

Name Of Applicant (legal organization name)

MDOT Agency

is applying for Section 5311, 5311(f), and/or 5339 funding under Federal Transit Law, as amended, for the application year. We will be bound by the provisions of this special 5333(b) [former 13(c)] labor warranty for the period of the grant.

Does a union represent the applicant's employees? Yes No

List union representation (only staff that has duties connected to the transit operation)

Union Name: Teamsters Local 214

Does agency use a third party transportation provider? Yes No

Are there other surface transportation providers in your area? Yes No

Note: Do not include school bus transportation providers and their unions

Indicate surface transportation providers and their union representation or none. (Providers serving the general public, including public agencies, private providers, and/or non-profit providers and their unions in your jurisdictional area)

Provider :	Indian Trails	Union Names:		None	<input checked="" type="checkbox"/>
Provider :	All City Cab	Union Names:		None	<input checked="" type="checkbox"/>
Provider :	Cadillac Taxi	Union Names:		None	<input checked="" type="checkbox"/>
Provider :	Q and F Cab, LLC	Union Names:		None	<input checked="" type="checkbox"/>
Provider :	Good Guys Taxi	Union Names:		None	<input checked="" type="checkbox"/>

FY 2022 ADA COMPLAINT INFORMATION

You must retain copies of complaints for at least one year and a summary of all complaints for at least five years.

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Has the agency been named in any lawsuits or complaints in the last year which allege an individual was discriminated against or denied full participation in transportation based on disability.

Yes No

In the last year, have you had ADA compliance review conducted on your transportation program as part of an overall FTA or MDOT Compliance Review?

Yes No

Have any changes been made to your ADA Complaint Policy?

Yes No

FY 2022 CONTRACT CLAUSES CERTIFICATION

Certification 1

I acknowledge that I have reviewed a copy of the Contract Clauses. I understand that the nature of the project will determine which requirements of the contract clauses apply and I will comply with all applicable clauses for all FTA-funded contracts for the application year.

Name Of The Person Authorized To Sign A Contract Or Project Authorization

Legal Organization Name

Title Of Authorized Signer

Signature Of Authorized Signer ** (See Below)

Date

.....

* If the organization has a master agreement with MDOT, **the organization name must match the name as it appears on the master agreement.** Organizations with multiple contracts must submit multiple contract clauses certifications.

** If the organization has a master agreement with MDOT, the signature must be the same as the authorized signer of the master agreement or an individual with legal authority to sign a project authorization for the organization. Your agency can change, add or remove an authorized signer at any time by completing a signature resolution.

FY 2022 COORDINATION PLAN FOR LOCAL BUS OPERATING ASSISTANCE

All agencies applying for Local Bus Operating Assistance must submit a coordination plan. (If an agency also is applying for Specialized Services Operating Assistance, only the Specialized Services coordination plan is required.)

Organizations must ensure that the level and quality of service will be provided without regard to race, color or national origin and that there is no disparate impact on groups protected by Title VI of the Civil Rights Act of 1964 and related statutes and regulations.

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Cadillac/Wexford Transit Authority

TRANSIT PROVIDER/PURCHASER AND COORDINATION EFFORTS

Describe efforts for coordinating transit services with each of these agencies, including any purchase of service arrangements, training, maintenance, and dispatching services, etc. Also include a description of the process used to ensure coordination efforts are being pursued (i.e., LAC meetings, public hearings, etc.)

CWTA operates a medical transportation service on a contractual basis for out-patients who reside in Wexford and Missaukee Counties and require oncology treatment at the Cowell Family Cancer Treatment Center in Traverse City.

CWTA provides daily transportation services on a contractual basis for Northern Lakes Community Mental Health for individuals with disabilities who reside in Wexford and Missaukee Counties.

CWTA provides daily transportation for DHHS (Medicaid rides) between Wexford County and Mt. Pleasant for Methadone treatment.

We also provide transportation on an "on call" basis through a contract with Autumnwood of McBain which is a nursing home facility located in Missaukee County.

CWTA is an active member of the Emergency Management Team for both Wexford and Missaukee counties and available 24 hours per day and seven days a week during an emergency.

CWTA has contractual partnership to provide transportation for Wexford County Council on Aging and the Missaukee Commission on Aging.

CWTA is actively involved with the Club Cadillac Program which serves adults with mental illness, local foster care facilities, senior residential living facilities, law enforcement agencies, fire departments, District 10 Health Department, Cadillac Area Chamber of Commerce, Cadillac Visitor's Bureau, Cadillac Silent Observer, Human Services Leadership Council, Senior Networking Advocacy Group, and several ad-hoc transportation committees.

CWTA provides coordinated services with the YMCA for after school tutoring and fitness programs.

CWTA promotes private carriers and cab companies when public transportation is not an option.

CWTA is a member of the Michigan Association of Transportation Systems (MASSTrans) and works closely with the Groundwork organization. These entities promote partnerships and coordination of services between transits.

CWTA is in contact with Local Advisory Committee members on a regular basis and reviews issues that relate to public transportation services and accessibility.

CWTA holds public input meetings on a regular basis with human service entities, businesses, passengers and the general public.

CWTA also surveys passengers on a regular basis. (3 surveys in 2016-2017). Regular feedback is solicited using our website and social media polls to gauge passenger interactions and overall satisfaction.

FUTURE TRANSIT OBJECTIVES

Describe your future objectives regarding coordination/consolidation of transit services:

Continue to evaluate ways to utilize our volunteer driver program to help the largest number of residents.

Regular presentations to areas businesses, human service organizations and other agencies that struggle with transportation.

Promote our Mobility Coordinator services for difficult transportation issues in the community and become a great community resource to other local entities.

Develop additional routes to serve the downtown population and new housing developments with the City of Cadillac.

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The Applicant agrees to comply with the applicable requirements of categories below. *
Those requirements that do not apply to you or your project will not be enforced.

<u>Categories</u>	<u>Descriptions</u>
01.	Certifications and Assurances Required of Every Applicant.
02.	Public Transportation Agency Safety Plans.
03.	Tax Liability and Felony Convictions.
04.	Lobbying.
05.	Private Sector Protections.
06.	Transit Asset Management Plan.
07.	Rolling Stock Buy America Reviews and Bus Testing.
08.	Formula Grants for Rural Areas.
09.	Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs.
10.	Enhanced Mobility of Seniors and Individuals with Disabilities Programs.
11.	Alcohol and Controlled Substances Testing.
12.	Demand Responsive Service.
13.	Interest and Financing Costs.
14.	Construction Hiring Preferences.

FTA and MDOT intend that the certifications and assurances the Applicant has selected on this form should apply, as required, to each project for which the Applicant seeks FTA assistance during application year.

The Applicant affirms the truthfulness and accuracy of the certifications and assurances it has made in the statements submitted herein with this document, and acknowledges that the provisions of the program Fraud Civil Remedies Act of 1986, as amended, 31 U.S.C. 3801 et.seq., and implemented by DOT regulations, 'Program Fraud Civil Remedies,' 49 CFR part 31 apply to any certification, assurance, or submission made to FTA. The criminal fraud provisions of 18 U.S. C. 1001 may apply to any certification, assurance, or submission made in connection with any program administered by FTA.

FY 2022 RESOLUTION OF INTENT

The approved resolution of intent to apply for state formula operating assistance for fiscal year 2022 under Act 51 of the Public Acts of 1951, as amended.

WHEREAS, pursuant to Act 51 of the Public Acts of 1951, as amended (Act 51), it is necessary for the (hereby known as THE APPLICANT) established under Act to provide a local transportation program for the state fiscal year of 2022 and, therefore, apply for state financial assistance under provisions of Act 51; and

WHEREAS, it is necessary for the governing body, to name an official representative for all public transportation matters, who is authorized to provide such information as deemed necessary by the State Transportation Commission or department for its administration of Act 51; and

WHEREAS, it is necessary to certify that no changes in eligibility documentation have occurred during the past state fiscal year; and

WHEREAS, the performance indicators have been reviewed and approved by the governing body.

WHEREAS, THE APPLICATION , has reviewed and approved the proposed balance (surplus) budget, and funding sources of estimated federal funds \$ estimated state funds \$ estimated local funds \$ with total estimated expenses of \$

(Note: Local funds include fare box and any other local revenue)

NOW THEREFORE, be it resolved that THE APPLICANT hereby makes its intentions known to provide public transportation services and to apply for state financial assistance with this annual plan, in accordance with Act 51; and

HEREBY, appoints as the Transportation Coordinator, for all public transportation matters, who is authorized to provide such information as deemed necessary by the State Transportation Commission or department for its administration of Act 51 for 2022

I, (Name)

(Secretary/Clerk) of THE Applicant , having custody of the records and proceedings of THE APPLICANT, does hereby certify that I have compared this resolution adopted by THE APPLICANT at the meeting of

20 with the original minutes now on file and of record in the office and that this resolution is true and correct.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed seal of said , this day of A.D 20

SIGNATURE

This form is required for all agencies applying for Regular Services, Section 5311 JARC, Section 5310, and/or New Freedom projects.

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THE APPLICANT AGREES TO COMPLY WITH THE APPLICABLE REQUIREMENTS SELECTED BELOW:

- This organization has the necessary operational lifts on its vehicles as required by Act 51, [Section 10e (17) and 10e(18)] of the Public Acts of 1951, as amended, and the Americans with Disabilities Act of 1990.
- The organization also certifies that the lifts are maintained and cycled on a regularly scheduled basis.
- B. This organization has proof of insurance on file that meets the insurance requirements in exhibit a of your master agreement with the Michigan Department of Transportation.

The applicant affirms the truthfulness and accuracy of the certifications and assurances it has made in statements submitted herein with this document. The truthfulness and accuracy of this document will enable the applicant to receive state funding.

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All FTA funds recipients, except for urban agencies that receive all of their FTA funds directly from FTA, must submit the following information that covers the period since your last MDOT application. First-time applicants should submit information for the previous fiscal year.

1. Are there any active lawsuits or complaints naming the applicant that allege discrimination based on race, color or national origin with respect to service or other transit benefits?

Yes No

2. Have you had any Title VI compliance review activities conducted with regard to your transportation program, including triennial compliance reviews conducted by FTA and/or MDOT?

Yes No

Please summarize the purpose or reason for the review; the name of the agency or organization that performed the review; the findings and recommendations of the review; and a report on the status and/or disposition of such finding and recommendations.

Triennial Review performed December 11, 2018. No issues found.

3. When was your last title VI program approved by MDOT or FTA MM/DD/YYYY

4. Has your Title VI Coordinator/EEO Officer changed during the reporting period or since your last Title VI Plan was approved?

Yes No

5. Has your organization had any projects and/or service change that have Title VI, Limited English Proficiency (LEP), or Environmental Justice (EJ) impacts? Service change includes service expansion/reduction, route and/or hour changes, etc

Yes No

6. During this reporting period, how were your employees educated about Title VI and their responsibility to ensure non-discrimination in any of your programs, services, or activities?

Annual training and quarterly updates at staff meetings.

NOTICE: The Local Advisory Council(LAC) must review and be given the opportunity to comment on this Vehicle Accessibility Plan (VAP). Please attach the signed minutes of the LAC meeting at which this VAP was discussed and approved.

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1. Total D-R Fleet anticipated for application year (including locally funded vehicles)

29

2.Total Anticipated D-R Fleet Accessible or lift-equipped (including locally funded vehicles)

29

3. Has the agency made any changes in vehicle inventory described in No. 1 and No. 2 above since the last accessibility plan update was submitted?

(If "yes" explain changes and reasons for those changes below.)

No

4. Has the agency made any changes in the following since the last accessibility plan update was submitted?

A. Fare structure No

B. Service area information No

C. Service availability information No

D. Service Hours/days of operation No

E. Local advisory council membership No

5. Has the agency made any other changes in its vehicle accessibility plan since last submission of an accessibility plan or annual update?

No

6. How frequently does the agency's LAC meet?

Annually

7. LAC MEMBER LIST (List below the members of your agency LAC. Attach a separate page of additional names if necessary.)

NOTICE: The Local Advisory Council (LAC) must review and be given the opportunity to comment on this Vehicle Accessibility Plan (VAP). Please attach the signed minutes of the LAC meeting at which this VAP was discussed and approved.

NOTE: MDOT Administrative Rule 202 requires that the applicant agency shall establish a LAC composed of a minimum of three members. No LAC member shall be a staff or board member of the applicant agency.

The applicant agency shall ensure all of the following:

1) 50% of the LAC membership represents persons who are 65 years of age or older and persons who have disabilities within the service area;

2) the LAC membership includes people who have diverse disabilities and the elderly who are users of public transportation; and

3) the applicant agency has approved at least one member, or 12% of the membership, jointly with the area agency on aging.

Does the list of members reflect the membership in the minutes?

Yes

1. CHAIRPERSON'S NAME

Enter name

Affiliation (Name of organization, if any)

Wexford County Council on Aging

This member represents

Persons 65 years and older

This member is

Jointly appointed by an area

2. NAME

Enter name

Affiliation (Name of organization, if any)

Disability Network

This member represents

Persons with Disabilities

This member is

A Person with Disabilities

3. NAME

Enter name

Affiliation (Name of organization, if any)

Public Transit User

This member represents

Persons 65 years and older

This member is

Age 65 or older

A user of public transportation

4. NAME**Affiliation (Name of organization, if any)**

This member represents

This member is
