



**NOTICE OF MEETING OF THE  
CARSON AREA METROPOLITAN PLANNING  
ORGANIZATION (CAMPO)**

**Day:** Wednesday  
**Date:** May 10, 2017  
**Time:** Beginning at 4:30 pm  
**Location:** Community Center, Sierra Room, 851 East William Street, Carson City, Nevada

**AGENDA**

**AGENDA NOTES:** The Carson Area Metropolitan Planning Organization (CAMPO) is pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Carson Area Metropolitan Planning Organization staff in writing at 3505 Butti Way, Carson City, Nevada, 89701, or Comments@CarsonAreaMPO.com, or call Patrick Pittenger at (775) 887-2355 as soon as possible (requests are required prior to 12:00 p.m. on May 8, 2017).

For more information or for copies of the supporting material regarding any of the items listed on the agenda, please contact Patrick Pittenger, Transportation Manager, at (775) 887-2355. Additionally, the agenda with all supporting material is posted on the CAMPO website at [www.carson.org/agendas](http://www.carson.org/agendas), or is available upon request at 3505 Butti Way, Carson City, Nevada, 89701.

**AGENDA MANAGEMENT NOTICE:** The Chair may take items on the agenda out of order; combine two or more agenda items for consideration; and/or remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

**DISCLOSURES:** Any member of the CAMPO Board may inform the Chair of his or her intent to make a disclosure of a conflict of interest on any item appearing on the agenda or on any matter relating to the CAMPO's official business. Such disclosures may also be made at such time the specific agenda item is introduced.

**1. ROLL CALL AND DETERMINATION OF A QUORUM**

**2. PUBLIC COMMENT:**

Members of the public who wish to address the CAMPO Board may approach the podium and speak on any matter relevant to or within the authority of CAMPO. Comments are limited to three minutes per person per topic. If your item requires extended discussion, please request the Chair to calendar the matter for a future CAMPO meeting. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an Agenda as an item upon which action may be taken.

**3. APPROVAL OF MINUTES:**

**3.A (For Possible Action)** April 12, 2017 Draft Minutes

#### **4. PUBLIC MEETING ITEM(S):**

**4.A (For Possible Action)** To determine the selection of the Federal Transit Administration's (FTA) 5310 application(s) to be submitted for funding in the CAMPO planning area.

**Staff Summary:** CAMPO staff has received two applications requesting FTA 5310 funding. One application was received from the Nevada Rural Counties Retired Senior Volunteer Program (RSVP) Program, and another from the Carson City Regional Transportation Commission (RTC). The CAMPO Board will determine whether the application(s) will be selected for funding and the amount of funds to be awarded out of the total available.

**4.B (For Possible Action)** To determine the selection of Carson City RTC's Federal Transit Administration (FTA) 5339 application to be submitted for funding in the CAMPO planning area.

**Staff Summary:** CAMPO staff has received one application, from the Carson City RTC, requesting FTA 5339 funding.

#### **5. INTERNAL COMMUNICATIONS AND ADMINISTRATIVE MATTERS (Non-Action Items):**

**5.A** Future Agenda Items

#### **6. BOARD COMMENTS (Information only):**

**6.A** Status reports and comments from the members of the CAMPO Board.

#### **7. PUBLIC COMMENT:**

Members of the public who wish to address the CAMPO Board may approach the podium and speak on any matter relevant to or within the authority of CAMPO. Comments are limited to three minutes per person per topic. If your item requires extended discussion, please request the Chair to calendar the matter for a future CAMPO meeting. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an Agenda as an item upon which action may be taken.

#### **8. ADJOURNMENT: For Possible Action**

**The next meeting is tentatively scheduled for 4:30 p.m., Wednesday, June 14, 2017, at the Sierra Room - Community Center, 851 East William Street.**

This agenda has been posted at the following locations on Thursday, May 4, 2017, before 5:00 p.m.:

City Hall, 201 North Carson Street

Carson City Library, 900 North Roop Street

Community Center, Sierra Room, 851 East William Street

Carson City Public Works, 3505 Butti Way

Carson City Planning Division, 108 E. Proctor Street

Douglas County Executive Offices, 1594 Esmeralda Avenue, Minden

Lyon County Manager's Office, 27 South Main Street, Yerington

Nevada Department of Transportation, 1263 S. Stewart Street, Carson City

City Website: [www.carson.org/agendas](http://www.carson.org/agendas)

State Website: <https://notice.nv.gov>

**CARSON AREA METROPOLITAN PLANNING ORGANIZATION**

**Minutes of the April 12, 2017 Meeting**

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**DRAFT**

A regular meeting of the Carson Area Metropolitan Planning Organization was scheduled for 4:30 p.m. on Wednesday, April 12, 2017 in the Community Center Sierra Room, 851 East William Street, Carson City, Nevada.

**PRESENT:** Chairperson Mark Kimbrough  
Vice Chairperson Brad Bonkowski  
Member Lori Bagwell  
Member Jon Erb  
Member Larry Hastings  
Member Jack Zenteno  
Ex-Officio Member Kevin Verre

**STAFF:** Patrick Pittenger, Transportation Manager  
Dirk Goering, Senior Transportation Planner  
Graham Dollarhide, Transit Coordinator  
Hailey Lang, Transportation Planner  
Dan Yu, Deputy District Attorney  
Tamar Warren, Deputy Clerk

**NOTE:** A recording of these proceedings, the CAMPO's agenda materials, and any written comments or documentation provided to the Clerk, during the meeting, are part of the public record. These materials are available for review, in the Recording Secretaries Division of the Carson City Clerk's Office, during regular business hours.

**1. CALL TO ORDER AND DETERMINATION OF A QUORUM (4:29:57)** - Chairperson Kimbrough called the meeting to order at 4:29 p.m. Ms. Warren called the roll; a quorum was present. Member Smolenski was absent.

**2. PUBLIC COMMENT (4:30:56)** - Chairperson Kimbrough entertained public comment; however, none was forthcoming.

**3. POSSIBLE ACTION ON APPROVAL OF MINUTES - January 11, 2017 (4:31:39)** - Chairperson Kimbrough introduced this item, and entertained a motion. **Vice Chairperson Bonkowski moved to approve the minutes, with a correction to the approval date on the signature page. Member Bagwell seconded the motion.** Chairperson Kimbrough entertained discussion on the motion. Members Erb and Hastings advised they would abstain from the vote. Chairperson Kimbrough called for a vote on the pending motion. **Motion carried 4-0-2, Members Erb and Hastings abstaining.**

**4. PUBLIC MEETING ITEMS:**

**4(A) POSSIBLE ACTION TO APPROVE AN AMENDMENT TO THE CAMPO FEDERAL FISCAL YEARS 2016 - 19 TRANSPORTATION IMPROVEMENT PROGRAM ("TIP") (4:32:25)** - Chairperson Kimbrough introduced this item, and Mr. Goering reviewed the agenda materials. Mr. Pittenger responded to questions of clarification. Chairperson Kimbrough entertained additional questions or comments and, when none were forthcoming, public comment. When no public comment was forthcoming, Chairperson Kimbrough entertained a motion. **Vice Chairperson Bonkowski moved to approve the amendment to the CAMPO Federal Fiscal Years 2016 - 19 Transportation**

**CARSON AREA METROPOLITAN PLANNING ORGANIZATION**

**Minutes of the April 12, 2017 Meeting**

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**DRAFT**

**Improvement Program. Member Bagwell seconded the motion.** Chairperson Kimbrough entertained discussion on the motion and, when none was forthcoming, called for a vote.

<b>RESULT:</b>	Approved [6 - 0]
<b>MOVER:</b>	Vice Chairperson Brad Bonkowski
<b>SECOND:</b>	Member Lori Bagwell
<b>AYES:</b>	Vice Chair Bonkowski, Members Bagwell, Erb, Hastings, Zenteno, and Chair Kimbrough
<b>NAYS:</b>	None
<b>ABSENT:</b>	Member Jim Smolenski
<b>ABSTAIN:</b>	None

**4(B) INFORMATION ONLY TO PROVIDE AN UPDATE ON CAMPO'S UNIFIED PLANNING WORK PROGRAM ("UPWP") TRAVEL DEMAND MODELING TASK (4:38:42) -** Chairperson Kimbrough introduced this item, and Mr. Goering reviewed the agenda materials. Mr. Goering and Mr. Pittenger responded to questions of clarification. Chairperson Kimbrough entertained additional CAMPO member comments or questions and, when none were forthcoming, public comment. No public comment was forthcoming.

**5. INTERNAL COMMUNICATIONS AND ADMINISTRATIVE MATTERS; FUTURE AGENDA ITEMS (4:48:09) -** Chairperson Kimbrough introduced this item, and Mr. Pittenger advised of an "open period to apply to CAMPO to access Federal Transit Administration Section 5310 and 5339 funds. ... After that closes, CAMPO staff will bring the applications to CAMPO for their consideration ..."

**6. CAMPO MEMBER COMMENTS (4:48:52) -** Chairperson Kimbrough entertained CAMPO member comments; however, none were forthcoming.

**7. PUBLIC COMMENT (4:49:04) -** Chairperson Kimbrough entertained public comments; however, none were forthcoming.

**8. ACTION ON ADJOURNMENT (4:49:10) -** Vice Chairperson Bonkowski moved to adjourn the meeting at 4:49 p.m.

The Minutes of the April 12, 2017 Carson Area Metropolitan Planning Organization meeting are so approved this \_\_\_\_\_ day of May, 2017.

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MARK KIMBROUGH, Chair



## STAFF REPORT

**Report To:** The Carson Area Metropolitan Planning Organization (CAMPO)

**Meeting Date:** May 10, 2017

**Staff Contact:** Dirk Goering, Senior Transportation Planner

**Agenda Title:** (**For Possible Action**) To determine the selection of the Federal Transit Administration's (FTA) 5310 application(s) to be submitted for funding in the CAMPO planning area.

**Staff Summary:** CAMPO staff has received two applications requesting FTA 5310 funding. One application was received from the Nevada Rural Counties Retired Senior Volunteer Program (RSVP) Program, and another from the Carson City Regional Transportation Commission (RTC). The CAMPO Board will determine whether the application(s) will be selected for funding and the amount of funds to be awarded out of the total available.

**Agenda Action:** Formal Action/Motion

**Time Requested:** 10 minutes

### **Proposed Motion**

I move to determine the selection of the Federal Transit Administration's (FTA) 5310 application(s) to be submitted for funding in the CAMPO planning area.

### **Background/Issues & Analysis**

FTA Section 5310 funds are apportioned annually to CAMPO and are to be used for the enhanced mobility of seniors and individuals with disabilities. The total amount of FTA 5310 funding available to CAMPO is \$61,944. This number represents the Federal Fiscal Year 2017 partial (7/12) apportionment. The standard split for this type of funding is 80% Federal for capital projects. CAMPO staff has received two eligible applications for FTA 5310 funds. The Nevada Rural Counties RSVP Program and the Carson City RTC (JAC transit) have each submitted an application for funding.

Any funds awarded to RSVP, which has requested \$33,200 in FTA funds, will be used to purchase a vehicle for their fleet. The vehicle will be used to provide transportation to senior citizens who are no longer able to drive themselves.

Any funds awarded to the RTC, which has requested \$61,944 in FTA funds, will be used as capitalized operating funds to continue to provide ADA-compliant fixed route and paratransit services at existing levels. The funds requested by the RTC will be used to cover operating expenses that are typically reimbursed at a 50% Federal rate, and will instead be reimbursed at an 80% Federal rate.

The CAMPO Board may choose to allocate funds to one or to both applicants (or to none at all) in the full amount, or an amount that is less than what has been requested. Based on the proposed use of funds, each applicant would be required to provide a 20% local match to any Federal funds awarded.

**Applicable Statute, Code, Policy, Rule or Regulation** – 49 U.S.C 5310

**Financial Information** – Local cash or in-kind matches will be required by the local agencies at the time funds are expended.

**Alternatives** – N/A

**Supporting Material** – Nevada Rural Counties RSVP Program and Carson City RTC applications.

**Board Action Taken:**

Motion: \_\_\_\_\_

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_

Aye/Nay

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Vote Recorded By)

# **Carson Area Metropolitan Planning Organization**

## **Applications for Federal Transit Administration Grant Funds: Section 5310 Program**

The following applications were received and deemed to be eligible for award of funds by CAMPO staff:

- Nevada Rural Counties RSVP Program, Inc.
- Carson City Regional Transportation Commission

# NEVADA RURAL COUNTIES RSVP PROGRAM, INC.

## BOARD OF DIRECTORS

JERRY THURMAN  
Board President  
*President Insured Financial  
Services*

MARGARET LOWTHER  
Board Vice President  
*Former Storey County  
Auditor/Recorder*

MARSHA BURGESS  
Board Treasurer  
*Former CEO  
Greater NV Credit Union*

BRIAN COSTELLO  
Board Secretary  
*Director, Delivery Operations  
NV Energy*

CAROLINE PUNCHES  
Board Director  
*Retired Executive Director  
Northern Nevada Chapter  
American Red Cross*

ALLAN WARD  
Board Director  
*Owner,  
Home Instead Senior Care*

KEVIN S. KIRKEBY  
Board Director  
*Business Analyst,  
ElectraTherm*

EXECUTIVE DIRECTOR  
& CEO

SUSAN C. HAAS

501 (c)(3) Non-Profit Tax Exempt Agency and Program of The Corporation For National And Community Service

April 13, 2017

Mailing Address: P. O. Box 1708  
Carson City, NV 89702  
Location: 2621 Northgate Lane Suite 6  
Carson City, NV 89706  
(775) 687-4680  
Fax (775) 687-4494  
Toll Free: 1-800-992-0900 Ext: 4680  
shaas@nrvsvp.com  
www.nevadaruralrsvp.org

Carson Area Metropolitan Planning Organization (CAMPO)  
3505 Butti Way  
Carson City, NV 89701

## Re: Carson Area Metropolitan Planning Organization (CAMPO) Federal Transit Administration (FTA) Section 5310 Grant Funds Application as Subrecipient

Dear Grants Committee:

Nevada Rural Counties RSVP Program, Inc. (RSVP) is pleased to submit an Application for grant funding offered by CAMPO under the Competitive Selection Process for Federal Transit Administration (FTA) Section 5310 (Capital/Vehicle) funding opportunity.

Nevada Rural Counties RSVP Program, Inc. (RSVP) is a 501 (c) (3) non-profit organization that has been serving the 15 rural counties of Nevada for over 43 years. NV Rural RSVP meets essential community needs through its innovative approach to providing independent living services to the homebound elderly and 24/7 caregivers and their loved-ones. Utilizing senior citizen volunteers who are trained to deliver a comprehensive and life-saving support system ensures that Nevada's frail and homebound elderly are assisted with direct care, in-home services, and a safety-net of services through independent living programs that allow them to continue to live independently and at home with dignity.

Our funding request is to purchase a van and provide Carson City senior citizens who are no longer able to drive themselves with escorted door-to-door services for critical care trips to medical, dental, vision appointments, essential shopping, socialization opportunities, and many other basic services. Additionally, our Project is in collaboration with Carson City Senior Center which will ensure that homebound and isolated seniors have opportunities to participate in the Center's daily congregate meal services and other activities which promote health, nutrition and socialization.

Thank you for consideration of our grant request. Please contact me at 687-4680, ext. 2 or [shaas@nrvsvp.com](mailto:shaas@nrvsvp.com) if you have questions or would like additional information.

Sincerely,

Susan C. Haas

Executive Director & C.E.O.

sh/mb

Encls.

RECEIVED  
4/13/17

*Named Outstanding 501 (c) (3) Non-Profit Agency in Nevada for 2001 - Governor Kenny Guinn's "Points of Light Award"*

Carson City - Churchill Co. - Douglas Co. - Elko Co. - Esmeralda Co. - Eureka Co. - Humboldt Co. - Lander Co. - Lincoln Co. - Lyon Co. - Mineral Co. - Nye Co. - Pershing Co. - Storey Co. - White Pine Co.

RSVP's Mission: To help frail, homebound, and low-income seniors remain independent by providing high quality programs which allow them to stay in their own homes with dignity. Additionally, RSVP coordinates a volunteer network of seniors who use their skills and talents to provide support to community agencies and address community needs through service.

Nevada Rural Counties RSVP Program, Inc.  
 APPLICANT'S NAME \_\_\_\_\_

APPLICATION CHECKLIST				
*****INCOMPLETE APPLICATIONS WILL NOT BE APPROVED*****				
NEW APPLICANT REVIEW	PAST APPLICANT REVIEW	PAGE	APPLICATION CHECKLIST WITH ITEMS REQUIRED	STAFF REVIEW
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	DETERMINATION OF ELIGIBILITY	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	9	FTA FUNDING SOURCES	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12	FEDERAL GRANT APPLICATION	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	13	PROJECT JUSTIFICATION	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	15	VEHICLE INVENTORY	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	17	BUDGET SUMMARY	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	18	AUTHORIZING RESOLUTION	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	APPENDIX A	<u>FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES</u>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	following certs & assurances	MATCH SOURCE DOCUMENTATION	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	ADA POLICY (vehicle/passengers information)	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	EEO PLAN	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	DRUG AND ALCOHOL POLICY (5339 Only)	N/A <input type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	VEHICLE/FACILITY MAINTENANCE POLICY	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	TRAINING POLICY	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	VEHICLE POLICY (driver/rider information)	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	N/A	new applicants include in application packet	COMPLAINT RESOLUTION POLICY	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	include in application packet	COPY OF VEHICLE INSURANCE POLICY (Evidencing Commercial Liability, General Liability, Collision, and Comprehensive Liability Insurance, with a limit of not less than One Million and not 100 Dollars (\$1,000,000.00) per occurrence.)	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	include in application packet	PUBLIC NOTICE- (Please review Appendix A "Certifications and Assurances - Private Sector Protections")	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	include in application packet	CURRENT LETTERS OF SUPPORT (From previous 12 month period of service)	<input checked="" type="checkbox"/>

\*Please provide 1 original application and 1 copy

Susan C. Haas  
 APPLICANT SIGNATURE

[Signature]  
 CAMPO STAFF SIGNATURE

**Carson Area Metropolitan Planning Organization**  
**Application for the Determination of Eligibility for the Federal Transit Administration's**  
**5310 & 5339 Federal Grant Programs – Federal Fiscal Year 2017 Apportionment**

Name of Organization: Nevada Rural Counties RSVP Program, Inc.

Area(s) Served: Carson City, Dayton, Gardnerville, Minden, Silver Springs, Stage Coach, Elko, Winnemucca, River District, Virginia City, Pahrump, Carlin, Hawthorne

Funding Amount Requested: \$41,500.00

Project Description: As a private non-profit organization, RSVP will provide escorted on demand transportation services to low-income, transit dependent, and disabled elders age 60 and older. Through volunteers, the Project provides our ridership with easy and reliable access to critical and lifesaving services such as essential medical (includes dialysis, chemotherapy, specialty clinics, primary care, physical therapy) dental and vision appointments, prescription pick up, grocery shopping, social events, and other necessary trip purposes. Drivers also share conversation with clients which helps relieve their isolation, assures them that someone cares for them, and fosters socialization. Furthermore, RSVP will partner with the Carson City Senior Center to provide seniors with door-to-door transportation to Senior Center activities including its daily congregate meal services. This collaborative project will perform a new service delivery - eliminate duplication of services, consolidate resources, and reach new senior riders in Carson City that would otherwise not have access to RSVP's Independent Living programs to reduce institutional care and meet their basic needs.

Project Relation to the State of Nevada Coordinated Human Services Transportation Plan: RSVP was a valuable contributor to the Plan's Provider Survey for Carson City/County. The Plan reports door -to-door escort service for seniors as one of two main transit service needs in Carson City, while transportation trips for medical and shopping purposes are the most frequently requested trip types followed by trips to the senior center. Furthermore, a key recommendation identified in the Plan's Transit Provider Survey is the opportunity for increased coordination between agencies. The Plan's Historic Demographic Data also reports that 16.5% of Carson City Residents identified as seniors over age 65. This number will continue to escalate as baby boomers retire and newcomers relocate to the area. The RSVP Project addresses the critical issues and other barriers outlined in the Plan in numerous ways: (1) the Project meets the basic transit needs of our most disadvantaged and elderly population; (2) the Project provides trips for medical and other life-saving needs including senior center meals; and (3) the Project is coordinating services to reduce duplication.

## FTA Funding Sources

**For your application to be considered complete, please only check one funding source. If multiple funding sources are desired please submit a separate application for each.**

**5310 (Capital/Vehicle) Funds  (20% match required)**

**5310 (Operating) Funds  (50% match required)**

This program (49 U.S.C. 5310) provides formula funding to metropolitan planning organizations (MPOs) for the purpose of assisting private nonprofit organizations or Governmental entities in meeting the transportation needs of the elderly and persons with disabilities. Eligible subrecipients are private non-profit organizations, governmental authorities where no non-profit organizations are available to provide service, and governmental authorities approved to coordinate services.

**5339 (Capital) Funds  (20% match required)**

This program (49 U.S.C. 5339) provides funding to replace, rehabilitate, and purchase buses and related equipment as well as construct bus-related facilities. This includes the acquisition of buses for fleet and service expansion, bus maintenance and administrative facilities, transfer facilities, bus malls, transport centers, intermodal terminals, park-and-ride stations, passenger shelters and bus stop signs, accessory and miscellaneous equipment such as mobile radio units, fare boxes, computers, shop and garage equipment. Eligible subrecipients include public agencies or private non-profit organizations engaged in fixed-route public transportation, including those providing services open to a segment of the general public as defined by age, disability, or low income.

**For more information on the programs above please refer to FTA's website:**  
<https://www.transit.dot.gov/grants>

**If you have questions regarding which funding source is appropriate for your service please feel free to contact the CAMPO Transit Coordinator at (775) 283-7583.**

**Project funding from the programs listed above is subject to the availability of grant funding and the amount of project funding requests received, which will be determined by the CAMPO Board during a regularly scheduled meeting occurring on the second Wednesday of each month.**

**CARSON AREA METROPOLITAN PLANNING ORGANIZATION  
FEDERAL GRANT APPLICATION  
FEDERAL FISCAL YEAR 2017 APPORTIONMENT**

Please fill out a separate application for each Grant Program you are applying for. Attach the original signed documents along with 1 complete copy of your application package and send to the Carson Area Metropolitan Planning Organization (CAMPO) 3505 Butti Way Carson City NV, 89701. Please retain 1 complete copy for your records.

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**Applicant** Nevada Rural Counties RSVP Program, Inc.

\*If you are a County applying on behalf of a transit system, please provide names and addresses for both the County and the transit system.

**Physical Address** 2621 Northgate Lane, Suite 6, Carson City, NV 89706

**Mailing Address** P.O. Box 1708, Carson City, NV 89702

**Contact**

**Person/Official** Susan Haas

**Title** Executive Director & C.E.O.

**Telephone** 775-687-4680, ext. 2

**Fax** 775-687-4494

**E-mail address** shaas@nvrsvp.com

**Federal Tax ID#** 94-3164032

**DUNS #** 06-786-7080

**Type of Agency**  Private Non-Profit  
 Private For-Profit  
 Governmental Agency  
 Tribal Agency (Sovereign Nation)  
 Other (describe)

**Type of Service**  Senior Center/Disabled Workshop  
 Demand-Response (Dial-a-Ride, Door to Door)  
 Deviated Fixed-Route  
 Fixed route  
 Other (describe)

**Mission/Vision Statement:** RSVP's mission is to help frail, homebound, and low-income seniors remain independent by providing high quality programs which allow them to stay in their own homes with dignity. Additionally, RSVP coordinates a volunteer network of seniors who use their skills and talents to provide support to community agencies and address community needs through service. FTA funding through CAMPO will be used to purchase an additional van that will provide Carson City seniors with the critical care trips to access the lifesaving goods and services so necessary for them to remain independent and in their own homes with dignity, thus avoiding costly and unnecessary institutionalization.

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## PROJECT JUSTIFICATION

1. Please describe in detail your transportation program and how this funding will enhance the services offered.

Rural RSVP provides escorted door-to-door transportation for frail, homebound and low-income seniors who are no longer able to drive themselves; and free critical care trips to medical, dental, and vision appts. in/outside a senior's county. Senior's are also provided with essential shopping and socialization opportunities. The program provides service for seniors in 15 rural counties where no other appropriate transportation is available. Our volunteer drivers use their own cars or an RSVP van. Our request is for service expansion - to purchase a van for Carson City services and Senior Center transportation.

2. Describe the transportation services currently being provided by your organization and/or others in the same region.

Rural RSVP's Transportation Program for seniors is a door-to-door service to a variety of destinations in and between rural Nevada counties, Carson City, and Reno. Where public transportation is available, many seniors simply cannot use it due to physical ailments, or the fixed route schedule or cost. While a few senior centers offer transportation services, they have rigid schedules and mileage restrictions. Our funding request will help fill this gap. The Carson City Transportation Coordinator maintains vehicle files, schedules maintenance, quarterly ridership, vehicle performance measures to NDOT.

3. Provide a detailed description of your organization. Provide information regarding how your organization came to be. Include the future vision for the organization.

Rural RSVP is a 501(c) 3 non-profit service organization which began as a satellite office of Washoe in 1972. In 1973 RSVP became a self-sponsored, self-incorporated program that has expanded to include all 15 rural Nevada counties. RSVP has a volunteer Board of Directors, comprised of community and business leaders. The future vision of RSVP is to provide the most comprehensive suite of programs to assist frail, homebound, and low-income seniors to remain independent and in their own homes as long as possible - avoiding institutionalization. RSVP offers 9 core Independent Living programs.

4. Describe any (proposed or currently in use) connectivity/coordination efforts with surrounding area transit providers.

RSVP's collaboration efforts has helped to maximize transportation resources and connectivity services for RSVP's senior clients and Veterans who live in Nevada's rural counties. RSVP partners with Silver Rider, RTC Carson City, RTC Reno, RTC Las Vegas, Washoe and Douglas Counties Transit Systems, Truckee/Tahoe Transportation District, Elko Transit Authority, Amador Stage Lines, local and regional transportation centers, Nevada Aging & Disability Services Division, senior centers, and other government agencies and non-profits. This project is in collaboration with Carson City Senior Center

The following information is required by the Federal Transit Administration. The economic/racial/ethnic composition of your governing body will not be considered as a factor in awarding this grant.

Our governing body (board of director, city council, etc.) is made up predominantly of minority and/or low income individuals.

Yes  No

**SERVICE**

**Clientele Served**

<input checked="" type="checkbox"/> Elderly (60+ years old)	<input type="checkbox"/> General Public (18-59 years old)
<input checked="" type="checkbox"/> Persons with disabilities	<input type="checkbox"/> Children (under age 5)
<input checked="" type="checkbox"/> Low Income/Welfare	<input type="checkbox"/> Children (5-7 years old)
<input type="checkbox"/> Minorities	<input type="checkbox"/> Children (8-17 years old)
<input type="checkbox"/> Commuters	

**Location (check all that apply)**

<input type="checkbox"/> Non-Urban Area (Rural under 50,000 population)
<input checked="" type="checkbox"/> Small Urban Area (50,000 - 200,000 population)
<input type="checkbox"/> Douglas County
<input type="checkbox"/> Lyon County
<input checked="" type="checkbox"/> Carson City

**Areas Served** 1. This vehicle will be designated for Carson City. 2. RSVP's escorted transportation in Vans serves: Carson City, Dayton, Hawthorne, Gardnerville, Minden, Silver Springs, Elko, Winnemucca, River District, Virginia City, Pahrump, Spring Creek, Carlin

**DESCRIPTION OF VEHICLE(S)/BUS(ES) REQUESTED\***

Quantity	VEHICLE DESCRIPTION (including size, capacity, wheelchair positions, etc.)	Estimated Cost
1	2017 Dodge Grand caravan SE - estimated cost per Teresa Jarrett	26,000
1	Van Conversion - estimate per Lone Star Handicap Vans as follows: ADA 56" Lowered side entry door modification-no rocker panel -New 14" lowered pre-fab. Floor system - New Exhaust system -New Altro flooring (complete cover) -Removable front passenger seat with footrest - Remounted spare tire holder or Air Pump	
	Remounted rear couch -Manual Bi-fold Aluminum Side Wheelchair Ramp (30" WIDTH) - Manual door-extended to accommodate ramp.	
	New Have Manual tie down system Full set of Body Ground Effects Painted to Match	15,500
<b>TOTAL QUANTITY</b>	<b>TOTAL ESTIMATED COST</b>	<b>41,500</b>

\*CAMPO staff will procure requested vehicle(s). Actual price will be based on bids received

Nevada Rural Counties RSVP Program, Inc.  
 Agency Name \_\_\_\_\_ Vehicle Inventory - FFY 2017

Vehicle Identification Number	License #	Condition Poor/Good/ Excellent	Year & Vehicle Mode (BU=Bus, CU=Cutaway, VN=Van, MV=Minivan)		Vehicle Length	Seating Capacity	ADA Accessible Vehicle		Mileage	Funding Source*	Vehicle to be Replaced	
			Year	Mode			Yes/No	# of ADA Seats			Yes	No
2B4GT44LX1R403084	41612	Poor	2001	Dodge Caravan	17'	7	No		148,314	NDOT	YES	RSVP
2D4RN4DE9AR455106	61078	Excellent	2010	Dodge Minivan	17'	5	YES		62,769	NDOT	NO	RSVP
1GBDV13137D176027	54278	Good	2007	Chevy Uplander	17'	7	YES		160,028	NDOT	NO	RSVP
1GNDM19W6XB100290	EX36343	Good	1999	Chevy Astrovan	17'	7	NO		141,597	NDOT	NO	RSVP
2C7WDGGBGGR144264	67082	Excellent	2016	Dodge Minivan	17'	7	YES		23,240	NDOT	NO	NDOT
2C7WDGGBGOGT144250	7091	Excellent	2016	Dodge Minivan	17'	7	YES		6,976	NDOT	NO	NDOT
2C7WDGGBG3FR686456	66022	Excellent	2015	Dodge Minivan	17'	7	YES		13,378	NDOT	NO	NDOT
2T3RK4DVOCW092028	EX62282	Excellent	2012	Toyota RAV 4	15'	5	NO		115,000	RSVP	NO	RSVP

\*Funding Source - Please provide the largest funding source used to purchase the vehicle. Please be specific. (i.e. FTA, other federal funds, private or other-- describe).

**FTA BUDGET (1 of 2) ALL APPLICANTS 5310 or 5339**

<b><u>CAPITALIZED OPERATING EXPENSES 5310</u></b>	
Contract Operator Expenses	\$ _____
(Defined as acquisition of transportation services under a contract, lease, or other arrangement)	
<b>(A) TOTAL CAPITAL EXPENSES</b>	\$ _____

<b><u>OPERATING EXPENSES 5310</u></b>	
Operator Expenses	\$ _____
(Defined as the incremental cost of providing same day service or door-to-door service)	
Fuel/Oil Fluids	\$ _____
Driver/Dispatcher Salaries	\$ _____
Other (Specify)	\$ _____
<b>(B) TOTAL OPERATING EXPENSES</b>	\$ _____

<b><u>CAPITAL PURCHASES (5339 or 5310)</u></b>	
Buses/Van/Paratransit Vehicle	\$ 41,500
Radios/Comm Equipment	\$ _____
Bus Facilities (Shelters, Signs)	\$ _____
Vehicle Overhaul/Rehab/etc.	\$ _____
Other (Specify)	\$ _____
<b>(C) TOTAL CAPITAL PURCHASES</b>	\$ 41,500

<b><u>REVENUE</u></b>	
(MUST INCLUDE PROJECTED FAREBOX REVENUE)	
Source	Dollar Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
<b>(D) TOTAL REVENUE</b>	\$ _____

<b><u>MATCH</u></b>	
Source	Dollar Amount
\$ RSVP	\$ 8,300
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
<b>(E) TOTAL MATCH</b>	\$ 8,300

**5310 Enhanced Mobility for Seniors & Individuals with Disabilities**

This program provides funds to 1) serve the special needs of transit-dependent populations beyond traditional public transportat service, where public transportation is insufficient, inappropriate, or unavailable; 2) projects that exceed the requirements of the Americans with Disabilities Act (ADA); 3) projects that improve access to fixed route service and decreased reliance on complementary paratransit; and 4) project that are alternatives to public transportation.

**5339 Bus and Bus Facilities**

This program provides funding to replace, rehabilitate, and purchase buses and related equipment as well as construct bus-related facilities. This includes the acquisition of buses for fleet and service expansion, bus maintenance and administrative facilities, transfer facilities, bus malls, transport centers, intermodal terminals, park-and-ride stations, passenger shelters and bus stop signs, accessory and miscellaneous equipment such as mobile radio units, fare boxes, computers, and shop and garage equipment.

**5310 / 5339 BUDGET (2 of 2)**

TOTAL CAPITALIZED OPERATING EXPENSES	_____	(A) On Budget Page 1 of 2
TOTAL FAREBOX REVENUE	_____	(D) On Budget Page 1 of 2
NET OPERATING EXPENSES	_____	Total expenses minus total revenue
FTA CAPITALIZED OPERATING AMOUNT	_____	80% of net expenses
SUB-RECIPIENT CAPITALIZED OPERATING MATCH	_____	20% of net expenses

TOTAL OPERATING EXPENSES	_____	(B) On Budget Page 1 of 2
TOTAL FAREBOX REVENUE	_____	(D) On Budget Page 1 of 2
NET OPERATING EXPENSES	_____	Total expenses minus total revenue
FTA OPERATING AMOUNT	_____	50% of net expenses
SUB-RECIPIENT OPERATING AMOUNT	_____	50% of net expenses

TOTAL CAPITAL PURCHASES	<u>41,500</u>	(C) On Budget Page 1 of 2
FTA OPERATING AMOUNT	<u>33,200</u>	80% of total
SUB-RECIPIENT OPERATING AMOUNT	<u>8,300</u>	20% of total

**PLEASE LIST FUNDING BELOW IN WHOLE DOLLARS**

<b>TOTAL FTA FUNDS REQUESTED</b>	33,200	(FTA CAPITALIZED OPERATING, OPERATING, & CAPITAL PURCHASES FROM ABOVE)
<b>SUBRECIPIENT MATCH</b>	8,300	(SUBRECIPIENT CAPITALIZED OPERATING, OPERATING, & CAPITAL PURCHASES FROM ABOVE)

AUTHORIZING RESOLUTION

APPLICANT Nevada Rural Counties RSVP Program, Inc.  
(Printed Name of Transportation Provider)

AUTHORIZED REPRESENTATIVE Susan C. Haas  
(Printed name of Authorized Representative)

Resolution authorizing the filing of an application for a Federal Transit Administration / Carson Area Metropolitan Planning Organization grant under 49 USC Chapter 53.

WHEREAS, the U S Department of Transportation (USDOT) is authorized to make grants to metropolitan planning organizations through the Federal Transit Administration (FTA) to support transportation projects under 49 USC Chapter 53; and

WHEREAS, the Carson Area Metropolitan Planning Organization (CAMPO) has been designated to administer certain transportation projects under 49 USC Chapter 53; and

WHEREAS, the contract for financial assistance will impose certain obligations upon the APPLICANT, including provisions of the local share of project costs;

NOW, THEREFORE, BE IT RESOLVED BY THE APPLICANT:

That the above named representative is authorized to execute and file an application with CAMPO on behalf of our agency to aid in the financing of capital, and / or operating costs pursuant to 49 USC Chapter 53; and

That the above named representative is authorized to furnish such additional information as CAMPO may require in connection with the application or the project.

The undersigned certifies that the foregoing is a true and correct statement.

Executive Director & C.E.O.  
(Printed Title of Authorized Representative)

Susan C. Haas  
(Signature of Authorized Representative)

Dated 4/10/17

**FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES**

**FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES FOR  
FEDERAL TRANSIT ADMINISTRATION ASSISTANCE PROGRAMS**

(Signature pages alternative to providing Certifications and Assurances in TrAMS)

Name of Applicant: Nevada Rural Counties RSVP Program, Inc.

The Applicant agrees to comply with applicable provisions of (Categories 01 – 23. X  
OR

The Applicant agrees to comply with applicable provisions of the Categories it has selected:

<u>Category</u>	<u>Description</u>	
01.	Required Certifications and Assurances for Each Applicant.	_____
02.	Lobbying.	_____
03.	Procurement and Procurement Systems.	_____
04.	Private Sector Protections.	_____
05.	Rolling Stock Reviews and Bus Testing.	_____
06.	Demand Responsive Service.	_____
07.	Intelligent Transportation Systems.	_____
08.	Interest and Financing Costs and Acquisition of Capital Assets by Lease.	_____
09.	Transit Asset Management Plan, Public Transportation Safety Program, and State Safety Oversight Requirements.	_____
10.	Alcohol and Controlled Substances Testing.	_____
11.	Fixed Guideway Capital Investment Grants Program (New Starts, Small Starts, and Core Capacity Improvement).	_____
12.	State of Good Repair Program.	_____
13.	Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs.	_____
14.	Urbanized Area Formula Grants Programs and Passenger Ferry Grant Program.	_____
15.	Enhanced Mobility of Seniors and Individuals with Disabilities Programs.	_____
16.	Rural Areas and Appalachian Development Programs.	_____
17.	Tribal Transit Programs (Public Transportation on Indian Reservations Programs).	_____
18.	State Safety Oversight Grant Program.	_____
19.	Public Transportation Emergency Relief Program.	_____
20.	Expedited Project Delivery Pilot Program.	_____
21.	Infrastructure Finance Programs.	_____
22.	Paul S. Sarbanes Transit in Parks Program.	_____
23.	Construction Hiring Preferences.	_____

**FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES**

**FEDERAL FISCAL YEAR 2017 FTA CERTIFICATIONS AND ASSURANCES SIGNATURE PAGE**

(Required of all Applicants for federal assistance to be awarded by FTA and all FTA Grantees with an active Capital or Formula Award)

**AFFIRMATION OF APPLICANT**

Name of the Applicant: Nevada Rural Counties RSVP Program, Inc.

Name and Relationship of the Authorized Representative: Susan C. Haas, Executive Director & C.E.O.

BY SIGNING BELOW, on behalf of the Applicant, I declare that it has duly authorized me to make these Certifications and Assurances and bind its compliance. Thus, it agrees to comply with all federal laws, regulations, and requirements, follow applicable federal guidance, and comply with the Certifications and Assurances as indicated on the foregoing page applicable to each application its Authorized Representative makes to the Federal Transit Administration (FTA) in federal fiscal year 2017, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent it.

FTA intends that the Certifications and Assurances the Applicant selects on the other side of this document should apply to each Award for which it now seeks, or may later seek federal assistance to be awarded during federal fiscal year 2017.

The Applicant affirms the truthfulness and accuracy of the Certifications and Assurances it has selected in the statements submitted with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. § 3801 *et seq.*, and implementing U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31, apply to any certification, assurance or submission made to FTA. The criminal provisions of 18 U.S.C. § 1001 apply to any certification, assurance, or submission made in connection with a federal public transportation program authorized by 49 U.S.C. chapter 53 or any other statute

In signing this document, I declare under penalties of perjury that the foregoing Certifications and Assurances, and any other statements made by me on behalf of the Applicant are true and accurate.

Signature Susan C. Haas Date: 4/10/17

Name Susan C. Haas  
Authorized Representative of Applicant

**AFFIRMATION OF APPLICANT'S ATTORNEY**

For (Name of Applicant): Nevada Rural Counties RSVP Program, Inc.

As the undersigned Attorney for the above named Applicant, I hereby affirm to the Applicant that it has authority under state, local, or tribal government law, as applicable, to make and comply with the Certifications and Assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the Certifications and Assurances have been legally made and constitute legal and binding obligations on it.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these Certifications and Assurances, or of the performance of its FTA assisted Award.

Signature Lora E. Myles Date: 4-10-2017

Name LORA E MYLES, ESQ.  
Attorney for Applicant

*Each Applicant for federal assistance to be awarded by FTA and each FTA Recipient with an active Capital or Formula Project or Award must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its electronic signature in lieu of the Attorney's signature within FTA's electronic award and management system, provided the Applicant has on file and uploaded to FTA's electronic award and management system this hard-copy Affirmation, signed by the attorney and dated this federal fiscal year.*

# NEVADA RURAL COUNTIES RSVP PROGRAM, INC.

## BOARD OF DIRECTORS

JERRY THURMAN  
Board President  
*President Insured Financial Services*

MARGARET LOWTHER  
Board Vice President  
*Former Storey County Auditor/Recorder*

MARSHA BURGESS  
Board Treasurer  
*Former CEO Greater NV Credit Union*

BRIAN COSTELLO  
Board Secretary  
*Director, Delivery Operations NV Energy*

CAROLINE PUNCHES  
Board Director  
*Retired Executive Director Northern Nevada Chapter American Red Cross*

ALLAN WARD  
Board Director  
*Owner, Home Instead Senior Care*

KEVIN S. KIRKEBY  
Board Director  
*Business Analyst, ElectraTherm*

EXECUTIVE DIRECTOR  
& CEO

SUSAN C. HAAS

501 (c)(3) Non-Profit Tax Exempt Agency and Program of The Corporation For National And Community Service

Mailing Address: P. O. Box 1708  
Carson City, NV 89702  
Location: 2621 Northgate Lane Suite 6  
Carson City, NV 89706  
(775) 687-4680  
Fax (775) 687-4494  
Toll Free: 1-800-992-0900 Ext: 4680  
shaas@nrsvp.com  
www.nevadaruralrsvp.org

April 10, 2017

Carson Area Metropolitan Planning Organization  
3505 Butti Way  
Carson City, NV 89701

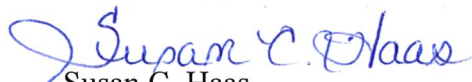
Re: Application for the Determination of Eligibility for the Federal Transit Administration's 5310 Federal Grant Program – Match Source Documentation  
FFY 2017 Apportionment

To Whom It May Concern:

Nevada Rural Counties RSVP Program, Inc. (RSVP) will raise funds to cover up to 20 percent in match requirement for a van to be placed in Carson City, Nevada. RSVP will request assistance with matching funds from the State of Nevada, Department of Health and Human Services Aging and Disability Services Division (ADSD). ADSD provided part of the FY 2015 match for a van and RSVP fundraised for the remaining match required. Under this project request, RSVP plans to continue its fundraising efforts to cover any shortfall for the balance of funds that have not been secured from other grant sources.

Lack of transportation is the number one deterrent to senior and disabled clients accessing lifesaving goods and services. This grant will allow RSVP to continue to serve Carson City residents to access critical care and other basic services because they are faced with lack of transportation.

Please contact me if you need further information or clarification.  
Sincerely,

  
Susan C. Haas  
Executive Director & C.E.O.

*Named Outstanding 501 (c) (3) Non-Profit Agency in Nevada for 2001 - Governor Kenny Guinn's "Points of Light Award"*  
Carson City - Churchill Co. - Douglas Co. - Elko Co. - Esmeralda Co. - Eureka Co. - Humboldt Co. - Lander Co. - Lincoln Co. - Lyon Co. - Mineral Co. - Nye Co. - Pershing Co. - Storey Co. - White Pine Co.

RSVP's Mission: To help frail, homebound, and low-income seniors remain independent by providing high quality programs which allow them to stay in their own homes with dignity. Additionally, RSVP coordinates a volunteer network of seniors who use their skills and talents to provide support to community agencies and address community needs through service.

## AMERICANS WITH DISABILITIES POLICY

RSVP will comply with all the relevant and applicable provisions of the Americans with Disabilities Act (ADA). RSVP will not discriminate against any employee or job applicant with respect to any terms, privileges, or conditions of employment because of a person's physical or mental disability pending a review of the specific job requirements. RSVP will make reasonable accommodations wherever necessary for all employees or applicants with disabilities, provided the individual is otherwise qualified to safely perform the duties and assignments connected with the job and provided that any accommodations made do not require significant difficulty or expense. This policy applies to all areas of RSVP employment including recruitment, hiring, training, promotion, compensation, benefits and social activities.

Any RSVP employee who believes that he or she has been discriminated against on the basis of disability should bring the problem to the attention of the Executive Director or a member of the Board of Directors.

## AFFIRMATIVE ACTION POLICY

RSVP's Affirmative Action Plan is aimed at the identification, recruitment, employment and training of minorities, seniors, disabled persons and women. It is a positive program to equalize employment opportunities and fully utilize the greater pool of human resources and skills that exist among the above-mentioned groups. In undertaking affirmative action, RSVP will not practice reverse discrimination by giving undue preferential treatment to those groups mentioned above by using quotas or other unequal opportunity devices. Rather, it will reinforce and enhance merit employment concepts by insuring that all segments of the community have an opportunity to enter employment on the basis of open competition, and to advance according to their relative ability and fitness.

RSVP maintains a comprehensive affirmative action philosophy covering all elements of personnel policy and practice to remove discriminatory employment barriers when and where they are found to exist, and to enable all individuals to compete for employment opportunities on an equal basis, regardless of age, race, color, religion, sex, national origin, ancestry, medical condition, disability, veteran status, marital status or any other status protected by law, unless there exists a bona fide occupational qualification.

**NEVADA RURAL COUNTIES RSVP PROGRAM, INC.  
PERSONNEL POLICIES AND PROCEDURES MANUAL**

**GENERAL**

This Personnel Policies and Procedures Manual of the Nevada Rural Counties RSVP Program, Inc. ("RSVP") constitute the declared personnel and administrative policies and objectives of the RSVP Board of Directors, to inspire public confidence in the exercise of initiative and leadership, to promote a harmonious interfunctional relationship and to ensure uniformity and fairness in personnel and labor relations administration.

The Board of Directors considers it appropriate that all employees have a copy of RSVP Personnel Policies to refer to when necessary.

The Nevada Rural Counties RSVP Program is administered as authorized and required under Title II of the Domestic Volunteer Services Act of 1973 as amended (Public Law 93-113) with oversight provided by a volunteer Board of Directors.

To ensure fiscal and programmatic quality controls, compliance with the Corporation for National and Community Service (CNCS) policies and procedures, and accomplishment of stated goals. The Board of Directors has promulgated these rules, regulations and policies to the extent permitted by the laws of the State of Nevada to assist employees in the efficient performance of their duties and to provide adequate employment guidelines.

**APPLICABILITY OF POLICIES AND PROCEDURES**

These policies and procedures are applicable to all employees and officers of RSVP, as well as to all departments and positions of employment now existing or hereafter created.

**SCOPE OF AUTHORITY**

The Executive Director as the chief administrative officer of RSVP shall implement this Personnel Policies and Procedures Manual for the purpose of efficient administration. The Executive Director is designated the personnel officer of RSVP and is authorized to delegate all or part of these duties and responsibilities to a qualified staff employee.

**HIRING PRACTICES**

**EQUAL EMPLOYMENT OPPORTUNITY:** It is the established policy of RSVP to effectively utilize available human resources by selecting the best-qualified person for the job to be performed. Appropriate attention shall be given to such factors as educational background, previous experience, proven skills, desirable character traits and potential for growth and development. RSVP shall offer equal employment opportunity to all persons without regard to race, creed, color, sex, age, national origin, religion, physical or

mental handicap or veterans' preference. No applicant is to be discriminated against or given preference because of these factors. This policy is intended to apply to recruiting, hiring, promotions, upgrading, layoffs, compensation, recall, benefits, termination and all other privileges, terms and conditions of employment.

**STAFF JOB OPENINGS:** The Executive Director shall make each job opening publicly known in the interest of acquiring the best possible talent and skills available. Qualified employees or independent contractors meeting the necessary criteria established by the Executive Director shall be given the first consideration for the vacant job before RSVP fills such vacancy from outside. Those qualified employees or independent contractors having the greatest job-related knowledge, skills and abilities, and demonstrated performance records with RSVP shall be considered first.

**TEMPORARY EMPLOYMENT:** The Executive Director shall have the discretion to employ, from time to time, persons for various temporary or part-time jobs as may be necessitated.

**PROBATIONARY EMPLOYEES:** Newly hired employees shall be regarded as probationary employees for the first six months of employment so as to be observed with respect to performance, attitude and ability. The Executive Director shall determine if probationary employees will successfully complete the probationary period and to be advanced to regular status. Vacation and sick leave shall accrue to probationary employees during the first six months and thereafter. Should employment be terminated prior to six months employment, employees shall not be entitled to leaves of absence, other than maternity leaves, except in emergency situations, or prior approval of the Executive Director.

**IMMIGRATION REQUIREMENTS:** The law passed on November 6, 1986, contains a basic prohibition against hiring illegal aliens. It imposes certain administrative requirements on employers.

We are required to inspect and verify documentation, which establishes an identity and employment authorization of every new employee.

The following documents are required of all new RSVP employees:

A driver's license or state-issued ID card with photograph, plus one of the following: Social Security Card or an original or certified copy of a U.S. Birth Certificate.

**EMPLOYMENT PERSONNEL RECORDS:** When you are hired as an employee of RSVP, your "Personnel Record" will be established. Throughout your employment, a work-related history will be maintained in this record.

Your record will contain some forms and information on your job application, your educational and training credentials, your performance evaluations and other records, which affect your status, salary, position, performance or business behavior.

Nevada Rural Counties RSVP Program, Inc.

Vehicle Maintenance Policy

When vehicles are under warranty and a local dealership is geographically accessible it is the policy of RSVP to have the vehicles serviced at the local dealership. In the case of a dealer being too far away, a local repair shop will be used to maintain the vehicle or make necessary repairs.

We follow the manufacturer's scheduled maintenance provided in the owner's manuals of each vehicle based on model and year.

We are currently in the process of updating our previous maintenance plan based on new service requirements mandated by NDOT.



**Nevada Rural Counties  
Retired and Senior Volunteer Program, Inc.  
RSVP  
Volunteer Handbook**

**NV Rural Counties RSVP, Inc.  
2621 Northgate Lane, Ste. 6  
Carson City, Nevada 89706  
(775) 687-4680  
fax: (775) 687-4494  
[www.nevadaruralrsvp.org](http://www.nevadaruralrsvp.org)**

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**NOTE FROM THE EXECUTIVE DIRECTOR**

Dear Volunteers:

Welcome to Nevada Rural Counties Retired and Senior Volunteer Program. We hope that your experience with us will be pleasant and make your life more fulfilling. We are extremely flexible and will work with you to find meaningful volunteer opportunities to suit your available time and diverse talents. You can volunteer as little or as often as you like.

This handbook is designed to provide you with the information that you need about one of the most important volunteer programs in the nation and will be a guide moving forward to make the most of your volunteer time. Please read it carefully and we will answer all of your questions about being a RSVP volunteer.

RSVP volunteers tell us that “I get more out of the program than I give. Knowing that I am an important contributing member of society and my community is what keeps me going”. Studies show that volunteer service helps us to live longer, healthier, more meaningful lives. Some doctors are even giving out volunteer prescriptions!

Thank you for giving of your time and talents to help others. Your assistance provides your community with something really wonderful. A little bit of you.

RSVP volunteers are part of the heritage that makes this country the greatest in the world.

Sincerely,

Susan C. Haas  
Executive Director & C.E.O.  
Nevada Rural Counties RSVP Program, Inc.

## RSVP BACKGROUND

Welcome to the RSVP Family and congratulations on making the important decision to become a volunteer! Staff and other volunteers will be proud to work with you and to count you among our growing family members. One of the best reasons for seniors to volunteer is one of the simplest: **Because it feels good to be active, to be involved, and to be needed.**

The Nevada Rural Counties Retired and Senior Volunteer Program (RSVP) has a variety of volunteer opportunities for seniors. Since 1971, RSVP has enabled older Americans to continue making significant contributions to others long after their professional careers have ended. More than 600,000 volunteers serve in over 850 RSVP Programs, urban and rural, large and small, throughout the United States. Older men and women are offered a meaningful, active volunteer opportunities putting their talents and experience to work in community-defined, community-supported projects and independent living programs with the goal of assisting seniors and disabled persons to remain independent and in their own homes with dignity.

As a volunteer, you will be working with people who appreciate the gifts you have to share and who will be glad to see you. In addition, while improving their lives did you know you may be improving your own as well? Research has shown that doing regular volunteer work more than any other activity dramatically increases life expectancy and vitality.

## GOALS

RSVP provides a variety of opportunities for people to participate in the life of their community through significant volunteer service. The program helps to increase the public's awareness of the vast knowledge, experience, expertise and love found in volunteers.

## FUNDING

RSVP is funded partly by the federal government and partly by the state and local community. About 14% of RSVP's budget is funded under the Corporation for National & Community Service. The other 86% comes from fundraisers and grants.

## ADVISORY COUNCILS

RSVP has Advisory Councils in selected communities we serve. The Councils advise and assist RSVP and Staff, and provides independent guidance and support to RSVP. Each Advisory Council is made up of community leaders, business professionals, representatives from volunteer stations, and RSVP volunteers. In addition to advising and supporting RSVP, the Councils are an important link to the community, helping to generate community support for RSVP. Some counties have more informal groups who assist RSVP. Check with your Field Representative about a Council or group in your community.

## ELIGIBILITY

Anyone can be an RSVP volunteer regardless of income, race, religion, creed, color, national origin, political affiliation, physical challenge or sexual orientation. An RSVP volunteer must be willing to accept training and supervision as required, and be capable of performing the desired assignment. Volunteers do not receive a salary or other compensation, except for mileage reimbursement and occasionally meals. **RSVP accepts volunteers over the age of 25** who desire to volunteer.

## VOLUNTEER OPPORTUNITIES

RSVP members serve through a variety of non-profit social service or governmental agencies and non-profit service organizations and institutions designated as volunteer stations. The stations include schools, libraries, day-care centers, hospitals, nursing homes, senior centers, local and state government and other community service organizations. Please call us to receive a list of the volunteer stations in your area.

As a volunteer, you will have the opportunity to make your own schedule. You choose the number of hours and days you want to serve each month. Some volunteers work several days each week, others less. **A minimum of one hour of service per quarter (90 days) is needed to be considered an active volunteer** in our program. This is critical for your insurance to remain in force. You may choose from many different kinds of volunteer placements and if you need a new challenge, you may change your volunteer job or station whenever you wish.

You have the right to refuse to serve in unsanitary or unsafe conditions. If you encounter unsafe or unsanitary conditions at your station or at client's home, notify RSVP immediately.

## LIMITATIONS TO PLACEMENT OF VOLUNTEERS

As a volunteer, you need to know that RSVP regulations reference the following prohibited activities for all volunteers:

- Volunteer shall not be assigned to or permitted to engage in work for political organizations.
- Volunteer shall not give religious instruction, conduct worship services or engage in any form of proselytization as part of his/her duties.
- Volunteer shall not be used to displace Station employees or contractors.
- Volunteer shall not accept tips, gifts, loans or fees from RSVP clients, their legal guardian, members of their family, or friends. **However, donations to RSVP are gratefully accepted.**
- Volunteer shall not smoke in clients' homes or while transporting clients'.
- Volunteer shall not purchase alcohol or illegal substance for clients'.
- Volunteer shall not borrow the clients' car or other personal belongings.
- Volunteer shall not bring family members, other people or pets to the clients' home without the clients' permission and supervisory approval.
- Staff shall not eat the clients' food.

## EQUAL OPPORTUNITY STATEMENT

RSVP will not discriminate in the selection of volunteers or those to receive services based upon race, color, creed, belief, religion, sex, national origin, age, political affiliation or past participation in the discrimination complaint process. Reasonable accommodation for persons with disabilities will be made available upon advance notice for meetings, hearings, or conferences.

## TERMINATION OF VOLUNTEER SERVICES

Volunteers may be removed from service for cause. Grounds for termination of volunteer services include but are not limited to: extensive and unauthorized absences; misconduct; inability to perform assignments; and failure to accept supervision. However, a station may not directly terminate a volunteer. The station may request that RSVP terminate a volunteer. The

parties will then hold a termination conference to clarify reasons for termination. RSVP may recall a volunteer or a volunteer may resign from an assignment or RSVP at any time. If you believe that your termination from service was unwarranted, please follow the grievances and complaints procedures, below.

## **GRIEVANCE PROCEDURES**

If you ever feel that you have not been treated well or fairly or have been discriminated against by RSVP staff or your station personnel, or if you believe that your termination from service was unwarranted, please put your grievance or complaint in writing. Describe fully the reason for or incident giving rise to the grievance or complaint. List the reporting or complaining party's information as well as information on any witnesses. If the grievance or complaint is against an RSVP volunteer or employee, include the volunteer or employee's name. If the complaint involves more than one incident, list each incident separately and send it to the RSVP Executive Director, P.O. Box 1708, Carson City, NV 89702. Your grievance or complaint will be acknowledged within one week of receipt. The Executive Director will call you and/or meet with you to work out a resolution that is acceptable to you. All proceedings will be kept strictly confidential. Call RSVP at 775-687-4680 x6 to request an *ACCIDENTS, INCIDENTS, GRIEVANCES AND COMPLAINTS* report form.

## **CONFIDENTIALITY, CODE OF ETHICS & ELDER ABUSE TRAINING**

Many of you will be working with clients or processing information that must be kept strictly confidential by federal and/or state statutes. Your cooperation in this area is essential. *A Confidentiality Agreement and RSVP Code of Ethics form is included in your Volunteer Package and must be signed and returned to the RSVP office before you are assigned to a person or project.*

***You will receive training on how to recognize and report Elder Abuse during your orientation and on an annual basis thereafter.***

RSVP will never give your personal telephone number, address, or other information to any party without your permission. RSVP is required to provide client information to the Division for Aging and Disability Services through the SAMS (Social Assistance Management Software) Program and volunteer information is maintained in Volunteer Reporter for the purpose of documenting

service and to obtain federal and state grants and funding for RSVP. If you do not wish your personal information entered into Volunteer Reporter Program, inform RSVP in writing.

RSVP recommends that you do not give clients your personal telephone number. However, it is your choice whether and when you share your telephone number or address with a client.

## REPORTING HOURS

RSVP volunteers donate more than 135,000 hours each year to community service in the 15 rural counties we serve. Every hour you work is a valuable contribution and needs to be reported. Our funding sources require that we compile statistics on what our senior volunteers are doing in the community. This is also important in our efforts to recognize our volunteers' contributions at our various recognition events.

Every RSVP volunteer, whether you volunteer one hour or one hundred hours a month is responsible for reporting volunteer hours to the RSVP office by **the 3<sup>rd</sup> of every month**. Hours are recorded on separate time sheets for each agency or program where you work. Do not report hours for more than one month or one station on a time sheet. Count your time beginning when you arrive at your station and ending when you leave. Hours spent working on your volunteer assignment at home count as well.

Time sheets are available from your Field Representative, in the RSVP office and at your workstation. When you need more time sheets, call our office, or write us a note when you send in your last time sheet, and you will be sent several more.

**Do not** report time spent volunteering in political organizations, or private for-profit organizations. Government regulations limit RSVP volunteers' activities in these areas. If you have a question about an organization, RSVP office staff can clarify it for you.

If you are requesting mileage reimbursement you must indicate this on your time sheet with your field representative or supervisor's signature for each station

or it will not be reimbursed. Remember to **sign your** name on the line provided on the timesheet.

## **TRAINING**

RSVP volunteers receive training and orientation from the Field Representative, Volunteer or Staff Interviewer. After placement, volunteers receive training and supervision from the station (workplace) and/or Field Representative, annual Elder Abuse Prevention Training and if you are a driver for RSVP; driver training to include: emergency procedures, safe driving techniques and passenger assistance. After your initial driver training you will receive refresher courses annually.

## **BENEFITS**

Depending on funds available, reimbursement for mileage and meals is available for RSVP volunteers whose income is such that the extra miles driving to and from volunteer stations (or a meal) are a financial burden. Requests for reimbursement should be made when you submit your time sheets. Volunteers can receive reimbursements for out of pocket expenses for meals and mileage. Mileage reimbursement are paid quarterly during the 4th week of the following month.

Mileage reimbursement is calculated at 40 cents (\$0.40) per mile and covers only the round trip miles from your home to the volunteer agency as well as any local trips you make for the agency. The actual cost of a meal, not provided by the station can be claimed if you are on assignment 3 hours or more in a day and including a meal period. Any mileage that is not reimbursed by RSVP can be claimed on your tax return. Check with your accountant. No checks are issued for less than two dollars (\$2.00). You are not under any obligation to drive for the station, especially mileage above what RSVP reimburses.

## **INSURANCE**

RSVP provides various free insurance that covers all volunteers while doing volunteer work. This insurance coverage begins when any other insurance you may have is exhausted. For more details, please see the brochure included in your enrollment packet.

Volunteers, who drive their own vehicle to and from their volunteer assignment, and/or serve as a volunteer driver, are required to keep in effect the minimum automobile liability coverage required by state law.

## **RECOGNITION**

RSVP holds special recognition events every other year to recognize the contribution of our volunteers. In addition, most counties hold a Christmas party for volunteers.

## **FURTHER INVOLVEMENT**

Want to help RSVP in other ways?

- Join the Advisory Council Committee
- Volunteer at the RSVP office
- Make a donation to RSVP in memory of a friend or remember us in your will.
- Offer your ideas at any time, in person or by phone. They are welcome.

## **VOLUNTEER RESPONSIBILITIES**

**BE DEPENDABLE:** If you say you will be somewhere on a certain date and time, please be there! Our clients depend upon you for valued services. Commitment to your agreed upon assignment is essential. If you are unable to make your commitment, please call your station supervisor as soon as possible as to why you cannot report for volunteer work.

**BE PROFESSIONAL:** You represent RSVP, the Corporation for National Service, and yourself. Treat clients with courtesy and dignity. *A Code of Ethics is included in your Volunteer Package and must be signed and returned to the RSVP office before you are assigned a station.*

**COMMUNICATE YOUR NEEDS:** If you are not clear about your job duties, or have concerns about your station, speak up! Most often you will find that the agency staff is eager to accommodate your needs. If, after talking to your supervisor, a better arrangement cannot be made, RSVP staff will intervene and resolve the situation, or find another placement that better suits your needs. Never just walk away from an assignment that you are unhappy with. RSVP has vast

volunteer opportunities and certainly can find one you will like and enjoy.

**KEEP RSVP INFORMED:**

- Every volunteer driver must have a valid driver's license or Nevada Identification Card on file with RSVP. If you renew your driver's license or identification cards, provide a copy of the new license or card to RSVP as soon as possible. **All RSVP drivers must submit a copy of your 3 year driving record from the Department of Motor Vehicles to the RSVP office prior to commencing volunteer driving activities. There is a fee for obtaining your record - and you will be reimbursed for this expense.**
- All volunteer drivers must provide proof of minimum automobile liability insurance coverage. It is your responsibility to notify RSVP of any changes in your insurance.
- Let RSVP know when you do not want to accept an assignment. You are a volunteer. There is no set day or time that you have to volunteer. It is entirely up to you!
- If you are planning to go on vacation, spend the winter somewhere warm, do some traveling, or just take some time off, please let the RSVP office know ahead of time. It is helpful for your Field Representative to plan around your temporary absence.
- **If you change your address or telephone number, let RSVP know at once.** Otherwise you will not receive correspondence and/or reimbursement checks in a timely manner.
- If your times of availability change, or you no longer wish to, or are no longer able to volunteer, for whatever reason, please notify the RSVP office as soon as possible.
- **If you have an on the job accident while volunteering, or a vehicle accident, the accident must be reported to the RSVP office at once.**
- Wear your RSVP nametag while volunteering.

**DRUG AND ALCOHOL USE**

RSVP provides a drug-free, healthful and safe environment. The legal use of prescribed drugs is permitted while volunteering only if it does not impair the volunteer's ability to perform the tasks effectively and in a safe manner.

## ELDER ABUSE

Elder Abuse is a felony, and includes neglect, exploitation, isolation, or coercion of a senior. Though the vast majority of abusers are family members, many abusers are seniors themselves. *A copy of the Elder Abuse Statute is included in your Volunteer Package.* You will receive training on how to recognize Elder Abuse and what to do if you suspect Elder Abuse; during your Volunteer Orientation and annually thereafter.

RSVP's mission is to help seniors, not to place them in circumstances which put them severely at risk or to subject them to abuse or exploitation. When a volunteer forgets this, it puts our entire program at risk.

As RSVP volunteers you have a duty to be compassionate but maintain a professional distance. You cannot become personally involved in our clients lives. You **cannot** become what is known in Elder Abuse circles as the client's "new best friend".

- If a client offers you money or an inheritance, you must refuse. (The client may donate money to RSVP. Donation envelopes are available from RSVP.)
- If a client asks you to mediate between her and her family, you must refuse.
- If a client starts seeing you as the daughter, son, brother or sister she never had, you must start putting distance between you and the client.
- If a client asks you to do more than what is allowed under RSVP's guidelines, you must refuse.
- If the client begins depending on you for nearly everything or to make decisions for him, you must immediately put distance between you and the client.
- If the client becomes romantically attached to you, transfer the client's case to another volunteer.
- **Do not give medicine, change bandages, lift, assist with bathing, toileting or provide other medical or personal care services of any kind to a client, even if you are a nurse.**
- Do not use your personal funds to pay clients' bills, or other expenses.
- If the client has a guardian, you cannot visit or transport the client without the guardian's approval. Only the guardian has the authority to

agree to any services to be provided to a senior under a guardianship.

*Do **not** take it upon yourself to do something which you should **not** be doing for the client. Do **not** put yourself, or RSVP, at risk of an Elder Abuse charge.*

This can be difficult because some of our clients have no one else to depend on. However, there are programs available to seniors through the local senior centers and Division for Aging and Disability Services, Welfare Department and more, which will help clients when you are unable to. Call the RSVP office for referral numbers. Don't step over the line. Use your head.

If you are unsure whether you are crossing the line between help and abuse, call RSVP **BEFORE** you act. Don't risk your reputation by doing something inappropriate. Don't risk RSVP's reputation by putting our clients at risk.

RSVP staff and volunteers are mandatory elder abuse reporters. If you suspect one of our clients is being abused or exploited, call **Elder Protective Services at (775) 688-2964** to file an abuse report. Your report is confidential. There is no liability for making a report. A listing of Elder Abuse Factors is included in your volunteer Package.

### **PHILIPS LIFELINE PROGRAM**

Philips Lifeline is a personal emergency response system (PERS). RSVP Lifeline Program volunteers install and maintain Philips Lifeline units in homes of low-income elderly seniors many of whom who live alone and have no immediate family living nearby. Philips Lifeline units provide immediate emergency response to persons in life-threatening situations who cannot access the telephone or other assistance because of a fall or other situation. Philips Lifeline units contain a button on a chain worn around the neck or on a wristband that can be pushed to obtain assistance at a moments notice. Each client can have three people who are the first point of contact "responders." If more serious help is needed, Philips Lifeline or the responder will call law enforcement personnel or emergency medical service.

Philips Lifeline gives the elderly and disabled the confidence and freedom to live on their own. Learning to install and maintain the units is simple and rewarding. RSVP Philips Lifeline volunteers are thoroughly trained to install and

maintain the Philips Lifeline units.

The Philips Lifeline Program is a separate program, coordinated through the Home Companion Program. *There is a monthly service fee.* The fee amounts to about \$1.00 per day.

If a senior has a court appointed Guardian, the senior legally can not execute any contract or agreement with RSVP. Only the guardian has the authority to agree to any services to be provided to the senior under the guardianship. If you find out after the fact that a senior has a guardian, you must contact the guardian immediately. The guardian then has the right to either continue the services by signing the contract herself, or terminate the services.

## **HOME COMPANION PROGRAM (HCP)**

The mission of the Home Companion Program is to link volunteers with the elderly, disabled and others in need of short- and long-term supplementary services with the goal of helping them remain at home rather than prematurely placed in a care facility.

Since its beginning in 1984, the Home Companion Program (HCP) has relied on volunteers to carry out its mission of meeting essential and supplementary needs for Nevada's rural elderly. HCP volunteers provide the emotional support and assist with the supplementary tasks that are so necessary to confined persons. These are duties that might be performed by family members were they readily available. Examples of HCP duties include: visiting clients, transporting client to medical appointments, transporting clients to shop or shopping for clients, reading to clients, and telephoning to check on people's well-being.

**All Home Companion Program volunteers who have direct access to clients or client information must agree to and allow a background check. There is no cost to the applicant.** The volunteer service provided to the client is documented in RSVP's client database, for funding purposes and to track client care and volunteer service hours. In addition to the regular information requested for time sheets, HCP volunteers must include the client's name beside the date and hours for each assignment.

**If a client has a medical emergency or falls** when you are with them, do not attempt to lift or treat the client. We do not want you to injure yourself or the client. **Call 911 immediately.** If the client has a Lifeline, assist the client in pushing the Lifeline button for a responder.

Although there is a need for house cleaners and cooks RSVP does not ask the HCP volunteers to perform these activities. If you wish to prepare a meal now and then for a client, please feel free to do this. However, RSVP will never relegate housekeeping or cooking duties to you as part of an assignment.

Clients are asked to call to request services at least 3 *BUSINESS DAYS* in advance and preferably as soon as they know they will be in need of HCP services. As soon as the client's request is received, RSVP will begin locating a HCP volunteer to assist the client. Because not all our transportation vans are wheelchair equipped RSVP is unable to accommodate everyone for rides. However, most drivers are able to assist clients into vans or automobiles. (Not all counties have an RSVP van assigned to them.) Field Representatives screen a client's ability to walk and lift themselves from chairs so the HCP volunteer will be fully informed when they accept an assignment. If not able to walk and lift themselves, clients must be accompanied by a personal assistant to do so.

## **RESISTANCE TRAINING EXERCISE PROGRAM**

Helps keep seniors active by providing exercise through light weights training. This is done in group settings or for individual homebound persons. RSVP's Resistance Training Exercise Program was designed by Dr. Maria Fiatarone of the University of Harvard's medical school to improve the strength, coordination and balance of seniors, thus improving their ability to ambulate and remain independent and in their own homes as long as possible. It is a proven system using repetitive sets of exercises with light arm or ankle weights three times a week. Research has shown that sedentary people start losing their muscle/bulk strength, balance and coordination, and their aerobic capacity in their late 20's and 30's. By age 55-60 they have lost about 40%. They become more frail and unsteady on their feet and much more susceptible to falling with serious injuries, thus causing many to be institutionalized prematurely. Resistance training participating seniors report increased flexibility and muscle strength resulting in the ability to maintain their health and safety and assist in the prevention of strokes, heart attacks, arthritis, diabetes and other disabling ailments and to

improve their quality of life.

## HOME COMPANION TRANSPORTATION PROGRAM

The Transportation Program provides critical care trips to medical and dental appointments. Not all services are available in all counties. The RSVP transportation program provides door-to-door escorted transportation services for low-income, elderly persons and disabled persons in the rural counties, where no other appropriate transportation is available. Our volunteer drivers use RSVP vans in addition to their own vehicles to take clients to medical, dental and eye appointments, and to also pick up prescriptions. All these are vital to the isolated and confined elderly and disabled.

**Driver Information:** Driving a homebound senior is an extremely valuable service. Many of our clients rely upon us to assist them with their basic needs so that they can remain independent and in their own homes as long as possible. Just that little bit of help can make all the difference. Typically, we provide clients with rides to all types of medical appointments. Based on driver availability, we help clients with rides to pick up prescriptions, grocery shopping, banking and various other activities such as a visit to the library or to visit a friend. When we call to request your services as a driver, we will go over exactly what the client would like to do, the times of service requested and any special needs that the client may have.

**To ensure safe driving while acting in the capacity of a RSVP volunteer, RSVP requires the following:**

- Use RSVP vehicles for official RSVP business only
- Wear your seat belt and require passengers to wear seat belts at all times
- Obey all traffic laws
- Always have your driver's license with you when driving as well as proof of automobile insurance
- Keep doors locked when driving and while parked
- Do not drive when tired, drinking or taking medication that causes drowsiness
- Do not smoke or allow passengers to smoke in vehicles
- Do not drive impaired by texting or cell phone use
- **DO NOT LEAVE a client that you are transporting alone in the vehicle at any time.** If you have RSVP business to attend to, i.e. picking up supplies, or dropping time sheets at the RSVP office, do so before or

after you have provided transportation to the client.

As an RSVP volunteer driver, you choose when and how often you would like to drive. Rides are typically scheduled Monday thru Friday between 9:00am and 1:00pm. Exceptions may occur, but we try to keep the appointments during those hours. We do not schedule rides on the weekends, holidays and during RSVP volunteer appreciation events. However, if there is a special case, and you are willing to make an exception using your own vehicle, you may do so.

Prior to your driving assignment you will be asked to provide a copy of your driver's license, proof of insurance and a DMV driver history. You will be asked to update your driver information if it changes and to provide your DMV driver history annually. RSVP will reimburse you for the cost of your DMV driver history. Additionally, you will receive driver safety training prior to your assignment and annually thereafter.

If you accept a driving assignment, it is extremely important that you let us know **AS SOON AS POSSIBLE** if for any reason you have to cancel. We will try to find another driver. As you can imagine, clients depend greatly on their drivers to be there at the appointed time and place. We ask that you call the client the day before the ride is scheduled to confirm. Please verify the address and time of pick-up and the destination. When you take a client to a Doctor's appointment, please walk them in, verify how long the appointment will be and either wait or be back in the waiting room when they have completed their visit so that you can walk them back to the van or your car.

We recommend that drivers **NOT** give out their personal address and telephone numbers to clients. If someone asks you for this information and you are not comfortable giving this information, just let them know that is RSVP's policy not to do so. Ask them to contact the RSVP office if they want to schedule or cancel a ride.

You will be provided with as much information about the client as we can legally give. If for any reason you find that you are not comfortable driving someone, let us know immediately and we will find another driver to work with that person and someone else for you to drive. We want to make the Home Companion Transportation experience pleasant for all concerned.

**If there is an emergency situation call 911. If you suspect that there is elder abuse; you are a mandatory reporter. You are required to report Elder Abuse to the Division on Aging Services, Elder Protection Division (775) 687-4210.**

**TIPS & DONATIONS:**

We do not charge for Home Companion Transportation services however, contributions are gratefully accepted. You will be provided with contribution envelopes. When a client wants to donate we ask that you accept the monies and let the clients know that you will forward it to RSVP's office for the Home Companion Transportation Program as a Contribution that stays in their county to help others.

**THE CARE LAW PROGRAM:**

Provides pro bono legal services for low-income seniors. The main areas of focus are: estate planning (wills and trusts); Medicaid and nursing home planning; guardianships; debt and consumer issues; social security and Medicare issues; powers of attorney and advance directives; homesteads and real property issues; and elder abuse issues. The Care Law program is an independent program of RSVP and is the only known legal services program sponsored and operated by a RSVP chapter. The Care Law program is dependent upon donations and grants.

**VOLUNTEER STATIONS:**

RSVP members serve through a variety of non-profit social service or governmental agencies and institutions designated as volunteer stations (workplaces). The stations include schools, libraries, day-care centers, hospitals, nursing homes, senior centers, local and state government and other community service organizations. Volunteer activities include crime prevention, adult literacy tutoring, environmental surveys and education, hospital volunteer service, center based nutrition programs, public museum docent services, library services for the community and homebound, computer assistance for the elderly and needy, veterans memorial services, homeless shelter and food bank services, USDA commodity foods distribution, free senior farmer's market produce coupon distribution and many more.

## HOME COMPANION RESPITE PROGRAM:

Helps families avoid premature institutionalization of their loved ones by providing respite and caregiver support services to Nevada's rural senior and disabled population. Caregivers often succumb to stress and exhaustion before the loved one if never given a break from the overwhelming 24/7 responsibility. Our mission to provide respite and caregiver support services to Nevada's rural senior and disabled population by helping families avoid premature institutionalization of their loved ones, thereby allaying the terrible fear of the elderly and afflicted that they will not be able to remain in their own homes where their possessions, family and memories all help alleviate their condition. This respite program gives direct relief to those who care for their family members.

## DEFINITIONS

**Station:** An agency or business that has entered into an agreement with RSVP for placement and supervision of volunteers. The place where you volunteer will be "your station".

**Agency Supervisor:** The person you report to at your station.

**Volunteer or Staff Interviewer:** The person who enrolls you in RSVP, provides you with orientation, and assists you in finding a volunteer assignment or station.

**Field Representative:** The Field Representative is the person responsible for coordinating RSVP within your community; under the direction of the Nevada Rural Counties RSVP Program's central office.

**Time Sheet:** The monthly record of your time, mileage and activities performed as a volunteer. These time sheets are critical and enable us to continue to provide services in your area.

RSVP's Main Office is located in Carson City. If you have questions or need to contact your local Field Representative you may contact us at: (775) 687-4680 x 7, x 6 or x 0. Please take a moment to review our web-site: [www.nevadaruralrsvp.org](http://www.nevadaruralrsvp.org). Again, congratulations on becoming an RSVP volunteer. We look forward to a long and rewarding relationship.

## **RESPIRE CARE PROGRAM**

One of the most difficult emotional events a person can experience is learning that they or a loved one has a life-limiting illness. We believe that no person should face this situation alone. Our program and volunteer members are devoted to helping clients and families by giving them a break from the sometimes overwhelming 24/7 care of a loved one.

RSVP is dedicated to providing Independent Living Programs to promote quality of life and to assist Nevadan's to remain independent and in their own homes for as long as possible.

We provide a good neighbor approach. Our goal is to listen carefully to each person we serve; be sensitive to their unique needs; respect and preserve their dignity; and compassionately provide them with respite care by giving them a break so that they can attend to their own needs and have some personal time to interact with friends and the community.

### **TIPS & DONATIONS:**

We do not charge for Respite Care services however, contributions are needed and gratefully accepted. You will be provided with marked envelopes. When a client wants to contribute we ask that you accept the monies and let the clients know that you will forward it to RSVP's office for the Home Companion/Respite Program as a Contribution that will stay in their county to help others.

The respite concept is fairly new to our society, originating sometime within the last hundred years. Respite care is based upon the idea of giving family members who are caregivers a break from their care giving responsibility.

The respite system gives families a chance to: Take a break from their jobs as full-time caregivers; enables them to attend to their own needs, and relax so that they can be better caregivers to their family members. It is a sad fact that over 40% of caregivers pre-decease the person that they are taking care of, mostly because of the overwhelming stress.

Over time, respite has turned into a beneficial service for not only caregivers and clients, but for the community. By spending time with the clients, volunteers are able to spread friendship and provide relief. When clients are able to live independently at home it is a benefit to themselves, their families and their community. Premature institutionalization takes a tremendous personal and financial toll on the family members and on society.

Respite focuses on care that: Enhances the quality of remaining life; provides relief or comfort; and supports the client and family. Through appropriate care, Respite allows the client and family members the breaks they need.

RSVP offers care to clients at no cost. Donations are gratefully accepted but not required. If you receive donations, turn them in to the Program Coordinator at the RSVP office or your local Field Representative. Clients who wish to use donations as a tax write off may do so. Our Controller will provide a letter verifying the contributions made upon request. Pick up the donation envelopes at the Carson City office or from your local Field Representative. You can leave the envelope with your client and if they wish to donate, great. If not, that is perfectly fine.

In Respite, we do not focus on medical issues of the client and their disease. We focus on what is important to the client and family. Our goal is to improve the client's care through help to the families by providing relief.

### Home Companion Respite Care – Principles of Respite

1. Offer quality home care personalized for the individual's needs
2. Fostering as much independence for each client as he or she wants and is capable of
3. Treating each client and family with dignity and respect
4. Respecting the individuality of each client and family
5. Supporting each client and family choice of care and lifestyle
6. Protecting each client and family's right to privacy
7. Nurturing the spirit of each client and family
8. Involving family in care planning
9. Providing a safe environment
10. Making respite a valuable community asset.

IMPORTANT NOTE:

Prohibitions of Respite:

1. Respite volunteers do not give medications to their clients.
2. Volunteers do not provide lifting, ambulating or transferring to their clients.
3. Volunteers do not provide toileting or bathing to their clients.
4. Volunteers shall not operate as the clients' legal guardian or executor.
5. Volunteers shall not become involved in the clients' personal financial affairs or estate.
6. Volunteers shall not become involved in issues related to criminal matter.
7. Volunteers shall not influence consumer choice.

**We are not nurses or professional in home nurses' aides. We can assist, give a steady hand or arm but we are not trained for or insured to provide the services of social workers or professional in home health care providers.**

We are volunteers. If you have any questions about what you can or cannot do to provide assistance to your client, contact the Program Coordinator or Program Director for guidance.

Respite Care givers offer choice, provide a safe environment and help clients and families maintain dignity and promote individuality. Offering choice enables a client to have a degree of control over their lives. By offering choices to clients, you encourage independence by involving them in decisions about their time and their care.

The Respite Care provider respects the dignity of clients. Helping to maintain a client's dignity involves showing respect. Clients need help in some very personal and private ways. Respite care givers must honor a client's dignity. For example, never call a client "honey" or "sweetie".

Training/Reflective sessions will be held on a quarterly basis to further communicate best practices, share experiences and provide valuable information to assist you and your clients. These training sessions are *mandatory* in order to remain in the program.

Each time you provide Respite Care to a client, log it in on your timesheet. Clearly write Respite on the Description of Service. Note the date, hours of service, client's name and caregiver's name, and miles travelled.

**You must provide hours of service in order to receive a stipend for the month.**

If you provide volunteer hours for RSVP in a different program, such as driving clients to the doctor, or installing a Lifeline, **PLACE THESE HOURS ON A SEPARATE TIMESHEET.**

Place all of your Respite volunteer hours on a separate timesheet(s) to avoid confusion in the office. We work to log your hours into the databases which record your valuable time and help to justify the funding of our Programs. As a Respite Care provider you are asked to commit to 8 to 10 hours of Respite, attend Respite Training Sessions or provide community outreach each week.

You will be provided with a monthly stipend (as long as you serve Respite hours, attend quarterly training, or community outreach for the month) and you will be reimbursed for mileage from your home to the client's home and return, for training mileage and community outreach mileage. Please submit your timesheets to the RSVP office or your local Field Representative no later than the 5<sup>th</sup> day of each month. Timesheets not received in the RSVP Carson City office by the 5<sup>th</sup> day of the month will be carried over to the next month. We make every effort to have your stipend ready within a day or two after the 5<sup>th</sup> of each month along with your mileage reimbursement.

You can earn your 8 to 10 hours per week by working with your local Field Representative or Program Coordinator to assist with our community outreach efforts. Your time providing community outreach should be noted on your Respite timesheet along with your mileage and clients. In the description of service column write "community outreach – dropped flyers off at St. Peter's church". Describe what you did. If you hang Respite flyers up on the grocery store bulletin board, etc. Talk to your local supervisor to find out how you can help distributing brochures and flyers to get the word out about our program and if you have questions about your stipend or mileage reimbursements.

Once you have established a client and a schedule of care please contact your Field Representative or the Carson City Program Coordinator so that we can note your days and times of service. If you have to cancel please notify us immediately so that we can work to find a substitute during your illness or vacation time. Our clients rely on us greatly so please allow us enough time to find a replacement.

**Read your Orientation Manual** and note any questions you have. You may contact us immediately or bring them up during the quarterly Training and Reflective sessions.

Be sure that you find out when the quarterly sessions are held and mark your calendars. **Attendance of the quarterly Training and Reflective Sessions are mandatory and a condition of remaining in the program.** We require your attendance so that we can share best practices, bring you up to date on the latest research and developments as well as report your on-going training to our funding sources.

Please contact us if you have questions about any of this information.

Thank you for volunteering to provide this valuable and meaningful service. Assisting caregivers by giving them a break from the sometimes overwhelming task of 24/7 care of their loved ones is one of the most meaningful volunteer endeavors that we provide.

## RSVP Transportation Program Training

Volunteers need to bring the RSVP Volunteer Handbook issued in their Welcome Packet to this training. It will be referred to as “**Handbook**” in these pages.

### Transportation Program Overview

- Ride Policies (discuss current Transportation Program Guidelines for Clients)
  - Client Ambulation requirements. **DO NOT LIFT, transfer or attempt to move clients in any way.** If client is unable to transfer on their own, they **MUST** bring an attendant or escort to assist them in moving in and out of the vehicle. If you arrive to a scheduled ride and that is NOT the case –**STOP!** Immediately call the Transportation Coordinator or your Field Representative. Let the client know that you are not be able to provide transportation to clients who need assistance above and beyond what volunteers are able to provide. We will not be able complete the ride as scheduled.
  - Standby Assist. You may offer a hand or arm to steady clients when walking **IF** the client requests it. Again, do not attempt to lift, move or transfer. You can 1.) Open the door for them 2.) fold/stow/unfold walkers and other assistive devices 3.) Brace step stool or walker with your foot when they are exiting or entering a vehicle.
  - No minors or additional guests are allowed in the vehicle. Service animals are accepted if previous arrangements have been made with both the Transportation Coordinator and the RSVP Driver. Clients bringing service animals should be seated in the back seat of the vehicle, not next to the driver.
- Client/ Volunteer Boundaries. See page \_\_\_\_ in Handbook.
- Additional destinations. Adding additional or changing destinations is allowed subject to your availability and based on time constraints of other ride(s) and appointments that are scheduled. It is not automatic or required that you take them to additional destinations that you have not committed to in advance. Please avoid casinos for gambling, liquor and smoke shops, etc.
- The Suggested Donation is \$2.00 per trip locally and \$10.00 round trip for a ride of 60 miles or more. Donations are greatly appreciated but service will not be denied because of an inability to contribute. Tipping of drivers and bartering for services is prohibited. If they offer to tip you please decline; however, you may ask that they donate that amount to RSVP. Donate today for a ride tomorrow!
- Transportation Ride Surveys will be provided and should be completed while they are with you. This assists us with continued grant funding which is critical to our ability to continue to provide services.

### RSVP Transportation Program

- Clients are pre-screened during the intake interview by RSVP staff or Field Representative.
  - Clients must wear seat belts, No Smoking allowed, Eating and drinking in vehicle acceptable if cleanliness is adhered to.

- Circle of Safety - walk around the vehicle from front to back ending back at the driver door.
- Vehicle Guidelines – Cleanliness, basic car maintenance, no volunteer pets are allowed during the ride.
- Keep transportation surveys and donation envelopes available; return them to RSVP office as soon as you can. Driver should carry a cell phone with them during rides for safety and it MUST be turned ON.

### Driver Orientation Checklist

- Ride Scheduling. Drivers please call us on Thursday or Friday for the following week to let us know your availability. We will call you as well.
- Ride service plan information is provided to driver (show completed example)
- Commitment to schedule. Call client as soon as you get the ride assignment, no later than 24 hours before pick up time. Arrive early or on time. If you have multiple rides that day, please make sure any additions do not make anyone with a previously scheduled ride late for an appt.
- “Missed Ride” note- leave on door if no answer
  - If situation looks suspicious, a welfare check through Sheriff can be done. Contact local transportation coordinator to discuss the situation.
- Emergencies- **Dial 911 if client slips or falls or has a medical emergency. DO NOT try to lift or move them, especially their neck or head.** You are not to decide whether it warrants emergency care. Err on the side of caution.
  - Try to keep client safe, warm and calm until help arrives.
  - Always report to RSVP immediately and complete incident report for every emergency/ incident or vehicle damage.
  - Report back to Transportation Coordinator with any issues

### Driver Safety Instruction – Using AARP Driver Safety Course, 6<sup>th</sup> and/or 2014 Edition

- Statistics on Older Drivers pages 10-12, 14 and 17
- Medications and Medical Conditions pages 24 and 26-27. Update on drug interaction and side effects. How medication can affect your driving. The effects of alcohol. Brain health and reaction time...brain improvement activities. Contrast sensitivity and Depth Perception. Remaining alert and focused while driving.
- Safety Strategies pages 31, 37 and 48
- Our Driving Partners pages 55, 56, 58, 62
- Knowing our Roads and Highways pages 75-76
- Understanding our Vehicles page 92. Changing vehicle technology and advanced crash warning. New navigation systems, GPS and Anti-lock braking, stability control and how they affect driving safety.
- Judging our Driving Fitness page 102, 103 and 110
- Cell phone and other Distractions Videos

## RSVP owned Vehicles Overview

- Clipboard→ Complete a Pre and Post-inspection checklist each time you take a vehicle out. Transportation Survey, and Missed ride form are also stored there.
- Be kind to vehicles. Check them over before you return them. Watch for seat belts pulled all the way out, trash in vehicle, items left behind. Be careful to not ride the brakes, be careful while backing up.
- Handicap Placard. Remove from mirror while van is in motion
- Donation envelopes/ RSVP brochures/ business cards for Transportation Coordinator are in the center console of the vehicles.
- First Aid kit/ sickness bags/ disease prevention kit( gloves, masks)
- Triangles/ road markers/ flashlight/Chains/Fire Extinguisher location
- Water and blanket policy (50+ miles one way)
- Vehicle cleanliness and general housekeeping. Use wipes for cleaning up while out, report spills to RSVP on return for prompt clean up.

## RSVP Wheelchair Transport Policy

- Because RSVP utilizes volunteers who cannot lift or transfer clients, RSVP cannot provide transportation to clients using wheelchairs. Exceptions may be made if the client is able to transfer in and out of the vehicle on their own or if the client has an attendant to assist them in and out of the vehicle. Attendants must remain with the client at all times. Before providing transportation for clients in wheelchairs advance arrangements must be made with the Transportation Coordinator and/or Mobility Manager because of safety and liability concerns. Authorization for said trip(s) must also be obtained from RSVP's Executive Director.
- Cover 2010 van features (Carson City only)
  - Ramp/ Gate on passenger side
  - Client view mirror
  - Seat Fold and Stow

I have received the training outlined in the above document and agree to adhere to the policies and procedures as outlined in this "RSVP Transportation Training".

RSVP Volunteer Name: \_\_\_\_\_ Date: \_\_\_\_\_

RSVP Volunteer Signature: \_\_\_\_\_

I have reviewed and explained the policies and procedures as outlined in this "Transportation Training Guideline".

RSVP Trainer Name: \_\_\_\_\_ Date: \_\_\_\_\_

RSVP Trainer Signature: \_\_\_\_\_

**RSVP Driver Orientation**

Date: \_\_\_\_\_

Name \_\_\_\_\_ Ph #s: (H) \_\_\_\_\_  (C) \_\_\_\_\_

Please check the phone number you would like us to call you on first.

Clients are asked to book their appointments in Carson City Monday-Friday between 9 am-3 pm. (We do make exceptions occasionally, e.g.: if the client is diabetic & has to fast the night before we will drive them before 9 am for lab work.)

Please check the days that you are available to drive & fill in the times: Monday  \_\_\_\_\_

Tuesday  \_\_\_\_\_ Wednesday  \_\_\_\_\_ Thursday  \_\_\_\_\_ Friday  \_\_\_\_\_

(We realize that you may not always be available on the above days & times and that this can vary.)

Would you like to use one of our vans to give clients rides? Yes \_\_\_ No \_\_\_ Sometimes \_\_\_ For Reno only \_\_\_

We ask clients to schedule their Doctor appointments in Reno between 10 am-2:00 pm on Tuesdays & Thursdays. Are you interested in driving clients to Reno? (Please check) Tuesday \_\_\_ Thursday \_\_\_ No \_\_\_ Possibly \_\_\_

Use van only \_\_\_ Use my own vehicle \_\_\_. I will use my vehicle if a van is not available \_\_\_. Comments: \_\_\_\_\_

When we book a ride with you, please let us know if you require a van so we can make sure one is available and book it for you. If you are using an RSVP van, please come into the office to get the keys. We also have an RSVP cell phone that you can use. Please let us know if you want to use it when you pick up the keys. You are required to fill out a "Pre-Trip Inspection Checklist" when you use a van. These forms are on a clipboard in the van. Please turn it in to the RSVP office when you return the keys. If you are using an RSVP van and the ride is not over until after 5:00 pm, please park the van on the South side of our building (or in the back) and drop the van key and the RSVP cell phone (if you are using it) in the mail slot on the left side of the RSVP front door.

If you are going to use your own vehicle please confirm the following: By initializing the box that follows, I certify that the vehicle I will be driving for the RSVP Transportation Program is equipped with seatbelts and that all the seatbelts are in working order and that I will remind RSVP passengers to buckle up before I proceed.  (Please initial)

When you have accepted a ride, please call the client at least 2 days prior to the ride to confirm the time, date and get directions to their home. We will call you with the information: the client's name, date & time of appointment, the client's address and the address where they are going. We will also let you know any other pertinent information about the client such as if they use a cane, walker or oxygen. The client is supposed to inform us of all the places they need to go when they book a ride. We give you this information when you accept a ride. If a client adds other stops to their ride that we did not inform you of, it is up to you if you want to accommodate them. Please inform the client that they must let RSVP know of all the stops they need to make when they book their ride. We do not drive clients in wheelchairs at the present time.

We provide donation envelopes in the vans and for you to keep in your vehicle. If a client wants to make a donation, please place the donation in the envelope and seal the envelope, write the client's name and the date on the envelope and drop it off at the RSVP office at your earliest convenience. You can also drop the envelope in the mail slot after hours (the mail slot is on the left side of the front door.) As an RSVP driver, you cannot accept tips but you can accept donations for the Transportation Program. The suggested donation for a ride is \$2.00.

If you have any problems or concerns regarding a client, please call us and let us know. We have not met most of them so there may be concerns that we are not aware of.

Safety Reminders: Always make sure everyone has their seat belt buckled up before the van is in motion. Do not use a cell phone while you are driving.

**RSVP Phone Number:** Transportation Desk, 687-4680, Anita Moreno, extension 7 or Reception at extension 0

I certify that I will comply with the above guidelines and rules.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## Winnemucca

# RSVP Driver Pre-Trip Inspection Checklist

Vehicle: 2016 Dodge Grand Caravan, License Plate # EX67082    Mileage at beginning: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_    Mileage on return: \_\_\_\_\_

Check any item that needs attention and include the details under "comments."

**\*\*Please turn in this form to the Transportation Coordinator\*\***

**Start the engine and test the following:**

**Noises (unusual)**            OK            NEEDS ATTENTION

Noises                                       

**Gauges**                            OK            NEEDS ATTENTION

Fuel                                Full             3/4             1/2

Temperature                               

Dashboard warning light               

**Lights**                            OK            NEEDS ATTENTION

Headlights                                 

Brake lights                               

Turn signals                               

Hazard lights                            

**Other**                            OK            NEEDS ATTENTION

Windshield wipers                       

Fans and defroster                       

Brakes (and parking brake)            

Mirrors                                    

Horn

Exhaust system    
(muffler, tailpipe)

**Tires**                      **OK**                      **NEEDS ATTENTION**

Proper inflation

Adequate tread

Spare inflated

**Leaks (underneath)**    **OK**                      **NEEDS ATTENTION**

Oil

Other \_\_\_\_\_

**Safety equipment**    **OK**                      **NEEDS ATTENTION**

Fire extinguisher

First aid kit

Reflective triangles

Map

Seat belts

(one for each passenger if applicable)

Wheelchair Ramp

Wheel Chair Tie down

***Comments:***

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**Vehicle Condition Following Driver's Inspection**

**Acceptable:** Vehicle can be driven without further inspection.

**Requires Attention:** Vehicle can be driven, but should be inspected by a mechanic in the next 30 days.

**Requires Immediate Attention:** Vehicle should *not* be driven until it has been inspected by a mechanic.

Driver's Name: \_\_\_\_\_

Driver's signature: \_\_\_\_\_





## ACCIDENTS, INCIDENTS, GRIEVANCES AND COMPLAINTS

**REPORT ALL ACCIDENTS AND INCIDENTS TO RSVP AS SOON AS POSSIBLE!**

**CALL 911**

**Immediately when an accident occurs in which  
there is physical injury and/or death**

### Accidents

If you are involved in a vehicle accident while volunteering for RSVP, file a law enforcement report and attach a copy of the report to the RSVP accident form.

For all accidents, complete and file the attached accident report form describing what occurred, listing all parties involved and listing insurance information of any other drivers involved. If an RSVP vehicle was involved, include the license number of the vehicle and attach photos of any damage to the vehicle. Do not sign any paperwork other than a law enforcement citation or report. Do not speculate who is at fault. Do not make statements regarding the accident to any party other than RSVP and law enforcement.

### Incidents

For all vehicle breakdowns or driver illness, contact RSVP immediately. RSVP will make arrangements to transfer any clients to a second vehicle and to have the disabled vehicle towed or the driver taken for medical care. For vehicle breakdowns, file the attached incident report form detailing how the vehicle handled prior to the breakdown.

If a client becomes ill during a visit or transport, call 911. Follow directions given by the 911 dispatcher. Call RSVP after contacting 911. File the attached incident report form with RSVP detailing what occurred, what the 911 dispatcher directed you to do, and any other actions taken.

### Grievances & Complaints

The attached grievance and complaint form is to be filled out in the following circumstances: if you ever feel that you have not been treated well or fairly, have been discriminated against by RSVP staff, volunteer, your station personnel, or board member, would like to request additional information on the organizations obligations, or if you believe that your termination from service was unwarranted. Describe fully the reason for or incident giving rise to the grievance or complaint. List the reporting or complaining party's information as well as information on any witnesses. If the grievance or complaint is against an RSVP volunteer or employee, include the volunteer or employee's name. If the complaint involves more than one incident, list each incident separately.

Send the completed form to the RSVP Executive Director, P.O. Box 1708, Carson City, NV 89702. If the complaint is against the Executive Director, send the completed form to RSVP, Attn: Board of Directors.

\*\*\*Assistance will be available to clients who require help in preparing a written complaint.

# ACCIDENTS, INCIDENTS, GRIEVANCES AND COMPLAINTS FORM

Nevada Rural Counties RSVP, Inc.  
2621 Northgate Lane Ste. 6  
Carson City, NV 89706  
PO Box 1708  
Carson City, Nevada 89702  
(775) 687-4680  
fax:(775) 687-4494

Reporting Party:

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Involved in incident     Witness     RSVP Field Rep/Employee

Incident:

Date occurred: \_\_\_\_\_ Time occurred: \_\_\_\_\_

Location: \_\_\_\_\_

\_\_\_\_\_

Persons Involved/Witnesses:

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Involved in incident     Witness

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Involved in incident     Witness

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Involved in incident     Witness

4. Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Involved in incident     Witness

Additional information (*check all applicable*):

Photos taken    Who has photos: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Police Report made    Where: \_\_\_\_\_

Elder Protective Services Report made

Description of What Occurred (*attach additional pages if needed*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reporting Party's Signature: \_\_\_\_\_  
\_\_\_\_\_

**For RSVP Internal Use Only:**

Date report received: \_\_\_\_\_ Date responded to: \_\_\_\_\_

Note: reports must be responded to within 30 days of receipt.

Action Taken: \_\_\_\_\_ Date of Follow up: \_\_\_\_\_

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_

\*\*\*Use separate sheet if needed and attach.



NVRURAL-01

LFISHER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/11/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: Alpine Insurance Associates, 3352 Goni Road, Suite 164, Carson City, NV 89706. CONTACT NAME, PHONE (775) 829-2345, FAX (775) 827-7090. E-MAIL ADDRESS. INSURER(S) AFFORDING COVERAGE: INSURER A: Berkshire Hathaway Homestate (NAIC # 20044), INSURER B: AIG (NAIC # 40258), INSURER C, D, E, F.

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Includes policies for Commercial General Liability, Automobile Liability, Umbrella Liability, and Workers Compensation.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Naming certificate holder as additional insured, per attached form

CERTIFICATE HOLDER: Carson Area Metropolitan Planning Organization, 3505 Butti Way, Carson City, NV 89701. CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE: [Signature]

## PUBLIC NOTICE

Nevada Rural Counties RSVP Program, Inc. (RSVP) a non-profit 501 (c ) (3) providing transportation services utilizing RSVP vans in Carson City, Douglas County, Lyon County and Storey County is applying for financial assistance under the Carson Area Metropolitan Planning Organization (CAMPO) Federal Transit Administration (FTA) Section 5310 Grant Funds authorized under 49 USC Section 5310 and current transportation bill in effect, currently the FAST Act. This program provides formula funding to metropolitan planning organizations (MPOs) for the purpose of assisting private nonprofit organizations or Governmental entities in meeting the transportation needs of the elderly and persons with disabilities. RSVP proposes to provide the following service: transportation in the Carson City area.

Private and local transit agencies located within the service area that are interested in providing services or have objections to the current public system, are advised that they may request a public hearing to be conducted to provide a means for them to express their views relative to the proposed project on the probable social, economic and environmental effects involved on the proposed project. In lieu of requesting a public hearing, interested parties may submit their comments on the proposed services by sending a written response within 30-days of today's date to:

RSVP  
P.O. Box 1708  
Carson City, NV 89702  
Attn: Susan C. Haas

Should a public hearing be requested, a public notice will be published stating the date, time and locations of the hearing.

PUBLIC NOTICE

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Private and local transit agencies located within the service area that are interested in providing services or have objections to the current public system, are advised that they may request a public hearing to be conducted to provide a means for them to express their views relative to the proposed project on the probable social, economic and environmental effects involved on the proposed project. In lieu of requesting a public hearing, interested parties may submit their comments on the proposed services by sending a written response within 30-days of today's date to:

RSVP  
P.O. Box 1708  
Carson City, NV 89702  
Attn: Susan C. Haas

Should a public hearing be requested, a public notice will be published stating the date, time and locations of the hearing.

**Pub: April 13, 2017**

**Ad #0000049708**

BRIAN SANDOVAL  
*Governor*



RICHARD WHITLEY, MS  
*Director*

EDWARD ABLESER, Ph.D.  
*Administrator*

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
3416 Goni Road, Suite D-132  
Carson City, NV, 89706  
Telephone (775) 687-4210 • Fax (775) 687-0574  
<http://adsd.nv.gov>

April 12, 2017

Susan Haas, Executive Director & C.E.O.  
Nevada Rural Counties RSVP Program, Inc.  
2621 Northgate Lane, Ste. 6  
Carson City, NV 89706

Re: Letter of Support for Nevada Rural Counties RSVP Program, Inc. application  
to CAMPO for 5310 grant

Dear Ms. Haas:

The Nevada Aging and Disability Services Division supports the Nevada Rural Counties Retired and Senior Volunteer Program (RSVP), Inc., in its efforts to obtain a grant for a vehicle through the Carson Area Metropolitan Planning Organization (CAMPO) 5310 program.

To the extent that funding is available, the Division will assist with up to 20 percent in match requirement of the grant.

Due to the vastness of our state and limited resources, Nevada faces challenges in providing quality services to all of its older adult citizens. RSVP's volunteer transportation program greatly enhances the ability of older adults to access escorted transportation and maintain their independence with dignity. Volunteers provide lifesaving access to goods and services and the emotional support and referrals that help older adults navigate available resources and age in place rather than be prematurely institutionalized at great expense.

This grant will enable RSVP to serve more older adults who are isolated due to a lack of transportation, which is so necessary to elders struggling to remain independent.

Sincerely,

Cherrill Cristman, Chief  
Resource Development

# Carson City Senior Citizens Center



911 Beverly Drive • Carson City, NV 89706 • (775) 883-0703 • Fax (775) 883-2869  
• Email [ccscc@gbis.com](mailto:ccscc@gbis.com)

April 12, 2017

Susan Haas, Executive Director & C.E.O.  
Nevada Rural Counties RSVP Program, Inc.  
2621 Northgate Lane, Ste. 6  
Carson City, NV 89706

Re: Letter of Support for Nevada Rural Counties RSVP Program, Inc. application  
to CAMPO for 5310 grant

Dear Ms. Haas:

The Carson City Senior Center supports the Nevada Rural Counties Retired and Senior Volunteer Program (RSVP), Inc., in its efforts to obtain a grant for a vehicle through the Carson Area Metropolitan Planning Organization (CAMPO) 5310 program.

RSVP's volunteer transportation program greatly enhances the ability of seniors to access escorted transportation and maintain their independence with dignity. The volunteers provide lifesaving access to goods and services. Additionally, volunteers provide the emotional support and referrals that help seniors navigate available resources and help them to age in place rather than be placed in a costly care facility prematurely.

This grant will enable RSVP to serve seniors who may be isolated due to lack of transportation and support seniors in Carson City who wish to access the goods and services they need. The van will also be utilized for daily trips to the Carson City Senior Center for nutrition and socialization so necessary to isolated seniors struggling to maintain their independence.

Sincerely,

A handwritten signature in blue ink that reads "Courtney Warner". The signature is fluid and cursive, written in a professional but personal style.

Courtney Warner  
Executive Director  
Carson City Senior Center

# **Carson City Regional Transportation Commission**

**Application to Carson Area Metropolitan Planning Organization  
for Federal Transit Administration (FTA) Section 5310 Program Funds**

Any funds awarded to the Carson City RTC as a result of this application will be used to reimburse operating expenses of the Jump Around Carson transit system



## **PUBLIC NOTICE**

### **CARSON AREA METROPOLITAN PLANNING ORGANIZATION FEDERAL GRANT APPLICATION FOR SECTIONS 5310 & 5339 PROGRAM FUNDS FEDERAL FISCAL YEAR 2017 APPORTIONMENT**

Separate applications are required for each Federal Transit Administration Program applied for.  
For further information or assistance, please contact the Transit Coordinator at  
**775-283-7583**

**Applications must be received no more than 30 days after notice of availability of funds:**  
Carson Area Metropolitan Planning Organization  
3505 Butti Way  
Carson City, NV 89701

**All documents must be signed by persons with signature authority and their legal counsel.**

**The following pages of the CAMPO Federal Grant Application were removed by CAMPO staff for the convenience of CAMPO Board members:**

**Pages 2 – 5**

The reserved pages included CAMPO's competitive transportation selection process for each funding source available for competitive award (5310 and 5339), and were removed to limit confusion and improve the flow of the document.



**Categories and Criteria** — Below are the categories which will be used to rank all submitted applications for Federal Transit Administration (FTA) funding. It is important to address each category as it pertains to your organization. Funding allocation will be based on how your application ranks among all submitted applications.

**Mission Statement/Vision (Page 12 of the application)**

Applicant's mission statement/vision: Include the organization's mission statement or vision which clearly states the use of the proposed project funds. It needs to be clear how this funding enhances the organization's objective.

**Project Justification (Page 13)**

Please complete page 13 detailing your agency and its purpose in order to ensure proper ranking of your application.

Access type: Discuss equal access to your program and use of this service by all persons eligible. This includes, but is not limited to, the Federal Civil Rights Compliance and Activity issues involving Title VI nondiscrimination, Equal Employment Opportunity, Disadvantaged Business Enterprises and Americans with Disabilities Act; and state and local access and disability statutes, policies and guidelines.

Service area: List anticipated/proposed routes, schedules, trip priorities, etc. Describe the geographic service area including scheduled and non-scheduled trips to adjoining areas. Please do not include brochures.

**Vehicle (Page 14 and 15 of the application)**

(Page 14) Identify vehicle(s) requested, providing a description of the desired vehicle. It should be noted whether the vehicle(s) is a replacement or an expansion of the existing vehicle fleet. Additionally, any special vehicle(s) options to be requested, (i.e. 4-wheel drive, bike racks, etc.) should be noted.

(Page 15) Existing vehicle inventory: Describe the existing vehicle fleet. Please list all vehicles in your inventory whether obtained through CAMPO or another source.

Insurance: A Certificate of Insurance will need to be provided. The state requires minimum liability coverage and Carson City/CAMPO requires full coverage for the vehicle as long as Carson City/CAMPO holds lien. (The standard insurance for a paratransit vehicle under this program is Liability and Property Damage Insurance with a limit of \$1,000,000 for each occurrence, for bodily injury, and property damage, naming Carson City/CAMPO as an additional insured. This shall be maintained through the useful life of the vehicle and until Carson City/CAMPO releases lien of the title.)

**Budget (Pages 16 & 17)**

All applicants must complete Page 16 for Capitalized Operating, Operating and Capital purchase funds they are requesting. If you are requesting both 5310 and 5339 funds, a separate application will need to be submitted for each. Page 17 is a summary of the budget to be completed for 5339

and 5310 capital funds separately. If you are unsure of which funds are most appropriate for your agency, please contact CAMPO staff prior to the application deadline.

**Revenue:** This section is distinguished from the match source in that this funding source offsets the overall budget, reducing the total project cost. It can be in the form of farebox contributions/revenue, donations, or agency financial assistance from service groups, businesses, charities, etc.

**Match source documentation:** This section includes the source of funding that provides the required non-federal share of the project cost. The source of the matching funds must be verifiable. A letter, or other documentation, stating the monetary commitment from the contributing agency/entity must be included within the submitted application packet.

### **Maintenance and Safety**

A maintenance plan is required whether there is an existing plan or if a new plan will be developed. This plan should include documented vehicle maintenance/accident repairs and ensure oversight for routine scheduled or non-scheduled maintenance activities.

### **Training Policy**

A training policy is required: At a minimum the policy should contain the frequency, the type and who will be trained in safety, substance abuse awareness, passenger sensitivity, and customer service.

### **Drug and Alcohol Policy (5339 only)**

Sub-recipients of 5339 FTA funds are required to comply with regulations issued by the FTA on drug and alcohol testing, 49 C.F.R. Part 655. Among other requirements, these regulations require that all safety sensitive employees be tested for drug and alcohol use, pre-employment (drug only), random, reasonable suspicion and post-accident, that certifications be made and reports submitted. There are limited exceptions to the testing requirements for contract maintenance workers under Section 5339 and for volunteers. Annual reporting of the testing results must be submitted to CAMPO by subrecipients on Management Information System (MIS) forms. Applications for 5310 funds do not need to include a drug and alcohol policy.

### **Customer Satisfaction and Community Support**

**Letters of Support:** Provide any current (within the past 12 months) letters of support, if available, for the services.

**Survey Reports:** Include a summary of informal survey results and on-board rider satisfaction if available.

**Other:** Include any other indications of community support for the program. This can include considerations for funding from groups, strong rider interest, or documentation of high levels of interest by client groups.

## FTA Funding Sources

**For your application to be considered complete, please only check one funding source. If multiple funding sources are desired please submit a separate application for each.**

### **5310 (Capital/Vehicle) Funds \_\_\_ (20% match required)**

### **5310 (Operating) Funds \_\_\_ (50% match required)**

This program (49 U.S.C. 5310) provides formula funding to metropolitan planning organizations (MPOs) for the purpose of assisting private nonprofit organizations or Governmental entities in meeting the transportation needs of the elderly and persons with disabilities. Eligible subrecipients are private non-profit organizations, governmental authorities where no non-profit organizations are available to provide service, and governmental authorities approved to coordinate services.

### **5339 (Capital) Funds \_\_\_ (20% match required)**

This program (49 U.S.C. 5339) provides funding to replace, rehabilitate, and purchase buses and related equipment as well as construct bus-related facilities. This includes the acquisition of buses for fleet and service expansion, bus maintenance and administrative facilities, transfer facilities, bus malls, transport centers, intermodal terminals, park-and-ride stations, passenger shelters and bus stop signs, accessory and miscellaneous equipment such as mobile radio units, fare boxes, computers, shop and garage equipment. Eligible subrecipients include public agencies or private non-profit organizations engaged in fixed-route public transportation, including those providing services open to a segment of the general public as defined by age, disability, or low income.

**For more information on the programs above please refer to FTA's website:**

**<https://www.transit.dot.gov/grants>**

**If you have questions regarding which funding source is appropriate for your service please feel free to contact the CAMPO Transit Coordinator at (775) 283-7583.**

**Project funding from the programs listed above is subject to the availability of grant funding and the amount of project funding requests received, which will be determined by the CAMPO Board during a regularly scheduled meeting occurring on the second Wednesday of each month.**

APPLICANT'S NAME Carson City RTC

APPLICATION CHECKLIST				
*****INCOMPLETE APPLICATIONS WILL NOT BE APPROVED*****				
NEW APPLICANT REVIEW	PAST APPLICANT REVIEW	PAGE	APPLICATION CHECKLIST WITH ITEMS REQUIRED	STAFF REVIEW
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	DETERMINATION OF ELIGIBILITY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	9	FTA FUNDING SOURCES	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12	FEDERAL GRANT APPLICATION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	13	PROJECT JUSTIFICATION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	15	VEHICLE INVENTORY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	17	BUDGET SUMMARY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	AUTHORIZING RESOLUTION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	APPENDIX A	<u>FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES</u>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	following certs & assurances	MATCH SOURCE DOCUMENTATION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	ADA POLICY (vehicle/passengers information)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	EEO PLAN	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	DRUG AND ALCOHOL POLICY (5339 Only)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	VEHICLE/FACILITY MAINTENANCE POLICY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	TRAINING POLICY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	VEHICLE POLICY (driver/rider information)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	COMPLAINT RESOLUTION POLICY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	include in application packet	COPY OF VEHICLE INSURANCE POLICY (Evidencing Commercial Liability, General Liability, Collision, and Comprehensive Liability Insurance, with a limit of not less than One Million and no/100 Dollars (\$1,000,000.00) per occurrence.)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	include in application packet	PUBLIC NOTICE- (Please review Appendix A "Certifications and Assurances - Private Sector Protections")	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	include in application packet	CURRENT LETTERS OF SUPPORT (From previous 12 month period of service)	<input checked="" type="checkbox"/>

\*Please provide 1 original application and 1 copy

  
 \_\_\_\_\_  
 APPLICANT SIGNATURE

  
 \_\_\_\_\_  
 CAMPO STAFF SIGNATURE

**PLEASE BE ADVISED THAT UPON ACCEPTANCE OF THIS APPLICATION FOR FTA FUNDING THERE MAY BE ADDITIONAL OBLIGATORY REQUIREMENTS UPON ENTERING INTO AN EXECUTED AGREEMENT INCLUDING BUT NO LIMITED TO THE FOLLOWING:**

**Quarterly Ridership Report (CAMPO approved form)**

**Quarterly Vehicle Performance Measurement Report (CAMPO approved form)**

**Quarterly written copies of current routes, schedules, and fares of the Transportation System**

**Quarterly written Progress Report (detailing any changes or additions to the System)**

**Insurance policy certificates, declaration pages and endorsements designating the Carson Area Metropolitan Planning Organization as an additional insured evidencing Commercial Liability, General Liability, Collision, and Comprehensive Liability Insurance, with a limit of not less than One Million and no/100 Dollars (\$1,000,000.00) per occurrence.**

**Annual U.S. Department of Transportation Drug and Alcohol Testing Management Information System (MIS) Data Collection Form**

**Follow the Federal Transit Administration (FTA) of the U.S. Department of Transportation 49 CFR Part 655, as amended, that mandates urine drug testing and breath alcohol testing for safety-sensitive positions, and prohibits performance of safety-sensitive functions when there is a positive test result. The U. S. Department of Transportation (USDOT) has published 49 CFR Part 40, as amended, that sets standards for the collection and testing of urine and breath specimens.**

**CARSON AREA METROPOLITAN PLANNING ORGANIZATION  
FEDERAL GRANT APPLICATION  
FEDERAL FISCAL YEAR 2017 APPORTIONMENT**

Please fill out a separate application for each Grant Program you are applying for. Attach the original signed documents along with 1 complete copy of your application package and send to the Carson Area Metropolitan Planning Organization (CAMPO) 3505 Butti Way Carson City NV, 89701. Please retain 1 complete copy for your records.

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**Applicant** \_\_\_\_\_

\*If you are a County applying on behalf of a transit system, please provide names and addresses for both the County and the transit system.

**Physical Address** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Contact Person/Official** \_\_\_\_\_

**Title** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

**Federal Tax ID#** \_\_\_\_\_

**DUNS #** \_\_\_\_\_

**Type of Agency** \_\_\_\_\_ **Private Non-Profit**  
\_\_\_\_\_ **Private For-Profit**  
\_\_\_\_\_ **Governmental Agency**  
\_\_\_\_\_ **Tribal Agency (Sovereign Nation)**  
\_\_\_\_\_ **Other (describe)**

**Type of Service** \_\_\_\_\_ **Senior Center/Disabled Workshop**  
\_\_\_\_\_ **Demand-Response (Dial-a-Ride, Door to Door)**  
\_\_\_\_\_ **Deviated Fixed-Route**  
\_\_\_\_\_ **Fixed route**  
\_\_\_\_\_ **Other (describe)**

**Mission/Vision Statement:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PROJECT JUSTIFICATION

**1. Please describe in detail your transportation program and how this funding will enhance the services offered.**

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**2. Describe the transportation services currently being provided by your organization and/or others in the same region.**

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**3. Provide a detailed description of your organization. Provide information regarding how your organization came to be. Include the future vision for the organization.**

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**4. Describe any (proposed or currently in use) connectivity/coordination efforts with surrounding area transit providers.**

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The following information is required by the Federal Transit Administration. The economic/racial/ethnic composition of your governing body will not be considered as a factor in awarding this grant.

Our governing body (board of director, city council, etc.) is made up predominantly of minority and/or low income individuals. Yes No

**SERVICE**

- |                         |  |   |
|-------------------------|--|---|
| <b>Clientele Served</b> | <input type="checkbox"/> Elderly (60+ years old)   | <input type="checkbox"/> General Public (18-59 years old) |
|                         | <input type="checkbox"/> Persons with disabilities | <input type="checkbox"/> Children (under age 5)           |
|                         | <input type="checkbox"/> Low Income/Welfare        | <input type="checkbox"/> Children (5-7 years old)         |
|                         | <input type="checkbox"/> Minorities                | <input type="checkbox"/> Children (8-17 years old)        |
|                         | <input type="checkbox"/> Commuters                 |   |

- Location (check all that apply)**
- Non-Urban Area (Rural under 50,000 population)
  - Small Urban Area (50,000 - 200,000 population)
  - Douglas County
  - Lyon County
  - Carson City

**Areas Served** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**DESCRIPTION OF VEHICLE(S)/BUS(ES) REQUESTED\***

Quantity	VEHICLE DESCRIPTION (including size, capacity, wheelchair positions, etc.)	Estimated Cost
<b>TOTAL QUANTITY</b>	<b>TOTAL ESTIMATED COST</b>	

\*CAMPO staff will procure requested vehicle(s). Actual price will be based on bids received

Agency Name \_\_\_\_\_ Vehicle Inventory - FFY 2017

Vehicle Identification Number	License #	Condition Poor/Good/ Excellent	Year & Vehicle Mode (BU=Bus, CU=Cutaway, VN=Van, MV=Minivan)	Vehicle Length	Seating Capacity	ADA Accessible Vehicle Yes/No ; # of ADA Seats	Mileage	Funding Source*	Vehicle to be Replaced Yes/No	Lein-holder-- see title

\*Funding Source - Please provide the largest funding source used to purchase the vehicle. Please be specific. (i.e. FTA, other federal funds, private or other--describe).

## FTA BUDGET (1 of 2) ALL APPLICANTS 5310 or 5339

<b><u>CAPITALIZED OPERATING EXPENSES 5310</u></b>	
<b>Contract Operator Expenses</b>	\$ _____
(Defined as acquisition of transportation services under a contract, lease, or other arrangement)	
<b>(A) TOTAL CAPITAL EXPENSES</b>	

<b><u>OPERATING EXPENSES 5310</u></b>	
<b>Operator Expenses</b>	\$ _____
(Defined as the incremental cost of providing same day service or door-to-door service)	
<b>Fuel/Oil Fluids</b>	\$ _____
<b>Driver/Dispatcher Salaries</b>	\$ _____
<b>Other (Specify)</b>	\$ _____
<b>(B) TOTAL OPERATING EXPENSES</b>	

<b><u>CAPITAL PURCHASES (5339 or 5310)</u></b>	
<b>Buses/Van/Paratransit Vehicle</b>	\$ _____
<b>Radios/Comm Equipment</b>	\$ _____
<b>Bus Facilities (Shelters, Signs)</b>	\$ _____
<b>Vehicle Overhaul/Rehab/etc.</b>	\$ _____
<b>Other (Specify)</b>	\$ _____
<b>(C) TOTAL CAPITAL PURCHASES</b>	

<b><u>REVENUE</u></b>	
(MUST INCLUDE PROJECTED FAREBOX REVENUE)	
Source	Dollar Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
<b>(D) TOTAL REVENUE</b>	

<b><u>MATCH</u></b>	
Source	Dollar Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
<b>(E) TOTAL MATCH</b>	

### 5310 Enhanced Mobility for Seniors & Individuals with Disabilities

This program provides funds to 1) serve the special needs of transit-dependent populations beyond traditional public transportation service, where public transportation is insufficient, inappropriate, or unavailable; 2) projects that exceed the requirements of the Americans with Disabilities Act (ADA); 3) projects that improve access to fixed route service and decreased reliance on complementary paratransit; and 4) project that are alternatives to public transportation.

### 5339 Bus and Bus Facilities

This program provides funding to replace, rehabilitate, and purchase buses and related equipment as well as construct bus-related facilities. This includes the acquisition of buses for fleet and service expansion, bus maintenance and administrative facilities, transfer facilities, bus malls, transport centers, intermodal terminals, park-and-ride stations, passenger shelters and bus stop signs, accessory and miscellaneous equipment such as mobile radio units, fare boxes, computers, and shop and garage equipment.

**5310 / 5339 BUDGET (2 of 2)**

<b>TOTAL CAPITALIZED OPERATING EXPENSES</b>	_____	<b>(A) On Budget Page 1 of 2</b>
<b>TOTAL FAREBOX REVENUE</b>	_____	<b>(D) On Budget Page 1 of 2</b>
<b>NET OPERATING EXPENSES</b>	_____	<b>Total expenses minus total revenue</b>
<b>FTA CAPITALIZED OPERATING AMOUNT</b>	_____	<b>80% of net expenses</b>
<b>SUB-RECIPIENT CAPITALIZED OPERATING MATCH</b>	_____	<b>20% of net expenses</b>

<b>TOTAL OPERATING EXPENSES</b>	_____	<b>(B) On Budget Page 1 of 2</b>
<b>TOTAL FAREBOX REVENUE</b>	_____	<b>(D) On Budget Page 1 of 2</b>
<b>NET OPERATING EXPENSES</b>	_____	<b>Total expenses minus total revenue</b>
<b>FTA OPERATING AMOUNT</b>	_____	<b>50% of net expenses</b>
<b>SUB-RECIPIENT OPERATING AMOUNT</b>	_____	<b>50% of net expenses</b>

<b>TOTAL CAPITAL PURCHASES</b>	_____	<b>(C) On Budget Page 1 of 2</b>
<b>FTA OPERATING AMOUNT</b>	_____	<b>80% of total</b>
<b>SUB-RECIPIENT OPERATING AMOUNT</b>	_____	<b>20% of total</b>

**PLEASE LIST FUNDING BELOW IN WHOLE DOLLARS**

**TOTAL FTA FUNDS REQUESTED**

(FTA CAPITALIZED OPERATING, OPERATING, & CAPITAL PURCHASES FROM ABOVE)

**SUBRECIPIENT MATCH**

(SUBRECIPIENT CAPITALIZED OPERATING, OPERATING, & CAPITAL PURCHASES FROM ABOVE)

AUTHORIZING RESOLUTION

APPLICANT Carson City Regional Transportation Commission (RTC)  
(Printed Name of Transportation Provider)

AUTHORIZED REPRESENTATIVE Brad Bonkowski  
(Printed name of Authorized Representative)

Resolution authorizing the filing of an application for a Federal Transit Administration / Carson Area Metropolitan Planning Organization grant under 49 USC Chapter 53.

WHEREAS, the U S Department of Transportation (USDOT) is authorized to make grants to metropolitan planning organizations through the Federal Transit Administration (FTA) to support transportation projects under 49 USC Chapter 53; and

WHEREAS, the Carson Area Metropolitan Planning Organization (CAMPO) has been designated to administer certain transportation projects under 49 USC Chapter 53; and

WHEREAS, the contract for financial assistance will impose certain obligations upon the APPLICANT, including provisions of the local share of project costs;

NOW, THEREFORE, BE IT RESOLVED BY THE APPLICANT:

That the above named representative is authorized to execute and file an application with CAMPO on behalf of our agency to aid in the financing of capital, and / or operating costs pursuant to 49 USC Chapter 53; and

That the above named representative is authorized to furnish such additional information as CAMPO may require in connection with the application or the project.

The undersigned certifies that the foregoing is a true and correct statement.

**Carson City RTC Chair**

(Printed Title of Authorized Representative)

  
(Signature of Authorized Representative)

Dated April 12, 2017

**The following pages of the CAMPO Federal Grant Application were removed by CAMPO staff for the convenience of CAMPO Board members:**

**Pages 1 – 44 of Appendix A**

The reserved pages included the FTA fiscal year 2017 Certifications and Assurances Preface and descriptions of individual Categories. Only the signature pages of this portion of the application were included.

**FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES**

**FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES FOR  
FEDERAL TRANSIT ADMINISTRATION ASSISTANCE PROGRAMS**

(Signature pages alternative to providing Certifications and Assurances in TrAMS)

Name of Applicant: \_\_\_\_\_

The Applicant agrees to comply with applicable provisions of (Categories 01 – 23. \_\_\_\_\_

**OR**

The Applicant agrees to comply with applicable provisions of the Categories it has selected:

<u>Category</u>	<u>Description</u>	
01.	Required Certifications and Assurances for Each Applicant.	_____
02.	Lobbying.	_____
03.	Procurement and Procurement Systems.	_____
04.	Private Sector Protections.	_____
05.	Rolling Stock Reviews and Bus Testing.	_____
06.	Demand Responsive Service.	_____
07.	Intelligent Transportation Systems.	_____
08.	Interest and Financing Costs and Acquisition of Capital Assets by Lease.	_____
09.	Transit Asset Management Plan, Public Transportation Safety Program, and State Safety Oversight Requirements.	_____
10.	Alcohol and Controlled Substances Testing.	_____
11.	Fixed Guideway Capital Investment Grants Program (New Starts, Small Starts, and Core Capacity Improvement).	_____
12.	State of Good Repair Program.	_____
13.	Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs.	_____
14.	Urbanized Area Formula Grants Programs and Passenger Ferry Grant Program.	_____
15.	Enhanced Mobility of Seniors and Individuals with Disabilities Programs.	_____
16.	Rural Areas and Appalachian Development Programs.	_____
17.	Tribal Transit Programs (Public Transportation on Indian Reservations Programs).	_____
18.	State Safety Oversight Grant Program.	_____
19.	Public Transportation Emergency Relief Program.	_____
20.	Expedited Project Delivery Pilot Program.	_____
21.	Infrastructure Finance Programs.	_____
22.	Paul S. Sarbanes Transit in Parks Program.	_____
23.	Construction Hiring Preferences.	_____

# FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES

## FEDERAL FISCAL YEAR 2017 FTA CERTIFICATIONS AND ASSURANCES SIGNATURE PAGE

(Required of all Applicants for federal assistance to be awarded by FTA and all FTA Grantees with an active Capital or Formula Award)

### AFFIRMATION OF APPLICANT

Name of the Applicant: \_\_\_\_\_


Name and Relationship of the Authorized Representative: \_\_\_\_\_

BY SIGNING BELOW, on behalf of the Applicant, I declare that it has duly authorized me to make these Certifications and Assurances and bind its compliance. Thus, it agrees to comply with all federal laws, regulations, and requirements, follow applicable federal guidance, and comply with the Certifications and Assurances as indicated on the foregoing page applicable to each application its Authorized Representative makes to the Federal Transit Administration (FTA) in federal fiscal year 2017, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent it.

FTA intends that the Certifications and Assurances the Applicant selects on the other side of this document should apply to each Award for which it now seeks, or may later seek federal assistance to be awarded during federal fiscal year 2017.

The Applicant affirms the truthfulness and accuracy of the Certifications and Assurances it has selected in the statements submitted with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. § 3801 *et seq.*, and implementing U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31, apply to any certification, assurance or submission made to FTA. The criminal provisions of 18 U.S.C. § 1001 apply to any certification, assurance, or submission made in connection with a federal public transportation program authorized by 49 U.S.C. chapter 53 or any other statute

In signing this document, I declare under penalties of perjury that the foregoing Certifications and Assurances, and any other statements made by me on behalf of the Applicant are true and accurate.

Signature  Date: April 13, 2017

Name BRAD BONKOWSKI, CHAIR  
Authorized Representative of Applicant

### AFFIRMATION OF APPLICANT'S ATTORNEY

For (Name of Applicant): Carson City RTC

As the undersigned Attorney for the above named Applicant, I hereby affirm to the Applicant that it has authority under state, local, or tribal government law, as applicable, to make and comply with the Certifications and Assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the Certifications and Assurances have been legally made and constitute legal and binding obligations on it.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these Certifications and Assurances, or of the performance of its FTA assisted Award.

Signature  Date: April, 12, 2017

Name S. Daniel Yu  
Attorney for Applicant

*Each Applicant for federal assistance to be awarded by FTA and each FTA Recipient with an active Capital or Formula Project or Award must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its electronic signature in lieu of the Attorney's signature within FTA's electronic award and management system, provided the Applicant has on file and uploaded to FTA's electronic award and management system this hard-copy Affirmation, signed by the attorney and dated this federal fiscal year.*



- 225-0000-381.01-03
- Account miscellane
- Budget miscellane
- Transactions
- Detail by date
- Detail by code
- Detail by year & p
- Pending by date
- Pending by code
- Pending by year
- Procurement car

**Account information**

Q GENERAL FUND / CC FTA 5907 OPS MATCH  
 Fiscal year: 2017 Cr  
 Estimated revenue: 400,000.00  
 Total receipts: 400,000.00  
 Q Unrealized revenue: .00

**Project Data**

Project Entry Optional

**Account Balance by Period**

Period/Month	Actuals	Cumulative Totals
Q 01 July	.00	.00
Q 02 August	400,000.00	400,000.00
Q 03 September	.00	400,000.00
Q 04 October	.00	400,000.00

**Payment information**

Vendor (\* indicates pending) Total

- Print
- Cancel
- Exit
- Previous acc...
- Next account
- 2016
- 2018
- Account activi...
- Pending trans...
- Subset transa...
- Budget alloca...

Type	App	Period	Date	Project	Transaction Amount	Budget Amount	Group
AJ	GM	02	9/14/2016		400000.00	.00	00887

End of records reached

Commercial Lines - (206) 892-9200  
Wells Fargo Insurance Services USA, Inc. - CA Lic#: 0  
999 Third Ave, Suite 4100  
Seattle, WA 98104

JAC Bus of Carson City  
3303 Butti Way, Bldg. 1  
Carson City, NV 89701

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Would you like to receive this certificate via email or fax?

We offer expedited delivery to better serve our mutual clients.

To update the delivery method for revisions to this certificate and for next year's copy, please enter this information in your browser:

<https://www.cybersure.com/cybersure/forms/iyoc/cdmu.aspx>

When prompted, enter this information for security purposes:

Client ID: 262761  
Cert ID: 11238875  
Passcode: 4C27F51C

Follow the instructions and let us know your delivery preference. You'll receive future copies of this certificate via the method you provide.

Thank you for helping us provide certificates to you more quickly.

\*\*\*\*\*





# CERTIFICATE OF LIABILITY INSURANCE

262761

DATE (MM/DD/YYYY)  
12/28/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


<b>PRODUCER</b> Commercial Lines - (206) 892-9200 Wells Fargo Insurance Services USA, Inc. - CA Lic#: 0D08408 999 Third Ave, Suite 4100 Seattle, WA 98104	<b>CONTACT NAME:</b> _____ <b>PHONE (A/C, No, Ext):</b> _____ <b>FAX (A/C, No):</b> _____ <b>E-MAIL ADDRESS:</b> _____	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Swift Communications, Inc. c/o Swift Communication 580 Mallory Way Carson City, NV 89701	<b>INSURER A:</b> Hanover Insurance Company	<b>NAIC #</b> 22292
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** 11238875                      **REVISION NUMBER:** See below

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____			ZH2-8978723-06	01/01/2017	01/01/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 JAC Bus of Carson City is Additional Insured under General Liability in accordance with the terms and conditions of the policy when required by written contract regarding their interest in the operations of the Named Insured.

<b>CERTIFICATE HOLDER</b> JAC Bus of Carson City 3303 Butti Way, Bldg. 1 Carson City, NV 89701	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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## NOTICE OF MEETING OF THE CARSON CITY REGIONAL TRANSPORTATION COMMISSION (RTC)

**Day:** Wednesday  
**Date:** April 12, 2017  
**Time:** Begins immediately after the adjournment of the Carson Area Metropolitan Planning Organization meeting that begins at 4:30 p.m.  
**Location:** Community Center, Sierra Room, 851 East William Street, Carson City, Nevada

### AGENDA

**AGENDA NOTES:** The Regional Transportation Commission is pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Regional Transportation Commission staff in writing at 3505 Butti Way, Carson City, Nevada, 89701, or [ppittenger@carson.org](mailto:ppittenger@carson.org), or call Patrick Pittenger at (775) 887-2355 as soon as possible (requests are required prior to 12:00 p.m. on April 10, 2017).

For more information or for copies of the supporting material regarding any of the items listed on the agenda, please contact Patrick Pittenger, Transportation Manager, at (775) 887-2355. Additionally, the agenda with all supporting material is posted under "Agendas & Minutes" at [www.carson.org/agendas](http://www.carson.org/agendas), or is available upon request at 3505 Butti Way, Carson City, Nevada, 89701.

**AGENDA MANAGEMENT NOTICE:** The Chair may take items on the agenda out of order; combine two or more agenda items for consideration; and/or remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

**DISCLOSURES:** Any member of the RTC Board may inform the Chair of his or her intent to make a disclosure of a conflict of interest on any item appearing on the agenda or on any matter relating to the RTC's official business. Such disclosures may also be made at such time the specific agenda item is introduced.

### 1. ROLL CALL AND DETERMINATION OF A QUORUM

## 2. PUBLIC COMMENT:

Members of the public who wish to address the RTC may approach the podium and speak on any matter relevant to or within the authority of RTC. Comments are limited to three minutes per person per topic. If your item requires extended discussion, please request the Chair to calendar the matter for a future RTC meeting. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an Agenda as an item upon which action may be taken.

## 3. APPROVAL OF MINUTES:

**3.A (For Possible Action)** March 8, 2017 Draft Minutes

## 4. PUBLIC MEETING ITEM(S):

**4.A (For Possible Action)** To adopt a Resolution authorizing the filing of an application for a Federal Transit Administration (FTA) grant under 49 U.S.C. Chapter 53, and to authorize the RTC Chair to sign the FTA Fiscal Year 2017 Certifications and Assurances section of the RTC application for 5310 funds.

**Staff Summary:** Staff has prepared an application for the fiscal year 2017 partial apportionment of FTA Section 5310 funds, the disbursement of which is determined by the Carson Area Metropolitan Planning Organization. Any funds received from the 2017 5310 apportionment will be used to fund costs associated with operating the Jump Around Carson (JAC) transit system.

**4.B (For Possible Action)** To adopt a Resolution authorizing the filing of an application for a Federal Transit Administration (FTA) grant under 49 U.S.C. Chapter 53, and to authorize the RTC Chair to sign the FTA Fiscal Year 2017 Certifications and Assurances section of the RTC application for 5339 funds.

**Staff Summary:** Staff has prepared applications for the fiscal year 2017 partial apportionment of FTA Section 5339 funds, the disbursement of which is determined by the Carson Area Metropolitan Planning Organization. Any funds received from the 2017 5339 apportionment will be used to fund capital costs associated with updating the JAC vehicle fleet.

**4.C (For Possible Action)** To adopt a resolution requesting the Carson City Board of Supervisors to issue Highway Revenue Refunding bonds to achieve interest rate savings; providing other details in connection therewith; and providing the effective date thereof.

**Staff Summary:** Staff is asking the Commission to approve the Resolution known as the "2017 Highway Revenue Refunding Bonds". Because interest rates have declined since the issuance of the 2008 Bonds, and pursuant to Chapters 373 and 350, of Nevada Revised Statutes, the Board is authorized, on behalf and in the name of the City to issue revenue refunding bonds to refund all or a portion of the 2008 Bonds to achieve interest rate savings.

**4.D (For Possible Action)** To approve a cooperative agreement P191-17-063, between the Carson City RTC and the Nevada Department of Transportation (NDOT) for the Silver Sage Drive reconstruction project, and to authorize the Transportation Manager to sign future amendments to this agreement regarding time extensions or a change in the value of funding up to 20% of the initial funding amount.

**Staff Summary:** In December of 2016, the CAMPO Board formally agreed to allocate the 2018 annual Surface Transportation Block Grant (STBG) funding to Carson City. The improvement cost for Silver Sage Drive is approximately \$748,000 and is programmed with STBG funding that requires a 5% local match. The improvements are between Snyder Avenue and Clearview Drive.

**5. INTERNAL COMMUNICATIONS AND ADMINISTRATIVE MATTERS (Non-Action Items):**

- 5.A Street Operations Activity Report
- 5.B Project Status Report
- 5.C Future Agenda Items

**6. BOARD COMMENTS (Information only):**

Status reports and comments from the members of the RTC Board.

**7. PUBLIC COMMENT:**

Members of the public who wish to address the RTC Board may approach the podium and speak on any matter relevant to or within the authority of RTC. Comments are limited to three minutes per person per topic. If your item requires extended discussion, please request the Chair to calendar the matter for a future RTC meeting. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an Agenda as an item upon which action may be taken.

**8. ADJOURNMENT: For Possible Action**

**The next meeting is tentatively scheduled for 4:30 p.m., Wednesday, May 10, 2017, at the Sierra Room - Community Center, 851 East William Street.**

This agenda has been posted at the following locations on Thursday, April 6, 2017, before 5:00 p.m.:

- City Hall, 201 North Carson Street
- Carson City Library, 900 North Roop Street
- Community Center, Sierra Room, 851 East William Street
- Carson City Public Works, 3505 Butti Way
- Carson City Planning Division, 108 E. Proctor Street
- Douglas County Executive Offices, 1594 Esmeralda Avenue, Minden
- Lyon County Manager's Office, 27 South Main Street, Yerington
- Nevada Department of Transportation, 1263 S. Stewart Street, Carson City
- City Website: [www.carson.org/agendas](http://www.carson.org/agendas)
- State Website: <https://notice.nv.gov>



April 26, 2017

Patrick Pittenger, AICP, PTP  
Transportation Manager  
Carson City Public Works  
3505 Butti Way  
Carson City, NV 89701

RE: Letter of Support for Carson City Regional Transportation Commission's application for Federal Transit Administration grant funds.

Dear Mr. Pittenger:

This letter is to inform you that Northern Nevada Veterans Resource Center fully supports additional Federal funding for the Carson City Regional Transportation Commission for the provision of transportation in the Carson City area.

It is understood that any funds awarded as a result of submittal of grant applications will be used to help continue service at current levels and to improve the vehicle fleet for Jump Around Carson, Carson City's public transit system. The consistent support provided to local and regional partners to plan and implement transportation options for the area's residents, particularly those who are most in need, including veterans, the elderly and individuals with disabilities has been invaluable to this community.

As an agency concerned with making veterans and individuals with disabilities a priority, we are pleased to coordinate with, and provide support to the Carson City Regional Transportation Commission in order to plan and implement service options for those who are in need.

Sincerely,

Natalie Stering

A handwritten signature in blue ink that reads 'Natalie Stering'. The signature is fluid and cursive, with a long horizontal stroke at the end.

**Natalie Stering**  
**Site Director - Carson City**  
**Veterans Resource Centers of America**  
106 E. Adams St., Ste. 203  
Carson City, NV 89706  
Office: (775) 360.2155  
Fax: (775) 360.2157

***"Serving those who served."***



## STAFF REPORT

**Report To:** The Carson Area Metropolitan Planning Organization (CAMPO)

**Meeting Date:** May 10, 2017

**Staff Contact:** Dirk Goering, Senior Transportation Planner

**Agenda Title:** **(For Possible Action)** To determine the selection of Carson City RTC's Federal Transit Administration (FTA) 5339 application to be submitted for funding in the CAMPO planning area.

**Staff Summary:** CAMPO staff has received one application, from the Carson City RTC, requesting FTA 5339 funding.

**Agenda Action:** Formal Action/Motion

**Time Requested:** 10 minutes

### **Proposed Motion**

I move to determine the selection of Carson City RTC's Federal Transit Administration (FTA) 5339 application to be submitted for funding in the CAMPO planning area.

### **Background/Issues & Analysis**

FTA Section 5339 funds are apportioned annually to CAMPO and are to be used to replace, rehabilitate and purchase buses and related equipment and to construct bus-related facilities. The total amount of FTA 5339 funding available to CAMPO is \$54,813. This number represents the Federal Fiscal Year 2017 partial (7/12) apportionment. The standard split for this type of funding is 80% Federal. However, due to an exception through the Americans with Disabilities Act, a Federal share of 85% is available for the RTC's qualifying vehicle purchase.

CAMPO has received one eligible application for FTA 5339 funds. The application is from the Carson City Regional Transportation Commission (RTC) to be used to fund capital costs associated with updating the Jump Around Carson (JAC) vehicle fleet. The amount of funding being requested by the RTC is \$54,813, which is the total amount currently available. However, the CAMPO Board may choose to allocate funds to the applicant (or to none at all) in an amount that is less than requested. Based on the proposed use of funds, the applicant would be required to provide a 15% local match to any Federal funds awarded.

**Applicable Statute, Code, Policy, Rule or Regulation** – 49 U.S.C 5339

**Financial Information** – Local cash or in-kind matches will be required by the local agencies at the time funds are expended.

**Alternatives** – N/A

**Supporting Material** – Carson City RTC application.

**Board Action Taken:**

Motion: \_\_\_\_\_

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_

Aye/Nay

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(Vote Recorded By)

# **Carson City Regional Transportation Commission**

## **Application to Carson Area Metropolitan Planning Organization for Federal Transit Administration (FTA) Section 5339 Program Funds**

Any funds awarded to the Carson City RTC as a result of this application will be used to partially reimburse the cost of procuring a replacement vehicle for the Jump Around Carson transit system



## **PUBLIC NOTICE**

### **CARSON AREA METROPOLITAN PLANNING ORGANIZATION FEDERAL GRANT APPLICATION FOR SECTIONS 5310 & 5339 PROGRAM FUNDS FEDERAL FISCAL YEAR 2017 APPORTIONMENT**

Separate applications are required for each Federal Transit Administration Program applied for.  
For further information or assistance, please contact the Transit Coordinator at  
**775-283-7583**

**Applications must be received no more than 30 days after notice of availability of funds:**  
Carson Area Metropolitan Planning Organization  
3505 Butti Way  
Carson City, NV 89701

**All documents must be signed by persons with signature authority and their legal counsel.**

**The following pages of the CAMPO Federal Grant Application were removed by CAMPO staff for the convenience of CAMPO Board members:**

**Pages 2 – 5**

The reserved pages included CAMPO's competitive transportation selection process for each funding source available for competitive award (5310 and 5339), and were removed to limit confusion and improve the flow of the document.

**Carson Area Metropolitan Planning Organization**  
**Application for the Determination of Eligibility for the Federal Transit Administration’s**  
**5310 & 5339 Federal Grant Programs – Federal Fiscal Year 2017 Apportionment**

Name of Organization: \_\_\_\_\_

Area(s) Served: \_\_\_\_\_

Funding Amount Requested: \_\_\_\_\_

Project Description: \_\_\_\_\_

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Project Relation to the State of Nevada Coordinated Human Services Transportation Plan: \_\_\_\_\_

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**Categories and Criteria** — Below are the categories which will be used to rank all submitted applications for Federal Transit Administration (FTA) funding. It is important to address each category as it pertains to your organization. Funding allocation will be based on how your application ranks among all submitted applications.

**Mission Statement/Vision (Page 12 of the application)**

Applicant's mission statement/vision: Include the organization's mission statement or vision which clearly states the use of the proposed project funds. It needs to be clear how this funding enhances the organization's objective.

**Project Justification (Page 13)**

Please complete page 13 detailing your agency and its purpose in order to ensure proper ranking of your application.

Access type: Discuss equal access to your program and use of this service by all persons eligible. This includes, but is not limited to, the Federal Civil Rights Compliance and Activity issues involving Title VI nondiscrimination, Equal Employment Opportunity, Disadvantaged Business Enterprises and Americans with Disabilities Act; and state and local access and disability statutes, policies and guidelines.

Service area: List anticipated/proposed routes, schedules, trip priorities, etc. Describe the geographic service area including scheduled and non-scheduled trips to adjoining areas. Please do not include brochures.

**Vehicle (Page 14 and 15 of the application)**

(Page 14) Identify vehicle(s) requested, providing a description of the desired vehicle. It should be noted whether the vehicle(s) is a replacement or an expansion of the existing vehicle fleet. Additionally, any special vehicle(s) options to be requested, (i.e. 4-wheel drive, bike racks, etc.) should be noted.

(Page 15) Existing vehicle inventory: Describe the existing vehicle fleet. Please list all vehicles in your inventory whether obtained through CAMPO or another source.

Insurance: A Certificate of Insurance will need to be provided. The state requires minimum liability coverage and Carson City/CAMPO requires full coverage for the vehicle as long as Carson City/CAMPO holds lien. (The standard insurance for a paratransit vehicle under this program is Liability and Property Damage Insurance with a limit of \$1,000,000 for each occurrence, for bodily injury, and property damage, naming Carson City/CAMPO as an additional insured. This shall be maintained through the useful life of the vehicle and until Carson City/CAMPO releases lien of the title.)

**Budget (Pages 16 & 17)**

All applicants must complete Page 16 for Capitalized Operating, Operating and Capital purchase funds they are requesting. If you are requesting both 5310 and 5339 funds, a separate application will need to be submitted for each. Page 17 is a summary of the budget to be completed for 5339

and 5310 capital funds separately. If you are unsure of which funds are most appropriate for your agency, please contact CAMPO staff prior to the application deadline.

**Revenue:** This section is distinguished from the match source in that this funding source offsets the overall budget, reducing the total project cost. It can be in the form of farebox contributions/revenue, donations, or agency financial assistance from service groups, businesses, charities, etc.

**Match source documentation:** This section includes the source of funding that provides the required non-federal share of the project cost. The source of the matching funds must be verifiable. A letter, or other documentation, stating the monetary commitment from the contributing agency/entity must be included within the submitted application packet.

### **Maintenance and Safety**

A maintenance plan is required whether there is an existing plan or if a new plan will be developed. This plan should include documented vehicle maintenance/accident repairs and ensure oversight for routine scheduled or non-scheduled maintenance activities.

### **Training Policy**

A training policy is required: At a minimum the policy should contain the frequency, the type and who will be trained in safety, substance abuse awareness, passenger sensitivity, and customer service.

### **Drug and Alcohol Policy (5339 only)**

Sub-recipients of 5339 FTA funds are required to comply with regulations issued by the FTA on drug and alcohol testing, 49 C.F.R. Part 655. Among other requirements, these regulations require that all safety sensitive employees be tested for drug and alcohol use, pre-employment (drug only), random, reasonable suspicion and post-accident, that certifications be made and reports submitted. There are limited exceptions to the testing requirements for contract maintenance workers under Section 5339 and for volunteers. Annual reporting of the testing results must be submitted to CAMPO by subrecipients on Management Information System (MIS) forms. Applications for 5310 funds do not need to include a drug and alcohol policy.

### **Customer Satisfaction and Community Support**

**Letters of Support:** Provide any current (within the past 12 months) letters of support, if available, for the services.

**Survey Reports:** Include a summary of informal survey results and on-board rider satisfaction if available.

**Other:** Include any other indications of community support for the program. This can include considerations for funding from groups, strong rider interest, or documentation of high levels of interest by client groups.

## FTA Funding Sources

**For your application to be considered complete, please only check one funding source. If multiple funding sources are desired please submit a separate application for each.**

### **5310 (Capital/Vehicle) Funds \_\_\_ (20% match required)**

### **5310 (Operating) Funds \_\_\_ (50% match required)**

This program (49 U.S.C. 5310) provides formula funding to metropolitan planning organizations (MPOs) for the purpose of assisting private nonprofit organizations or Governmental entities in meeting the transportation needs of the elderly and persons with disabilities. Eligible subrecipients are private non-profit organizations, governmental authorities where no non-profit organizations are available to provide service, and governmental authorities approved to coordinate services.

### **5339 (Capital) Funds \_\_\_ (20% match required)**

This program (49 U.S.C. 5339) provides funding to replace, rehabilitate, and purchase buses and related equipment as well as construct bus-related facilities. This includes the acquisition of buses for fleet and service expansion, bus maintenance and administrative facilities, transfer facilities, bus malls, transport centers, intermodal terminals, park-and-ride stations, passenger shelters and bus stop signs, accessory and miscellaneous equipment such as mobile radio units, fare boxes, computers, shop and garage equipment. Eligible subrecipients include public agencies or private non-profit organizations engaged in fixed-route public transportation, including those providing services open to a segment of the general public as defined by age, disability, or low income.

**For more information on the programs above please refer to FTA's website:**

**<https://www.transit.dot.gov/grants>**

**If you have questions regarding which funding source is appropriate for your service please feel free to contact the CAMPO Transit Coordinator at (775) 283-7583.**

**Project funding from the programs listed above is subject to the availability of grant funding and the amount of project funding requests received, which will be determined by the CAMPO Board during a regularly scheduled meeting occurring on the second Wednesday of each month.**

APPLICANT'S NAME Carson City RTC

APPLICATION CHECKLIST				
*****INCOMPLETE APPLICATIONS WILL NOT BE APPROVED*****				
NEW APPLICANT REVIEW	PAST APPLICANT REVIEW	PAGE	APPLICATION CHECKLIST WITH ITEMS REQUIRED	STAFF REVIEW
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	DETERMINATION OF ELIGIBILITY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	9	FTA FUNDING SOURCES	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12	FEDERAL GRANT APPLICATION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	13	PROJECT JUSTIFICATION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	15	VEHICLE INVENTORY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	17	BUDGET SUMMARY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	18	AUTHORIZING RESOLUTION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	APPENDIX A	<a href="#">FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES</a>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	following certs & assurances	MATCH SOURCE DOCUMENTATION	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	ADA POLICY (vehicle/passengers information)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	EEO PLAN	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	DRUG AND ALCOHOL POLICY (5339 Only)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	VEHICLE/FACILITY MAINTENANCE POLICY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	TRAINING POLICY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	VEHICLE POLICY (driver/rider information)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	N/A	new applicants include in application packet	COMPLAINT RESOLUTION POLICY	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	include in application packet	COPY OF VEHICLE INSURANCE POLICY (Evidencing Commercial Liability, General Liability, Collision, and Comprehensive Liability Insurance, with a limit of not less than One Million and no/100 Dollars (\$1,000,000.00) per occurrence.)	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	include in application packet	PUBLIC NOTICE- (Please review Appendix A "Certifications and Assurances - Private Sector Protections")	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	include in application packet	CURRENT LETTERS OF SUPPORT (From previous 12 month period of service)	<input checked="" type="checkbox"/>

\*Please provide 1 original application and 1 copy

  
 \_\_\_\_\_  
 APPLICANT SIGNATURE

  
 \_\_\_\_\_  
 CAMPO STAFF SIGNATURE

**PLEASE BE ADVISED THAT UPON ACCEPTANCE OF THIS APPLICATION FOR FTA FUNDING THERE MAY BE ADDITIONAL OBLIGATORY REQUIREMENTS UPON ENTERING INTO AN EXECUTED AGREEMENT INCLUDING BUT NO LIMITED TO THE FOLLOWING:**

**Quarterly Ridership Report (CAMPO approved form)**

**Quarterly Vehicle Performance Measurement Report (CAMPO approved form)**

**Quarterly written copies of current routes, schedules, and fares of the Transportation System**

**Quarterly written Progress Report (detailing any changes or additions to the System)**

**Insurance policy certificates, declaration pages and endorsements designating the Carson Area Metropolitan Planning Organization as an additional insured evidencing Commercial Liability, General Liability, Collision, and Comprehensive Liability Insurance, with a limit of not less than One Million and no/100 Dollars (\$1,000,000.00) per occurrence.**

**Annual U.S. Department of Transportation Drug and Alcohol Testing Management Information System (MIS) Data Collection Form**

**Follow the Federal Transit Administration (FTA) of the U.S. Department of Transportation 49 CFR Part 655, as amended, that mandates urine drug testing and breath alcohol testing for safety-sensitive positions, and prohibits performance of safety-sensitive functions when there is a positive test result. The U. S. Department of Transportation (USDOT) has published 49 CFR Part 40, as amended, that sets standards for the collection and testing of urine and breath specimens.**

**CARSON AREA METROPOLITAN PLANNING ORGANIZATION  
FEDERAL GRANT APPLICATION  
FEDERAL FISCAL YEAR 2017 APPORTIONMENT**

Please fill out a separate application for each Grant Program you are applying for. Attach the original signed documents along with 1 complete copy of your application package and send to the Carson Area Metropolitan Planning Organization (CAMPO) 3505 Butti Way Carson City NV, 89701. Please retain 1 complete copy for your records.

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**Applicant** \_\_\_\_\_

\*If you are a County applying on behalf of a transit system, please provide names and addresses for both the County and the transit system.

**Physical Address** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Contact Person/Official** \_\_\_\_\_

**Title** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

**Federal Tax ID#** \_\_\_\_\_

**DUNS #** \_\_\_\_\_

**Type of Agency** \_\_\_\_\_ **Private Non-Profit**  
\_\_\_\_\_ **Private For-Profit**  
\_\_\_\_\_ **Governmental Agency**  
\_\_\_\_\_ **Tribal Agency (Sovereign Nation)**  
\_\_\_\_\_ **Other (describe)**

**Type of Service** \_\_\_\_\_ **Senior Center/Disabled Workshop**  
\_\_\_\_\_ **Demand-Response (Dial-a-Ride, Door to Door)**  
\_\_\_\_\_ **Deviated Fixed-Route**  
\_\_\_\_\_ **Fixed route**  
\_\_\_\_\_ **Other (describe)**

**Mission/Vision Statement:** \_\_\_\_\_  
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## PROJECT JUSTIFICATION

**1. Please describe in detail your transportation program and how this funding will enhance the services offered.**

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**2. Describe the transportation services currently being provided by your organization and/or others in the same region.**

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**3. Provide a detailed description of your organization. Provide information regarding how your organization came to be. Include the future vision for the organization.**

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**4. Describe any (proposed or currently in use) connectivity/coordination efforts with surrounding area transit providers.**

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The following information is required by the Federal Transit Administration. The economic/racial/ethnic composition of your governing body will not be considered as a factor in awarding this grant.

Our governing body (board of director, city council, etc.) is made up predominantly of minority and/or low income individuals.

Yes No

**SERVICE**

**Clientele Served**     
  Elderly (60+ years old)                     
  General Public (18-59 years old)  
 Persons with disabilities                     
  Children (under age 5)  
 Low Income/Welfare                     
  Children (5-7 years old)  
 Minorities                     
  Children (8-17 years old)  
 Commuters

**Location (check all that apply)**  
 Non-Urban Area (Rural under 50,000 population)  
 Small Urban Area (50,000 - 200,000 population)  
 Douglas County  
 Lyon County  
 Carson City

**Areas Served** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**DESCRIPTION OF VEHICLE(S)/BUS(ES) REQUESTED\***

<b>Quantity</b>	<b>VEHICLE DESCRIPTION (including size, capacity, wheelchair positions, etc.)</b>	<b>Estimated Cost</b>
<b>TOTAL QUANTITY</b>	<b>TOTAL ESTIMATED COST</b>	

\*CAMPO staff will procure requested vehicle(s). Actual price will be based on bids received

Agency Name \_\_\_\_\_ Vehicle Inventory - FFY 2017

Vehicle Identification Number	License #	Condition Poor/Good/ Excellent	Year & Vehicle Mode (BU=Bus, CU=Cutaway, VN=Van, MV=Minivan)	Vehicle Length	Seating Capacity	ADA Accessible Vehicle Yes/No ; # of ADA Seats	Mileage	Funding Source*	Vehicle to be Replaced Yes/No	Lein-holder-- see title

\*Funding Source - Please provide the largest funding source used to purchase the vehicle. Please be specific. (i.e. FTA, other federal funds, private or other--describe).

## FTA BUDGET (1 of 2) ALL APPLICANTS 5310 or 5339

<b><u>CAPITALIZED OPERATING EXPENSES 5310</u></b>	
<b>Contract Operator Expenses</b>	\$ _____
(Defined as acquisition of transportation services under a contract, lease, or other arrangement)	
<b>(A) TOTAL CAPITAL EXPENSES</b> \$ _____	

<b><u>OPERATING EXPENSES 5310</u></b>	
<b>Operator Expenses</b>	\$ _____
(Defined as the incremental cost of providing same day service or door-to-door service)	
<b>Fuel/Oil Fluids</b>	\$ _____
<b>Driver/Dispatcher Salaries</b>	\$ _____
<b>Other (Specify)</b>	\$ _____
<b>(B) TOTAL OPERATING EXPENSES</b> \$ _____	

<b><u>CAPITAL PURCHASES (5339 or 5310)</u></b>	
<b>Buses/Van/Paratransit Vehicle</b>	\$ _____
<b>Radios/Comm Equipment</b>	\$ _____
<b>Bus Facilities (Shelters, Signs)</b>	\$ _____
<b>Vehicle Overhaul/Rehab/etc.</b>	\$ _____
<b>Other (Specify)</b>	\$ _____
<b>(C) TOTAL CAPITAL PURCHASES</b> \$ _____	

<b><u>REVENUE</u></b>	
(MUST INCLUDE PROJECTED FAREBOX REVENUE)	
Source	Dollar Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
<b>(D) TOTAL REVENUE</b> \$ _____	

<b><u>MATCH</u></b>	
Source	Dollar Amount
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
<b>(E) TOTAL MATCH</b> \$ _____	

**5310 Enhanced Mobility for Seniors & Individuals with Disabilities**

This program provides funds to 1) serve the special needs of transit-dependent populations beyond traditional public transportat service, where public transportation is insufficient, inappropriate, or unavailable; 2) projects that exceed the requirements of the Americans with Disabilities Act (ADA); 3) projects that improve access to fixed route service and decreased reliance on complementary paratransit; and 4) project that are alternatives to public transportation.

**5339 Bus and Bus Facilities**

This program provides funding to replace, rehabilitate, and purchase buses and related equipment as well as construct bus-related facilities. This includes the acquisition of buses for fleet and service expansion, bus maintenance and administrative facilities, transfer facilities, bus malls, transport centers, intermodal terminals, park-and-ride stations, passenger shelters and bus stop signs, accessory and miscellaneous equipment such as mobile radio units, fare boxes, computers, and shop and garage equipment.

**5310 / 5339 BUDGET (2 of 2)**

<b>TOTAL CAPITALIZED OPERATING EXPENSES</b>	_____	<b>(A) On Budget Page 1 of 2</b>
<b>TOTAL FAREBOX REVENUE</b>	_____	<b>(D) On Budget Page 1 of 2</b>
<b>NET OPERATING EXPENSES</b>	_____	<b>Total expenses minus total revenue</b>
<b>FTA CAPITALIZED OPERATING AMOUNT</b>	_____	<b>80% of net expenses</b>
<b>SUB-RECIPIENT CAPITALIZED OPERATING MATCH</b>	_____	<b>20% of net expenses</b>

<b>TOTAL OPERATING EXPENSES</b>	_____	<b>(B) On Budget Page 1 of 2</b>
<b>TOTAL FAREBOX REVENUE</b>	_____	<b>(D) On Budget Page 1 of 2</b>
<b>NET OPERATING EXPENSES</b>	_____	<b>Total expenses minus total revenue</b>
<b>FTA OPERATING AMOUNT</b>	_____	<b>50% of net expenses</b>
<b>SUB-RECIPIENT OPERATING AMOUNT</b>	_____	<b>50% of net expenses</b>

<b>TOTAL CAPITAL PURCHASES</b>	_____	<b>(C) On Budget Page 1 of 2</b>
<b>FTA OPERATING AMOUNT</b>	_____	<b>80% of total</b>
<b>SUB-RECIPIENT OPERATING AMOUNT</b>	_____	<b>20% of total</b>

**PLEASE LIST FUNDING BELOW IN WHOLE DOLLARS**

**TOTAL FTA FUNDS REQUESTED**

(FTA CAPITALIZED OPERATING, OPERATING, & CAPITAL PURCHASES FROM ABOVE)

**SUBRECIPIENT MATCH**

(SUBRECIPIENT CAPITALIZED OPERATING, OPERATING, & CAPITAL PURCHASES FROM ABOVE)

AUTHORIZING RESOLUTION

APPLICANT Carson City Regional Transportation Commission (RTC)  
(Printed Name of Transportation Provider)

AUTHORIZED REPRESENTATIVE Brad Bonkowski  
(Printed name of Authorized Representative)

Resolution authorizing the filing of an application for a Federal Transit Administration / Carson Area Metropolitan Planning Organization grant under 49 USC Chapter 53.

WHEREAS, the U S Department of Transportation (USDOT) is authorized to make grants to metropolitan planning organizations through the Federal Transit Administration (FTA) to support transportation projects under 49 USC Chapter 53; and

WHEREAS, the Carson Area Metropolitan Planning Organization (CAMPO) has been designated to administer certain transportation projects under 49 USC Chapter 53; and

WHEREAS, the contract for financial assistance will impose certain obligations upon the APPLICANT, including provisions of the local share of project costs;

NOW, THEREFORE, BE IT RESOLVED BY THE APPLICANT:

That the above named representative is authorized to execute and file an application with CAMPO on behalf of our agency to aid in the financing of capital, and / or operating costs pursuant to 49 USC Chapter 53; and

That the above named representative is authorized to furnish such additional information as CAMPO may require in connection with the application or the project.

The undersigned certifies that the foregoing is a true and correct statement.

**Carson City RTC Chair**

(Printed Title of Authorized Representative)



(Signature of Authorized Representative)

Dated April 12, 2017

**The following pages of the CAMPO Federal Grant Application were removed by CAMPO staff for the convenience of CAMPO Board members:**

**Pages 1 – 44 of Appendix A**

The reserved pages included the FTA fiscal year 2017 Certifications and Assurances Preface and descriptions of individual Categories. Only the signature pages of this portion of the application were included.

**FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES**

**FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES FOR  
FEDERAL TRANSIT ADMINISTRATION ASSISTANCE PROGRAMS**

(Signature pages alternative to providing Certifications and Assurances in TrAMS)

Name of Applicant: \_\_\_\_\_

The Applicant agrees to comply with applicable provisions of (Categories 01 – 23. \_\_\_\_\_

**OR**

The Applicant agrees to comply with applicable provisions of the Categories it has selected:

<u>Category</u>	<u>Description</u>	
01.	Required Certifications and Assurances for Each Applicant.	_____
02.	Lobbying.	_____
03.	Procurement and Procurement Systems.	_____
04.	Private Sector Protections.	_____
05.	Rolling Stock Reviews and Bus Testing.	_____
06.	Demand Responsive Service.	_____
07.	Intelligent Transportation Systems.	_____
08.	Interest and Financing Costs and Acquisition of Capital Assets by Lease.	_____
09.	Transit Asset Management Plan, Public Transportation Safety Program, and State Safety Oversight Requirements.	_____
10.	Alcohol and Controlled Substances Testing.	_____
11.	Fixed Guideway Capital Investment Grants Program (New Starts, Small Starts, and Core Capacity Improvement).	_____
12.	State of Good Repair Program.	_____
13.	Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs.	_____
14.	Urbanized Area Formula Grants Programs and Passenger Ferry Grant Program.	_____
15.	Enhanced Mobility of Seniors and Individuals with Disabilities Programs.	_____
16.	Rural Areas and Appalachian Development Programs.	_____
17.	Tribal Transit Programs (Public Transportation on Indian Reservations Programs).	_____
18.	State Safety Oversight Grant Program.	_____
19.	Public Transportation Emergency Relief Program.	_____
20.	Expedited Project Delivery Pilot Program.	_____
21.	Infrastructure Finance Programs.	_____
22.	Paul S. Sarbanes Transit in Parks Program.	_____
23.	Construction Hiring Preferences.	_____

# FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES

## FEDERAL FISCAL YEAR 2017 FTA CERTIFICATIONS AND ASSURANCES SIGNATURE PAGE

(Required of all Applicants for federal assistance to be awarded by FTA and all FTA Grantees with an active Capital or Formula Award)

### AFFIRMATION OF APPLICANT

Name of the Applicant: \_\_\_\_\_

Name and Relationship of the Authorized Representative: \_\_\_\_\_

BY SIGNING BELOW, on behalf of the Applicant, I declare that it has duly authorized me to make these Certifications and Assurances and bind its compliance. Thus, it agrees to comply with all federal laws, regulations, and requirements, follow applicable federal guidance, and comply with the Certifications and Assurances as indicated on the foregoing page applicable to each application its Authorized Representative makes to the Federal Transit Administration (FTA) in federal fiscal year 2017, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent it.

FTA intends that the Certifications and Assurances the Applicant selects on the other side of this document should apply to each Award for which it now seeks, or may later seek federal assistance to be awarded during federal fiscal year 2017.

The Applicant affirms the truthfulness and accuracy of the Certifications and Assurances it has selected in the statements submitted with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. § 3801 *et seq.*, and implementing U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31, apply to any certification, assurance or submission made to FTA. The criminal provisions of 18 U.S.C. § 1001 apply to any certification, assurance, or submission made in connection with a federal public transportation program authorized by 49 U.S.C. chapter 53 or any other statute

In signing this document, I declare under penalties of perjury that the foregoing Certifications and Assurances, and any other statements made by me on behalf of the Applicant are true and accurate.

Signature  Date: April 12, 2017


Name BRAD BONKOWSKI, CHAIR  
Authorized Representative of Applicant

### AFFIRMATION OF APPLICANT'S ATTORNEY

For (Name of Applicant): Carson City RTC

As the undersigned Attorney for the above named Applicant, I hereby affirm to the Applicant that it has authority under state, local, or tribal government law, as applicable, to make and comply with the Certifications and Assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the Certifications and Assurances have been legally made and constitute legal and binding obligations on it.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these Certifications and Assurances, or of the performance of its FTA assisted Award.

Signature  Date: April, 12, 2017

Name S. Daniel Yu  
Attorney for Applicant

*Each Applicant for federal assistance to be awarded by FTA and each FTA Recipient with an active Capital or Formula Project or Award must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its electronic signature in lieu of the Attorney's signature within FTA's electronic award and management system, provided the Applicant has on file and uploaded to FTA's electronic award and management system this hard-copy Affirmation, signed by the attorney and dated this federal fiscal year.*

- 225-0000-381.01-03
- Account miscellane
- Budget miscellane
- Transactions
- Detail by date
- Detail by code
- Detail by year & p
- Pending by date
- Pending by code
- Pending by year
- Procurement car

**Account information**

Q GENERAL FUND / CC FTA 5907 OPS MATCH  
 Fiscal year: 2017 Cr  
 Estimated revenue: 400,000.00  
 Total receipts: 400,000.00  
 Q Unrealized revenue: .00

**Project Data**

Project Entry Optional

**Account Balance by Period**

Period/Month	Actuals	Cumulative Totals
Q 01 July	.00	.00
Q 02 August	400,000.00	400,000.00
Q 03 September	.00	400,000.00
Q 04 October	.00	400,000.00

**Payment information**

Vendor (\* indicates pending) Total

- Print
- Cancel
- Exit
- Previous acc...
- Next account
- 2016
- 2018
- Account activi...
- Pending trans...
- Subset transa...
- Budget alloca...

Type	App	Period	Date	Project	Transaction Amount	Budget Amount	Group
AJ	GM	02	9/14/2016		400000.00	.00	00887

End of records reached

Commercial Lines - (206) 892-9200  
Wells Fargo Insurance Services USA, Inc. - CA Lic#: 0  
999 Third Ave, Suite 4100  
Seattle, WA 98104

JAC Bus of Carson City  
3303 Butti Way, Bldg. 1  
Carson City, NV 89701

\*\*\*\*\*

Would you like to receive this certificate via email or fax?

We offer expedited delivery to better serve our mutual clients.

To update the delivery method for revisions to this certificate and for next year's copy, please enter this information in your browser:

<https://www.cybersure.com/cybersure/forms/iyoc/cdmu.aspx>

When prompted, enter this information for security purposes:

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Cert ID: 11238875  
Passcode: 4C27F51C

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Thank you for helping us provide certificates to you more quickly.

\*\*\*\*\*





# CERTIFICATE OF LIABILITY INSURANCE

262761

DATE (MM/DD/YYYY)  
12/28/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


<b>PRODUCER</b> Commercial Lines - (206) 892-9200 Wells Fargo Insurance Services USA, Inc. - CA Lic#: 0D08408 999 Third Ave, Suite 4100 Seattle, WA 98104	<b>CONTACT NAME:</b> _____	
	<b>PHONE (A/C, No, Ext):</b> _____	<b>FAX (A/C, No):</b> _____
<b>E-MAIL ADDRESS:</b> _____		
<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
<b>INSURER A:</b> Hanover Insurance Company	22292	
<b>INSURER B:</b> _____		
<b>INSURER C:</b> _____		
<b>INSURER D:</b> _____		
<b>INSURER E:</b> _____		
<b>INSURER F:</b> _____		

**COVERAGES**                      **CERTIFICATE NUMBER:** 11238875                      **REVISION NUMBER:** See below

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: _____			ZH2-8978723-06	01/01/2017	01/01/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N <input type="checkbox"/> N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 JAC Bus of Carson City is Additional Insured under General Liability in accordance with the terms and conditions of the policy when required by written contract regarding their interest in the operations of the Named Insured.

<b>CERTIFICATE HOLDER</b> JAC Bus of Carson City 3303 Butti Way, Bldg. 1 Carson City, NV 89701	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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ACORD 25 (2016/03)



\*CYB01A2B/003564/02/02/0/0/0\*



## NOTICE OF MEETING OF THE CARSON CITY REGIONAL TRANSPORTATION COMMISSION (RTC)

**Day:** Wednesday  
**Date:** April 12, 2017  
**Time:** Begins immediately after the adjournment of the Carson Area Metropolitan Planning Organization meeting that begins at 4:30 p.m.  
**Location:** Community Center, Sierra Room, 851 East William Street, Carson City, Nevada

### AGENDA

**AGENDA NOTES:** The Regional Transportation Commission is pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Regional Transportation Commission staff in writing at 3505 Butti Way, Carson City, Nevada, 89701, or [ppittenger@carson.org](mailto:ppittenger@carson.org), or call Patrick Pittenger at (775) 887-2355 as soon as possible (requests are required prior to 12:00 p.m. on April 10, 2017).

For more information or for copies of the supporting material regarding any of the items listed on the agenda, please contact Patrick Pittenger, Transportation Manager, at (775) 887-2355. Additionally, the agenda with all supporting material is posted under "Agendas & Minutes" at [www.carson.org/agendas](http://www.carson.org/agendas), or is available upon request at 3505 Butti Way, Carson City, Nevada, 89701.

**AGENDA MANAGEMENT NOTICE:** The Chair may take items on the agenda out of order; combine two or more agenda items for consideration; and/or remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

**DISCLOSURES:** Any member of the RTC Board may inform the Chair of his or her intent to make a disclosure of a conflict of interest on any item appearing on the agenda or on any matter relating to the RTC's official business. Such disclosures may also be made at such time the specific agenda item is introduced.

### 1. ROLL CALL AND DETERMINATION OF A QUORUM

## 2. PUBLIC COMMENT:

Members of the public who wish to address the RTC may approach the podium and speak on any matter relevant to or within the authority of RTC. Comments are limited to three minutes per person per topic. If your item requires extended discussion, please request the Chair to calendar the matter for a future RTC meeting. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an Agenda as an item upon which action may be taken.

## 3. APPROVAL OF MINUTES:

**3.A (For Possible Action)** March 8, 2017 Draft Minutes

## 4. PUBLIC MEETING ITEM(S):

**4.A (For Possible Action)** To adopt a Resolution authorizing the filing of an application for a Federal Transit Administration (FTA) grant under 49 U.S.C. Chapter 53, and to authorize the RTC Chair to sign the FTA Fiscal Year 2017 Certifications and Assurances section of the RTC application for 5310 funds.

**Staff Summary:** Staff has prepared an application for the fiscal year 2017 partial apportionment of FTA Section 5310 funds, the disbursement of which is determined by the Carson Area Metropolitan Planning Organization. Any funds received from the 2017 5310 apportionment will be used to fund costs associated with operating the Jump Around Carson (JAC) transit system.

**4.B (For Possible Action)** To adopt a Resolution authorizing the filing of an application for a Federal Transit Administration (FTA) grant under 49 U.S.C. Chapter 53, and to authorize the RTC Chair to sign the FTA Fiscal Year 2017 Certifications and Assurances section of the RTC application for 5339 funds.

**Staff Summary:** Staff has prepared applications for the fiscal year 2017 partial apportionment of FTA Section 5339 funds, the disbursement of which is determined by the Carson Area Metropolitan Planning Organization. Any funds received from the 2017 5339 apportionment will be used to fund capital costs associated with updating the JAC vehicle fleet.

**4.C (For Possible Action)** To adopt a resolution requesting the Carson City Board of Supervisors to issue Highway Revenue Refunding bonds to achieve interest rate savings; providing other details in connection therewith; and providing the effective date thereof.

**Staff Summary:** Staff is asking the Commission to approve the Resolution known as the "2017 Highway Revenue Refunding Bonds". Because interest rates have declined since the issuance of the 2008 Bonds, and pursuant to Chapters 373 and 350, of Nevada Revised Statutes, the Board is authorized, on behalf and in the name of the City to issue revenue refunding bonds to refund all or a portion of the 2008 Bonds to achieve interest rate savings.

**4.D (For Possible Action)** To approve a cooperative agreement P191-17-063, between the Carson City RTC and the Nevada Department of Transportation (NDOT) for the Silver Sage Drive reconstruction project, and to authorize the Transportation Manager to sign future amendments to this agreement regarding time extensions or a change in the value of funding up to 20% of the initial funding amount.

**Staff Summary:** In December of 2016, the CAMPO Board formally agreed to allocate the 2018 annual Surface Transportation Block Grant (STBG) funding to Carson City. The improvement cost for Silver Sage Drive is approximately \$748,000 and is programmed with STBG funding that requires a 5% local match. The improvements are between Snyder Avenue and Clearview Drive.

**5. INTERNAL COMMUNICATIONS AND ADMINISTRATIVE MATTERS (Non-Action Items):**

- 5.A Street Operations Activity Report
- 5.B Project Status Report
- 5.C Future Agenda Items

**6. BOARD COMMENTS (Information only):**

Status reports and comments from the members of the RTC Board.

**7. PUBLIC COMMENT:**

Members of the public who wish to address the RTC Board may approach the podium and speak on any matter relevant to or within the authority of RTC. Comments are limited to three minutes per person per topic. If your item requires extended discussion, please request the Chair to calendar the matter for a future RTC meeting. No action may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an Agenda as an item upon which action may be taken.

**8. ADJOURNMENT: For Possible Action**

**The next meeting is tentatively scheduled for 4:30 p.m., Wednesday, May 10, 2017, at the Sierra Room - Community Center, 851 East William Street.**

This agenda has been posted at the following locations on Thursday, April 6, 2017, before 5:00 p.m.:

- City Hall, 201 North Carson Street
- Carson City Library, 900 North Roop Street
- Community Center, Sierra Room, 851 East William Street
- Carson City Public Works, 3505 Butti Way
- Carson City Planning Division, 108 E. Proctor Street
- Douglas County Executive Offices, 1594 Esmeralda Avenue, Minden
- Lyon County Manager's Office, 27 South Main Street, Yerington
- Nevada Department of Transportation, 1263 S. Stewart Street, Carson City
- City Website: [www.carson.org/agendas](http://www.carson.org/agendas)
- State Website: <https://notice.nv.gov>



April 26, 2017

Patrick Pittenger, AICP, PTP  
Transportation Manager  
Carson City Public Works  
3505 Butti Way  
Carson City, NV 89701

RE: Letter of Support for Carson City Regional Transportation Commission's application for Federal Transit Administration grant funds.

Dear Mr. Pittenger:

This letter is to inform you that Northern Nevada Veterans Resource Center fully supports additional Federal funding for the Carson City Regional Transportation Commission for the provision of transportation in the Carson City area.

It is understood that any funds awarded as a result of submittal of grant applications will be used to help continue service at current levels and to improve the vehicle fleet for Jump Around Carson, Carson City's public transit system. The consistent support provided to local and regional partners to plan and implement transportation options for the area's residents, particularly those who are most in need, including veterans, the elderly and individuals with disabilities has been invaluable to this community.

As an agency concerned with making veterans and individuals with disabilities a priority, we are pleased to coordinate with, and provide support to the Carson City Regional Transportation Commission in order to plan and implement service options for those who are in need.

Sincerely,

Natalie Stering

A handwritten signature in blue ink, appearing to read 'Natalie Stering', with a stylized flourish at the end.

**Natalie Stering**  
**Site Director - Carson City**  
**Veterans Resource Centers of America**  
106 E. Adams St., Ste. 203  
Carson City, NV 89706  
Office: (775) 360.2155  
Fax: (775) 360.2157

***"Serving those who served."***