



CHAMPAIGN COUNTY BOARD
HIGHWAY & TRANSPORTATION COMMITTEE ADDENDUM
County of Champaign, Urbana, Illinois
Friday, December 6, 2013 - 9:00 a.m.

Highway Building Conference Room
1605 East Main Street, Urbana

XII. Other Business

- A. Resolution for Downstate Transit Improvement Fund (DTIF) Vehicle and Office Equipment Grant Application

Champaign County strives to provide an environment welcoming to all persons regardless of disabilities, race, gender, or religion. Please call 217-384-3776 to request special accommodations at least 2 business days in advance.

TO: Champaign County Highway Committee

FROM: Champaign County Regional Planning Commission Staff

DATE: December 6th, 2013

RE: Resolution for Downstate Transit Improvement Fund (DTIF) Vehicle and Office Equipment Application

Background: During the capital needs assessment statewide survey, Champaign County was asked to submit a request for proposal (RFP) for the rolling stock and office equipment indicated as a need. IDOT-DPIT then notified Champaign County of our eligibility to apply for rolling stock capital (7 medium duty accessible vehicles) and office equipment as described below. However, the grant application requires a supporting resolution from the grantee. If approved to submit an application, a public meeting will be held to gather any comments regarding this grant application.

For the Large Capital request, the proposal includes the following:

- Two 14-passenger vehicles to provide deviated fixed route multi-municipality service between Rantoul and Champaign/Urbana connecting persons with employment, job trainings, and/or child care. This rolling stock was requested for in the JARC application applied for in FY12; however, we were only awarded operating funds and no rolling stock funding for this grant.
- One 14-passenger vehicle to expand our medical shuttle service hours of operation by 28% filling a void for affordable, general public, non-emergency medical trips to pharmacies, medical appointments, hospitals and specialized medical centers for those residents living in the non-urbanized area of Champaign County. This rolling stock was requested for in the New Freedom Application in FY 12; however we were only awarded operating and no rolling stock funds for this grant.
- Four 14-passenger vehicles to expand rural Champaign County's curb-to-curb general public transportation.

For the Small Capital Request, the proposal includes the following:

- Five work stations – Four (4) work stations' replacement for existing staff and one (1) additional work station for new staff hired to provide expanded service. Each work station includes: computer, desk and chair. Current computers and desks belong to CRIS Rural Mass Transit District (operator) and are old and in need of replacement.

Requested Action:

Approve the attached resolution permitting application for rolling stock vehicles and office equipment for the rural transit system.

RESOLUTION AUTHORIZING APPLICATION FOR A PUBLIC TRANSPORTATION CAPITAL ASSISTANCE GRANT UNDER THE ILLINOIS DEPARTMENT OF TRANSPORTATION'S GENERAL AUTHORITY TO MAKE SUCH GRANTS

WHEREAS, the provision and improvement of public transportation facilities is essential to the development of a safe, efficient, functional public transportation system; and

WHEREAS, The Illinois Department of Transportation has the authority to make such Grants and makes funds available to offset certain capital costs of a private non-profit, general public transportation system or an IDOT Certified Public Provider transportation system providing specialized paratransit service; and

WHEREAS, grants for said funds will impose certain obligations upon the recipient.

NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BOARD OF THE COUNTY OF CHAMPAIGN :

Section 1. That an application be made to the Division of Public and Intermodal Transportation, Department of Transportation, State of Illinois, for a financial assistance grant under the Illinois Department of Transportation's general authority to make such Grants, for the purpose of off-setting certain public transportation facility capital costs of the County of Champaign.

Section 2. That the County Administrator of Champaign County is hereby authorized and directed to execute and file on behalf of the County of Champaign such application.

Section 3. That the County Administrator of Champaign County is authorized to furnish such additional information as may be required by the Division of Public and Intermodal Transportation in connection with the aforesaid application for said Grant.

Section 4. That the County Administrator of Champaign County is hereby authorized and directed to execute and file on behalf of the County of Champaign all required Grant Agreements with the Illinois Department of Transportation.

PRESENTED and ADOPTED the 19th day of December, 2013.

ATTEST:

Gordy Hulten, County Clerk and
Ex-officio Clerk of the County Board

Alan Kurtz, Chair
Champaign County Board

ILLINOIS DEPARTMENT OF TRANSPORTATION

**CAPITAL ASSISTANCE
APPLICATION**

INTRODUCTION

Required application items are listed on the attached checklist. The applicant will be advised of any missing or supplemental information required with respect to checklist items, or other supporting documentation. The Department considers the application as representing the applicant's intent to undertake the proposed project promptly if approved.

In the course of its review and evaluation of an application, the Department may require the applicant to submit additional information in support of the proposed project. When the Department is satisfied that all information necessary for evaluation of the application has been submitted, a final review will be undertaken.

Once review of the application is complete, the Department will process grant contracts for execution by the applicant and the Department.

Application for Capital Assistance Grant

Checklist

Instructions for this application are contained in Appendix F.

Below is a checklist provided to assist preparers of applications in meeting all of the requirements of the application process. All items are required unless otherwise indicated. Completed applications should be sent to the following address.

Carlos Campos, Bureau Chief, Capital Grants
Illinois Department of Transportation
Division of Public and Intermodal Transportation
J. R. Thompson Center, Suite 6-600
100 W. Randolph
Chicago, IL 60601

Check List **Key:** √ Item Enclosed n/a Not Applicable

1. Completed Application Form

X A. Project Description _____

X B. Project Justification

n/a C. Use of "Innovative/Green" Technology

X D. Proposed Project Budget

X E. Implementation Schedule

2. Public Notice (Appendix A)

N/A 3. Historic Preservation (Appendix B)

4. Opinion of Counsel (Appendix C)

5. Applicant's Governing Board Resolution (Appendix D)

Note: Include this checklist with the application submittal (indicate by cover letter items which are pending).

**State of Illinois
Department of Transportation
Division of Public and Intermodal Transportation**

Application for Capital Assistance Grant

Legal Name of Applicant Champaign County	Date of Application 11/1/13
Street Address, City, and Zip Code 1776 E. Washington St. Urbana, IL 61802	
Contact Person Alan Kurtz	Title Chairman, Champaign County Board
Telephone Number 217-384-3772	

The Champaign County hereby applies to the Illinois Department of Transportation for a Capital Improvement Grant. Required resolutions, certifications and other documents in support of this grant request are attached and are considered a part of this application.

A. Project Description (attach additional pages if necessary)

For the Large Capital request, the proposal includes –

- Two 14-passenger vehicles to provide deviated fixed route multi-municipality service between Rantoul and Champaign/Urbana connecting persons with employment, job trainings, and/or child care. This rolling stock was requested for in the JARC application applied for in FY12; however, we were only awarded operating and no rolling stock for this grant.
- One 14-passenger vehicle to expand our medical shuttle service hours of operation by 28% filling a void for affordable, general public, non-emergency medical trips to pharmacies, medical appointments, hospitals and specialized medical centers for those in non-urbanized areas of Champaign County. This rolling stock was requested for in the New Freedom Application in FY 12; however we were only awarded operating and no rolling stock for this grant.
- Four 14-passenger vehicles to expand rural Champaign County’s curb-to-curb general public transportation.

For the Small Capital Request

- 5 work stations – 4 replacement for existing staff and 1 additional for new staff tied to expanded service. Each work station includes: computer, desk and chair. Current computers and desks belong to CRIS Rural Mass Transit District (operator) and are old and in need of replacement.

Please identify by name and title in the space below the chief officers of record of applicant's governing board, such as Chairman, President, Secretary, Treasurer or comparably designated officers (add additional page if necessary):

Alan Kurtz
Name

County Board Chairman
Officer's Title

Debra Busey
Name

County Administrator
Officer's Title

Name

Officer's Title

Name

Officer's Title

Applicant is a:

municipality

county

corporation

mass transit district

not-for-profit**

other** _____

** For "not-for-profit" or "other" applicants, please provide a general description of applicant's services:

In support of this application, I offer the above data and attached supporting documents as required. I certify that the statements herein and in the supporting documents are correct and complete.

Champaign County 12/19/13
Applicant Date

Debra Busey County Administrator, Champaign County
Name of Authorized Official Title

Signature Attest

B. Project Justification (attach additional pages if necessary)

Vehicles are needed to expand the current service. Currently Champaign County has 5 vehicles that were purchased with start up funds and have 3 they are leasing from CRIS Rural Mass Transit District. With the current fleet size of 7 vehicles, we are not able to meet the demand/request for rides. The additional 4 vehicles requested for expansion of service and 1 for New Freedom will allow us to increase our ridership by at least 20% and will allow for the 3 vehicles leased from CRIS Rural Mass Transit District to go back to CRIS. The 2 vehicles requested for deviated fixed route JARC service, will give us the ability to incorporate the JARC service within our 5311 service if funding permits.

The 5 computer work stations which include desks, computers and chairs are needed as the current computers and desks are owned by CRIS Rural Mass Transit District (operator). The computers are over 5 years old and are in need of replacement. New computers would be necessary if in the future funding for ITS software becomes available for Champaign County.

C. Use of “Innovative/Green” Technology

Please describe by project the use of innovative or green technology to be incorporated into the project.

1. Has this project been locally endorsed and identified in the local TIP? O YES O No
 If no, can the TIP be amended in 30 -60 days? O YES O No
2. Current fleet spare ratio: 14 % (7 inservice 1 spare)
3. Fleet spare ratio with receipt of new vehicles: 8 % (11 inservice 1 spare)
4. Vehicle to be purchased from: (check one)
 - O Own specifications and procurement
 - X Purchase off existing state contract or CVP
 - O Exercising an option on existing contract
 - O Piggy-backing off another contract
 - O Joint procurement
5. If using own spec/procurement: (check one)
 - O Specifications are under development
 - O Specs are complete-ready to bid
 - O Bid process under way

D. Proposed Project Budget

Line Item Activity	TOTAL	Federal	State	Local	Estimated % of DBE Participation*
(7) 14 passenger buses	\$490,000		\$490,000		
5 computers/monitors, 5 desks, 5 chairs	\$15,780		\$15,780		
TOTAL	\$505,780		\$505,780		

* Not applicable for any rolling stock purchase.

E. Implementation Schedule

Implementation Schedule - Show anticipated contract obligations and cash disbursements by fiscal quarter after project approval. Percentages may be used, but please include dollar amounts as well. Please complete the fields below that are applicable to your project.

Fiscal Quarter (Example: 2013 1 st Quarter)	Major Activity Initiated	Contract Obligations	Cash Disbursements
Procurement			
Advertise	2nd quarter 2014		
Purchase	3rd quarter 2014	\$15,780	\$15,780
Delivery	3rd quarter 2014		
Land Acquisition (if applicable)			
Design Consultant Contract Award (if applicable)			
30% Design			
60% Design			
90% Design			
Design Complete			
Construction			
Advertise			
Award			
Start Date			
Completion Date			

Appendix A: Public Hearing Notice (Sample Language)

Notice of Public Hearing

(Name of Applicant)

RE: Capital Assistance Grant Application, Improvements to *(Description and Location of Project Facilities)*

I. Notice is hereby given that a public hearing will be held by the *(Name of Applicant)*.

Date:

Time:

Room:

Place:

For the purpose of considering a project for which financial assistance is being sought from the Illinois Department of Transportation, pursuant to its Capital Grants Program. The project is generally described as follows:

- A. Project Description: *(Brief Description of the Project Including Nature, Size, Location and Limits)*.
- B. Relocation: Relocation Assistance will not be required.
- C. Environment: This project is being implemented to minimize environmental impacts.
- D. Comprehensive Planning: This project is in conformance with comprehensive transportation planning in the area.
- E. Elderly and Handicapped: All new facilities included in this project will be accessible to the elderly and handicapped.

II. At the hearing, the *(Name of Applicant)* will afford an opportunity for interested persons or agencies to be heard with respect to the social, economic, and environmental aspects of the project. Interested persons may submit orally or in writing evidence and recommendations with respect to said project.

III. The *(Name of Applicant)* requests that any hearing impaired person wishing to attend this Public Hearing notify *(Applicant Contact Person & Telephone No.)* at least one week before the scheduled hearing date so that arrangements can be made to provide an interpreter.

IV. A copy of the application for a state grant for the proposed project will be made available for public inspection at *(Name & Address of Applicant)*.

(Contact Person Name), (Title)

(Address)

(Telephone)

Appendix B: Historic Preservation For Fixed Facility Projects Only

Basic Review Information Requirements

If the project can be considered one of those projects shown in the attached list as having no effect on historic preservation, please simply indicate same.

On the other hand, in order to request the comments of the State Historic Preservation Officer concerning possible project effects on cultural resources for purposes of the National Historic Preservation Act or the Illinois State Agency Historic Resources Protection Act, the following information should be provided:

1. Description of proposed undertaking.
2. Name of managing, funding, or licensing agency (state or federal).
3. Name of satellite agencies involved in project (state and federal).
4. Project address(es); street, municipality, and county.
5. Map (USGS 7.5 minute series topographic) of project location, and project site plan, if applicable.
6. Current photos of all standing structures within the project area (no Xerox).
7. Project plans and specifications if applicable.
8. Participating federal, state, and local funding sources/programs.

This information should be addressed to:

Deputy Historic Preservation Officer
Preservation Services Division
Illinois Historic Preservation Agency
Old State Capitol
Springfield, IL 62701

Appendix B (Continued)

Projects with no effect on Historic Preservation

1. Purchase or rehabilitation of rolling stock.
2. Equipment purchases and installation.
3. Replacement / installation of railroad crossing signal systems.
4. Rebuild / resurface an existing parking lot as long as no enlargement occurs.
5. Construction of bus turnouts of less than one acre on existing right-of-way.
6. Construction of bus layover facilities of less than one acre on existing right-of-way.
7. Construction of passenger stations / shelters of less than one acre on existing property where no demolition occurs.
8. Construction of sidewalks on existing right-of-way.
9. Parking deck replacement or expansion (vertical).
10. Underground fuel storage replacement / installation on transit property.
11. Rehabilitation work done on existing facilities less than 40 years old (garages, stations, rail yards, buildings, structures, electrical, signal, and communication systems).
12. Replacement of ballast, ties, and rail on existing right-of-way.
13. Replacement of bridges less than 40 years old where no more than one acre of new right-of-way is required.
14. Construction of pedestrian canopies.
15. Engineering / planning studies for the classes of action included above.

Appendix C: Opinion of Counsel (Sample Language)

Opinion of Counsel

I, the undersigned, am an attorney, licensed by and duly admitted to practice law in the State of Illinois and counsel for and attorney for the (*Name of Applicant*). In this capacity, my opinion has been requested concerning the eligibility of the (*Name of Applicant*) for grant assistance under the provisions of the Civil Administrative Code of Illinois (Act), 20 ILCS 2705-305. You are hereby advised as follows:

1. The (*Name of Applicant*) is an eligible recipient as defined in state regulations.
2. There are no provisions in the (*Name of Applicant*)'s charter or by-laws or in the statutes of the State, the United States of America, or any other local ordinances that preclude or prohibit the (*Name of Applicant*) from making said application for or contracting with the State for the purpose of receiving a State capital improvement grant.
3. The undersigned has no knowledge of any pending or threatened litigation, in either Federal or State courts which would adversely affect this application, or which seeks to prohibit the (*Name of Applicant*) from contracting with the State for the purpose of receiving a State capital improvement grant.

Based upon the foregoing, I am of the opinion that the (*Name of Applicant*) is an eligible recipient under the provisions of the Act, and that it is fully empowered and authorized to apply for and to accept the grant from the State.

Signature: _____
(Attorney's Name)

Attorney for: (*Name of Applicant*)

Date: _____

Appendix D: Governing Board Resolution (Sample Language)

Resolution

No. _____

Resolution authorizing submittal of the application dated (*Date of Application*) for a Public Transportation Capital Assistance Grant under the Illinois Department of Transportation's general authority to make such Grants.

WHEREAS, The provision and improvement of public transportation facilities, rolling stock, equipment and services is essential to the development of safe, efficient, functional public transportation; and

WHEREAS, The Illinois Department of Transportation has the authority to make such Grants and makes funds available to offset eligible capital costs required for providing and improving public transportation facilities, rolling stock, equipment and services; and

WHEREAS, Grants for said funds will impose certain obligations upon the recipient.

NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BOARD OF THE (*Name of Applicant*):

Section 1. That an application be made to the Division of Public & Intermodal Transportation, Department of Transportation, State of Illinois (The Department), for a financial assistance grant under the Illinois Department of Transportation's general authority to make such Grants, for the purpose of offsetting eligible public transportation capital costs of the (*Name of Applicant*).

Section 2. That (*Designated Official*) of the (*Name of Applicant*) is hereby authorized and directed to sign and submit such application on behalf of the (*Name of Applicant*).

Section 3. That the (*Designated Official*) of the (*Name of Applicant*) is authorized to furnish such additional information as may be required by the Department in connection with the aforesaid application for said Grant.

Section 4. That (*Designated Official*) of the (*Name of Applicant*) is hereby authorized and directed to execute on behalf of the (*Name of Applicant*) the Grant Agreement or subsequent Grant Agreement Amendments resulting from aforesaid application.

Section 5. That (*Designated Official*) of the (*Name of Applicant*) is hereby authorized and directed to sign such documents as may be required by the Department to request payment for the project funding authorized under aforesaid Grant Agreement.

PRESENT and ADOPTED the _____ day of _____, 20____

(*Signature of Official*)

ATTEST: _____
(*Signature*)

Title

Title

Instructions

These instructions have been developed to assist agencies in completing the application form and in complying with program requirements. Applicants should review the requirements carefully. Failure to comply with any requirements may delay or disqualify applications from consideration.

CHECKLIST

Use this page as a check-off list of the items enclosed in the application package. Mark each item with a check as it is completed. Mark any item(s) not required with “N/A” (not applicable).

PREPARING THE APPLICATION FORM

Applicant - Name of applicant organization, must be a municipality, county, or transit district or otherwise designated as eligible by state legislation.

Date of Application – Use anticipated application submittal date reflected on Page 3 of Application and referenced in *Appendix D: Governing Board Resolution*.

Address - Show the agency's complete mailing address.

Contact Person - Identify the name, title, and phone number of the person responsible for completing the application form.

Project Description - Describe the nature, size, location, and limits of all elements of the proposed project scope; for equipment, describe its use. If the scope-of-work proposed for grant funding is part of a larger project, describe its relationship to the larger project and whether this scope can function on a stand-alone basis. Indicate owners of record for all property required for the project. Explain any adverse impact the project may have on the environment. Attach site plans, conceptual plans, aerials, or photographs if available.

Project Justification - Indicate why the proposed improvements or equipment are necessary. Current conditions including any operational, design and capacity deficiencies should be discussed. Describe how the proposed improvement will ameliorate such conditions. Describe how the equipment will either expand current capabilities or replace other equipment. Emphasize as appropriate, accomplishment of program goals of improving access to, and reducing congestion at transit facilities. Applicants are advised to focus on project justification within the context of benefits to the transit system and its patrons.

Proposed Project Budget - Show line items with estimated costs by type of activity (appraisals; legal services; equipment procurement; land acquisition; demolition; contract and/or force account engineering, construction, construction management). Explain the basis for the cost estimate. A 10% contingency line item may also be included.

PUBLIC NOTICE

For fixed facilities projects (acquisition and construction) use Appendix A; for all other types of capital projects, use Appendix B. For all capital projects funded through this program the applicant must afford the public an opportunity to comment on the proposed project. This may be accomplished by conducting a public hearing, or by placing an advertisement describing the project in a newspaper with local circulation to determine the public's interest in holding a public hearing. Submit certificates of publication, and if a public hearing is held, an attendance list, written comments, and report (transcript) of proceedings. Sample Opportunity for Public Hearing and Public Hearing notices are attached as Appendix A and B.

HISTORIC PRESERVATION

Projects undertaken with state funding provided by the Illinois Department of Transportation are subject to the requirements of the Illinois State Agency Historic Resources Preservation Act [20 ILCS 3420/1 *et seq.*]. In compliance with this statute and appurtenant interagency agreements, applicants must either:

1. Identify the appropriate project which is considered to have no effect on historic, architectural or archeological resources and thus need not be reviewed under the Illinois State Agency Historic Resources Preservation Act; see Appendix C for a listing of those types of projects that are considered to have no effect; OR
2. Submit documentation from the Illinois Historic Preservation Agency (IHPA) that the undertaking will have no effect on historic, architectural, or archeological resources (information required by IHPA for its review is contained in Appendix C); OR
3. Submit documentation of an agreement between IHPA and the applicant regarding action that will be taken to accommodate any historic, architectural, or archeological resource.

OPINION OF COUNSEL

An opinion of the applicant's legal counsel is required stating that the applicant is legally organized, is empowered (eligible) to apply for, and receive the requested grant, and that there is no pending or threatened litigation that would adversely affect the applicant's ability to receive the requested funds. A sample Opinion of Counsel is attached as Appendix D.

GOVERNING BOARD RESOLUTION

A resolution must be passed by the applicant's governing board authorizing the filing of the application and execution of required grant agreement. A sample Governing Board Resolution is attached as Appendix D.