

UNIFIED GRANT APPLICATION

PUBLIC TRANSPORTATION PROGRAM RESOLUTION

FY26 RESOLUTION

Section 5311 (including ADTAP), 5310, 5339, 5307 and applicable State funding, or combination thereof.

Applicant seeking permission to apply for Public Transportation Program funding, enter into agreement with the North Carolina Department of Transportation, provide the necessary assurances and the required local match.

A motion was made by (*Board Member's Name*) _____ and seconded by (*Board Member's Name or N/A, if not required*) _____ for the adoption of the following resolution, and upon being put to a vote was duly adopted.

WHEREAS, Article 2B of Chapter 136 of the North Carolina General Statutes and the Governor of North Carolina have designated the North Carolina Department of Transportation (NCDOT) as the agency responsible for administering federal and state public transportation funds; and

WHEREAS, the North Carolina Department of Transportation will apply for a grant from the US Department of Transportation, Federal Transit Administration and receives funds from the North Carolina General Assembly to provide assistance for rural public transportation projects; and

WHEREAS, the purpose of these transportation funds is to provide grant monies to local agencies for the provision of rural, small urban, and urban public transportation services consistent with the policy requirements of each funding source for planning, community and agency involvement, service design, service alternatives, training and conference participation, reporting and other requirements (drug and alcohol testing policy and program, disadvantaged business enterprise program, and fully allocated costs analysis); and

WHEREAS, the funds applied for may be Administrative, Operating, Planning, or Capital funds and will have different percentages of federal, state, and local funds.

WHEREAS, non-Community Transportation applicants may apply for funding for "purchase-of-service" projects under the Capital Purchase of Service budget, Section 5310 program.

WHEREAS, (*Legal Name of Applicant*) **Gaston County** hereby assures and certifies that it will provide the required local matching funds; that its staff has the technical capacity to implement and manage the project(s), prepare required reports, obtain required training, attend meetings and conferences; and agrees to comply with the federal and state statutes, regulations, executive orders, Section 5333 (b) Warranty, and all administrative requirements related to the applications made to and grants received

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from the Federal Transit Administration, as well as the provisions of Section 1001 of Title 18, U. S. C.

WHEREAS, the applicant has or will provide all annual certifications and assurances to the State of North Carolina required for the project;

NOW, THEREFORE, be it resolved that the (Authorized Official's Title)* _____ of (Name of Applicant's Governing Body) **Gaston County Board of Commissioners** is hereby authorized to submit grant application (s) for federal and state funding in response to NCDOT's calls for projects, make the necessary assurances and certifications and be empowered to enter into an agreement with the NCDOT to provide rural, small urban, and urban public transportation services.

I (Certifying Official's Name)* Donna S. Buff (Certifying Official's Title) Clerk to the Board do hereby certify that the above is a true and correct copy of an excerpt from the minutes of a meeting of the (Name of Applicant's Governing Board) **Gaston County Board of Commissioners** duly held on the 19th day of September, 2024.

Signature of Certifying Official

***Note that the authorized official, certifying official, and notary public should be three separate individuals.**

Seal Subscribed and sworn to me
(date) _____

*Notary Public **

Printed Name and Address

My commission expires
(date) _____

Affix Notary Seal Here

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PUBLIC HEARING NOTICE

Section 5311 (ADTAP), 5310, 5339, 5307 and applicable State funding, or combination thereof.

This is to inform the public that a public hearing will be held on the **proposed FY26 Community Transportation Program Application** to be submitted to the North Carolina Department of Transportation no later than **October 4, 2024**. The public hearing will be held on **September 19, 2024**, at **6:00pm** before the (governing board) **Gaston County Board of Commissioners**.

Those interested in attending the public hearing and needing either auxiliary aids and services under the Americans with Disabilities Act (ADA) or a language translator should contact **Gaston County ACCESS** on or before **September 18, 2024**, at telephone number **704-866-3254** or via email at **Twanna.Littlejohn@gastongov.com**.

The Community Transportation Program provides assistance to coordinate existing transportation programs operating in **Gaston County** as well as provides transportation options and services for the communities within this service area. These services are currently provided using **Gaston County ACCESS transportation and private vendors**. Services are rendered by **Gaston County**.

The total estimated amount requested for the period **July 1, 2025 through June 30, 2026**.

NOTE: Local share amount is subject to State funding availability.

<u>Project</u>	<u>Total Amount</u>	<u>Local Share</u>
5311 Administrative	\$ 235,261	\$ 35,290 (15%)
5311 Operating	\$	\$ (50%)
Combined Capital	\$ 495,700	\$ 49,570 (10%)
5310 Operating	\$	\$ (50%)
Other _____	\$	\$ (%)
Other _____	\$	\$ (%)
TOTAL PROJECT	\$ 730,961	\$ 84,860

Total Funding Request

Total Local Share

This application may be inspected at **Gaston County ACCESS transportation** from **9:00am-5:00pm**, **Monday through Friday**. Written comments should be directed to **Twanna Littlejohn, Gaston County, P.O. Box 1578 Gastonia NC 28053** before **September 18, 2024**.

End of Notice

Note: AN ORIGINAL COPY of the published Public Hearing Notice must be attached to a signed Affidavit of Publication. **Both the Public Hearing Notice and the Affidavit of Publication** must be submitted with the grant application.

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AVISO DE AUDIENCIA PÚBLICA

Sección 5311 (ADTAP), 5310, 5339, 5307 y financiación estatal aplicable, o una combinación de las mismas.

Se informa al público que se llevará a cabo una audiencia pública sobre la propuesta de solicitud del Programa de Transporte Comunitario para el año fiscal 2026 que se presentará al Departamento de Transporte de Carolina del Norte a más tardar el 4 de octubre de 2024. La audiencia pública se llevará a cabo el 18 de septiembre de 2024 a las 6:00 p. m. ante la Junta de Comisionados del condado de Gaston (la junta directiva).

Las personas interesadas en asistir a la audiencia pública y que necesiten ayudas y servicios auxiliares conforme a la Ley de Estadounidenses con Discapacidades (ADA) o un traductor de idiomas deben comunicarse con ACCESS del condado de Gaston antes del 18 de septiembre de 2024 al número de teléfono 704-866-3254 o por correo electrónico a Twanna.Littlejohn@gastongov.com.

El Programa de Transporte Comunitario brinda asistencia para coordinar los programas de transporte existentes que operan en el condado de Gaston, así como también brinda opciones y servicios de transporte para las comunidades dentro de esta área de servicio. Estos servicios se brindan actualmente mediante el transporte ACCESS del condado de Gaston y proveedores privados. Los servicios son prestados por el condado de Gaston.

El monto total estimado solicitado para el período del 1 de julio de 2025 al 30 de junio de 2026.

Monto total del proyecto Participación local

<u>Project</u>	<u>Importe total</u>	<u>Compartir localmente</u>
5311 Administrativo	\$ 235,261	\$ 35,290 (15%)
5311 Operativo	\$	\$ (50%)
Capital combinado	\$ 495,700	\$ 49,570 (10%)
5310 Operativo	\$	\$ (50%)
Otros _____	\$	\$ (%)
Otros _____	\$	\$ (%)
TOTAL DEL PROYECTO	\$ 730,961	\$ 84,860

Solicitud de financiación total

Participación local total

Esta solicitud puede ser inspeccionada en el servicio de transporte ACCESS del condado de Gaston de 9:00 a. m. a 5:00 p. m., de lunes a viernes. Los comentarios por escrito deben dirigirse a Twanna Littlejohn, condado de Gaston, P.O. Box 1578 Gastonia NC 28053 antes del 18 de septiembre de 2024.

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Fin del aviso

End of Notice

Nota: Se debe adjuntar UNA COPIA ORIGINAL del Aviso de Audiencia Pública publicado a una Declaración Jurada de Publicación firmada. Tanto el Aviso de Audiencia Pública como la Declaración Jurada de Publicación deben presentarse junto con la solicitud de subvención

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PUBLIC HEARING RECORD

Important – A public hearing **MUST** be conducted whether or not requested by the Public.

Section 5311 (including ADTAP), 5310, 5339, 5307 and applicable State funding, or combination thereof.

APPLICANT: Gaston County

DATE: September 19, 2024

PLACE: Gaston County Courthouse

TIME: 6:00pm

How many BOARD MEMBERS attended the public hearing? _____

How many members of the PUBLIC attended the public hearing? _____

Public Attendance Surveys

☐ (Attached)

☐ (Offered at Public Hearing but none completed)

I, the undersigned, representing (Legal Name of Applicant) Gaston County do hereby certify to the North Carolina Department of Transportation, that a Public Hearing was held as indicated above and

During the Public Hearing

☐ (NO public comments)

☐ (Public Comments were made and meeting minutes will be submitted after board approval)

The estimated date for board approval of meeting minutes is: _____

Signature or Clerk to the Board

Printed Name and Title

Date

Affix Seal Here

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VOLUNTARY TITLE VI PUBLIC INVOLVEMENT

Title VI of the Civil Rights Act of 1964 requires the North Carolina Department of Transportation (NC DOT) to gather statistical data regarding participants and beneficiaries of the agency's federal-aid programs and activities. NC DOT collects information on race, color, national origin and gender of the attendees to this public meeting to ensure the inclusion of all segments of the population impacted by a proposed project.

NCDOT wishes to clarify that this information gathering process **is completely voluntary** and that you are not required to disclose the statistical data requested to participate in this meeting. This form is a public document used to collect data, only.

The completed forms will be held on file at the North Carolina Department of Transportation. For Further information regarding this process please contact the NCDOT Title VI Program at telephone number 919.508.1808 or email at titlevi@ncdot.gov.

Project Name:		Date:
Meeting Location:		
Name (please print)	Gender:	
	<input type="checkbox"/> Male <input type="checkbox"/> Female	
General ethnic identification categories (check one)		
<input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic American	<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> African American	<input type="checkbox"/> Asian/Pacific Islander	Other:
Color:	National Origin:	

After completing this form, please fold and place it inside the designated box on the registration table.

Thank you for your cooperation.

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PUBLIC HEARING OUTREACH

APPLICANT: Gaston County

Provide a detailed description of public hearing outreach efforts by the applicant to inform the public **ESPECIALLY MINORITY, WOMEN, ELDERLY, DISABLED, LIMITED ENGLISH PROFICIENCY- (LEP) AND LOW INCOME INDIVIDUALS** about the scheduled public hearing and the opportunity to comment on the proposed Community Transportation grant application. Outreach may include efforts such as distribution of information on vehicles, at human service agencies, at local community events, at public events, local organization, etc.

Click on gray box and begin typing the *detailed* description.

Advertised public hearing notice in English and Spanish in local paper, Gaston Gazette.

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FY26 LOCAL SHARE CERTIFICATION FOR FUNDING

Gaston County
(Legal Name of Applicant)

Requested Funding Amounts

<u>Project</u>	<u>Total Amount</u>	<u>Local Share**</u>
5311 Administrative	\$ <u>235,261</u>	\$ <u>35,290</u> (15%)
5311 Operating (No State Match)	\$ _____	\$ _____ (50%)
5310 Operating (No State Match)	\$ _____	\$ _____ (50%)
Combined Capital	\$ <u>495,700</u>	\$ <u>49,570</u> (10%)
Mobility Management	\$ _____	\$ _____ (10%)
5310 Capital Purchase of Service	\$ _____	\$ _____ (10%)
ConCPT	\$ _____	\$ _____ (50%)
Capital Cost of Contracting	\$ _____	\$ _____ (%)
Traveler's Aid	\$ _____	\$ _____ (50%)
_____	\$ _____	\$ _____ (%)
_____	\$ _____	\$ _____ (%)
_____	\$ _____	\$ _____ (%)

Funding programs covered are 5311, 5310, 5339 Bus and Bus Facilities, 5307 (Small fixed route, regional, and consolidated urban-rural systems)

TOTAL	\$ <u>730,961</u>	\$ <u>84,860</u>
	Total Funding Requests	Total Local Share

****NOTE: Applicants should be prepared for the entire Local Share amount in the event State funding is not available.**

The Local Share is available from the following sources:

<u>Source of Funds</u>	<u>Apply to Grant</u>	<u>Amount</u>
<u>General Funds</u>	<u>5311 Administrative</u>	\$ <u>35,290</u>
<u>General Funds</u>	<u>Capital</u>	\$ <u>49,570</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

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_____	_____	\$ _____
_____	_____	\$ _____
TOTAL		<u>\$ 84,860</u>

**** Fare box revenue is not an applicable source for local share funding**

I, the undersigned representing (*Legal Name of Applicant*) **Gaston County** do hereby certify to the North Carolina Department of Transportation, that the required local funds for the FY2025 Community Transportation Program and 5307 Governors Apportionment will be available as of **July 1, 2025**, which has a period of performance of July 1, 2025 – June 30, 2026.

Signature of Authorized Official

Type Name and Title of Authorized Official

Date

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DBE GOOD FAITH EFFORTS CERTIFICATION

This is to certify that in all purchase and contract selections (*Legal Name of Transit Agency or Organization*) Gaston County

is committed to and shall make good faith efforts to purchase from, and award contracts to, Disadvantaged Business Enterprises (DBEs).

DBE good faith efforts will include the following items that are indicated by check mark(s) or narrative:

Required by IMD	Check all that apply	Description
*	<input checked="" type="checkbox"/>	Write a letter/email to Certified DBEs in the service area to inform them of purchase or contract opportunities;
*	<input checked="" type="checkbox"/>	Document telephone calls, emails and correspondence with or on behalf of DBEs;
	<input type="checkbox"/>	Advertise purchase and contract opportunities on local TV Community Cable Network;
*	<input checked="" type="checkbox"/>	Request purchase/contract price quotes/bids from DBEs;
	<input type="checkbox"/>	Monitor newspapers for new businesses that are DBE eligible
*	<input checked="" type="checkbox"/>	Encourage Interested eligible firms to become NCDOT certified. Interested firms should contact the office of contractual services at (919) 707-4800 for more information
*	<input checked="" type="checkbox"/>	Encourage interested firms to contact the Office of Historically Underutilized Businesses at (919) 807-2330 for more information
*	<input checked="" type="checkbox"/>	Consult NCDOT Certified DBE Directory. A DBE company will be listed in the DBE Directory for each work type or area of specialization that it performs. You may obtain a copy of this directory at https://www.ebs.nc.gov/VendorDirectory/default.html
	<input type="checkbox"/>	Describe other efforts;

You may obtain a copy of the USDOT Disadvantaged Business Enterprise Program Title 49 Part 26 at <https://www.ebs.nc.gov/VendorDirectory/default.html>

Reminder: Documentation of all good faith efforts shall be retained for a period of five (5) years following the end of the fiscal year.

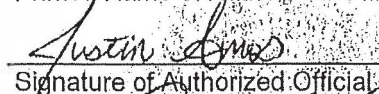
I certify that, to the best of my knowledge, the above information describes the DBE good faith efforts:

Justin Amos

Printed Name of Authorized Official

Chief of Staff

Title of Authorized Official


Signature of Authorized Official

04/22/24

Date

Attest:


Clerk to the Board

FY26 DBE GOOD FAITH EFFORTS CERTIFICATION
Last Updated: 01/09/2024



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NORTH CAROLINA DEPARTMENT OF TRANSPORTATION INTEGRATED MOBILITY DIVISION

DBE/MBE/WBE/HUB ANTICIPATED VENDOR AWARDS in FY26

APPLICANT AGENCY: Gaston County PERIOD COVERED
E-MAIL ADDRESS: twanna.littlejohn@gastongov.com From: 07/01/2025
VENDOR NUMBER: _____ To: 06/30/2026

We expect to utilize the following list of DBE/MBE/WBE/HUB Vendors in FY26:

DBE/MBE/WBE/HUB Vendor/Subcontractor's Name	Mailing Address City, State, Zip	ID# from NCDOT Website	Describe Service/ Item to be Purchased	Anticipated Expenditure (\$)
TOTAL				\$0

The above list includes the DBE/MBE/WBE/HUB Vendors the applicant expects to utilize in FY26. No

Justin Amos

Chief of Staff

Printed Name of Authorized Official

Title of Authorized Official

4/23/24
Date

Signature of Authorized Official

FY26 DBE/MBE/WBE/HUB ANTICIPATED VENDOR AWARDS
Last Updated: 01/09/2024

Attest:
Clerk to the Board

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FY26 DELEGATION OF AUTHORITY

Date: 04/22/24

I Justin Amos (Printed Name of Authorized Official)
Chief of Staff (Title of Authorized Official)
of Gaston County (Authorized Official's Agency)

as the designated party for Gaston County
(Grant Recipient/Application Agency) with authority to submit funding applications and enter into contracts with the North Carolina Department of Transportation and execute all agreements and contracts with the NCDOT Integrated Mobility Division, hereby delegate authority to the individual(s) filling the positions as indicated below:

Primary Designee: Gregory Grier, Community Support Services Director
DHHS-Community Support Services division


Reimbursement Requests:	<input checked="" type="checkbox"/> YES
Budget Revisions:	<input type="checkbox"/> YES
Budget Amendments:	<input type="checkbox"/> YES
Period of Performance Extensions:	<input checked="" type="checkbox"/> YES
Other	<input type="checkbox"/> YES

Alternate Designee #1: Twanna Littlejohn, Transportation Administrator
DHHS-Community Support Services division

Reimbursement Requests:	<input checked="" type="checkbox"/> YES
Budget Revisions:	<input type="checkbox"/> YES
Budget Amendments:	<input type="checkbox"/> YES
Period of Performance Extensions:	<input checked="" type="checkbox"/> YES
Other	<input type="checkbox"/> YES

Alternate Designee #2:

Reimbursement Requests:	<input type="checkbox"/> YES
Budget Revisions:	<input type="checkbox"/> YES
Budget Amendments:	<input type="checkbox"/> YES
Period of Performance Extensions:	<input type="checkbox"/> YES
Other	<input type="checkbox"/> YES


Signature of Authorized Official

FY26 DELEGATION OF AUTHORITY
Last Updated: 01/09/2024

Attest:

Clerk to the Board



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EEO QUESTIONNAIRE

Threshold Requirements: Any applicant, recipient, or sub-recipient is required to comply with program requirements in Chapter III if it meets the following thresholds:

- Employees 100 (+) or more transit-related employees*; and
- Requests or receives capital or operating assistance under Sections 3, 4(l), or 9 of the FTA; assistance under 23 U.S.C. 142(a)(2) or 23 U.S.C. 103(e)(4), or any combination thereof, in excess of \$1 million in the previous Federal fiscal year; or
- Request and receives planning assistance under Sections 8 and/or 9 in excess of \$250,000 in the previous Federal fiscal year.

Transit systems with 50 – 99 employees must keep a plan on file for review at next site visit.

Name of Organization:

Gaston County

Organization Type:

Transit Agency

TrAMS ID: _____ (if applicable)

1. How many employees do you have in your organization? 26
2. How many of those employees are *transit related? 26

*A transit related employee is an employee of an FTA applicant, recipient, or subrecipient who is involved in an aspect of an agency's mass transit operation funded by FTA. For example, a city planner involved in a planning bus route would be counted as part of the recipient's work force, but a city planner involved in land use would not be counted.

**If EEO requirement is not applicable check here ☒, sign below, and submit, otherwise complete remaining questions.

I declare (or certify, verify, or state) that the foregoing is true and correct.

Printed Name Justin Amos

Title Chief of Staff

Signature Justin Amos

Date 04/22/24

2024-2016

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3. Does your agency submit an EEO Program? _____
If yes, what is the date of your last submission? _____
4. Does your agency submit an Abbreviated EEO Program? _____
If yes, what is the date of your last submission? _____
5. Do you contract out any of your transit services? No _____
If no, skip to question 7. If yes,
a. What is the name of agency (s)? _____
b. How many transit employees does the agency have? _____
c. Does the agency submit an EEO Program/Abbreviated EEO Program to you? _____
If yes, what is the date of their last EEO/Abbreviated EEO submission? _____
6. What is the date of your last Triennial Review (If applicable)? _____
a. Were there any deficiencies? _____
If yes, In what area(s) _____
b. Are any of the deficiencies still open? _____
If yes, in what area(s)? _____
7. Has your agency participated in an EEO compliance review? If yes, what is the date of your last EEO compliance review? _____
a. Were there any deficiencies? _____

UNIFIED GRANT APPLICATION

If yes, in what area(s)

b. Are any of the deficiencies still open? _____

If yes, in what area(s)?

I declare (or certify, verify, or state) that the foregoing is true and correct.

Printed Name Justin Amos

Title Chief of Staff

Signature Justin Amos

Date 04/22/24

Attest
Clerk to the Board

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TITLE VI PROGRAM REPORT SECTION 5311, 5310, 5339, Combined Capital, 5307 or State Funds Call for Projects

(Complete and sign either Part A or B, whichever is applicable; and Part C)

Part A – No complaints or Lawsuits Filed

I certify that to the best of my knowledge, **No complaints or lawsuits** alleging discrimination have been filed against
Gaston County (Legal Name of Transit Agency or Organization)
during the period July 1, 2023 through June 30, 2024.

Justin Amos

Printed Name of Authorized Official

Chief of Staff

Title of Authorized Official

Signature of Authorized Official

04/22/24

Date

Part B – Complaints or Lawsuits Filed

I certify that to the best of my knowledge, the below described complaints or lawsuits alleging discrimination have been filed against
(Legal Name of Transit Agency or Organization)
during the period July 1, 2023 through June 30, 2024.

Complainant Name/Address/Telephone Number	Date	Description	Status/Outcome

(Attach an additional page if required.)

Justin Amos

Printed Name of Authorized Official

Chief of Staff

Title of Authorized Official

Signature of Authorized Official

Date

Part C - Title VI Plan

Do you currently have a Title VI Plan: Yes Date of last plan update: 06/30/23

Budget Summary

General Information

*Legal Name:	GASTON COUNTY
Address:	PO Box 1578 GASTONIA, NC 28053-1578
County:	<input type="checkbox"/>
Congressional District:	
Period of Performance (from):	7/1/24
Period of Performance (to):	6/30/26
Federal Billable/Non-Billable:	<input type="checkbox"/>

Contact Information

Contact Person:	Tawanna Littlejohn
Telephone:	7048663254
Fax:	
Email:	Twanna.littlejohn@gastongov.c...
Website:	
Federal ID Number:	
DUNS Number:	
CFDA:	
Project Number:	

Total Project Expenditures

(NCDOT Maximum Participation Amounts)	Requested	NCDOT (Use Only)
	Total Expenses	235261.00
0.00	Total Contra Accts and Fare Revenue	0.00
0.00	Total Net Expenses/Cost	235261.00
0.00		

Proposed Project Funding

Total	Federal	Federal Non-Billing	NCDOT	Local
			Total Funding (%)	100.00000
			Total Funding (\$)	235261.00
188208.00	0.00	11763.00	35290.00	

Approved Funding (Do not complete this section - NCDOT only)

	Total	Federal	Federal Non-Billing	NCDOT	Local
				Total Funding (%)	0.00000
0.00000	0.00000	0.00000	0.00000	Total Funding (\$)	0.00
0.00	0.00	0.00	0.00		

Proposed DBE, MBE, WBE Goals (Enter DBE Goal if Federal Funding applies, otherwise ...

	DBE	MBE	WBE
Amount (%)		0.00000	0.00000
Amount	0.00	0.00	0.00

Approved DBE, MBE, WBE Goals (Enter DBE Goal if Federal Funding applies, otherwise ...

	DBE	MBE	WBE
Amount (%)	0.00000	0.00000	0.00000
Amount	0.00	0.00	0.00

Summary

Summary Information

Description	Total Cost	NCDOT Cost
Total Salaries	141,313.00	0.00
Total Fringe	52,011.00	0.00
Total Salary and Fringe	193,324.00	0.00
Total Contra Accounts	0.00	0.00
Total Fare Revenues	0.00	0.00
Total Contra Accounts and Fare Revenues	0.00	0.00
Total Expenses less Total Contra Accounts and Fare Revenues = Total Operating Expenses (TNOE)	235,261.00	0.00
Total Contract Service Revenue	0.00	0.00
Total Miscellaneous Revenue and Income	0.00	0.00
Total Local Match	0.00	0.00
Total Contract Service Revenue + Miscellaneous Revenue and Income Local Match	0.00	0.00

Cash Flow

*Please enter anticipated spending per quarter. Projections are only estimates. Projected cash flow will assist IMD in financial planning throughout the year. If the funding request is adjusted per NCDOT column, the projections will be adjusted to scale NCDOT changes. Please contact your Regional Grant Specialist for further assistance.

Projected Cash Flow

+

Year (YYYY)	1st Quarter Jul 1 - Sep 30	2nd Quarter Oct 1 - Dec 31	3rd Quarter Jan 1 - Mar 31	4th Quarter Apr 1 - Jun 30	Total	
2025	58,815.00	58,815.00	58,815.00	58,816.00	235,261.00	
Total	58,815.00 USD	58,815.00 USD	58,815.00 USD	58,816.00 USD	235,261.00 USD	

Proposed Budget Expenses

Full Time Employees (G121)

+

Description	No of Positions	Annual Salary	Percent age	No of Years	Budgeted Amount	# of Approved Positions	NCDOT Maximum Participation	
Transportatio...	1	96,745.00	10...	1	96,745.00	0	0.00	<input type="checkbox"/>
Billing Specia...	1	44,568.00	10...	1	44,568.00	0	0.00	<input type="checkbox"/>
Total G121 Salaries					141,313.00		0.00 USD	

USD

Part-Time Employees - Receiving Benefits (G125)

+

Description	No of Positions	Annual Salary	Percent age	No of Years	Budgeted Amount	# of Approved Positions	NCDOT Maximum Participation	
No Employees Available								
Total G125 Salaries					0.00 USD		0.00 USD	

Part-Time Employees - Receiving No Benefits (G126)

+

Description	No of Positions	Annual Salary	Percent age	No of Years	Budgeted Amount	# of Approved Positions	NCDOT Maximum Participation	
No Employees Available								
Total G126 Salaries					0.00 USD		0.00 USD	

Salaries and Wages (G120)

Code	Description	Total Cost	NCDOT Cost
G121	Full-time Employees	141,313.00	0.00
G122	Overtime	0.00	0.00
G125	Part-time (Receives Benefits)	0.00	0.00
G126	Temporary and Part-time (Receives no Benefits)	0.00	0.00
G127	Longevity	0.00	0.00
Subtotal Salaries		141,313.00 USD	0.00 USD

Fringe Benefits (G180)

Co de	Description	Total Salaries	%	Cost Per Month	# Of Em plo yee s	No Of Mo nth s	Total Cost	NCDOT Cost
G1 81	Social Security Contribution (7.65% of Total Salaries)						10,81...	0.00
G1 82	Retirement Contribution (Total Salaries X Participating Percent...	141,...	1...				18,20...	0.00
G1 83	Hospitalization Insurance (Cost per Month X No. of Months X No. of Employees) / Describe -			958.33	2..	12	23,00...	0.00
Subtotal Fringe							52,011.00	0.00 USD

Co de	Description	Total Salaries	%	Cost Per Month	# Of Em plo yee s	No Of Mo nth s	Total Cost	NCDOT Cost
G1 84	Disability Insurance (Cost per Month X No. of Months X No. Of Employees)			0.00	0..	0	0.00	0.00
G1 8 5	Unemployment Compensation (Number of Employees)				0..		0.00	0.00
G1 8 6	Workers Compensation				0..		0.00	0.00
G1 89	Other -						0.00	0.00
Subtotal Fringe							52,011.00	0.00 USD
							USD	

Professional Services (G190)

Cod e	Description	No Of Emple es	Total Cost	NCDOT Cost
G19 1	Accounting		0.00	0.00
G19 2	Legal		0.00	0.00
G19 5	Management Consultant		0.00	0.00
G19 6	Drug & Alcohol Testing Contract		0.00	0.00
G19 7	Drug & Alcohol tests (Provide # of Employees in Test Detail)	2.000	200.00	0.00

Cod e	Description	No Of Employee s	Total Cost	NCDOT Cost
G19 8	Medical Review Officer		0.00	0.00
G19 9	Other -		0.00	0.00

Supplies and Materials (G200)

Code	Description	Total Cost	NCDOT Cost
G211	Janitorial Supplies - (Housekeeping)	0.00	0.00
G212	Uniforms	0.00	0.00
G261	Office Supplies and Materials	1,600.00	0.00
G281	Air Conditioner / Furnace Filters	0.00	0.00
G291	Computer Supplies	0.00	0.00

Travel and Transportation (other than employee development) (G300)

Code	Description	Total Cost	NCDOT Cost
G311	Travel: Anticipated trips -	0.00	0.00
G312	Travel Subsistence	0.00	0.00

Code	Description	Total Cost	NCDOT Cost
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G314	Travel - Motor-pool or Leased Vehicles (Does NOT include vehicles used in the provision of contracted transportation services.)	0.00	0.00
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Communications (G320)

Code	Description	Total Cost	NCDOT Cost
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G321	Telephone Service	4,300.00	0.00
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G322	Internet Service Fee	0.00	0.00
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G323	Combined Service Fee	0.00	0.00
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G325	Postage	150.00	0.00
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G329	Other Communications -	0.00	0.00
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Utilities (G330)

Code	Description	Total Cost	NCDOT Cost
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G331	Electricity	0.00	0.00
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G332	Fuel Oil	0.00	0.00
------	----------	------	------

G333	Natural Gas	0.00	0.00
------	-------------	------	------

G334	Water	0.00	0.00
------	-------	------	------

Code	Description	Total Cost	NCDOT Cost
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G335	Sewer	0.00	0.00
G336	Trash Collection	0.00	0.00
G337	Single/Combined Utility Bill	0.00	0.00
G339	Other -	0.00	0.00

Printing and Binding (G340)

Code	Description	Total Cost	NCDOT Cost
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G341	Printing and Reproduction	500.00	0.00
G349	Other -	0.00	0.00

Repairs and Maintenance (G350)

Code	Description	Total Cost	NCDOT Cost
------	-------------	------------	------------

G355	Office and Computer Equipment	0.00	0.00
G357	Communications Equipment	0.00	0.00
G359	Other -	0.00	0.00

Advertising/Promotion (G370)

Code	Description	Maximum/Minimum Amount	Total Cost	NCDOT Cost
G371	Marketing (Paid Ads, Marketing Firm, etc.)		1,800.00	0.00
G372	Promotional Items (Maximum Amount - (% of G371 Total Cost))	450.00	450.00	0.00
G373	Other -		0.00	0.00

Computer Support Services (contracted) (G380)

Code	Description	Total Cost	NCDOT Cost
G381	Computer Programming Services	0.00	0.00
G382	Computer Support/Technical Assistance	20,480.00	0.00

Other Services (G390)

Code	Description	Total Cost	NCDOT Cost
G391	Legal Advertising	0.00	0.00
G392	Laundry and Dry Cleaning	0.00	0.00
G393	Temporary Help services	0.00	0.00
G394	Cleaning Services	8,338.00	0.00
G395	Training - Employee Education Expense	2,119.00	0.00

Code	Description	Total Cost	NCDOT Cost
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G396	Management services (Contracted Transit System Mgmt/Admin Services)	0.00	0.00
G398	Security Services	0.00	0.00
G399	Other -	0.00	0.00

Rental of Real Property (include copy of current lease agreement) (G410)

Co de	Description	Cost Per Month	No Of Months	Total Cost	NCDOT Cost
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G412	Rent of Building X Number of Monthly Payments	0.00	0	0.00	0.00
G413	Rent of Offices X Number of Monthly Payments	0.00	0	0.00	0.00
G419	Other -			0.00	0.00

Lease of Computer Equipment (G420)

Code	Description	Total Cost	NCDOT Cost
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G421	Lease of Computer Hardware	0.00	0.00
G422	Lease of Computer Software	0.00	0.00

Lease of Equipment (G430)

Code	Description	Total Cost	NCDOT Cost
G431	Lease of Reproduction Equipment	0.00	0.00
G432	Lease of Postage Meter	0.00	0.00
G433	Lease of Communications Equipment (Includes Radio, Cable Lines and Antennae)	0.00	0.00
G439	Other -	0.00	0.00

Service and Maintenance Contracts (G440)

Code	Description	Total Cost	NCDOT Cost
G441	Communications Equipment	0.00	0.00
G442	Office Equipment	0.00	0.00
G443	Reproduction Equipment	0.00	0.00
G445	Computer Equipment	0.00	0.00
G449	Other -	0.00	0.00

Insurance and Bonding (G450)

Co de	Description	Fleet Vehicle s	Maximum Amount	Total Cost	NCDOT Cost
G4 51	Property and General Liability (does not include Vehicle Insurance)			0.00	0.00

Co de	Description	Fleet Vehicle s	Maximum Amount	Total Cost	NCDOT Cost
G4 52	Vehicles	0	0.00	0.00	0.00
G4 53	Fidelity			0.00	0.00
G4 54	Professional Liabilities			0.00	0.00
G4 55	Special Liabilities			0.00	0.00

Indirect Costs (G480) (Prior approval of Indirect Cost Percentage Rate required. Quest...

C od e	Description	Direct Cost	Perce ntage	Maximum Amount	Total Cost	DOT Percenta ge	NCDOT Cost
G 48 1	Central Services: (Budget Direct Cost (Percentage rate)	0.00	0...	0.00	0.00	0.00	0.00

Other Fixed Charges (G490)

Code	Description	Total Cost	NCDOT Cost
G491	Dues and Subscriptions -	2,000.00	0.00
G499	Other -	0.00	0.00

Comments

Agency Comments

DOT Comments

Supporting Documents

Attachments (0)



No Documents Attached

Drop files to upload, or use the "+" button.

Document is not available for download. If you are having trouble viewing this document, please contact the document owner.

UNIFIED GRANT APPLICATION

FY26 COMBINED CAPITAL APPLICATION

PART 1: Applicant Information

Legal Name of Applicant:	Gaston County
Applicant's Congressional District (If Applicant's city is included in more than one district, enter primary district only):	
Applicant's County (If Applicant has offices in more than one county, list county where main office is located):	
Address:	P.O. Box 1578
City, State, Zip:	Gastonia NC 28053
Federal Taxpayer ID Number:	
Doing Business As (DBA) Name:	Gaston County ACCESS
Applicant's Unique Entity ID(UEI) (Register your Entity or get a Unique Entity ID at: https://sam.gov/content/duns-uei)	
Parent Agency UEI:	
Applicant's Service Area's Congressional District (If service area is included in more than one district, enter primary district only): 12	
Project's Service Area (list the county or counties that will be served by the proposed project): Gaston County and any other location approved by NEMT and Veterans Services.	

Project Manager and Contact Information			
Name of Project Manager:	Twanna Littlejohn		
Title:	Transportation Administrator		
Address:	816 W Mauney Avenue Gastonia NC 28052		
E-mail:	Twann.Littlejohn@gastongov.com		
Phone Number:	704-866-3254		
Mobile Phone Number:	980-925-9200	FAX:	
Alternative Contact Information (in absence of Project Manager)			
Name:	Gregory Grier		
E-mail:	Gregory.Grier@gastongov.com		
Phone Number:	704-862-6735		

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Fleet Information

Table 1: Fleet information

Current Vehicle Inventory (enter number in fleet)					
Vans		Vans/Lifts		Sedans or Minivans	4
LTV's		LTV's/Lifts	21	Buses	
Average Fleet Age (in Miles as of June 30, 2024)					
Explanation of fleet make-up or fleet concerns (if necessary)					

Table 2: Vehicle Type Requested (Based on ITRE-projected information)

Integrated Mobility Division (IMD) will provide each transit system a specific list of vehicles eligible for replacement in FY26. Replacement vehicles must meet useful life by June 30, 2024. If a system wants to replace a vehicle not on the approved list a strong explanation must be provided with the application and it will be reviewed and considered by IMD management on a case-by-case basis. Approval is not guaranteed.

Vehicles to be Replaced in FY26 (attach additional sheet to list vehicles if needed)

Asset (model year, manufacturer, model or variant)	VIN or Fleet ID	Miles as of June 30, 2024	Vehicle replacement is based upon fleet analysis and pre-planning by IMD to determine which vehicles will be eligible for funding in FY26.
Ford E-350	1FDEE3FS3HDC78778	113490	
Ford E-350	1FDEE3FS3KDC27806	105302	
Raised Roof	1FDVU4XM7KKA67823	110393	
E-450	1FDFE4FS4HDC64415	121644	

Vehicles Requested in FY26 Application (*Excluding Expansion Vehicles)

Vehicle Replacement Type (enter number of each type requesting)					
Vans		Vans/Lifts		Sedans or Minivans	
LTV's		LTV's/Lifts	4	Buses	

***NOTE:** Systems can apply for EV's but are only eligible if they have initiated a feasibility study and EV infrastructure design OR already have charging infrastructure in place. Funding for the feasibility study may or may not be included in the grant award. Charging infrastructure must be used for transit vehicles only.

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Federal Financial Assistance Transparency Act

Federal Financial Assistance Transparency Act (FFATA) mandates the disclosure of the names and total compensation of the five most highly compensated officers of an entity if:

- The Applicant received 80% or more of its annual gross revenues in the preceding fiscal year from the federal government (all federal sources, not just FTA); and
- Those revenues were greater than \$25M; and
- The public does not have access to the information through Securities and Exchange Commission or Internal Revenue Service filings as specified in FFATA.

Applicant should select "Yes" if they are subject to the reporting requirements of FFATA and "No" if they are not subject to Executive Compensation Reporting.

☐ YES ☒ No

Executive Compensation Reporting: If "Yes" is selected above, enter the Names and Compensation amounts for the top five officers of the Applicant.

<u>Full Name</u>	<u>Total Compensation</u>
1 _____	\$ _____
2 _____	\$ _____
3 _____	\$ _____
4 _____	\$ _____
5 _____	\$ _____

UNIFIED GRANT APPLICATION

PART 2: Project Information

IMPORTANT: Applicants should submit one application for all capital projects for their small urban and/or rural service area. Duplicate projects within service areas will not be funded. Applicants can apply for one year of funding only. If a project is selected, funding for subsequent years is not guaranteed. It will be necessary to reapply and go through another competitive process for subsequent years' funding. Eligible projects may be funded using 5311, 5339 or a combination of the funding sources. IMD will determine the project's funding after the application has been reviewed and approved.

Project Name	Replacement Vehicles	
Type(s) of Capital Project (vehicle replacement, equipment, etc.). Describe the project(s) to be funded.	Replacement of vehicles having met useful life.	
	FY26	
Federal Amount Requested =	\$396,560.00	
State Amount Requested** =	\$49,570.00	
Local match amount =	\$49,570.00	
Total project cost =	\$495,700.00	

**** Applicant should be prepared for 20% local share in the event the State cannot participate.**

UNIFIED GRANT APPLICATION

PART 3: Project Criteria

Address each of the evaluation criteria separately, demonstrating how the project responds to each criterion. Each proposer is encouraged to demonstrate the responsiveness of a project to all of the appropriate selection criteria with the most relevant information that the proposer can provide, regardless of whether such information has been specifically requested, or identified. Please be thorough, yet concise in the response.

3-1. Threshold Criteria

- a. Does the applicant have the technical capacity to administer the project?
× Yes ☐ No Explain your answer in the box below.

Yes. County match is in reserve. County mechanics will maintain vehicle maintenance. The county Transporters will operate the vehicles.

- b. Describe the qualifications of the key personnel assigned to the project and the percentage of time each person will be involved in the project. Will the applicant need to hire additional personnel to support the project?

No additional personnel needed.

- c. Does applicant have adequate financial and management systems in place to ensure adequate reporting and project oversight? × Yes ☐ No Explain your answer in the box below.

The applicant has various departments to ensure adequate reporting and project oversight. The department include; finance, county managers office, county attorneys, DHHS, and Budget.

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- d. Has the source of local match been identified in a current budget or has it been approved by the agency's governing body in a future budget? What is the source of the match (e.g., agency reserves, capital replacement fund, municipal general fund, private partnership, etc.)? If the match is not from the applicant agency but another party, has that party committed the match in writing? Provide documentation of the commitment of local match from an outside party. Explain your answer in the box below.

Yes. County reserve.

- e. Further describe the matching funds, including amount and source of the match (agency reserves, capital replacement budget, municipal general fund, private partnership, etc.). List each source individually. If the matching funds are not committed, identify their source and anticipated award date. [Add/Remove Lines as necessary – place the cursor in the bottom row then right click → "Insert" → "Insert Rows Below" to add more lines to the following table]

Source	Amount	Date awarded or available
County reserve	\$158,140.00	07/1/2024

- f. Were FTA funds awarded to this project in previous years? ☒ Yes ☐ No

- g. Describe the intended service area that will benefit from your proposed project. Include pertinent demographic information about the service area in your answer. It should be clear from your description where your project's target population lives in a small urban or rural area of North Carolina.

The project is intended to serve Gaston County through NEMT transportation, and contractual agreements

- h. Estimate the annual number of unduplicated passengers who will be served or the number of one-way trips that will be provided from the proposed project.

Unduplicated Passengers		One-way trips	30,599
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UNIFIED GRANT APPLICATION

Fully Allocated Cost per Trip	\$41
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List items included in the fully allocated cost per trip. What other factors, if any, are included in setting the cost of a trip?

FY24 Opstats report.

3-2. Project Readiness

- a. Describe the project plan in detail and provide a timeline and milestones for the completion of the project. This description should completely describe what you want to accomplish and how you are going to accomplish it if you receive the requested funding. The applicant may wish to attach the following documents with the application, but these documents are not required: maps, pictures, marketing plans, draft brochures, charts or graphs and/or route schedules that support the request for funding, demonstrate the need or illustrate the applicant's preparation. If the applicant is working in partnership with or coordinating with other agencies or organizations, letters of support from these agencies or organizations may be attached with the application. Your detailed answer should be one half to one whole page long.

In accordance with NCDOT-IMD rules, we would like to replace the vehicles that have reached their useful life mileage. Since FY19, no new vehicles have been provided to Gaston County. We were approved to replace twelve vehicles in FY22, but because of the COVID-19 pandemic and the subsequent price increase for chassis and vehicles, we were unable to do so. Most of the vehicles have over 100,000 miles on them, which leads to an increase in maintenance and repairs. Additionally, due to the large number of parts that are currently out of stock, our vehicles are out of commission for longer than anticipated, sometimes up to 4-6 months. The number of daily trips for which we provide service will continue to decline the more vehicles we have out of commission. Currently, the county of Gaston averages 2,800 trips across all service programs, to include those for seniors, veterans, vocational rehab, the general public, and EDTAP. Gaston has been fully staffed for the last year which is allowing us to offer additional trips to people who require our services.

- b. Describe the applicant's preparedness to manage the project.

This project is to replace 4 vehicles that have met its useful life. This will include 4 LTV/w lift. The project will help better the service provided to the citizens of Gaston County and will help most efficiently utilize all resources.

UNIFIED GRANT APPLICATION

- c. If project is a Facility project, has a feasibility study been initiated and is the NEPA process in progress? If awarded, IMD would expect the pre-construction activities that are already initiated to wrap up before July 2024.

Gaston County does not have a facility project, that we're looking to complete for FY26.

3-3. Project Monitoring

- a. Describe the method that will be used to monitor and evaluate the success of this project. List the measurable indicators of success.

ACCESS will use the metrics indicators in the Success Plan as a monitoring tool. Financial and ridership data will be submitted in the form of OpStat and the NTD reporting. Data will be compared with prior years.

- b. Describe how the project relates to any federal or other programs that the applicant operates and, if applicable, how the applicant plans to use these resources to leverage this project.

Gaston County ACCESS provided the NEMT and CARES transportation for Gaston County. The project will allow Gaston County ACCESS to continue to provide efficient and effective demand response to the Gaston County community.

- c. What is the applicant's organizational mission? Explain how the project fits in with the other service the applicant already provides.

It is the mission of Gaston County ACCESS Central Transportation to enhance the quality of life for the citizens and of Gaston County by providing timely, cost efficient, high quality, general public and human service transportation. The project is our way of providing the service.

- d. Describe how the applicant will manage risk and provide for the safe delivery of services.

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We will act in accordance to the adopted SSP and the ACCESS Operations Supervisor will monitor daily operations for adherence.

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3-4. Special Considerations

- a. Given this request is only for capital assistance, is your agency committed to operating the services associated with the proposed project over time? How? Provide an explanation in the box below.

<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Explain
---	---------

- b. How will the applicant maintain any vehicles/capital after the grant period?

Costs will be covered through the county's general reserve. The vehicle will be entered into Enterprise Asset Management and will be serviced and maintained by County Garage.

PART 4: Budget Information

Provide a general line-item budget for the total project, with enough detail to describe the various key components of the project. Since it is possible that projects may be partially funded, the budget should provide for the minimum amount necessary to fund specific project components of independent utility. [Add/Remove Lines as necessary using prior instructions]. **A detailed budget needs to be submitted via Enterprise Business Services (EBS).**

Project Stages with Independent Utility and Description	Federal Amount Requested	State Amount Requested	Local Share	Total Cost
1.G546- 20" LTV				
2.G547- 25" LTV				
3.G548- Raised roof				
4.				
Project Totals	396,560.00	49,570.00	49,570.00	495,700.00

Capital Budgets

All rural transportation systems will be eligible for capital assistance funds. A Capital Replacement Schedule is included in this document. **ASSETS THAT HAVE MET USEFUL LIFE WILL NOT AUTOMATICALLY BE REPLACED.** The Capital Replacement Schedule represents the minimum threshold for replacement consideration unless the applicant can document that a capital item has a history of mechanical failure, is un-repairable or that it is financially prohibitive

UNIFIED GRANT APPLICATION

to repair the item. **Only transit systems with in-house maintenance shops may apply for replacement support vehicles.**

*No Expansion vehicles are accepted on this Combined Capital application.

Other Capital, Advanced Technology and Baseline Technology – Applicants should consult the Capital Replacement Schedule before requesting any replacements of Other Capital or Advanced/Baseline Technology. Current Advanced Technology users may request to replace existing Advanced Technology items as necessary. If a system applies for technology and is awarded, IMD helps with procurement aspects and leads technical assistance and pulls in ITRE as needed. The applicant must provide one (1) retail estimate per item if they request funding to replace or purchase Other Capital or Advanced/Baseline Technology. The estimate will determine the amount of funding recommended by the reviewer. Some Object Codes in the Other Capital and Baseline Technology budgets include the maximum cost in which IMD will participate. Requests for funding cannot exceed these amounts per item. The applicant is required to enter written justification in Section II for Advanced/Baseline Technology; Radio Equipment; and Telephone Equipment.

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CAPITAL REPLACEMENT SCHEDULE

Note: Assets that have met their useful life will not automatically be replaced. This schedule represents the minimum threshold for replacement consideration. Listed capital items are illustrative and not exhaustive. Updated 1/2021

CATEGORY CAPITAL ITEMS	MINIMUM REQUIREMENTS	MINIMUM DOCUMENTATION REQUIRED
MAJOR FACILITY RENOVATIONS AND NEW CONSTRUCTION	40 Years	Note: Major Renovation involves the purchase of an existing building and complete refurbishing of the building. Needs Assessment required. Plans and specs required. At least 1 retail estimate required
<ul style="list-style-type: none"> Building Purchase Facility Construction 		
OFFICE/BREAKROOM FURNITURE	12 Years	Explanation of need for replacement
<ul style="list-style-type: none"> Desk Bookcase File Cabinet Lockers Chairs Conference Table Safe (Fireproof) (25 yrs.) 		
OFFICE EQUIPMENT	5 Years	Explanation of need for replacement
<ul style="list-style-type: none"> Fax Machine Copier Calculator Etc. 		
AUDIO VISUAL EQUIPMENT	10 Years	Explanation of need for replacement
<ul style="list-style-type: none"> VCR/DVD TV Camcorder Etc. 		
BASELINE TECHNOLOGY	5 Years	Explanation of need for replacement in item #14 of project description *Presentation may be required
<ul style="list-style-type: none"> Projector Desktop Printer Laptop Server Scanner (6 yrs.) 		
SECURITY & SURVEILLIANCE	7 Years	Explanation of need for replacement
<ul style="list-style-type: none"> Video (facility and vehicles) Cameras DVR Wireless unit Antenna 		
COMMUNICATIONS EQUIPMENT	6 Years	Explanation of need for replacement in item #14 of project description
<ul style="list-style-type: none"> Projector Desktop Printer Laptop Server Scanner (6 yrs.) 		
MAINTENANCE EQUIPMENT & FIXTURES	12 Years	Only Transit Systems with in-house maintenance garages are eligible
<ul style="list-style-type: none"> Roller cabinets Portable tool stands Compressors- (5 yrs.) Hoists - (10 yrs.) Bus washers- (10-15 yrs.) Diagnostics equip Lift truck Engine stands Brake lathes 		

UNIFIED GRANT APPLICATION

SUPPORT VEHICLES		
▪ Trucks/Sedans – Light Duty	100,000 miles	Only Systems with in-house maintenance garages are eligible
REVENUE VEHICLES – Vans		
▪ Center Aisle Van (2010 or older)	100,000 miles	<ul style="list-style-type: none">▪ Updated PTMS▪ Current VUD▪ Once required fleet size has been determined through the capital assessment process, local vehicles may be designated for disposition and not be eligible for replacement.
▪ Mini-Van		
▪ Conversion Van or Raised Roof Van		
REVENUE VEHICLES – Buses		
Light Transit Vehicle (medium duty) 20ft, 22ft, 25ft and 28 ft. LTVs (body on cut-a-way chassis)	100,000 miles	
LTV (heavy duty) Approximately 30 ft. (body on truck chassis)	350,000 miles	
Large Bus (heavy duty) 35-40ft	500,000 miles	

**CAPITAL BUDGET ID: 1000022704**

Legal Name: GASTON COUNTY

Project Number:	
Address:	PO Box 1578 GASTONIA, NC 28053-1578
County:	GASTON <input checked="" type="checkbox"/>
Congressional District:	
Federal ID Number:	
DUNS Number:	
CFDA#:	

Program:	P2026_CAPITAL, FY26 CAPI
Contact Person:	Tawanna Littlejohn
Telephone:	704-866-3254
Fax:	
Email:	Twanna.littlejohn@gastongov.com
Web Site:	
Period of Performance (From):	Jul 1, 2024
Period of Performance (To):	Jun 30, 2026
*Federal Billable/Non-Billable:	Bill able <input type="checkbox"/>

NCDOT Maximum Participation Amounts	Requested	NCDOT Use Only
Replacement Vehicles	495,000.00	0.00
Other Capital	700.00	0.00
Advanced Technology	0.00	0.00
Baseline Technology	0.00	0.00
Facility Budget	0.00	0.00
Other Expenses	0.00	0.00
Total	495,700.00	0.00

Proposed Funding

Federal	80.00000	396,560.00
Federal Non-Billing	0.00000	0.00
NCDOT	10.00000	49,570.00
Local	10.00000	49,570.00
TOTAL	100.00000	495,700.00

Approved Funding

Federal	0.00000	0.00
Federal Non-Billing	0.00000	0.00
NCDOT	0.00000	0.00
Local	0.00000	0.00
TOTAL	0.00000	0.00

Proposed Goals

DBE	0.00000	0.00
MBE	0.00000	0.00
WBE	0.00000	0.00
TOTAL	0.00000	0.00

Approved Goals

DBE	0.00000	0.00
MBE	0.00000	0.00
WBE	0.00000	0.00
TOTAL	0.00000	0.00

Projected Cashflow

*Please enter anticipated spending per quarter. Projections are only estimates. Projected cash flow will assist IMD in financial planning throughout the year. If the funding request is adjusted per NCDOT column, the projections will be adjusted to scale NCDOT changes. Please contact your Regional Grant Specialist for further assistance.

Year(s) YYYY	1st Quarter July 1 - Sept 30	2nd Quarter Oct 1 - Dec 31	3rd Quarter Jan 1 - Mar 31	4th Quarter Apr 1 to Jun 30	Total
2025	123750.000	123750.000	123750.000	123750.000	495,000.00
Total	123,750.00	123,750.00	123,750.00	123,750.00	495,000.00

Replacement Vehicles

LoNo: "A low or no emission bus is defined as a passenger vehicle used to provide public transportation that sufficiently reduces energy consumption or harmful emissions, including direct carbon emissions, when compared to a standard vehicle. The statutory definition includes zero emission transit buses, which are defined as buses that produce no direct carbon emissions and no particulate matter emissions under any and all possible operational modes and conditions. Examples of zero emission bus technologies include, but are not limited to, hydrogen fuel-cell buses, battery-electric buses, and rubber tire trolley buses powered by overhead catenaries."

G541

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
35- to 40-Ft. HD Low Floor Transit Bus (Replacement).							
Bi-fuel Propane Conversion Kits							
Total				0.00			0.00

G542

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
30- to 35-Ft. HD Low Floor Transit Bus (Replacement).							
Bi-fuel Propane Conversion Kits							
Total				0.00			0.00

G543

Description	Emmision Type	Budgeted Cost	Quan...	Budgeted Total	Quan...	NCDOT Total
20' Light Transit Vehicle (Replacement) – Body-on-chassis type vehicle (Cutaway van chassis); retaining the van-type cab; offering increased headroom and wider body; max. capacity - 13 passengers		110000.000				
Bike Rack						
Brake Retarder						
Bi-fuel Propane Conversion Kits						
Total				0.00		0.00

G545

Description	Emmision Type	Budgeted Cost	Quan...	Budgeted Total	Quan...	NCDOT Total
Raised Roof Van (Replacement) - Side entry;						
NO LIFT;	<input type="checkbox"/>	95000.000	<input type="checkbox"/>		<input type="checkbox"/>	
maximum capacity-12-13 passengers.						
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Total				0.00		0.00

G546

Description	Emmision Type	Budgeted Cost	Quan...	Budgeted Total	Quan...	NCDOT Total
20' Light Transit Vehicle w/wheelchair lift (Replacement) –						
Body-on-chassis type vehicle (Cutaway van chassis);						
retaining the van-type cab; offering increased headroom and						
wider body; fully automatic side lift.						
	<input type="checkbox"/>	125000.00	02	250000.00	00	0.00
Bike Rack			<input type="checkbox"/>		<input type="checkbox"/>	
Brake Retarder			<input type="checkbox"/>		<input type="checkbox"/>	
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Total				250000.00		0.00

G547

Description	Emmision Type	Budgeted Cost	Quan...	Budgeted Total	Quan...	NCDOT Total
25' Light Transit Vehicle w/wheelchair lift (Replacement) -						
Body-on-chassis type vehicle (Cutaway van chassis);						
retaining the van-type cab; offering increased headroom and						
wider body; fully automatic side lift.						
		135000.00	01	135000.00	00	0.00
Brake Retarder			<input type="checkbox"/>		<input type="checkbox"/>	
Bike Rack			<input type="checkbox"/>		<input type="checkbox"/>	
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Total				135000.00		0.00

G548

Description	Emmision Type	Budgeted Cost	Quan...	Budgeted Total	Quan...	NCDOT Total
Raised Roof Van w/lift (Replacement) - Side entry; rear fully						
automatic interior lift.						
	<input type="checkbox"/>	110000.00	01	110000.00	00	0.00
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Total				110000.00		0.00

G571

Please note that there is NOT currently an FTA-compliant North Carolina contract for minivans. Independent procurements will need to be performed if awarded this project.

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
Minivan / Crossover (Replacement) – Small vehicle; standard production vehicle; maximum capacity - 6 passengers. Crossover vehicle (6 pax) available ONLY for ALL-WHEEL DRIVE .	<input type="checkbox"/>						
Option: Accessible Minivan compliant with ADA; Lowered floor, wheelchair ramp and 1 to 2 wheelchair stations.							
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>						
Total				0.00			0.00

G573

Please note that there is **NOT** currently an FTA-compliant North Carolina contract for service vehicles/SUVs. Independent procurements will need to be performed if awarded this project.

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
Support Vehicle (Replacement) - a vehicle used to support the transit system; maintenance needs(Non-Revenue Vehicle).	<input type="checkbox"/>						
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>						
Total				0.00			0.00

G576

Description	Emmision Type	Budgeted Cost	Quan...	Budgeted Total	Quan...	NCDOT Total
22' Light Transit Vehicle w/wheelchair lift (Replacement) – Body-on-chassis type vehicle (Cutaway van chassis); retaining the van-type cab; offering increased headroom and wider body; fully automatic side lift.		130000.000				
Brake Retarder						
Bike Rack						
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>					
Total				0.00		0.00

G577

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
Other Transit Vehicle (Replacement) - Other transit-type vehicle not otherwise identified in UPTAS. Specify type and if lift equipped. (include estimated cost documentation)							
Bi-fuel Propane Conversion Kits	<input type="checkbox"/>						
Total				0.00			0.00

***NOTE:** If you prefer to use a local vendor for lettering, please budget cost under line code G591 located under "Other Capital". Logos are now eligible under that code also.

Vehicle Replacement Information						NCDOT	
Replaced Vehicles					New Vehicle	Approved Replacement	
Year(s)	Make	Type	Complete VIN	Mileage	Select Code Below	Y/N	Comments
20...	F350	20 LTV	1FDEE3FS3HDC78778 <input type="checkbox"/>	112677.00	G546 - 20' L... <input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
20...	F350	20 LTV	1FDEE3FS3KDC27806 <input type="checkbox"/>	104285.00	G546 - 20' L... <input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
20...	F450	25 LTV	1FDFE4FS4HDC64415 <input type="checkbox"/>	121068.00	G547 - 25' L... <input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
20...	E-350V	MV N...	1FDVU4XM7KKA67823 <input type="checkbox"/>	105599.00	G548 - Raise... <input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Other Vehicle Expenses

G511

Office Furniture - Cost of tables, desks, chairs, file cabinets, and related furniture for transportation offices or facilities.

List one item per line, the no.of units per item, and the estimated cost.

(provide one cost estimate for each item requested.)

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G512

Office Equipment - Cost of fax machines, copiers, calculators, and other equipment for transportation offices and facilities. Does not include computer hardware and software.

List one item per line, the no.of units per item, and the estimated cost.

(provide one cost estimate for each item requested.)

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G513

Audio-Visual Equipment - Includes the costs of overhead projector, TV and VCR to be used for training purposes.

List one item per line, the no. of units per item, and the estimated cost.

(provide one cost estimate for each item requested.)

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G551

Vehicle Spare Parts - Cost of spare parts for revenue producing vehicles.

The spare part must have a unit cost of greater than \$300 and a useful life of more than one (1) year. This expenditure is only available to systems with in-house maintenance facilities which maintain an inventory of spare parts.

List one item per line, the number of units, and the estimated cost per each.

(provide one cost estimate for each item requested.) Must have Maintenance Facility!

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
Vehicle Batteries	<input type="checkbox"/>	0.000					
Total				0.00			0.00

G552

Shop Equipment - Purchase of equipment for maintaining vehicles, including, but not limited to, motor hoist, tire balancer, etc.

List one item per line, the no. of units per item, and the estimated cost.

(provide one cost estimate for each item requested.) Must have Maintenance Facility!

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
No data							
Total				0.00			0.00

G553

Repeater Station - Used to extend the range of the base installation. Attach estimate of cost from vendor.

Watts:

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New	0.000					
Replacement	0.000					
Total			0.00			0.00

G554

Radio Base Station - Desk-type unit used to transmit to mobile units in the vehicles. Includes remotes and mobiles with power packs. Attach estimate of cost from vendor.

Watts:

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New	0.000					
Replacement	0.000					
Total			0.00			0.00

G555

Mobile Radio Unit - 2-way radio installed in vehicle. Attach estimate of cost from vendor.

Watts:

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New	<input type="text" value="0.000"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	
Replacement	<input type="text" value="0.000"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	
Total			0.00			0.00

Hand-held Radio Unit - portable 2-way radio (limit 2 per transit system) Attach estimate of cost from vendor.

Watts:

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New	<input type="text" value="0.000"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	
Replacement	<input type="text" value="0.000"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	
Total			0.00			0.00

G556

Telephone equipment - Individual telephone instruments (does not include new or replacement telephone systems – see G524 in Facility Improvements); may include cellular (digital) phones. List one item per line, the no. per item, and the estimated cost.

☐

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G557

Fareboxes - Coin collection unit installed on vehicle. List item and indicate no. of units: Attach estimated cost & type.

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New	<input type="text" value="0.000"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	
Replacement	<input type="text" value="0.000"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	
Total			0.00			0.00

G559

Other Equipment - Specify item if not listed above. List one item per line, the no. per item, and the estimated cost.

Provide one cost estimate for each item requested.

☐

Description	Emmision Type	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
No data							
Total				0.00			0.00

G585

Bus Stop Signs - Sign used to indicate location where passengers can board or exit a public transit vehicle.

*Do not request Bus Stop Shelters/Benches here. Must request in Facility Improve.

Description	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
New	0.000					
Total			0.00			0.00

G591

Vehicle Lettering & Logos - Cost of lettering and/or logos and the labor involved in having the transit system name, phone number, and/or logo applied to vehicles. Costs to be incurred by using a local vendor. (Attach cost estimate for reference only.)

Description	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
New	175.00	04	700.00	0.00	00	0.00
Total			700.00			0.00

Advanced Technology

G524

Scheduling Software for Advance Technology-

Must comply with Technology Plan:

Description	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
No data						
Total			0.00			0.00

G526

Mobile Data Devices (Tablets) -

Must comply with Technology Plan:

Description	Budgeted Cost	Qua...	Budgeted Total	DOT Rate	Qua...	NCDOT Total
Replacement	0.000					
Expansion	0.0 00					
Total			0.00			0.00

Fare Media: Smart Card / Magenetic Stripe Card

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Initial Installation	0.000					
Expansion	0.000					
Total			0.00			0.00

G527

Automatic Vehicle Location (AVL) -

Must comply with Technology Plan:

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Replacement	0.000					
Expansion	0.000					
Total			0.00			0.00

G528

Data Communication Device -

Must comply with Technology Plan:

Describe Data Communication Device Upgrades that may be necessary for MDT technology:

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G592

Other Advanced Technology Items - Advance Technology -

Must comply with Technology Plan:

List other hardware not included above, such as replacement hard drives, network cards, etc.

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G596

Vehicle Security / Surveillance Equipment -

Must comply with:

Cost and installation of on-board security systems and surveillance equipment. **Attach estimate.**

Definition of camera system vs camera. Needs to identify camera systems as part of multi componet set and must match estimate. Example - (16) unit cameras as part of system estimate for \$30,000 (a 4 camera system consists of **CD) & provide example model for undstanding requirments for EBS and estimate.

*specify between single camera vs camera systems.

Single camera within system replacement.

Multi Componet Camera system w/ estimate requirements.

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

Baseline Technology

G514

Micro Portable Projector/Laptop -

Note: laptop is part of operation of projector.

NCDOT will participate UP TO \$4,000

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New	0.000					
Replacement	0.000					
Total			0.00			0.00

G521

Personal Computer System (PC) -

Includes laptop, DESKTOP computers include CPU, Office XP, one 24" monitor, keyboard, mouse and Microsoft Office XP software, 2 yr. technical support contract)

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Replacement	0.000					
Expansion	0.000					
Total			0.00			0.00

G522

Printers -

Laser Jet network and non-network printers

Non-network

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Replacement	0.000					
Total			0.00			0.00

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Expansion	0.000					
Total			0.00			0.00

Network

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Replacement	0.000					
Expansion	0.000					
Total			0.00			0.00

G523

Software -

Eligible software listed under FY08 Technical Specifications *

List Software:



Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

Operating System Software Upgrade:

(Ensure that your current pc has enough RAM)

Windows XP PROFESSIONAL operating system

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Upgrade Version	0.000					
Full Version	0.00 0					
Total			0.00			0.00

Microsoft Office Software:

(Ensure that your current pc has enough RAM)

MS Office XP PROFESSIONAL

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Upgrade Version	0.000					
Full Version	0.000					
Total			0.00			0.00

G525

Network Server -

For use with network application/programs

Use standard local IT specifications)

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Replacement	0.000					
Expansion	0.000					
Total			0.00			0.00

G529

Other Technology Items *

List other hardware not included above, such as replacement hard drives network cards, etc. (baseline technology)

☐

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

Facility Budget

G531

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
New Construction of Transit Facility- New building construction for Administration, Maintenance, Transfer, or Multi-Modal purposes.						
Attach study cost estimate.	0.000					
Must be a STI approved project for this fiscal year.						
Total			0.00			0.00

G532

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Purchase of Modular Structure- Purchase of modular unit.						
Attach cost estimate.	0.000					
Must be a STI approved project for this fiscal year.						
Total			0.00			0.00

G533

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Legal Fees, Appraisal, Survey - Fees associated with construction or land acquisition. Survey, Appraisal, Title fees, and closing costs.						
Describe items needed and attach cost estimate.	0.000					
Total			0.00			0.00

G535

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Land Acquisition - Purchase of parcel of land for construction.	0.00					
Attach appraisal.						
Must be a STI approved project for this fiscal year.						
Total			0.00			0.00

G536

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Sitework/Grading - Pre-construction work including site prep.	0.000					
Describe work to be completed and attach cost estimate.						
Total			0.00			0.00

G537

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Utility Work/ Hook-Ups - Costs associated with water, sewer, electrical or telephone lines or wiring, pre or post construction.	0.00					
Describe work to be completed and attach cost estimat.						
Total			0.00			0.00

G538

Fencing/Lighting - Exterior building and parking lot lighting. Fencing and gate to secure parking area for vehicles.
List one item per line Attach cost estimate for reference only.

Description	Budgeted Cost	Quantities	Budgeted Total	DOT Rate	Quantities	NCDOT Total
No data						
Total			0.00			0.00

G539

Accessway/ Signage/Landscaping - Post-construction site work Construction of ramps and and walkways that meet ADA. Permanent signs, such as a facility signs. Soil erosion containment.

List one item per line Attach cost estimate for reference only.

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Total			0.00			0.00

G558

Telephone System - New or Replacement telephone system

Attach cost estimate for reference only.

□

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G581

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
-------------	---------------	---------	----------------	----------	---------	-------------

Construction/ Project Management Services- A firm or individual that acts on behalf of the owner to oversee entire construction project

0.000

Attach projected cost estimate.

Must be a STI approved project for this fiscal year.

Total			0.00			0.00
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G582

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
-------------	---------------	---------	----------------	----------	---------	-------------

Facility Acquisition - Purchase of existing structure.

Attach appraisal.

0.000

Must be a STI approved project for this fiscal year.

Total			0.00			0.00
-------	--	--	------	--	--	------

G583

Bus Stop Shelter and Benches - Enclosure and seating provided to passengers at bus stop.

*Requires plan approval by city or county regarding location. ADA requirements include minimum size and width of the shelter; min. turning radius in shelter; accessibility to shelter by sidewalk; and concrete pad adjacent to shelter for loading and unloading bus.

Provide plan approval with application.

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Bus Shelters	0.000					
Benches	0.000					
Total			0.00			0.00

G584

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Park and Ride Lots - Paved lots for park and ride.						
Describe work to be completed and attach cost estimate.	0.00					
Total			0.00			0.00

G586

Building Security/Surveillance Equipment - Cost and installation of security system and surveillance equipment for transit system's administrative or maintenance facility and parking area.

List one item per line. Attach cost estimate for reference only.



Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
No data						
Total			0.00			0.00

G587

Paving / Resurfacing - Asphalt surface paving or resurfacing of the facility parking area. Also includes existing Park and Ride Lots.

Indicate size (sq.ft.) area to be paved/resurfaced:

Attach cost estimate for reference only

Budgeted Cost :

NCDOT Total :

G588

Description	Budgeted Cost	Quan...	Budgeted Total	DOT Rate	Quan...	NCDOT Total
Engineering and Design Services - Cost of architectural and engineering services required for construction or renovation projects						
Attach projected cost estimate.	0.000					
For new construction - Must be a STI approved project for this fiscal year.						
Total			0.00			0.00

G589

Other Facility Improvements - Improvements and/or Repairs.

Attach cost estimate for reference only.



Material Cost	Labor Cost	Description	Emmision Type	Budgeted Total	NCDOT Total
		Electric Vehicle Charging Stations	<input type="checkbox"/>		
		Propane fueling infrastructure	<input type="checkbox"/>		
		Maintenance facility improvements for e...	<input type="checkbox"/>		

NOTE: YOU MUST OWN THE FACILITY TO BE ELIGIBLE TO APPLY FOR FUNDING FOR THESE PURPOSES. YOU MUST SUBMIT A COPY OF THE TITLE (DEED) OF OWNERSHIP WITH THIS APPLICATION FOR FUNDING CONSIDERATION.

Physical Address of Facility:

Facility Improvement Questionnaire - Must be completed for consideration.

Do you currently operate out of this location?: ☐ NO

If you DO NOT currently operate out of this location, what is the anticipated date that you will occupy this location?:

What is the total square footage of the facility?:

Is this facility shared for other uses or with other entities?: ☐ NO

If yes, list entities, square footage occupied, and purposes:

☐

Entity	Sq. Feet	Purpose
Click + to add new line item.		

Other Expenses

Code	Code Description	Budgeted Total	NCDOT Total
M100	M100 - 111201-BUY BUS 40FT REPL	0.00	0.00
M101	M101 - 111202-BUY BUS 35FT REPL	0.00	0.00
M102	M102 - 111203-BUY BUS 30FT REPL	0.00	0.00
M103	M103 - 111204-BUY BUS <30FT REPL	0.00	0.00
M104	M104 - 111205-BUY SCHOOL BUS RPL	0.00	0.00
M105	M105 - 111207-BUY BUS C/S REPL	0.00	0.00
M106	M106 - 111209-BUY BUS TRLEY REPL	0.00	0.00
M107	M107 - 111215-BUY VANS REPL	0.00	0.00
M108	M108 - 111216-BUY SDAN/S-WGN RPL	0.00	0.00
M112	M112 - 111303-BUY BUS 30FT EXP	0.00	0.00
M160	M160 - 113207-ACQ SURV/SEC SYS	0.00	0.00
M175	M175 - 113401-REH/REN BUS TRML	0.00	0.00
M221	M221 - 114301-CONST ADMIN BLDG	0.00	0.00
Total			

Code	Code Description	Budgeted Total	NCDOT Total
M222	M222 - 114302-CONST MAINT FACILI	0.00	0.00
M223	M223 - 114303-CONST ADM/MNT FAC	0.00	0.00
M224	M224 - 114304-CONST STORAGE FAC	0.00	0.00
M225	M225 - 114305-CONST YARDS&SHOPS	0.00	0.00
M226	M226 - 114306-CONST SHOP EQUIP	0.00	0.00
M227	M227 - 114307-CONST ADP HARDWARE	0.00	0.00
M228	M228 - 114308-CONST ADP SOFTWARE	0.00	0.00

Total

Agency Comments:

NCDOT Comments:

Asset Inventory List by Department



Department(s): GCA-REV

All Maintenance Classes

All Asset Types

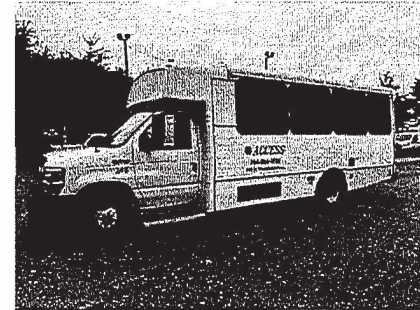
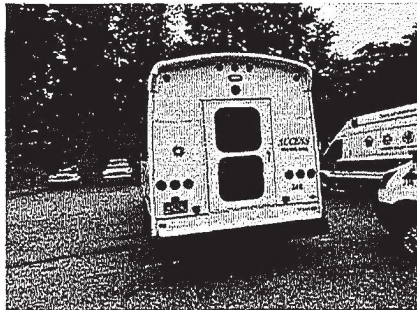
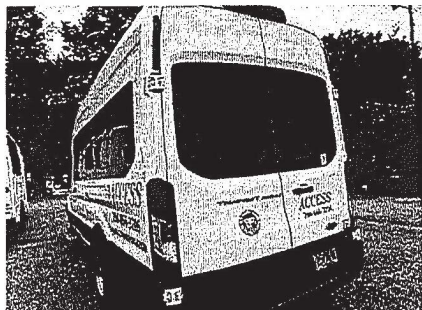
Department: GCA-REV - Gaston County (Gca)-Revenue						ASSET
Asset	Serial Number	Year Manufacturer Model	PM Loc ID	In Service	Original Cost	Meter 1 Meter 2
GCA-CLASS						
GCA-0203 - Mini Van Nonlift	2C7WDGCG5GR200939	2016 DODG Mini Van	12328	6-21-2016	\$41,464	84,163
GCA-0220 - Lift Equipped Van	1FDEE3FL2GDC31961	2016 FORD E 350 Ltv	12328	6-23-2016	\$49,326	172,272 11,662
GCA-0221 - Lift Equipped Van	1FDEE3FS3HDC78778	2017 FORD F- 350 Truck	12328	8-6-2018	\$54,871	117,276 7,281
GCA-0222 - Lift Equipped Van	1FDEE3FS5HDC78779	2017 FORD F- 350 Truck	12328	8-6-2018	\$54,871	128,734 7,899
GCA-0223 - Lift Equipped Van	1FDEE3FS3KDC27806	2019 FORD F- 350 Truck	12328	6-12-2019	\$56,065	109,425 7,365
GCA-0224 - Lift Equipped Van	1FDEE3FS0KDC35796	2019 FORD F- 350 Truck	12328	6-12-2019	\$56,065	81,955 4,213
GCA-0234 - Raised Roof Van	1FDVU4XM1KKA66621	2019 FORD E-350 Van	12328	7-24-2019	\$63,812	88,086 4,021
GCA-0235 - Raised Roof Van	1FDVU4XM7KKA67823	2019 FORD E-350 Van	12328	7-24-2019	\$63,812	112,439 6,751
GCA-0236 - Raised Roof Van	1FDVU4XM9KKA67824	2019 FORD E-350 Van	12328	7-24-2019	\$63,812	47,076 2,962
GCA-0251 - Lift Equipped Van	1FDDE4FS4GDC25869	2016 FORD F450	12328	6-23-2016	\$57,128	169,405 7,748
GCA-0252 - Lift Equipped Van	1FDDE4FSXGDC25861	2016 FORD F450	12328	1-18-2017	\$68,573	135,448 8,774
GCA-0253 - Lift Equipped Van	1FDDE4FS4HDC64415	2017 FORD F450	12328	12-12-2017	\$63,503	123,188 8,538
GCA-0254 - Lift Equipped Van	1FDDE4FS3HDC64437	2017 FORD F450	12328	12-12-2017	\$63,503	119,119 6,874
GCA-0001 - Minivan With Lift	2C7WDGBG6KR778154	2019 DODGE Grand Caravan	12328	3-6-2024	\$26,111	112,764
GCA-201 - Mini Van Nonlift	2D4RN4DG8BR795429	2011 DODG Mini Van	12328		\$0	27,334
GCA-202 - Mini Van Nonlift	2D4RN4DG4BR795430	2011 DODG Mini Van	12328		\$0	59,489
GCA-218 - Lift Equipped Van - No Lift Meter	1FTSS34LX7DA63926	2007 FORD E-350 Van	12328	6-19-2007	\$0	115,130 2,957
GCA-225 - Lift Equipped Van	1FDDE4FS0KDC56237	2020 FORD F450	12328		\$64,177	75,794 5,043
GCA-226 - Lift Equipped Van	1FDDE4FS0KDC56240	2020 FORD F450	12328		\$64,177	91,091 5,718
GCA-227 - Lift Equipped Van	1FDDE4FS5KDC55567	2020 FORD F450	12328		\$64,177	63,487 5,601
GCA-233 - 25 Ft. Ltv Lift Van	1FDDE4FS4ADA62499	2010 FORD Ltv	12328	6-22-2010	\$0	216,293 10,164
GCA-239 - Lift Equipped Van	1FTDS3EL0ADA15088	2010 FORD E-350 Van	12328	3-22-2010	\$0	224,589 12,827
GCA-244 - Lift Equipped Van	1FDDE4FS6DDA02793	2013 FORD E-350 Van	12328		\$0	220,376 9,918
GCA-245 - Lift Equipped Van	1FDDE4FS8DDA02794	2013 FORD E-350 Van	12328		\$0	233,618 9,865
GCA-246 - 25 Ft. Ltv Lift Van	1FDDE4FS6EDA09003	2014 FORD E-350 Van	12328		\$67,785	196,724 8,699
GCA-247 - 28 Ft. Ltv Lift Van	1FDGF5GY9EEA69149	2014 FORD Ltv	12328	1-31-2014	\$85,689	130,761 5,364
GCA-248 - Lift Equipped Van	1FDDE4FS2EDA94566	2014 FORD F450	12328		\$66,322	185,544 10,120

Asset Inventory List by Department

Department: GCA-REV - Gaston County (Gca)-Revenue						ASSET	
Asset	Serial Number	Year Manufacturer Model	PM Loc ID	In Service	Original Cost	Meter 1	Meter 2
GCA-CLASS							
GCA-249 - Lift Equipped Van	1FDEE3FS1EDA88196	2014 FORD F550	12328		\$60,802	150,702	
						377	
GCA-250 - Lift Equipped Van	1FDFE4FS5GDC02696	2016 FORD F450	12328		\$59,493	167,419	
						12,104	
Class GCA-CLASS Totals:			Count: 29		Equip Cost:	\$1,315,536.81	
Department: GCA-REV - Gaston County (Gca)-Revenue						COMPONENT	
Asset	Serial Number	Year Manufacturer Model	PM Loc ID	In Service	Original Cost	Meter 1	Meter 2
--							
GCA-VC- - 2 Or 4 Camera System	GCA-VC-TEST	2013 SEON TI4 - 2 And 4 Cameras	12328	6-5-2009	\$0		
Class -- Totals:			Count: 1		Equip Cost:	\$0.00	
Dept. GCA-REV Totals:			Count: 30		Equip Cost:	\$1,315,536.81	



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Non-reflective lettering and logos applied to buses similar as shown.

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Customer:	Gaston County
Date:	August 7th, 2024
Estimate No:	01962
Production Time:	
Estimate:	\$175.00 each, plus NC sales tax
Proof Approval:	<input type="checkbox"/> PROOF APPROVED - NO CHANGES <input type="checkbox"/> PROOF APPROVED - WITH CHANGES INDICATED
Signature:	

