/wp-content/uploads/2023/03/Regionally-Coordinated-Transportation-Plan_April2022.pdf) *(provide the page number(s) where the need is identified). Explain how the proposed project(s) address the need(s) identified.*

Click or tap here to enter text.

### Project Planning and Implementation

*When could your project begin upon receiving funding? Describe the process your organization would take to implement the project, including timelines.*

Click or tap here to enter text.

*Please explain your agency’s coordination efforts with other organizations. Please include each coordinating agency’s name, description of coordination activities and whether or not efforts are under a formal agreement. Attach a copy of any formal agreements, letters of support, and/or letters of commitment.*

Click or tap here to enter text.

### Program Effectiveness and Evaluation

*How does your organization plan to collect information to monitor quality control and customer satisfaction related to implementing the proposed project? Include in your description any measurable indicators you propose to use.*

Click or tap here to enter text.

### Organizational Preparedness

*Describe how your proposed project aligns with the overarching mission of your organization.*

Click or tap here to enter text.

*Describe the staffing plan for this project. Who would be the primary staff person responsible for carrying out the project and managing the grant? What other staff would be involved? Describe any relevant past experience these staff have in working on the type of project proposed.*

Click or tap here to enter text.

*Please note any experience your organization has with financial reporting such as quarterly reports, annual audits and/or other forms of financial reporting.*

Click or tap here to enter text.

### Proposed Project Budget

The budget figures provided below must match the green highlighted sections from the completed Detailed Budget Request Form. Please note: All budgeted figures must represent the full amount of local share required in the event TDCs are not awarded so that applicants are aware of the full scope of their financial responsibility.

|  |  |  |  |
| --- | --- | --- | --- |
| Cost Category | Total Estimated Cost  (2-year period) | Federal Share  Not factoring TDCs | Local Share  Not factoring TDCs |
| Vehicle Purchases |  |  |  |
| Acquisition of Service |  |  |  |
| Other Capital Items |  |  |  |
| Mobility Management |  |  |  |
| Operating Assistance |  |  |  |
| TOTAL BUDGET |  |  |  |

### Local Match Sources

***Is your agency requesting Transportation Development Credits (TDCs) in lieu of Local Match?*** Y / N

Please note: VIA will request Transportation Development Credits from the Texas Department of Transportation

on your behalf for all eligible cost categories (TDCs are not eligible for operating assistance). TDCs are not guaranteed and applicants must certify that they will be able to provide the required local match in the event TDCs are not awarded.

*Is your agency prepared to provide the necessary local match in the event TDCs are not awarded?* Y/N

*Describe the sources of all local matching funds (aside from TDCs)*

Click or tap here to enter text.

*Describe any plans for continued investment or commitment to the life of the project beyond the availability of the requested grant funds.*

Click or tap here to enter text.

**Application Authority**

|  |
| --- |
| By signing the application, I certify to the best of my knowledge that: 1) the information in this application is true and accurate and that this organization has the necessary fiscal, data collection, and managerial capability to implement and manage the projects associated with this application, and that I have authority to submit this Application Package; and 2) is prepared to abide by all applicable federal requirements specified in 49 U.S.C. Section 5310, FTA Circular C 9070.1G, and FTA Circular 5010.1E.  Agency Name Click or tap here to enter text.  Name of Authorized Official Click or tap here to enter text.  Title of Authorized Official Click or tap here to enter text.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of Authorized Official Date |
|  |
|  |
|  |

**Application Checklist**

All attachments **MUST** be submitted in pdf format as part of the application submission document and in the order shown

Signed/Completed 5310 Funding Application

Detailed Budget Request Form

Fleet Inventory Supplemental Form (if applicable)

Vehicle Maintenance Plan (if applicable)

Vehicle Purchase Supplemental Form (if applicable)

Supporting budget calculation schedule for Purchase of Service funding requests (if applicable)

Mobility Management job descriptions (if applicable)

Financials and Single Audit (if applicable) for previous 2 years (you may provide a link if online)

Agreements with other organizations, letters of support / commitment (if applicable)