


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 *	TVT		
2 - Operating Name *	Treasure Valley Transit		
3 - Legal Name *	Treasure Valley Transit, Inc.		
4 - Physical Address #1 *	1136 W. Finch Drive		
5 - Physical Address #2			
6 - Physical City *	Nampa		
7 - Physical State *	Idaho		
8 - Physical Zip *	83651		
9 - Mailing Address same as Physical Address? *	YES		
10 - Mailing Address #1			
11 - Mailing Address #2			
12 - Mailing City			
13 - Mailing State			
14 - Mailing Zip			
15 - Business Phone #1 *	208-463-9111		
16 - Business Phone #2			
17 - Business Fax	208-465-1803		
18 - Business E-Mail	terri@treasurevalleytransit.com		
19 - Home Page / Web Address	www.treasurevalleytransit.com		
20 - What date was this organization formed?	5/24/1996		
21 - Established RPTA? *	NO		
22 - What counties does this organization currently serve?	Ada, Adams, Boise, Canyon, Elmore, Gem, Idaho, Payette, Owyhee, Washington and Valley		
23 - What FTA Programs are associated with each county?	5310: Adams, Boise, Elmore, Gem, Owyhee, Payette, Washington and Valley 5311: Adams, Canyon, Elmore, Owyhee, Payette, Washington & Valley 5316: Adams, Elmore, Payette, Washington & Valley 5317: Ada, Canyon,		
24 - Congressional District Entity Resides in *	1ST DISTRICT		
25 - Congressional District Served *	BOTH		
26 - List the Local Mobility Networks (LMMN) you are currently serving? *	3A, 3B and 3C and 2C		
27 - DUNS Number *	88-497-2332		
28 - Employer ID # EIN *	82-0489459		
29 - Current By Laws? *	YES	Upload a copy with your Pre-application	
30 - Current Audit? *	YES	Upload a copy with your Pre-application	
31 - Current Drug/Alcohol Policy? *	YES	Upload a copy with your Pre-application	
32 - Do you Use a Cost Allocation Methodology? *	YES		
Describe the Methodology (500 Characters Maximum)	This is a procurement with a defined cost per unit of service established through the Request For Bid process. TVT monitors the service through the parameters that are established in detail within the Contract.		
33 - Do you have a Board of Directors?	YES	Upload a list of your Board members and meeting schedule with your Pre-application	
34 - Do you currently have a Vehicle Replacement Plan?	YES	Upload a copy with your Pre-application	
35 - Agency Type *	Private Non-Profit		
 *Mandatory!! 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)	N/A		
36 - Number of personal vehicles in service (annual total)	N/A		
37 - Average Trip Length (miles)	N/A		
38 - TEAM Recipient ID#	7104		

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39 - Description of products/services currently provided by this organization.* (500 Characters Maximum)	Deviated Fixed Route, Fixed Route, Demand Response, Purchase of Service
40 - Governing Board Meeting Schedule * (500 Characters Maximum)	TVT Board of Directors meet on the last Tuesday of each month from 8:00 to 9:30 via conference call or in person. The Board does meet face to face quarterly.

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.	YES
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.)	

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

State Meeting and Travel <http://www.sco.idaho.gov/web/sbe/sbweb.nsf/pages/trvpolicy.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
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Description (700 Characters Maximum)	TVT provides driver training (PASS, Defensive Driving, CPR & First Aid, etc.) and technical assistance to Senior Centers, CCOA, MCOA, private and non-profit transportation providers and other agencies throughout District 3. TVT also loans out vehicles to senior centers when their vehicle is out of service.
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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
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Description (700 Characters Maximum)	TVT has developed relationships with our cities, counties and local businesses and they contribute in-kind match which have resulted in significant cost savings. These have included office space, bus parking and park and ride lots.
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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)	TVT looks for partnerships that will enable better service by coordination among senior centers, employers, health and human services, etc. As a result TVT provides service, driver training, loans vehicles and assists in technical support for 5310 grant applicants.
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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 type="checkbox"/> Wyoming		
2 - Strategy Number *	3B.L015		
3 - Strategy Name *	Provide Mobility Services for Seniors and Persons with Disabilities in the Counties of Payette and Washington.		
4 - Project Name *	Purchase of Service: Cambridge, New Plymouth, Payette and Weiser		
5 - Please describe your project * (500 Characters Maximum)	Treasure Valley Transit was awarded this Purchase of Service grant award for FY11 and through a competitive procurement process restored service for seniors and persons with disabilities in these communities . This will provide the senior and disabled populations in the rural areas of Payette and Washington Counties with more transportation options. In addition, this service will connect with LMMN 3A.		
6 - What mode will this project use? *	Paratransit		
7 - Which funding program do you intend to apply for? *	5310		
8 - List the Districts this project will serve. *	District 3		
9 - List the Local Mobility Networks (LMMN) this project will serve.*	3B		
10 - Is this project dependent on any of your other projects? *	NO		
Identify the other projects that are dependent on this one. (500 Characters)			
11 - Are you submitting other projects as options for this strategy? *	NO		
Identify the other projects that are options to this strategy. (500 Characters)	N/A		
12 - Does this project directly interconnect with other mobility options? *	YES		

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Identify the other mobility options. (500 Characters)	TVT operates Snake River Transit and one aspect of this Purchase of Service is to connect to these routes.
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Section E - Required Documents to Be Submitted With Application - Checklist

Instructions:

Update the entry for each document to show a status of 'Included' as documents are prepared for uploading.

1 - Current Bylaws	• If Applicable	Included
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 date of grant agreement.	Included
3 - Drug Alcohol Policy	• If Applicable - You will need this if you are applying for 5311 funds.	Included
4 - Board of Directors Information	• Meeting Schedule • Board Contact Information	Included
5 - Vehicle Replacement Plan	• If you are purchasing a new vehicle, you will need to have a replacement plan.	Not Included
6 - IRS Letter of Determination for 501(C)3 non-profit status	• If Applicable	Included

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:

TML

Name and Title	Terri Lindenberg	Date	1/9/2012
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