

**FY 2020**  
**Annual Transportation Plan (ATP)**  
**Application**

**Legal Name: County Council of Talbot County Maryland.**

**Submitted by: Delmarva Community Services, Inc.**

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(Contact person for questions regarding this application)

**Andrea Waters, CCTM,**  
**Transportation Grants Specialist**

Name/Title

410-221-1910  
Phone

410-221-2925  
Fax

Andrea@dcsdct.org  
Email

1/29/2019  
Date

**DRAFT COPY**

**ATP-20  
PROGRAM DESCRIPTION  
PART I-A**

Annual Transportation Plan for Fiscal Year 2020

SECTION 1  
PROGRAMDESCRIPTION

This part of your application is critical in justifying requested funding as well as documenting that planning requirements have been completed. Refer to application instructions for more information on what is required under each section.

This document is formatted to be 'tabbed' through. All responses should be placed in the yellow boxes. Copy and Paste where necessary inside the yellow boxes. The boxes will expand with your entries. Please enter ALL information in this file. Be sure to include this file on the disc submitted with your application

Jurisdiction/Program: TALBOT COUNTY

**A. CONTACT INFORMATION**

Applicant Organization

Legal Name: County Council of Talbot County MD DUNS #: 02-911-0582  
Mailing Address: 11 NORTH WASHINGTON STREET CAGE CODE: (SAM #) 4HH03  
Street Address: 11 NORTH WASHINGTON STREET (Part of the SAMS System)  
City: EASTON State: MD Zipcode: 21601-3178  
Federal Taxpayer ID: 52-60001028 Website (URL): http://www.talbotcountymd.gov

Application Submitted By - Must be person named on Authorizing Resolution

Name: COREY W. PACK  
Title: PRESIDENT, COUNTY COUNCIL OF TALBOT COUNTY MD  
Telephone: 410.770.8001 Fax: 410.770.8007  
Email: CPACK@TALBOTCOUNTYMD.GOV TTY:

Application Contact -Person to whom questions should be directed

Name: ANDREA WATERS  
Title: TRANSPORTATION GRANTS SPECIALIST - DCS/DCT  
Telephone: 410.221.1910 X 154 Fax: 410.221.2925  
Email: ANDREA@DCSDCT.ORG TTY:

Operator Contact--Public Transportation Programs

Name: JEROME STANLEY  
Title: OPERATIONS MANAGER  
Organization/Company: DELMARVA COMMUNITY SERVICES,INC./DELMARVA COMMUNITY TRANSIT  
Mailing Address: 10502 GREENSBORO ROAD  
Street Address: 10502 GREENSBORO ROAD  
City: DENTON State: MD Zipcode: 21629-3307  
Telephone: 410.479.4974 Fax: 410.479.4443  
Email: JEROME@DCSDCT.ORG TTY:

**Operator Contact--SSTAP/ADA Programs**

Name: JEROME STANLEY  
Title: OPERATIONS MANAGER  
Organization/Company: DELMARVA COMMUNITY SERVICES, INC./DELMARVA COMMUNITY TRANSIT  
Mailing Address: 10502 GREENSBORO ROAD  
Street Address: 10502 GREENSBORO ROAD  
City: DENTON State: MD Zipcode: 21629-3307  
Telephone: 410.479.4974 Fax: 410.479.4443  
Email: JEROME@DCSDCT.ORG TTY: \_\_\_\_\_

**B. OPERATOR/SERVICE DESCRIPTION**

**1. Service Description**

- a. Provide a general description of all of the transportation services your organization provides or administers. *Submit one set of public timetables, schedules, brochures, and maps according to the naming protocol illustrated on the Application Checklist.*

Our geographic area consists of Talbot, Kent and Caroline Counties. The levels of service are fixed route in the town of Easton with complementary ADA and deviated fixed route and demand service throughout the remainder of our service area. The Delmarva Community Services One Stop team provides mobility management for employees, employers and human service organizations with the goal of providing greater access to jobs and job training in these Counties. Specifically, the office provides travel training to individuals who are unfamiliar with using public transit. Additionally travel training teaches individuals how to read transit schedules, communicate with dispatchers, plan routes and learn about the menu of transit options which will best accommodate individuals in accessing employment. The mobility managers work to resolve transit issues for riders and employers and network with community groups and human service organizations who are also assisting their clients in becoming employable. Specifically mobility managers present regularly to the Veterans' Job Clubs about unique veteran transit programs and are regular exhibitors at all regional job fairs to provide transportation information for job seekers at the fairs. Additionally, the One Stop office makes available small vehicles for the purpose of supplementing the regular transit schedule when it cannot accommodate employee work schedules etc. A Hispanic Outreach Coordinator is a member of the mobility management team. The outreach coordinator is bi-lingual and provides travel training and mobility management to seasonal workers who speak Spanish who live in very remote areas. The outreach worker also works with the employers of the seasonal workers to inform them of transit schedules and other specialized transit services which allow them access not only to work but to other services around the work schedule. The outreach worker also advocates for the Spanish speaking riders to our transit system to interpret as well as explain cultural perceptions etc. One member of the mobility management, in addition to being a travel trainer is a marketing specialist who has established a significant information campaign comprised of print, visual and social media to promote transit services and create a greater awareness for employers, and employees.

b. As illustrated in Form 2a, did your services meet minimum performance standards?

YES

NO

If no, please *discuss* what circumstances may contribute to or cause services to operate below standards, the prospects for improvement, and any steps being considered or taken to improve performance.

Cost per Trip is high due to the total passengers trips having decreased. We believe the reason for the decreased number of passenger trips is due to the lower cost of fuel so people are able to drive their own cars rather than use public transportation.

Farebox Recovery Ratio is low because costs remain consistent where passenger trips/fare paying persons has decreased.

Passenger Trips per mile is low due to the same reasons listed above.

Passenger Trips per hour is low due to the same reasons listed above.

2. Marketing/Advertising Program

Describe your public outreach and marketing program. *Submit one copy or sample of all brochures or advertisements according to the naming protocol illustrated on the Application Checklist.*

Do you use Social Media?  YES  NO

\_\_\_\_\_ Twitter      X Facebook      \_\_\_\_\_ Other

Delmarva Community Services, Inc./Delmarva Community Transit utilizes the MUST Bus Schedule as those schedules directly relate to our pick-up locations and times. Passengers can also review the other MUST counties times and pick-up locations and how they relate and coordinate to all of the MUST Routes. The schedules and brochures are available at various stores, libraries, Dept. of Social Services, Neighborhood Service Center, doctors' offices and clinics Family Support Center. The County Dispatchers answer questions to guide and direct passenger with general as well as special requests and general route and pick-up times. The Dispatchers also inform passengers of the New Freedom/One Stop and Veterans Grant for additional detailed travel training. The drivers direct passengers and supply specific information on various routes and times. The One-Stop Travel Trainers give individual attention to passengers requiring special accommodations. Delmarva Community Services, Inc. continues to present speaking engagements as well as informational training sessions as requested. Informational sessions have been given at: Talbot, Caroline and Kent County Social Services, Maryland Department of Disabilities, Senior Centers in Kent, Caroline and Talbot Counties, Division of License and Labor Regulation, Talbot County Disabilities Coalition, Mid-Shore Family Violence Center and the Maryland Association of County Organizations. Our most effective and valuable marketing continues to be our satisfied passengers. Bus schedule for MUST Routes published in Spanish were updated and distributed in September 2016. MUST logos, MUST radio and television advertising, MUST toll-free number and website. We hired a Marketing Specialist in 2012. He has created a Facebook Page, created an improved website with access to the revised schedules. He sends stories relating to our agency and transportation department to Print, Online and Broadcast media. He does presentations about our transportation program to groups and individuals. He distributed Literature and Schedules across the Eastern Shore. A Bus Stop Shelters has been installed in Federalsburg and two more have been installed in Denton.

## C. PROJECT COORDINATION

State and Federal funding streams encourage and require coordination of resources and effort in order to minimize duplication, recognize efficiencies, increase transportation options and opportunities, and to improve overall mobility. Please refer to the section on Project Coordination in the Application Instructions for more guidance when completing this section.

1. **Coordination Within Your Organization.** *Describe* how PTP and SSTAP are integrated with each other and with your total transportation program.

Caroline and Talbot County Dispatching is managed, administered and operated from the 10502 Greensboro Road, Denton, Maryland location. The Kent County Dispatching operation is located at the Kent County Public Works Building, 709 Morgnec Road, Chestertown, Maryland. The Kent County Dispatching phone and radios are answered at the Denton location when it is necessary for the Kent County Dispatcher to drive. All mobile radio transmittal is monitored from both locations as well as the Cambridge base. The Denton, Kent and Cambridge locations of Delmarva Community Transit share buses, vehicle maintenance, office staff, janitorial services, building maintenance, drivers and administrative staff. Individual trips out of the county are arranged between the four counties, there by utilizing one vehicle and driver rather than four. This year we have also acquired the contract to provide Medical Assistance transportation for Talbot County. All these trips are coordinated as much as possible with Medical Assistance trips provided for Dorchester County.

The role of the mobility management one stop office is to assist in coordinating transit services within our organization through problem resolution, communication, transit planning, rider advocacy and small support vehicles to supplement the transit fleet. Specifically, the team analyzes routes, collects requests from riders who need transport to jobs, and provides rides using the small vehicles when buses cannot accommodate. These vehicles are used also to feed the transit routes for riders living in very remote rural areas. A particular success was coordinating door to door services and an existing fixed route in the afternoons with return trips for seasonal workers on a regular route which transformed dead head miles into fare mileage.

### 2. **Coordination with Other Organizations**

- a. **How do you currently coordinate services with other organizations?** *Describe* efforts to share vehicles, trips, seats, passengers, fuel, maintenance, and/or to purchase some or all your PTP and/or SSTAP service with other transportation operators in your service area.

Coordination occurs with Delmarva Community Transit in Cambridge, County Ride in Queen Anne's County, Medical Adult Day Care in Kent County, Kent Center, The Veterans Administration, One Stop and the three upper shore counties of Delmarva Community Transit. This coordination is accomplished by sharing rides to Baltimore, Easton, Cambridge, Centerville, Chestertown, Galena, Elkton and Salisbury. Dispatchers in each of the Delmarva Community Transit Counties and the transportation coordinators from the different agencies contact each other to determine the most efficient action. The One-Stop coordinates clients with special

needs that require additional assistance to access transportation. At times the ride is Medical Assistance, SSTAP or any of the fixed routes operating in Kent, Caroline, Queen Anne's or Dorchester Counties. The contract with Kent County Medical Adult Day Care and Kent Center allows us to combine PTP and SSTP passengers with the contract passengers. Delmarva Community Transit has an arrangement with Kent County for the purchase of diesel fuel and the lease of office space at Kent County Public Works Building. Recently a One-Stop Office was opened in Talbot County and the office space is shared with Benedictine School.

The One Stop staff works closely with the Benedictine Vocational Training Center in Easton Maryland to coordinate rides and teach individuals with Developmental disabilities how to use public transit to access the training center as well as access job placements throughout the mid-shore area. This program is very successful and has resulted in the two organizations sharing office space in the training center and the establishment of a travel training curriculum as a core component of the individuals' graduation from the training program. Veterans Administration shuttle - The mobility management team uses small vehicles to feed the VA shuttle service by transporting veterans from outlying areas to shuttle stop locations. We refer individuals to the VA service and they in turn make referrals to our service when they are full or when veterans do not qualify for their service.

**Benedictine School for Individuals with Developmental Disabilities** - One stop staff work in tandem with the Benedictine and DCT transit staff to coordinate trips for Benedictine clients using vehicles from all three programs. These trips enable Benedictine clients living in their residential program or living with their families to access work, the Benedictine Vocational training center and other social and educational activities.

- b. Provide a list of all transportation providers and/or organizations that have a program with a transportation element in your service area, and *describe* the relationship(s) between programs.

**Caroline County Health Department** - Medical Assistance and Medical Adult Day Care. Delmarva Community Transit does not have the contract to provide Medical Assistance or Medical Adult Day Care, but these passengers are encouraged to utilize the existing fixed routes. **Channel Marker, Inc.** - Special needs transportation. Delmarva Community Transit provides supplemental transportation in the more rural areas that we traverse with the existing SSTAP service.

**Talbot County Health Department** - Delmarva Community Transit currently provides Medical Assistance in Talbot County. Also, their passengers are utilizing the fixed routes in Easton and St. Michaels and are given schedules and assistance from the drivers. Passengers use their Independence Card as remuneration for the trip, along with one dollar.

**Kent County Social Services** - Delmarva Community Transit is currently transporting passengers to the Social Service Office as well as the JOB Programs. These passengers are transported on the current SSTP routes from the rural areas. Passengers are able to use their Independence Card and one dollar as remuneration to transfer to the fixed route in Chestertown to continue their trip.

**Caroline County Social Services** - Delmarva Community Transit is currently transporting passengers to the Social Service Office as well as the JOB Programs. These passengers are transported on the current SSTP routes from the rural areas. Passengers are able to use their Independence Card and one dollar as remuneration to transfer to the fixed route in Denton to continue their trip.

Talbot County Social Services – Delmarva Community Transit is currently transportation passengers to the Social Services Office. Passengers are able to use their Independence Card and on dollar as remuneration to transfer to the fixed routes in Easton, Denton, Chestertown, Federalsburg, Preston, Chesapeake College and Centreville.

Kent County Health Department – Delmarva Community Transit currently does not provide Medical Assistance in Kent County but these riders are encouraged to utilize the fixed routes.

Kent Center, Inc. – Special needs transportation. Delmarva Community Transit provides transportation.

St. Benedictine – Special needs transportation. Delmarva Community Transit provides transportation.

JW Express, Scotty's Taxi, Bay Area Transportation – provide taxi and/or bus service in the Public Service Area.

County Ride-Queen Anne's County – Delmarva Community Transit coordinates service with County Ride for trips out of our service area and supplies information to residents of Queen Anne's County when they would like to utilize routes which we operate through Church Hill, Centreville and Wye Mills.

All of the above were contracted, via letter and a copy of the Public Hearing Notice was enclosed.

Chester River Hospital Center – Located in Chestertown, Kent County Maryland. Delmarva Community Transit transports passenger to the hospital and the physicians located in the adjoining Medical Center. The passengers reside in Kent, Caroline and Queen Anne's Counties. Transportation is a coordinated endeavor with Delmarva Community Transit counties and County Ride.

Dorchester General Hospital – Located in Cambridge, Dorchester County, Maryland. Delmarva Community Transit transports passengers to the hospital with the cooperation and coordination of Dorchester and the Denton location of Delmarva Community Transit. The passengers reside in Caroline, Talbot and Queen Anne's Counties.

Shore Regional Hospital – Located in Easton, Talbot County, Maryland. Delmarva Community Transit transports passengers to the hospital. The passenger reside in Kent, Queen Anne's, Caroline, Dorchester and Talbot Counties. Transportation is accomplished through the cooperation of County Ride and Delmarva Community Transit.

Chester River Manor – Located in Chestertown, Kent County, Maryland. Delmarva Community Transit transports visitors and employees to the nursing/rehabilitation center from Kent and Caroline Counties.

Choptank Community Health Systems, Inc. – Locations in Denton, Federalsburg, Goldsboro and St. Michaels. Delmarva Community Transit transports passengers to the facilities from Kent, Caroline and Talbot Counties.

The Pines Genesis and William Hill Manor – both located in Easton, Talbot County, Maryland. Transportation can be accessed from the fixed route in Easton.

Veterans Administration shuttle – The mobility management team uses small vehicles to feed the VA shuttle service by transporting veterans from outlying areas to shuttle stop locations. We refer individuals to the VA service and they in turn make referrals to our service when they are full or when veterans do not qualify for their service.

Benedictine School for Individuals with Developmental Disabilities - One stop staff work in tandem with the Benedictine and DCT transit staff to coordinate trips for Benedictine clients using vehicles from all three programs. These trips enable Benedictine clients living in their residential program or living with their families to access work, the Benedictine Vocational training center and other social and educational activities.

3. Transportation Advisory Committee. Do you have a local Transportation Advisory Committee?

YES

NO

*Describe the organizational structure, membership, meeting schedule, and Submit a copy of minutes from the most recent two meetings according to the naming protocol illustrated on the Application Checklist.*

Transportation Advisory Committee Agenda and mailing list are attached. No minutes are kept at the meetings.

**ATP-20  
CURRENT SERVICES  
PART I-B**

Annual Transportation Plan for Fiscal Year 2020

Jurisdiction Name **TALBOT COUNTY**  
 Legal Name **DELMARVA COMMUNITY SERVICES, INC.**

**Form 1: TRANSPORTATION PROGRAM SUMMARY**

**Summary of Total Transportation Services**

*Identify all types of transportation services provided by your organization by checking the appropriate boxes and indicate their respective funding sources.*

Transportation Service	Funding Source(s)						
	5307	5311	ADA	SSTAP	Large Urban	Other	
<input checked="" type="checkbox"/> General Public	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Senior Center/Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Medical	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Nutrition	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Adult Day Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> Contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Specify Other \_\_\_\_\_

Other 1 - Funding Source \_\_\_\_\_

Other 2 - Funding Source \_\_\_\_\_

**Vehicle Summary**

<u>23</u> Vehicles Used in Peak Service*	**Total vehicles operated in max. service	<u>23</u> Lift/Ramp-Equipped Veh
+ <u>2</u> Spare/Backup Vehicles	by Fixed Route <u>10</u>	<u>46</u> Wheelchair Placements in
= <u>25</u> Total in Service**	by Demand Response <u>13</u>	<u>3</u> Vehicles On Order
<u>9%</u> Spare Ratio	**The total should equal cell B30	

**Employee Characteristics:**

Drivers:	Non-CDL	CDL	Fixed Route	Paratransit	Total
Full-Time	<u>0</u>	<u>7</u>	<u>15</u>	<u>7</u>	<u>27</u>
Part-Time	<u>2</u>	<u>25</u>	<u>0</u>	<u>12</u>	<u>37</u>
Volunteer	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>Mechanics</b>	<u>1.5</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1.5</u>
<b>Street Supervisor</b>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<b>Dispatchers</b>	<u>3</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>3</u>
<b>Administration</b>	<u>0.5</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0.5</u>
<b>Management</b>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>1</u>
<b>TOTAL</b>	<u>8</u>	<u>32</u>	<u>15</u>	<u>12</u>	<u>40</u>

\* Must match total number of peak vehicles on Form #7

\*\* Must match total active Vehicle Inventory on Form #6, exclusive of vehicles on order (not yet delivered)

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction Name  
Legal Name

TALBOT COUNTY  
DELMARVA COMMUNITY SERVICES, INC.

**Form 2: CURRENT SERVICE CHARACTERISTICS**

*Provide current service characteristics for all MTA-funded services.*

Funding Source	Type of Service	Level of Service (1)	Days & Hours of Operation	Fares(2):						
				General Public	Elderly	Disabled	Student	Donations	Other	
Large Urban	Fixed-Route									
	Deviated Fixed-Route									
	Demand-Response									
Section 5311	Fixed-Route	100%	Easton M-F 5:30 AM to 6:30 PM	\$3.00	\$1.50	\$1.50	\$2.00			Independence Cards and
	Deviated Fixed-Route	100%	Kent & Caroline M-F 5:30 AM to 6:00 PM	\$3.00	\$1.50	\$1.50	\$2.00			Chesapeake College tickets
	Demand-Response									
SSTAP	Fixed-Route									
	Deviated Fixed-Route									
	Demand-Response	100%	Caroline, Kent and Talbot	\$3.00	\$1.50	\$1.50	\$2.00			JOB
	Taxi Voucher		M-F, 7:00 AM to 4:00 PM							
Section 5307	Deviated Fixed-Route									
	Demand-Response									
	Deviated Fixed-Route									
ADA	Demand-Response	100%	Easton M-F 8:00 AM to 3:00 PM	\$4.00	\$4.00	\$4.00	\$4.00			

(1) Indicate approximate percentage of each service type operated within each grant program.  
 (2) Attach fare schedule if zones/mileage differences are used.



Annual Transportation Plan for Fiscal Year 2020  
**TALBOT COUNTY**  
**DELMARVA COMMUNITY SERVICES, INC.**

Jurisdiction Name  
 Legal Name

**Form 7: VEHICLE UTILIZATION PLAN**

*Indicate how each vehicle listed in the Vehicle Inventory (Form 6) is used on a regular basis. If vehicles are used for multiple services, please use a separate line for each route or service. If schedules are different on different days of the week, please use a separate line for each day. Insert additional lines and pages as needed.*

Usual Vehicle (Agency Fleet No.)	Route Name or Number	Origin of Route	Geographic Areas Served	Destination of Route	Trip Purpose	Passenger/Client Group	One-way Trip Length	Usual No. of Riders/Day	Days of the Week	Hours of Day Operated	
										Start Time	End Time
<i>Example</i>	<i>Yourtown Shuttle</i>	<i>101 Main St., Yourtown</i>	<i>Yourtown area</i>	<i>Yourtown Mall</i>	<i>general purpose</i>	<i>general public</i>	<i>12 miles</i>	<i>25</i>	<i>M-F</i>		
225	Shuttle St. M	Denton	Talbot Co	St. Michaels	Med/Nut/Emp	GP/SR/Dis	32	12	M-F	5:00	10:00
225	Rel.C	Denton	Talbot Co	St. Michaels	Med/Nut/Em	GP/SR/Dis	23	12	M-F	10:00	12:00
VARIABLES	Betterton	Chestertown	Kent Co	Chestertown	Med/Train	GP/Dis	30		CALL ONLY	7:00	16:30
223	Rt D-A	Denton	Talbot Co	Easton	Emp/College	GP	35	30	M-F	6:30	13:00
178	Trappe	Denton	Talbot Co	Easton	Emp/College	GP/SR	38	8	M-F	7:15	10:00
178	Trappe	Denton	Talbot Co	Easton	Emp/College	GP/SR	38	8	M-F	15:30	16:30
163	Coleman	Chestertown	Kent Co	Still Pond	Med/Nut	SR/GP/Dis	45	42	M-F	7:00	16:00
225	St Michaels	Denton	Talbot Co	St Michaels	Emp/College	GP/SP	52	22	M-F	12:00	19:00
178	KI Benid	Denton	Talbot/QA	Kent Is.	Educat	Dis	35	15	M-F	6:00	7:15
178	KI Benid	Denton	Talbot/QA	Kent Is.	Educat	Dis	35	15	M-F	16:30	17:30
1301	sstap	St Michaels	Talbot	Easton	Rec/Nut/Med	SR/GP/Dis	30	20-25	M-F	7:00	3:30
940	Rt 4-A	Chestertown	Kent/QA/Talbot	Easton	College/Emp	GP/SR	118	56	M-F	4:00	12:00
940	Rock Hall	Chestertown	Kent Co	Chestertown	Nut/Emp/Col	SR/GP/Dis	23	28	M-F	12:00	16:00
223	Goldsboro	Denton	Caroline Co.	Goldsboro	Med/Shop	SR/GP/Dis	36	14	M-F	13:30	15:30
218	Rt C-A-P	Denton	Talbot Co	Easton	College/Emp	GP/SR	15	40	M-F	7:00	17:30
1117	Rt 6-A-P	Denton	Caroline/Talbot	Easton	Emp/College	GP/SR	27	20	M-F	5:30	17:30

Annual Transportation Plan for Fiscal Year 2020

TALBOT COUNTY

DELMARVA COMMUNITY SERVICES, INC.

Jurisdiction Name

Legal Name

Form 7: VEHICLE UTILIZATION PLAN

Indicate how each vehicle listed in the Vehicle Inventory (Form 6) is used on a regular basis. If vehicles are used for multiple services, please use a separate line for each route or service. If schedules are different on different days of the week, please use a separate line for each day. Insert additional lines and pages as needed.

Usual Vehicle (Agency Fleet No.)	Route Name or Number	Origin of Route	Geographic Areas Served	Destination of Route	Trip Purpose	Passenger/ Client Group	One-way Trip Length	Usual No. of Riders/ Day	Days of the Week	Hours of Day Operated
216	Kent Ct.	Chestertown	Kent	North Kent	Emp Train	Disabled	37	28	M-F	7:00 - 10:30
216	Kent Ct.	Chestertown	Kent	North Kent	Emp Train	Disabled	37	28	M-F	14:00 - 17:30
220	Rt 7-A	Denton	Caroline/Talbot	Easton	College/Emp	GP/SR	21	12	M-F	5:30 - 7:00
930	Kent Ct.	Chestertown	Kent	Central Kent	Emp Train	Disabled	29	24	M-F	7:00 - 10:30
930	Kent Ct.	Chestertown	Kent	Central Kent	Emp Train	Disabled	29	24	M-F	14:00 - 17:30
1119	Mod 4-A	Denton	Kent/QA/Talbot	Easton	College/Emp	GP/SR	58	72	M-F	8:30 - 13:00
178	JARC D	Denton	Caroline/Talbot	Easton	Emp/Rec	GP/SR	44	63	Sat	10:00 - 15:30
varies	Rel. D	Denton	Talbot Co.	Easton	Med/Nut/Em	GP/SR/Dis	32	12	M-F	12:00 - 15:00
157	Cliff City	Chestertown	Kent Co	Chestertown	Nut/Med/Emp	SR/GP/Dis	44	2	Call Only	7:00 - 10:00
155	Newtown	Denton	Talbot Co.	Cordova	Nut/Med/Emp	SR/GP/Dis	25	12	CALL ONLY	8:00 - 14:00
1119	St. Benedictine	Denton	Caroline/Talbot	Easton	Emp Train	Dis/GP	50	48	M-F	7:00 - 8:30
1119	St. Benedictine	Denton	Caroline/Talbot	Easton	Emp Train	Dis/GP	50	48	M-F	13:00 - 18:00
902	St. Benedictine	Denton	Caroline/Talbot	Ridgely	Emp Train	Dis/GP	50	54	M-F	13:00 - 18:00
902	St. Benedictine	Denton	Caroline/Talbot	Ridgely	Emp Train	Dis/GP	50	54	M-F	7:00 - 8:30
1115	Route 5	Denton	Caroline/Talbot	Easton	Emp/Colleg	GP/SR	45	34	M-F	7:00 - 16:30
196	Millington	Chestertown	Kent Co	Chestertown	Nut/Med/Em	SR/GP/Dis	43	18	M-F	7:00 - 14:30
220	Rt 7 - P	Denton	Talbot Co.	Easton	Emp/Colleg	GP/SR	21	12	M-F	13:00 - 17:30



Annual Transportation Plan for Fiscal Year 2020

Form 6: REVENUE VEHICLE INVENTORY

Indicate all vehicles currently owned by the applicant organization, as well as vehicles requested in FY20 and those funded or promised for future years that are currently on order. Attach additional sheet and paper as needed.

Agency Fleet Number	Vehicle Identification Number (VIN)	Current Status	Road Year	Make	Vehicle Type	Length (ft)	Seating Capacity		Standing Capacity	Fuel Type	Delivered Price	MTA Grant Number or Other Source	Funding Ratio (Local)	In-Service Date	Current Convention	Current Mileage	Minimum Useful Life		Estimated Useful Life Remaining		Exhaustible Remaining (hrs)	Donor	Supports Multiple Hosts?	Date of 5th Annual to Dispose	Date of Disposal	If Rebuilt, Indicate Vehicle Rebuild
							Amby	Over									Miles	Years	Miles	Years						
DR	142 1FDXK3F50013716	Inactive	2006	FORD	Bus, Light Duty	23	12	20	0	Diesel	\$ 50,656.00	MD-18-0023	80/70/0	12/1/2006	1	300,372	200,000	6	(100,372)	-6.1	2013	LOTS	No	10/22/2018	12/14/2018	
DR	178 1FDXK3F50013716	Active	2011	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 58,942.00	MD113398C2012	80/70/0	5/1/2011	3	254,390	200,000	6	(54,450)	-0.7	2015	LOTS	No			
DR	183 1BWSJAAM2ZM4788J8	Active	2013	ELDOBA	Bus, Light Duty	30	24	20	0	Diesel	\$ 140,251.00	DO113398C2012	80/70/0	5/1/2013	3	133,940	200,000	6	(66,616)	0.3	2019	LOTS	No			
DR	196 1FDXK3F50013716	Active	2013	FORD	Bus, Light Duty	23	12	20	0	Diesel	\$ 58,942.00	MD18-0023	80/70/0	5/1/2013	3	133,940	200,000	6	(66,616)	-2.3	2015	LOTS	No			
DR	302 1FDXK3F50013716	Inactive	2006	FORD	Bus, Light Duty	23	12	20	0	Diesel	\$ 58,942.00	MD18-0023	80/70/0	5/1/2006	2	284,888	200,000	6	(84,888)	-8.1	2012	LOTS	No			
DR	501 1FDXK3F50013716	Inactive	2006	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 55,845.68	MD-18-0023	80/70/0	5/1/2006	2	284,888	200,000	6	(84,888)	-6.7	2012	LOTS	No			
DR	502 1FDXK3F50013716	Inactive	2006	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 55,845.68	MD-18-0023	80/70/0	5/1/2006	2	284,888	200,000	6	(84,888)	-6.7	2012	LOTS	No			
DR	502 1FDXK3F50013716	Inactive	2006	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 55,845.68	MD-18-0023	80/70/0	5/1/2006	2	284,888	200,000	6	(84,888)	-6.7	2012	LOTS	No			
DR	701 1FDXK3F50013716	Active	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	3	195,177	200,000	6	(4,823)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8	2015	LOTS	No			
DR	800 1FDXK3F50013716	Inactive	2008	FORD	Bus, Light Duty	26	16	20	0	Diesel	\$ 60,682.80	MD-18-0023	80/70/0	4/1/2009	2	284,887	200,000	6	(84,887)	-3.8						

Annual Transportation Plan for Fiscal Year 2020

State of Maryland  
Department of Transportation

Vehicle Administration Services, Inc.

Form 651

FORM 651 - EQUIPMENT (NON-REVENUE VEHICLES AND OTHER EQUIPMENT)

Indicate if vehicle currently owned by the applicant/department. If not, enter full name of owner and paper or model.

Agency Fiscal Year	Vehicle Identification Number (VIN)	Current Status	Model Year	Make	Vehicle Type	Length (ft)	Seating Capacity		Fuel Type	Delivered Price	Mileage Number or Other Mileage	Purchase Date	Current Physical Condition	Current Mileage		Estimated Useful Life Remaining		Date of PFA Approval to Dispose	Disposition Method	If Repaired, Vehicle Being Replaced
							Seating	Weight (lbs)						Miles	Years	Miles	Years			
2011	2011L0008	Active	2011	TOYOTA	Subcompact Car	17	0	0	Gasoline	\$ 23,694.00	105,345.00	6/7/2013	4	236,200	200,000	6	3.8	2019	NO	
2011	2011L0008	Active	2011	TOYOTA	Subcompact Car	17	0	0	Gasoline	\$ 23,694.00	105,345.00	6/7/2013	4	236,200	200,000	6	3.8	2019	NO	

Signature of Administrator of the Department

Date

**ATP-20  
PROGRAM COMPLIANCE, Part I  
PART I-C**

## PROGRAM COMPLIANCE, Part I

### A. CIVIL RIGHTS

Do you: 1) employ 100 or more transit-related employees (including temporary, full-time, or part-time employees either directly and/or through contractors); AND 2) request or receive State/Federal capital or operating assistance in excess of \$1 million in the FY2018, or request or receive planning assistance in excess of \$250,000 in FY2018? *If "Yes", to both questions, provide one copy of your current MDOT MTA approved EEO Program according to the naming protocol illustrated on the Application Checklist.*

YES

NO

Do you: 1) employ 50-99 transit-related employees (including temporary, full-time, or part-time employees either directly and/or through contractors); AND 2) request or receive State/Federal capital or operating assistance in excess of \$1 million in the FY2018, or request or receive planning assistance in excess of \$250,000 in FY2018? *If "Yes", to both questions, provide one copy of your current MDOT MTA approved EEO Program according to the naming protocol illustrated on the Application Checklist.*

YES

NO

If your organization does not have an MDOT MTA approved EEO Program or Abbreviated Program, please contact your Regional Planner.

The State and any subrecipients that receive funds from FTA for planning, capital, or operating assistance or any combination thereof in excess of \$250,000 to award in prime contracts, NOT including funds for transit vehicle purchases, in a given Federal Fiscal Year must prepare a DBE Program.

Is the amount of State/Federal funds received in FY 2018 for planning, capital, operating assistance, or any combination thereof more than \$250,000? *If "Yes", please provide a copy of your approved DBE Program. If your organization does not have an MDOT MTA approved DBE Program, please contact your regional planner. You must prepare and submit a DBE Program.*

YES

NO

If your project received less than \$250,000, do you have an MDOT MTA approved DBE Policy Statement? *If "Yes", please provide a copy of your approved DBE Policy Statement. If your organization does not have an MDOT MTA approved DBE Policy Statement, please contact your regional planner. You must prepare and submit a DBE Policy Statement.*

YES

NO

Do you have a purchase of service agreement with a private operator/contractor? *If "Yes", please provide one copy of the contractor's EEO Program AND their DBE Program or Policy Statement according to the naming protocol illustrated on the Application Checklist.*

YES

NO

Have you submitted a Title VI Plan to the MDOT MTA within the past three years? If so, when?

YES

NO

If "Yes", has your Title VI Plan been approved by MDOT MTA?

YES

NO

Are you in a census area with a population more than 200,000?

YES

NO

Date of Approval 6/28/18

*Please provide one copy of your most recent Title VI Policy Statement/Plan according to the naming protocol illustrated on the Application Checklist.*

MDOT MTA Use Only  
Office of Local Transit Support

Reviewed By:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**B. CIVIL RIGHTS CONTACTS – Applicant (Please provide current information)**

**EEO CONTACT - Applicant**

Name Santo Grande  
Title President/CEO  
Department/Organization Delmarva Community Services, Inc.  
Phone 410-221-1900 E-Mail santo@dcsdct.org  
Address 2450 Cambridge Beltway  
City, State ZIP Cambridge MD 21613

**DBE CONTACT - Applicant**

Name Santo Grande  
Title President/CEO  
Department/Organization Delmarva Community Services, Inc.  
Phone 410-221-1900 E-Mail santo@dcsdct.org  
Address 2450 Cambridge Beltway  
City, State ZIP Cambridge MD 21613

**Title VI CONTACT - Applicant**

Name Santo Grande  
Title President/CEO  
Department/Organization Delmarva Community Services, Inc.  
Phone 410-221-1900 E-Mail santo@dcsdct.org  
Address 2450 Cambridge Beltway  
City, State ZIP Cambridge MD 21613

**C. CIVIL RIGHTS CONTACTS – Contractors (Please provide current information)**

**EEO CONTACT - Contractor**

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Department/Organization \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail \_\_\_\_\_  
Address \_\_\_\_\_  
City, State ZIP \_\_\_\_\_

**DBE CONTACT - Contractor**

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Department/Organization \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail \_\_\_\_\_  
Address \_\_\_\_\_  
City, State ZIP \_\_\_\_\_

**Title VI CONTACT - Contractor**

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Department/Organization \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail \_\_\_\_\_  
Address \_\_\_\_\_  
City, State ZIP \_\_\_\_\_

**D. SAFETY AND SECURITY**

1. Federal regulations require that *AT LEAST* 1% of Federal Funds be used for Safety and Security purposes.

In FY 2018, what was the total amount of Federal funding received for all programs?  
 \$695,321.00 (Total)

Then, "Total" x .01 = \$6,953.00 *Minimum* required expenses on Safety/Security in FY 2018.

Did your organization achieve the 1% goal for FY 2018? What were your total safety and security project expenses? \_\_\_\_\_ \$6,953.00 \_\_\_\_\_

YES

NO

If Yes - complete table below

If No - Contact your Regional Planner

2. Documentation of Security Expenses		
SECURITY PROJECTS	\$ AMOUNT	DESCRIPTION
<i>Infrastructure/Capital Improvements</i>		
Increased Lighting		
Increased Surveillance		
Emergency Communications		
Other Projects	6,953	Security cameras on buses
<i>Operating/Personnel Expenditures</i>		
In-House Security Personnel		
Contract Security Personnel		
Security Training		
Other Projects		
<b>Total</b>		

MDOT MTA Use Only  
 Statewide Planning Division

Reviewed by:

Signature \_\_\_\_\_

Date \_\_\_\_\_

## E. MAINTENANCE PROGRAM

1. Describe your preventive vehicle maintenance program. Include cycles and major intervals for preventive work.

*Submit current copies of all maintenance forms used in the program. Submit a full copy of your PM Program if it changed in the past year. Please follow naming protocol illustrated on the Application Checklist.*

Copy of PM Plan attached. All the forms used in the vehicle maintenance program are attached. Each time a service is completed on a vehicle a sticker is placed on the vehicle stating the date and mileage the maintenance was done. The mechanics and office staff collect odometer reading on all vehicles weekly to see if it is time for another maintenance to be performed. Any problems with the vehicle are recorded on a Vehicle Inspection Report and reported to the mechanics. The mechanics then take the vehicle out of service to check and/or repair the vehicle. All maintenance performed on a vehicle that is 16 passenger or more is recorded on a Passenger Bus Preventative Maintenance Report and filed for the State of Maryland. All maintenances and repairs are recorded on a Job Work order and the total costs on the work orders are spread appropriately across the program in which the vehicle is used.

2. Who is responsible for the routine and preventive maintenance of the transportation program fleet?

- In-house (Transportation program employees)
- In-house (other city/county/municipal department)
- County/Municipal Garage
- Local Garage(s)
- Partner Agency
- Private Maintenance Vendor
- Included in Purchase of Service Agreement/Operating Contract

3. If routine and preventive maintenance are done in-house or by another city / county department, *describe the following:*

- a) the arrangements,
- b) the number of maintenance personnel assigned (or trained) to transportation, and
- c) how maintenance charges are assessed.

Delmarva Community Services, Inc. has three in-house mechanics. The mechanics provide a Job order for each job done to each vehicle. The maintenance costs are then spread to each program. The salary of all the mechanics are spread based on miles.

4. If routine and preventative maintenance (PM) are done in-house, do you incur labor charges over \$100,000 per year? If yes, please provide a Force Account Plan for PM.

Not applicable, we do not incur labor charges over \$100,000 per year.

5. If routine maintenance is performed by private vendor(s) *describe the following:*

- a) the vendor selection process and criteria used,
- b) how charges are assessed (attach a copy of the written contract or price schedule),  
and/or
- c) your informal verbal agreement.

Not applicable

6. Do you require a pre-trip vehicle inspection?

YES

NO

Submit a copy of the pre-trip checklist.

Copy attached.

7. Who performs the inspection?

- Driver/Operator
- Dispatcher
- Operations/Supervisory Staff
- Maintenance Staff Person
- Other (\_\_\_\_\_)

8. Do you operate vehicles with a seating capacity of 16 passengers or more, including the driver or over 10,000 GVWR?

- YES  NO

If yes, you are subject to the Maryland Preventive Maintenance Program.

Copy attached.

9. Are any of your facilities funded or constructed with Federal or State funds?

YES

NO

Do you have a maintenance program/policy for these transit facility(ies)?

YES

NO

Copy attached

## F. TRAINING PROGRAMS

1. Effective July 1, 2008, (FFY 2009) MDOT MTA requires that AT LEAST 1% of ALL grant funds be used for training purposes.

In FY 2018, what was the total amount of grant funding received for all programs?  
\$1,281,358.00 (Total)

Then, "Total" x .01 = \$12,814.00 *Minimum* required expenses on Training in FY 2018.  
What was your organization's total for training expenses in FY 2018? \$12,814.00

- 2a. If you obtained training that was provided at no cost to you, please indicate:

Did you use a TransitSCORE Trainer?  YES  NO

Did you obtain training through NTI?  YES  NO

Please specify other training obtained at no cost:

Please provide the following information:

Name of Training:

Name[s] of the Trainer[s]:

# of Persons Trained:

Date[s] Training Conducted:

Location of Training Site:

**2b. Documentation of Training Expenses**

TRAINING CONDUCTED	\$ AMOUNT	DESCRIPTION
TAM CONFERNECE	4,000	
CTAA CONFERENCE	2,000	
Update Driver's Trainings	2,500	
New Driver Trainings	2,500	
Strategic Plan Management Training	1,814	
Other Projects		
<b>Total</b>	<b>12,814</b>	

Add more rows to the table if needed.

### 3. Training Program Description

Please *describe* your training programs. Be sure to include as much information as possible about new hire training, on-going and/or re-training, course curriculum, schedules, topics, resources, and materials. Provide information regarding who conducts the training, how the training is evaluated, and how it is determined to be successful.

#### a) Driver Training:

Delmarva Community Services, Inc. is the training site for the eastern region for the Maryland Transit Administration for community transit providers. We are equipped with a complete training facility. Specific areas of training are conducted by Jerome Stanley, our Operations Manager, as follows:

1. CPR
2. First Aid
3. Passenger Assistance Techniques
4. Understanding the Needs and Capabilities of Special Needs Passengers
5. Substance Abuse Awareness in Rural Transit
6. Emergency Procedures in rural Transit
7. Special Transit and Rural Driver Training
8. Defensive Driver Training
9. Fire Extinguisher Use
10. Bloodborne Pathogens
11. Sensitivity

#### b) Maintenance Training:

1. Pre and Post Trip Inspection Training
2. Radio Usage
3. Mobile Telephone Usage

#### c) Other Training:

## G. PURCHASED TRANSPORTATION

If you have a contract with a separate provider who is included on your Form B-2 as Purchased Transportation and you have submitted a Form B-3 on their behalf, *submit one copy of their contract. Please follow appropriate naming protocol illustrated on the Application Checklist.*

A brief description of the contract arrangement should be included here, including the operator(s), contract term and any options, and the scope of services to be provided.

Not Applicable

## H. DRUG AND ALCOHOL TESTING POLICY

Do you have an approved Drug Free Workplace Policy and an approved Drug and Alcohol Testing Policy as required by FTA regulations, "Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations," at 49 CFR part 665, subpart I and in accordance with 49 CFR part 40?

YES

NO

Date of Original Policy 2003

Contractor Health Enhancement

Date of Last Update 2013

Contractor Health Enhancement

### Drug and Alcohol Policy Administrator - Applicant

Name Dottie McCracken

Title Human Resources Manager

Department/Organization Delmarva Community Services, Inc.

Phone 410-221-1900 E-Mail dottie@dcsdct.org

Address 2450 Cambridge Beltway

City, State ZIP Cambridge MD 21613

### Drug and Alcohol Policy Administrator - Service Contractor

Name Health Enhancement

Title Lavonne Palmer, Account Manager

Department/Organization

Phone 410-822-8690 E-Mail

Address 8615 Commerce Drive Suite 4

City, State ZIP Easton MD 21613

### Drug and Alcohol Policy Administrator - Maintenance Provider

Name Dottie McCracken

Title Human Resources Manager

Department/Organization Delmarva Community Services, Inc.

Phone 410-221-1900 E-Mail dottie@dcsdct.org

Address 2450 Cambridge Beltway

City, State ZIP Cambridge MD 21613

Copy Attached

## I. CELL PHONE POLICY

Do you have a policy regarding the use of cell phones and other portable electronic devices for employees of your program?

YES

NO

Copy attached

**ATP-20  
OPERATING BUDGET REQUEST  
PART II-A**

Annual Transportation Plan for Fiscal Year 2020

Jurisdiction Name:  
Legal Name:

Form B-1: FY 2020 Grant Budget Summary

Totals on this form must equal totals on Forms B-2, B-3, B-4, B-5, C-4, C-5, and C-7 and C-9. This form is designed to fill in automatically with information entered into these forms.

However, please review this information to ensure that the numbers for each grant program and type of assistance do match.

Program Name	Share	Operating Assistance	Capital Assistance				Technical Assistance	Total
			Vehicles Replacement/Expansion	Refurbishment	Equipment	Facilities		
Section 5303/5304 Technical Assistance	Federal						\$	\$
	State							
	F&S-Subtotal						\$	\$
	Local						\$	\$
	Subtotal						\$	\$
Large Urban	State						\$	\$
	Local						\$	\$
							\$	\$
	Subtotal						\$	\$
	Federal	\$ 478,199					\$	\$ 478,199
	State	\$ 159,400					\$	\$ 159,400
	F&S-Subtotal	\$ 637,598					\$	\$ 637,598
	Local	\$ 267,150					\$	\$ 267,150
	Subtotal	\$ 904,748					\$	\$ 904,748
Section 5311 Operating Assistance	Federal	\$ 163,494	\$ 40,000				\$ 203,494	\$ 203,494
	State	\$ 20,437	\$ 5,000				\$ 25,437	\$ 25,437
	F&S-Subtotal	\$ 183,931	\$ 45,000				\$ 228,931	\$ 228,931
	Local	\$ 20,436	\$ 5,000				\$ 25,436	\$ 25,436
	Subtotal	\$ 204,367	\$ 50,000			\$ 254,367	\$ 254,367	
PTP Capital Assistance	Federal							\$
	State							\$
	F&S-Subtotal							\$
	Local							\$
	Subtotal							\$
Section 5307	Federal							\$
	State							\$
	F&S-Subtotal							\$
	Local							\$
	Subtotal							\$
ADA	State	\$ 40,000					\$ 40,000	\$ 40,000
	Local	\$ 10,874					\$ 10,874	\$ 10,874
		\$ 50,874					\$ 50,874	\$ 50,874
	Subtotal	\$ 493,973	\$ -	\$ -	\$ -	\$ -	\$ 493,973	\$ 493,973
SSTAP	State	\$ 153,692	\$ -	\$ -	\$ -	\$ -	\$ 153,692	\$ 153,692
	Local	\$ 647,665	\$ -	\$ -	\$ -	\$ -	\$ 647,665	\$ 647,665
		\$ 493,973	\$ -	\$ -	\$ -	\$ -	\$ 493,973	\$ 493,973
	Subtotal	\$ 1,603,287	\$ -	\$ -	\$ -	\$ -	\$ 1,603,287	\$ 1,603,287
TOTAL MTA-FUNDED PROGRAMS	Federal	\$ 478,199	\$ 163,494	\$ 40,000	\$ -	\$ -	\$ 203,494	\$ 681,693
	State	\$ 693,373	\$ 20,437	\$ 5,000	\$ -	\$ -	\$ 25,437	\$ 719,810
	F&S-Subtotal	\$ 1,171,571	\$ 183,931	\$ 45,000	\$ -	\$ -	\$ 228,931	\$ 1,400,503
	Local	\$ 431,716	\$ 20,436	\$ 5,000	\$ -	\$ -	\$ 25,436	\$ 457,152
	TOTAL	\$ 1,603,287	\$ 204,367	\$ 50,000	\$ -	\$ -	\$ 254,367	\$ 1,857,654

Annual Transportation Plan for Fiscal Year 2020

Jurisdiction Name: TALBOT COUNTY  
 Legal Name: DELMARVA COMMUNITY SERVICES, INC.

Form B-2: OPERATING BUDGET SUMMARY

	Total Program	SSTAP	Large Urban	Section 5311	Section 5307	ADA <i>(Form B-4 column H)</i>	Senior Ride
<b>OPERATIONS EXPENSES</b>							
Driver Salaries	\$ 591,971	\$ 244,695		\$ 328,391		\$ 18,885	
Dispatcher Salaries	\$ 113,995	\$ 48,310		\$ 61,957		\$ 3,728	
Fringe Benefits	\$ 165,535	\$ 68,968		\$ 91,251		\$ 5,316	
Fuel & Oil	\$ 214,711	\$ 92,269		\$ 115,321		\$ 7,121	
Vehicle Insurance	\$ 67,308	\$ 29,373		\$ 35,716		\$ 2,219	
Vehicle Depreciation (1)	\$ -					\$ -	
Vehicle Lease	\$ -					\$ -	
Vehicle License	\$ -					\$ -	
Vehicle Storage Facility	\$ -					\$ -	
Operations Training	\$ -					\$ -	
Other	\$ -					\$ -	
<b>Subtotal Operations</b>	<b>\$ 1,153,520</b>	<b>\$ 483,615</b>	<b>\$ -</b>	<b>\$ 632,636</b>	<b>\$ -</b>	<b>\$ 37,269</b>	<b>\$ -</b>
<b>PURCHASED SERVICE</b>	<b>\$ 290,739</b>	<b>\$ 124,944</b>	<b>\$ -</b>	<b>\$ 165,795</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

(2) These programs will not appear in your budget for public transportation. This application is not intended to be used for these programs.

Annual Transportation Plan for Fiscal Year 2020

Jurisdiction Name: TALBOT COUNTY  
 Legal Name: DELMARVA COMMUNITY SERVICES, INC.

Form B-2: OPERATING BUDGET SUMMARY

	Total Program	SSTAP	Large Urban	Section 5311	Section 5307	ADA	Senior Ride
<b>MAINTENANCE EXPENSES</b>							
Mechanics Salaries	\$ 50,335	\$ 21,255		\$ 27,382		\$ 1,698	
Mechanics Aids Salaries	\$ -					\$ -	
PM-Capital Expense	\$ -					\$ -	
Tubes & Tires	\$ 19,755	\$ 7,986		\$ 11,127		\$ 642	
Fringe Benefits	\$ -					\$ -	
Maintenance Contract	\$ 53,376	\$ 23,184		\$ 28,504		\$ 1,688	
Materials & Supplies (parts)	\$ 5,177	\$ 2,255		\$ 2,749		\$ 173	
Maintenance Facility Rental	\$ 10,859	\$ 4,655		\$ 5,839		\$ 365	
Equipment Rental	\$ -					\$ -	
Utilities	\$ 5,970	\$ 2,481		\$ 3,281		\$ 208	
Maintenance Training	\$ 261	\$ 107		\$ 145		\$ 9	
Other	\$ 780	\$ 345		\$ 409		\$ 26	
<b>Subtotal Maintenance</b>	<b>\$ 146,513</b>	<b>\$ 62,268</b>	<b>\$ -</b>	<b>\$ 79,436</b>	<b>\$ -</b>	<b>\$ 4,809</b>	<b>\$ -</b>

(2) These programs will not appear in your budget for public transportation. This application is not intended to be used for these programs.

Annual Transportation Plan for Fiscal Year 2020

Jurisdiction Name: TALBOT COUNTY  
 Legal Name: DELMARVA COMMUNITY SERVICES, INC.

Form B-2: OPERATING BUDGET SUMMARY

	Total Program	SSTAP	Large Urban	Section 5311	Section 5307	ADA	Senior Ride
<b>ADMINISTRATIVE EXPENSES</b>							
Administrator Salary	\$ 4,798	\$ 1,996		\$ 2,637		\$ 165	
Manager Salary	\$ 36,867	\$ 14,682		\$ 21,035		\$ 1,150	
Secretary Salary	\$ 8,425	\$ 3,561		\$ 4,578		\$ 286	
Bookkeeper Salary	\$ 8,425	\$ 3,561		\$ 4,578		\$ 286	
Other Salary	\$ 10,003	\$ 4,236		\$ 5,428		\$ 339	
Fringe Benefits	\$ 20,159	\$ 8,062		\$ 11,456		\$ 641	
Materials & Supplies	\$ 7,516	\$ 3,185		\$ 4,074		\$ 257	
Telephone	\$ 6,191	\$ 2,590		\$ 3,389		\$ 212	
Office Rental	\$ -					\$ -	
Utilities	\$ 19,691	\$ 8,081		\$ 10,948		\$ 662	
Office Equipment Rental	\$ 1,314	\$ 556		\$ 713		\$ 45	
Administrative Training	\$ 1,391	\$ 623		\$ 723		\$ 45	
Safety & Security	\$ -					\$ -	
Other	\$ 175,771	\$ 73,811		\$ 96,236		\$ 5,724	
<b>Subtotal Administration</b>	\$ 300,551	\$ 124,944	\$ -	\$ 165,795	\$ -	\$ 9,812	\$ -
<b>TOTAL EXPENSES</b>	\$ 1,891,323	\$ 795,771	\$ -	#####	\$ -	\$ 51,890	\$ -

(2) These programs will not appear in your budget for public transportation. This application is not intended to be used for these programs.

(3) Include Medical Assistance and other transportation contracts

(1) Depreciation is not an eligible expense for vehicles/equipment purchased with State or Federal funds.  
 (2) While these funds are not requested in this application, it is important to indicate your estimated budget.

Annual Transportation Plan for Fiscal Year 2020

TALBOT COUNTY  
 DELMARVA COMMUNITY SERVICES, INC.

Jurisdiction Name:  
 Legal Name:

Form B-2: OPERATING BUDGET SUMMARY

	Total Program	SSTAP	Large Urban	Section 5311	Section 5307	ADA	Senior Ride
<b>FAREBOX AND OTHER REVENUE NOT INCLUDED AS LOCAL SHARE</b>							
Passenger Fares	\$ 69,262	\$ 30,589		\$ 37,657		\$ 1,016	
Passenger Donations	\$ -					\$ -	
Charter Revenue	\$ -					\$ -	
Advertising	\$ 37,238	\$ 18,619		\$ 18,619		\$ -	
Contracts Revenue (itemize):	\$ 181,536	\$ 98,898		\$ 82,638		\$ -	
	\$ -					\$ -	
	\$ -					\$ -	
	\$ -					\$ -	
	\$ -					\$ -	
<b>TOTAL REVENUE</b>	<b>\$ 288,036</b>	<b>\$ 148,106</b>	<b>\$ -</b>	<b>\$ 138,914</b>	<b>\$ -</b>	<b>\$ 1,016</b>	<b>\$ -</b>
<b>NET PROJECT COST</b>	<b>\$ 1,603,287</b>	<b>\$ 647,665</b>	<b>\$ -</b>	<b>\$ 904,748</b>	<b>\$ -</b>	<b>\$ 50,874</b>	<b>\$ -</b>
<i>(net expenses minus revenue for 5307; total expenses minus revenue for all others)</i>							
<b>LOCAL FUNDS (itemize):</b>							
Local County Government	\$ 249,303	\$ 86,123		\$ 159,243		\$ 3,937	
Fuel Tax Refund	\$ 34,471	\$ 4,108		\$ 30,363		\$ -	
DCSDCT	\$ 147,942	\$ 63,461		\$ 77,544		\$ 6,937	
	\$ -					\$ -	
	\$ -					\$ -	
<b>TOTAL LOCAL FUNDS</b>	<b>\$ 431,716</b>	<b>\$ 153,692</b>	<b>\$ -</b>	<b>\$ 267,150</b>	<b>\$ -</b>	<b>\$ 10,874</b>	<b>\$ -</b>
<b>FEDERAL/STATE FUNDS REQUESTED</b>	<b>\$ 1,171,571</b>	<b>\$ 493,973</b>	<b>\$ -</b>	<b>\$ 637,598</b>	<b>\$ -</b>	<b>\$ 40,000</b>	<b>\$ -</b>

(2) These programs will not appear in your budget for public transportation. This application is not intended to be used for these programs.

Comments:

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program:  
 Legal Name:

**Form B-4: ADA OPERATING BUDGET**

*Note: This form is three pages long. Do not insert or delete columns or rows.  
 An ADA Operating Project Justification Form must be attached for ADA funded projects.*

	ADA FY2019 Awarded	ADA FY 2020 Requested	% Change
<b>VEHICLE OPERATIONS EXPENSES</b>			
Driver Salaries	\$ 18,885	\$ 18,885	0%
Dispatcher Salaries	\$ 3,728	\$ 3,728	0%
Fringe Benefits	\$ 5,316	\$ 5,316	0%
Fuel & Oil	\$ 7,121	\$ 7,121	0%
Tubes & Tires			#DIV/0!
Vehicle Insurance	\$ 2,219	\$ 2,219	0%
Vehicle Depreciation (1)			#DIV/0!
Vehicle Lease			#DIV/0!
Vehicle License			#DIV/0!
Vehicle Storage Facility			#DIV/0!
Operations Training			#DIV/0!
Other			#DIV/0!
<b>Subtotal Operations</b>	<b>\$ 37,269</b>	<b>\$ 37,269</b>	<b>0%</b>
<b><u>PURCHASED SERVICE (2)</u></b>			
			#DIV/0!
<b>MAINTENANCE EXPENSES</b>			
Mechanics Salaries	\$ 1,698	\$ 1,698	0%
Mechanics Aids Salaries			#DIV/0!
Presentative Maintenance			#DIV/0!
Tubes & Tires	\$ 642	\$ 642	0%
Fringe Benefits			#DIV/0!
Maintenance Contract	\$ 1,688	\$ 1,688	0%
Materials & Supplies (parts)	\$ 173	\$ 173	0%
Maintenance Facility Rental	\$ 365	\$ 365	0%
Equipment Rental			#DIV/0!
Utilities	\$ 208	\$ 208	0%
Maintenance Training	\$ 9	\$ 9	0%
Other	\$ 26	\$ 26	0%
<b>Subtotal Maintenance</b>	<b>\$ 4,809</b>	<b>\$ 4,809</b>	<b>0%</b>

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program:

Legal Name:

**Form B-4: ADA OPERATING BUDGET**

*Note: This form is three pages long. Do not insert or delete columns or rows.  
An ADA Operating Project Justification Form must be attached for ADA funded projects.*

	<u>ADA FY2019 Awarded</u>	<u>ADA FY 2020 Requested</u>	<u>% Change</u>
<b>ADMINISTRATIVE EXPENSES</b>			
Administrator Salary	\$ 165	\$ 165	0%
Manager Salary	\$ 1,150	\$ 1,150	0%
Secretary Salary	\$ 286	\$ 286	0%
Bookkeeper Salary	\$ 286	\$ 286	0%
Other Salary	\$ 339	\$ 339	0%
Fringe Benefits	\$ 641	\$ 641	0%
Materials & Supplies	\$ 257	\$ 257	0%
Telephone	\$ 212	\$ 212	0%
Office Rental			#DIV/0!
Utilities	\$ 662	\$ 662	0%
Office Equipment Rental	\$ 45	\$ 45	0%
Administrative Training	\$ 45	\$ 45	0%
Safety & Security			#DIV/0!
Other	\$ 5,724	\$ 5,724	0%
<b>Subtotal Administration</b>	<b>\$ 9,812</b>	<b>\$ 9,812</b>	<b>0%</b>
<b>TOTAL EXPENSES</b>	<b>\$ 51,890</b>	<b>\$ 51,890</b>	<b>0%</b>

- (1) Depreciation is not an eligible expense for vehicles/equipment purchased with State or Federal funds.
- (2) A separate budget worksheet must be submitted for each operator from whom you purchase service.

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program:

Legal Name:

**Form B-4: ADA OPERATING BUDGET**

*Note: This form is three pages long. Do not insert or delete columns or rows.  
An ADA Operating Project Justification Form must be attached for ADA funded projects.*

	ADA FY2019 Awarded	ADA FY 2020 Requested	% Change
<b>FAREBOX AND OTHER REVENUE NOT INCLUDED AS LOCAL SHARE</b>			
Passenger Fares	\$ 1,016	\$ 1,016	0%
Passenger Donations			#DIV/0!
Charter Revenue			#DIV/0!
Advertising			#DIV/0!
Contracts Revenue (Itemize):			#DIV/0!
			#DIV/0!
<b>TOTAL REVENUE</b>	\$ 1,016	\$ 1,016	0%
<b>NET PROJECT COST</b>	\$ 50,874	\$ 50,874	0%
<i>(total expenses minus revenue)</i>			
<b>LOCAL FUNDS (identify by source)</b>			
Local County Government	\$ 3,937	\$ 3,937	0%
Fuel Tax Refund			#DIV/0!
DCSDCT	\$ 6,937	\$ 6,937	0%
			#DIV/0!
			#DIV/0!
<b>TOTAL LOCAL FUNDS</b>	\$ 10,874	\$ 10,874	0%
<i>minimum 10% of net project cost</i>			
	21%	21%	0%
<b>STATE FUNDS REQUESTED</b>	\$ 40,000	\$ 40,000	0%
<i>up to 90% of net project cost</i>			

**ATP-20  
CAPITAL PROJECT PLAN  
PART II-B**

## Annual Transportation Plan for Fiscal Year 2020

Jurisdiction/Program: \_\_\_\_\_

Legal Name: \_\_\_\_\_

### Form C-1: SUMMARY OF FY 2020 CAPITAL REQUESTS IN PRIORITY ORDER

List all FY20 Capital requests in order of priority (highest priority first), and indicate project type and requested funding source. Indicate fleet number of vehicles to be replaced.

Priority	Project Name or Brief Description	Project Type					Requested Funding Source (check one)	
		Vehicle			Equip-ment	Facility	PTP	SSTAP
		Repl.	Exp.	Refurb.				
	Veh #							
1	Preventative Maintenance		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	Replace Small Cutaway	178	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	Replace Small Cutaway	801	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	Replace Small Van	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Small Bus Worksheet and Order Form

Jurisdiction/Program: TALBOT COUNTY

Legal Name: DELMARVA COMMUNITY SERVICES, INC.

<b>Form C-2: CAPITAL PROJECT PLAN</b>
<b>Small BUS COST WORKSHEET</b>

A. Unit Base Price				
Item	Description	Quantity	Unit Base Price Per Vehicle	Total Costs
1	<i>Type 4A - 176" Wheelbase, Dual Rear Wheel (DRW) with 16/2 seating, Gas Engine</i>	1	\$61,451.00	\$61,451.00

B. OPTION LIST				
Item	Description	Quantity	Unit Price	Unit Price
1	Option 1 - Electronic Destination Signs	1	\$3,877.00	\$3,877.00
2	Option 2 - Fire Suppression System	0	\$3,277.00	\$0.00
3	Option 3 - Farebox Accommodation	1	\$1.00	\$1.00
4	Option 4 - Farebox	1	\$1,212.00	\$1,212.00
5	Option 5 - Full Camera System	1	\$6,931.00	\$6,931.00
6	Option 6 - Dual-Vision Camera System	0	\$795.00	\$0.00
7	Option 7 - Passenger Stop Request	0	\$334.00	\$0.00
8	Option 8 - Flat Floor	0	\$459.00	\$0.00
9	Option 9 - Manually Operated Passenger Door	0	\$759.00	\$0.00
10	Option 10 - Bike Rack	1	\$1,585.00	\$1,585.00
11	Option 11 - Strobe Light	1	\$165.00	\$165.00
12	Option 12 - Public Address System			
	12.1 Public Address system	0	\$460.00	\$0.00
	12.2 Optional Hands Free Microphone	0	\$264.00	\$0.00
13	Option 13 - Radio Delete	0	\$300.00	\$0.00
14	Option - Not Applicable			
15	Option - Not Applicable			
16	Option 16 - Diagnostic Equipment			
	16.1 - Laptop Computers	0	\$1,800.00	\$0.00
	16.2 - Engine Diagnostic Readers/Scanners	0	\$80.00	\$0.00
17	Option 17 - Training	0	\$1.00	\$0.00
18	Option 18 - Back-up Camera System	1	\$271.00	\$271.00
19	Option 19 - XL3 Hybrid Electric Drive System	0	\$16,880.00	\$0.00
20	Option 20 - Driver's Storage Compartment	0	\$300.00	\$0.00
21	Option 21 - Passenger Counters			
	21.1 - Single Tally 4-Digit Passenger Counter	0	\$220.00	\$0.00
	21.2 - Four Tally 4-Digit Passenger Counter	0	\$788.00	\$0.00

22	Option 22 - MORryde RL Suspension System	0	\$895.00	\$0.00
<b>SUB TOTAL - B (LINES 01 - 22)</b>			<b>\$39,536.00</b>	<b>\$14,042.00</b>

**C. ADDITIONAL OPTIONS - Seating**

Item	Description		Unit Price	Unit Price
23	Single flip seat	0	\$248.00	\$0.00
24	Double flip seat	0	\$412.00	\$0.00
25	Double fold flip seat	2	\$508.00	\$1,016.00
26	Extra-long retractable seat belts (in lieu of standard)	0	\$23.00	\$0.00
27	Cloth fabric (Level 4) on passenger seats	0	\$1.00	\$0.00
<b>SUB TOTAL - C (LINES 23 - 27)</b>			<b>\$1,192.00</b>	<b>\$1,016.00</b>

**D. ADDITIONAL OPTIONS - Exterior Options**

Item	Description		Unit Price	Unit Price
28	Lettering on exterior of vehicle - basic (agency name on two sides)	1	\$350.00	\$350.00
29	Lettering on exterior of vehicle - advanced (agency name and logo on two sides)	0	\$650.00	\$0.00
30	Full Body Paint (Alternate Color)	0	\$3,500.00	\$0.00
31	Stripes – single color 6” stripe	1	\$325.00	\$325.00
<b>SUB TOTAL - D (LINES 28 - 31)</b>			<b>\$4,825.00</b>	<b>\$675.00</b>

**E. PARATRANSIT**

Item	Description		Unit Price	Unit Price
32	Folding Platform Lift (in lieu of standard lift)	0	\$200.00	\$0.00
33	Additional Q'straint QRT-360 Fully Automatic tiedown system per position	0	\$789.00	\$0.00
<b>SUB TOTAL – E (LINES 32 - 33)</b>			<b>\$589.00</b>	<b>\$0.00</b>

**Grand Total** **\$77,184.00**

**G. GRANT NUMBER:**

**FUNDS BREAKOUT** Federal : \$ 61,748.00      State: \$ 7,718.00      Local: \$ 7,718.00

**Is this Bus a replacement or expansion vehicle?** **REPLACEMENT**

**Bus number being replaced:** # 178

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Small Bus Worksheet and Order Form

Jurisdiction/Program: **TALBOT COUNTY**

Legal Name: **DELMARVA COMMUNITY SERVICES, INC.**

<b>Form C-2: CAPITAL PROJECT PLAN</b>
<b>Small BUS COST WORKSHEET</b>

A. Unit Base Price				
Item	Description	Quantity	Unit Base Price Per Vehicle	Total Costs
1	<i>Type 4A - 176" Wheelbase, Dual Rear Wheel (DRW) with 16/2 seating, Gas Engine</i>	1	\$61,451.00	\$61,451.00

B. OPTION LIST				
Item	Description	Quantity	Unit Price	Unit Price
1	Option 1 - Electronic Destination Signs	1	\$3,877.00	\$3,877.00
2	Option 2 - Fire Suppression System	0	\$3,277.00	\$0.00
3	Option 3 - Farebox Accommodation	1	\$1.00	\$1.00
4	Option 4 - Farebox	1	\$1,212.00	\$1,212.00
5	Option 5 - Full Camera System	1	\$6,931.00	\$6,931.00
6	Option 6 - Dual-Vision Camera System	0	\$795.00	\$0.00
7	Option 7 - Passenger Stop Request	0	\$334.00	\$0.00
8	Option 8 - Flat Floor	0	\$459.00	\$0.00
9	Option 9 - Manually Operated Passenger Door	0	\$759.00	\$0.00
10	Option 10 - Bike Rack	1	\$1,585.00	\$1,585.00
11	Option 11 - Strobe Light	1	\$165.00	\$165.00
12	Option 12 - Public Address System			
	12.1 Public Address system	0	\$460.00	\$0.00
	12.2 Optional Hands Free Microphone	0	\$264.00	\$0.00
13	Option 13 - Radio Delete	0	\$300.00	\$0.00
14	Option - Not Applicable			
15	Option - Not Applicable			
16	Option 16 - Diagnostic Equipment			
	16.1 - Laptop Computers	0	\$1,800.00	\$0.00
	16.2 - Engine Diagnostic Readers/Scanners	0	\$80.00	\$0.00
17	Option 17 - Training	0	\$1.00	\$0.00
18	Option 18 - Back-up Camera System	1	\$271.00	\$271.00
19	Option 19 - XL3 Hybrid Electric Drive System	0	\$16,880.00	\$0.00
20	Option 20 - Driver's Storage Compartment	0	\$300.00	\$0.00
21	Option 21 - Passenger Counters			
	21.1 - Single Tally 4-Digit Passenger Counter	0	\$220.00	\$0.00
	21.2 - Four Tally 4-Digit Passenger Counter	0	\$788.00	\$0.00

22	Option 22 - MORryde RL Suspension System	0	\$895.00	\$0.00
<b>SUB TOTAL - B (LINES 01 - 22)</b>			<b>\$39,536.00</b>	<b>\$14,042.00</b>

**C. ADDITIONAL OPTIONS - Seating**

Item	Description		Unit Price	Unit Price
23	Single flip seat	0	\$248.00	\$0.00
24	Double flip seat	0	\$412.00	\$0.00
25	Double fold flip seat	2	\$508.00	\$1,016.00
26	Extra-long retractable seat belts (in lieu of standard)	0	\$23.00	\$0.00
27	Cloth fabric (Level 4) on passenger seats	0	\$1.00	\$0.00
<b>SUB TOTAL - C (LINES 23 - 27)</b>			<b>\$1,192.00</b>	<b>\$1,016.00</b>

**D. ADDITIONAL OPTIONS - Exterior Options**

Item	Description		Unit Price	Unit Price
28	Lettering on exterior of vehicle - basic (agency name on two sides)	1	\$350.00	\$350.00
29	Lettering on exterior of vehicle - advanced (agency name and logo on two sides)	0	\$650.00	\$0.00
30	Full Body Paint (Alternate Color)	0	\$3,500.00	\$0.00
31	Stripes – single color 6” stripe	1	\$325.00	\$325.00
<b>SUB TOTAL - D (LINES 28 - 31)</b>			<b>\$4,825.00</b>	<b>\$675.00</b>

**E. PARATRANSIT**

Item	Description		Unit Price	Unit Price
32	Folding Platform Lift (in lieu of standard lift)	0	\$200.00	\$0.00
33	Additional Q'straint QRT-360 Fully Automatic tiedown system per position	0	\$789.00	\$0.00
<b>SUB TOTAL – E (LINES 32 - 33)</b>			<b>\$589.00</b>	<b>\$0.00</b>

**Grand Total** **\$77,184.00**

**G. GRANT NUMBER:**

**FUNDS BREAKOUT Federal : \$ 61,748.00 State: \$ 7,718.00 Local: \$ 7,718.00**

**Is this Bus a replacement or expansion vehicle? REPLACEMENT**

**Bus number being replaced: # 801**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Replace # 20

<b>MARYLAND TRANSIT ADMINISTRATION Minivan Order Form</b>			
<b>BASE VAN TYPE</b>	<b>QTY</b>	<b>Price</b>	<b>Extended Price</b>
Accessible Side entry Minivan**	1	\$ 50,000.00	\$ 50,000.00
Accessible Rear Entry Minivan**		\$ 50,000.00	\$ -
<b>EQUIPMENT OPTIONS</b>			
Fold up middle seat*		TBD	NA
Power fold out ramp*		TBD	NA
Extra long seat belts*		TBD	NA
Upgraded seating material*		TBD	NA
<b>TOTAL</b>			<b>\$ 50,000.00</b>
<b>LOCAL SHARE (10%)</b>			<b>\$ 5,000.00</b>

\*\*pricing is based on estimates and is subject to change, add number of vans to QTY

\* these options may or may not be available, please ✓ those of interest

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program: \_\_\_\_\_  
 Legal Name: \_\_\_\_\_

**Form C-4: CAPITAL PROJECT PLAN FY 2020 VEHICLE REQUESTS**

List all FY20 vehicle requests. Use the vehicle cost calculated on Forms C-2a, C-2b, C-2c, C-2d and/or C-3. Attach a Vehicle Replacement Worksheet for each replacement requested. Insert additional rows as needed.

Priority (1)	Type of Request		Fleet No. of Vehicle Being Replaced (from Form 6)	In Service Date	Information on Requested Vehicle				Total FY20 Project Cost	FY20 Funding			
	Replacement	Expansion			Accessibility	Seating Capacity		Communications Equipment		PTP		SSTAP	
						Ambulatory	Wheelchair		Total		Fed/State (90%)	Local (10%)	State (95%)
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	178	5/1/2012	Lift	16	2	18	Radio	\$ 77,184	\$ 69,466	\$ 7,718	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	801	4/1/2009	Lift	16	2	18	Radio	\$ 77,184	\$ 69,466	\$ 7,718	
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20	6/1/2013	None	8	0	8	Cell	\$ 50,000	\$ 45,000	\$ 5,000	
	<input type="checkbox"/>	<input type="checkbox"/>						0					
	<input type="checkbox"/>	<input type="checkbox"/>						0					
	<input type="checkbox"/>	<input type="checkbox"/>						0					
	<input type="checkbox"/>	<input type="checkbox"/>						0					
	<input type="checkbox"/>	<input type="checkbox"/>						0					
	<input type="checkbox"/>	<input type="checkbox"/>						0					
	<input type="checkbox"/>	<input type="checkbox"/>						0					
<i>Insert additional rows as needed above this row.</i>										\$ 204,368	\$ 183,932	\$ 20,436	\$ -
<b>Total Requested Vehicle Costs:</b>													

(1) Must be the same priority number as shown among all FY20 capital requests indicated in Form C-1.

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program: \_\_\_\_\_  
 Legal Name: \_\_\_\_\_

**VEHICLE REPLACEMENT WORKSHEET**

*This form must be completed FOR EACH FY20 vehicle replacement request  
 The following must correspond to the information indicated for this request on Form C-1*

Priority: 2 Cost: \$ 77,184

Requested Vehicle Type:  Small/Cutaway     Medium/High Floor < 30'     Medium/Low Floor < 30'     Sedan/Other  
 Trolley     Heavy/Transit - 30'     Heavy/Transit - 35'     Heavy/Transit  
 Truck/Heavy Equipmen

*The following formula must be used to determine if the vehicle will meet the minimal service life criteria:*

Agency Fleet Number (from Form 6)	178
In Service Date (from Form 6)	5/1/2012
Vehicle Identification Number (VIN)	1FDFE4FS9CDA26794
Type of Current Vehicle (use categories above)	Small Cutaway
Seating (amb/wc)	16/2
Date Vehicle was Placed in Service (month/year)	May-12
Current Date (month/year)	January-19
Total Months of Ownership (enter whole number, digits only)	80
Current Vehicle Mileage (from Form 6)	254,490
Average Miles per Month (current mileage divided by total months of ownership)	3,181
Projected Annual Mileage (average miles per month x 12 months)	38,174
TOTAL VEHICLE MILEAGE (current plus projected mileage)	292,664
Projected Age of Vehicle in Months (total months of ownership plus 12 months)	92
TOTAL AGE OF VEHICLE IN YEARS (projected age of vehicle in months divided by 12)	7.666666667
EXPECTED USEFUL LIFE YEARS (From charts in Appendix C)	6
EXPECTED USEFUL LIFE MILEAGE (From charts in Appendix C)	200,000
YEARS OVER/UNDER USEFUL LIFE	2
MILEAGE OVER/UNDER USEFUL LIFE	92,664

ESTIMATED COST OF ANNUAL REPAIRS: \_\_\_\_\_

ESTIMATED # OF DAYS OUT OF SERVICE: \_\_\_\_\_

Has an extended warranty been purchased for this vehicle? If yes, to what mileage?

- Yes       No \_\_\_\_\_

If you are awarded a replacement vehicle, how will you dispose of the vehicle to be replaced?

- Sell vehicle       Use vehicle as backup - contingency fleet  
 Junk vehicle       Other: \_\_\_\_\_

Who will procure the new vehicle?

- MTA Contract  
 Local Procurement

If local procurement, estimate number of days from award date:

- Project Advertising: \_\_\_\_\_  
 Project Award: \_\_\_\_\_  
 Project Delivery: \_\_\_\_\_

**JUSTIFICATION:**

*Important: Vehicle replacements require justification beyond age and mileage. Select the appropriate condition description according to the following chart and enter in the space provided. Additional details can be provided here.*

Code #            2            Descriptor   Poor  

**VEHICLE CONDITION**

Number according to the following guidelines:

Condition Code	Descriptor	General Definition of Condition Code
5	Excellent	Equipment or other assets, for which no operational problems exist, or older assets for which only routine preventative maintenance is needed to keep asset in reliable working condition.
4	Good	Equipment or other assets, for which operational problems may exist, but only occasional minor repairs beyond routine preventative maintenance may be needed to keep assets in reliable working condition.
3	Fair	Equipment or other assets, for which periodic operational problems may exist, and periodic repairs may be needed to keep asset in reliable working condition.
2	Poor	Equipment or other assets, for which significant operational problems may exist, and ongoing repairs may be needed to keep asset in reliable working condition. In this latter case these assets could be candidates for early replacement.
1	Bad	Equipment or other assets, for which substantial operational problems exist and substantial repairs are needed to keep asset in reliable working condition. These assets should receive top priority for replacement.

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program Name: \_\_\_\_\_

Legal Name: \_\_\_\_\_

**VEHICLE REPLACEMENT WORKSHEET**

*This form must be completed FOR EACH FY20 replacement request*

*The following must correspond to the information indicated for this request on Form C-1*

Priority: 3 Cost: \$ 77,184

Requested Vehicle

Type:  Small/Cutaway     Medium/High Floor < 30'     Medium/Low Floor < 30'     Sedan/Other

Trolley     Heavy/Transit - 30'     Heavy/Transit - 35'     Heavy/Transit

Truck/Heavy Equipment

*The following formula must be used to determine if the vehicle will meet the minimal service life criteria:*

Agency Fleet Number (from Form 6)	801
In Service Date (from Form 6)	4/1/2009
Vehicle Identification Number (VIN)	1FDFE45P29DA15593
Type of Current Vehicle (use categories above)	Small Cutaway
Seating (amb/wc)	16/2
Date Vehicle was Placed in Service (month/year)	April-09
Current Date (month/year)	January-19
Total Months of Ownership (enter whole number, digits only)	117
Current Vehicle Mileage (from Form 6)	246,687
Average Miles per Month (current mileage divided by total months of ownership)	2,108
Projected Annual Mileage (average miles per month x 12 months)	25,301
TOTAL VEHICLE MILEAGE (current plus projected mileage)	271,988
Projected Age of Vehicle in Months (total months of ownership plus 12 months)	129
TOTAL AGE OF VEHICLE IN YEARS (projected age of vehicle in months divided by 12)	10.75
EXPECTED USEFUL LIFE YEARS (From charts in Appendix C)	6
EXPECTED USEFUL LIFE MILEAGE (From charts in Appendix C)	200,000
YEARS OVER/UNDER USEFUL LIFE	5
MILEAGE OVER/UNDER USEFUL LIFE	71,988

ESTIMATED COST OF ANNUAL REPAIRS: \_\_\_\_\_

ESTIMATED # OF DAYS OUT OF SERVICE: \_\_\_\_\_

Has an extended warranty been purchased for this vehicle? If yes, to what mileage?

- Yes       No \_\_\_\_\_

If you are awarded a replacement vehicle, how will you dispose of the vehicle to be replaced?

- Sell vehicle       Use vehicle as backup - contingency fleet  
 Junk vehicle       Other: \_\_\_\_\_

Who will procure the new vehicle?

- MTA Contract  
 Local Procurement

If local procurement, estimate number of days from award date:

- Project Advertising: \_\_\_\_\_  
 Project Award: \_\_\_\_\_  
 Project Delivery: \_\_\_\_\_

**JUSTIFICATION:**

*Important: Vehicle replacements require justification beyond age and mileage. Select the appropriate condition description according to the following chart and enter in the space provided. Additional details can be provided here.*

Code #      2      Descriptor Poor

**VEHICLE CONDITION**

Number according to the following guidelines:

Condition Code	Descriptor	General Definition of Condition Code
5	Excellent	Equipment or other assets, for which no operational problems exist, or older assets for which only routine preventative maintenance is needed to keep asset in reliable working condition.
4	Good	Equipment or other assets, for which operational problems may exist, but only occasional minor repairs beyond routine preventative maintenance may be needed to keep assets in reliable working condition.
3	Fair	Equipment or other assets, for which periodic operational problems may exist, and periodic repairs may be needed to keep asset in reliable working condition.
2	Poor	Equipment or other assets, for which significant operational problems may exist, and ongoing repairs may be needed to keep asset in reliable working condition. In this latter case these assets could be candidates for early replacement.
1	Bad	Equipment or other assets, for which substantial operational problems exist and substantial repairs are needed to keep asset in reliable working condition. These assets should receive top priority for replacement.

**Annual Transportation Plan for Fiscal Year 2020**

Jurisdiction/Program: \_\_\_\_\_  
 Legal Name: \_\_\_\_\_

**VEHICLE REPLACEMENT WORKSHEET**

*This form must be completed FOR EACH FY20 vehicle replacement request  
 The following must correspond to the information indicated for this request on Form C-1*

Priority: 4 Cost: \$ 50,000

- Requested Vehicle Type:
- Small/Cutaway     Medium/High Floor < 30'     Medium/Low Floor < 30'     Sedan/Other
  - Trolley     Heavy/Transit - 30'     Heavy/Transit - 35'     Heavy/Transit
  - Truck/Heavy Equipmen

*The following formula must be used to determine if the vehicle will meet the minimal service life criteria:*

Agency Fleet Number (from Form 6)	20
In Service Date (from Form 6)	6/1/2013
Vehicle Identification Number (VIN)	2D4RN3DG1BR625584
Type of Current Vehicle (use categories above)	SEDAN/OTHER (MINIVAN)
Seating (amb/wc)	6/0
Date Vehicle was Placed in Service (month/year)	June-13
Current Date (month/year)	January-19
Total Months of Ownership (enter whole number, digits only)	67
Current Vehicle Mileage (from Form 6)	238,200
Average Miles per Month (current mileage divided by total months of ownership)	3,555
Projected Annual Mileage (average miles per month x 12 months)	42,663
TOTAL VEHICLE MILEAGE (current plus projected mileage)	280,863
Projected Age of Vehicle in Months (total months of ownership plus 12 months)	79
TOTAL AGE OF VEHICLE IN YEARS (projected age of vehicle in months divided by 12)	6.583333333
EXPECTED USEFUL LIFE YEARS (From charts in Appendix C)	4
EXPECTED USEFUL LIFE MILEAGE (From charts in Appendix C)	150,000
YEARS OVER/UNDER USEFUL LIFE	3
MILEAGE OVER/UNDER USEFUL LIFE	130,863

ESTIMATED COST OF ANNUAL REPAIRS: \_\_\_\_\_  
 ESTIMATED NUMBER OF DAYS OUT OF SERVICE: \_\_\_\_\_

Has an extended warranty been purchased for this vehicle? If yes, to what mileage?

- Yes       No \_\_\_\_\_

If you are awarded a replacement vehicle, how will you dispose of the vehicle to be replaced?

- Sell vehicle       Use vehicle as backup - contingency fleet  
 Junk vehicle       Other: \_\_\_\_\_

Who will procure the new vehicle?

- MTA Contract  
 Local Procurement

If local procurement, estimate number of days from award date:

Project Advertising: \_\_\_\_\_  
 Project Award: \_\_\_\_\_  
 Project Delivery: \_\_\_\_\_

**JUSTIFICATION:**

*Important: Vehicle replacements require justification beyond age and mileage. Select the appropriate condition description according to the following chart and enter in the space provided. Additional details can be provided here.*

Code #      2      Descriptor Poor  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**VEHICLE CONDITION**

Number according to the following guidelines:

Condition Code	Descriptor	General Definition of Condition Code
5	Excellent	Equipment or other assets, for which no operational problems exist, or older assets for which only routine preventative maintenance is needed to keep asset in reliable working condition.
4	Good	Equipment or other assets, for which operational problems may exist, but only occasional minor repairs beyond routine preventative maintenance may be needed to keep assets in reliable working condition.
3	Fair	Equipment or other assets, for which periodic operational problems may exist, and periodic repairs may be needed to keep asset in reliable working condition.
2	Poor	Equipment or other assets, for which significant operational problems may exist, and ongoing repairs may be needed to keep asset in reliable working condition. In this latter case these assets could be candidates for early replacement.
1	Bad	Equipment or other assets, for which substantial operational problems exist and substantial repairs are needed to keep asset in reliable working condition. These assets should receive top priority for replacement.



(2) Use current prices.

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