


# 2012 GRANT Pre-Application

## GENERAL INSTRUCTIONS:

- I. Complete all pages and enter responses in all fields.
- II. Required fields are marked with a \*

## Section A - Organization Information

1 - Short Name or Common Acronym *	City of Driggs		
2 - Operating Name *	City of Driggs		
3 - Legal Name *	City of Driggs		
4 - Physical Address #1 *	60 S. Main Street		
5 - Physical Address #2			
6 - Physical City *	Driggs		
7 - Physical State *	ID		
8 - Physical Zip *	83422		
9 - Mailing Address same as Physical Address? *	<b>NO</b>	Please enter Mailing Address	
10 - Mailing Address #1	P.O. Box 48		
11 - Mailing Address #2			
12 - Mailing City	Driggs		
13 - Mailing State	ID		
14 - Mailing Zip	83422		
15 - Business Phone #1 *	208-354-2362		
16 - Business Phone #2			
17 - Business Fax			
18 - Business E-Mail			
19 - Home Page / Web Address	<a href="http://driggs.govoffice.com/">http://driggs.govoffice.com/</a>		
20 - What date was this organization formed?			
21 - Established RPTA? *	<b>NO</b>		
22 - What counties does this organization currently serve?	Teton County, ID. *The city does not have an RPTA but is served by Targhee Regional Public Transit Authority.		
23 - What FTA Programs are associated with each county?	The City of Driggs does not operate any FTA programs at this time, but TRPTA serves Teton County, ID with a demand-response operation (5311)		
24 - Congressional District Entity Resides in *	<b>2ND DISTRICT</b>		
25 - Congressional District Served *	<b>2ND DISTRICT</b>		
26 - List the Local Mobility Networks (LMMN) you are currently serving? *	6B		
27 - DUNS Number *	182020578		
28 - Employer ID # EIN *	82-6000184		
29 - Current By Laws? *	<b>YES</b>	Upload a copy with your Pre-application	
30 - Current Audit? *	<b>YES</b>	Upload a copy with your Pre-application	
31 - Current Drug/Alcohol Policy? *	<b>YES</b>	Upload a copy with your Pre-application	
32 - Do you Use a Cost Allocation Methodology? *	<b>YES</b>		
Describe the Methodology (500 Characters Maximum)	We will track direct hours & costs allocated to the project within an account in the city's Caselle accounting system.		
33 - Do you have a Board of Directors?	<b>YES</b>	Upload a list of your Board members and meeting schedule with	
34 - Do you currently have a Vehicle Replacement Plan?	<b>NO</b>		
35 - Agency Type *	<b>State General and Local Government (State or City or</b>		
 <b>*Mandatory!!</b> Private non-profit applicants must attach a copy of their IRS Letter of Determination for 501(c)3 non-profit status to their submitted Pre-Application			
35 - Number of volunteer drivers (annual total)			
36 - Number of personal vehicles in service (annual total)			
37 - Average Trip Length (miles)	40 miles round-trip		
38 - TEAM Recipient ID#	N/A		

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39 - Description of products/services currently provided by this organization.* (500 Characters Maximum)	Maintains public service systems such as roads, sewers, public buildings, conducts transportation and other planning, etc. The City of Driggs will receive 2012 funding in April 2012 to contract the operation of the shuttle service between Victor–Driggs–Grand Targhee from December to April/May.
40 - Governing Board Meeting Schedule* (500 Characters Maximum)	The City of Driggs Town Council meets regularly the first and third Tuesdays of every month.

### Section B - CERTIFICATIONS AND ASSURANCES

#### Instructions:

There are Certifications and Assurances that apply to sub-recipients receiving federal funding. The Sub-recipient's Board Chair or designated individual must indicate the organization is willing to comply with the applicable certifications, assurances, and procedures in order to receive federal funding. These documents are available for download from the internet at: <http://i-way.org/Tool%20Box/documentlibrary> under the heading of **Federal Transit Administration (FTA) Documents & Links**.

1 - Will the organization comply with applicable certifications, assurances, and procedures?

YES, the organization is willing to comply with any applicable certifications, assurances, and procedures.

NO, the organization is NOT willing to comply with the applicable certifications, assurances, and procedures.

(NOTE: NO means you will not be eligible to receive funding.)

**YES**

**Please note:** a subrecipient of the State of Idaho is required to comply with certain pass-through requirements. Here are the references:

**Audits** (Procedure M-2010-20), **Open Meeting** (Procedure M-2010-19) <http://i-way.org/Mobility%20Funding/procedures>

**Procurement** <http://adm.idaho.gov/adminrules/rules/idapa38/0501.pdf>

[http://www.fta.dot.gov/funding/grants\\_financing\\_6036.html](http://www.fta.dot.gov/funding/grants_financing_6036.html)

**State Meeting and Travel** <http://www.sco.idaho.gov/web/sbe/sbeweb.nsf/pages/trvlpolicy.html>

### Section C - RESOURCE & COMMUNITY COORDINATION

1 - Do you share resources in any significant way with other agencies (e.g., maintenance/ mechanics, vehicles, staff/drivers, facilities, marketing, insurance, fuel purchases, training, bilingual programs, etc.)? If yes, provide a brief description.\*

**YES**

Description  
(700 Characters Maximum)

The City of Driggs heads the Teton Valley Mobility Advisory Committee and collaborates with the City of Victor, Teton County, as well as private businesses, public transit operators (START, TRPTA, Grand Targhee Resort, Teton County School District, Seniors Center) and non-profit organizations (LINX/YBP, Teton Valley Trails and Pathways). This group coordinates with the District 6 Mobility Manager to solicit community input on mobility needs to update the LMMN 6B mobility plan, identify and prepare grants for other sources of funding, coordinate services and routes, discuss infrastructure and rolling stock needs and inventory resources to maximize efficiency of mobility operations in and around the community.

2 - Have you realized any measurable or quantifiable savings in costs directly through, or as a result of, your coordination efforts? If yes, provide a brief description.\*

**YES**

Description  
(700 Characters Maximum)

The TVMAC estimates that we have saved \$100,000 in mobility-related funds through our coordination efforts. We have identified where existing rolling stock was not being utilized and made plans to maximize use. Through our marketing coordination efforts we have increased rider numbers in the community by 4% and this number will go up significantly when we implement the FTA funds in 2012, we have avoided costs of acquiring inadequate facilities for rolling stock storage through coordination of multiple provider's needs and we have avoided mobility planning costs that would have otherwise needed to be paid for by local governments to outside contractors.

3 - Describe your efforts to work with other organizations, agencies, businesses, and other appropriate community interests in order to provide service (e.g., employers, medical centers, social service agencies, visitor services, activity centers, etc.). \* (Enter N/A if not applicable)

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Description  
(500 Characters Maximum)

Through the Teton Valley Mobility Advisory Committee we have reached out to several community agencies and organizations that represent all community service sectors. We have solicited input on their needs through community meetings, LMMN planning meetings and community surveys. The TVMAC group has strived to keep community decision-makers informed of the progress and challenges the community faces with regard to mobility so they can better support efforts. Specifically, Grand Targhee Resort is working with TRPTA and START to modify route schedules so that Alta residents can ride transit to Driggs to catch the commuter bus to Jackson and so that Rexburg residents can ride transit to Alta, WY and Grand Targhee Resort. START is working with the City of Driggs and various transit providers to identify and plan for bus storage and maintenance facility needs. The TVMAC group is working with the School District to identify and plan for school children's transit needs. TVMAC is helping to identify mobility needs that will be included in the Teton County Comprehensive Plan updates that are currently underway. The TVMAC group is working with different municipalities to identify the best locations for bus stops and transit centers, signage and promotional display areas. TVMAC is working with the Chamber of Commerce, the Teton Valley Foundation, LINX and Grand Targhee Resort to promote mobility services and future plans to the community and potential visitors through website updates, comprehensive route schedule development, and spreading the word through the community.

### Section D - PROJECT INFORMATION

1 - In which state(s) will your project provide service? *	<input checked="" type="checkbox"/> Idaho	<input type="checkbox"/> Montana	<input type="checkbox"/> Nevada
	<input type="checkbox"/> Oregon	<input type="checkbox"/> Utah	<input type="checkbox"/> Washington
	<input checked="" type="checkbox"/> Wyoming		
2 - Strategy Number *	6B.L026		
3 - Strategy Name *	Provide shuttle service from Victor-Driggs-Grand Targhee from December to April/May.		
4 - Project Name *	Town/Ski Hill Shuttle		
5 - Please describe your project * (500 Characters Maximum)	Grand Targhee Resort is the largest employer in Teton County, ID (350 employees). 98% of the Resort's employees live in Teton County, ID. 22% of the resort's employees have an income equal to or less than \$17,580/year (the federal standard for extremely low-income). 10% of the resort's employees do not own a vehicle for personal transportation. This project would use existing infrastructure to provide 7 day/week employee shuttle service mid-November to mid-April, from 6:30am to 10PM. The shuttle will be open to the public but the schedule will mainly be focused on serving employees. The grant would cover operating expenses, maintenance and administrative costs.		
6 - What mode will this project use? *	<b>Fixed Route</b>		
7 - Which funding program do you intend to apply for? *	<b>5316</b>		
8 - List the Districts this project will serve. *	6B		
9 - List the Local Mobility Networks (LMMN) this project will serve. *	6B		
10 - Is this project dependent on any of your other projects? *			<b>YES</b>
Identify the other projects that this one is dependent on. (500 Characters)	The project is not dependent on any other project. We will submit the same application for funding under the 5311 program. In 2012, we were funded for part of the project through 5311 funds and part of the project through 5316 funds.		
11 - Are you submitting other projects as options for this strategy? *			<b>NO</b>

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Identify the other projects that are options to this strategy. (500 Characters)	
12 - Does this project directly interconnect with other mobility options? *	
	<b>YES</b>
Identify the other mobility options. (500 Characters)	The route will coordinate services with the START commuter service from Driggs to Jackson, WY, with the provide that operates the Rexburg to Driggs, ID route, and the community pathway that extends from Victor, ID to Ashton, ID. The route will also allow for TRPTA demand-response riders to connect in Victor, ID, Driggs, ID and at the Targhee Employee Housing development north of Driggs, ID.

### Section E - Required Documents to Be Submitted With Application - Checklist

<b>Instructions:</b> Update the entry for each document to show a status of 'Included' as documents are prepared for uploading.		
1 - Current Bylaws	• If Applicable	<b>Included</b>
2 - Current Audit	• For any companies which historically have received Federal funds - most recent audit. • For all other companies, audit report will be provided on anniversary data of grant agreement.	<b>Included</b>
3 - Drug Alcohol Policy	• If Applicable - You will need this if you are applying for 5311 funds.	<b>Included</b>
4 - Board of Directors Information	• Meeting Schedule • Board Contact Information	<b>Included</b>
5 - Vehicle Replacement Plan	• If you are purchasing a new vehicle, you will need to have a replacement plan.	<b>Not Included</b>
6 - IRS Letter of Determination for 501(C)3 non-profit status	• If Applicable	<b>Not Included</b>

### Section F - Signature

By typing your initials in the box to the right you are verifying that you have read, understood, and agreed to all the requirements of this pre-application. This mark will act as your electronic signature:			<b>DES</b>
<b>Name and Title</b>	<b>Doug Self, Planning Administrator</b>	<b>Date</b>	<b>1/19/2012</b>