

# Vehicle Application

## Section 1. Instructions

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**IMPORTANT – PLEASE READ BEFORE STARTING APPLICATION.** This application is intended for one of the following project types:

1. Acquire conventionally-fueled revenue rolling stock (hereinafter referred to simply as “conventional rolling stock”), to **replace** existing rolling stock. “Rolling stock” describes equipment that is used to transport passengers (e.g., buses, vans, cars, gondolas, etc). Support vehicles, such as staff vehicles, are classified as “Other Capital” and must be requested in an “Other Capital” application.
2. Acquire **alternatively-fueled (hereinafter referred to simply as “alt fuel”) rolling stock** to replace conventionally-fueled rolling stock. Alt fuel refers to rolling stock powered by compressed natural gas (CNG), electric battery or propane.
3. Acquire conventionally-fueled rolling stock for fleet and/or service **expansion**.

You will need to fill out a separate application for each category listed above. For instance, if you wish to apply for a replacement vehicle and an expansion vehicle, you must complete two separate applications. If you plan to submit requests for multiple conventional rolling stock replacements, you may bundle those requests into one single replacement application.

### Application Type

Please select the application type. [Drop down list, only one item to be selected]

- Replace conventional rolling stock
- Replace conventional rolling stock with alt fuel rolling stock (aka the Settlement program)
- Expand existing fleet

### Agency Profile and Capital Inventory Requirements

Before applying, applicants are required to update their Agency Profile and Capital Inventory in COTRAMS. In particular, FTA Title VI requires agencies to provide passenger information, including demographic information for their service area. For returning applicants, your inventory should already be up-to-date. New applicants and those whose inventory is not updated this year will need to provide updated inventory information in order to submit their application. You will not be allowed to submit an application without this information being current. Many questions in the application will contain answers pulled directly from the Agency Profile and Capital Inventory sections. It is important to verify all of your Agency Profile and Capital Inventory information so that the application is as accurate as possible.

My organization's COTRAMS profile has been updated:

My organization's Capital Inventory in COTRAMS has been updated:

## Section 2. Applicant General Information

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**The following fields in the Agency Information section are auto-populated from the Agency Information tab. Please verify the information below. If any of the information is not correct, then you must exit the application and go to the Agency Information tab of COTRAMS in order to update or add information.**

Organization Legal Name Defined by DUNS: (Pre-pop)

Agency DUNS Number

What is your SAM expiration date?

Agency Description:

Agency Fiscal Year End Date

Your Organization's Cognizant Agency:

Non-Profit or EIN ID:

Spent more than \$750,000 in Federal funds in the last fiscal year:

## Section 3. Applicant Eligibility

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Please describe the type of entity (private for profit, private nonprofit, public, etc) your agency is.

Please describe the type of transit service your agency operates in general (e.g., demand response, fixed-route, etc) and also any transit service you plan to operate for this particular project (demand response, fixed-route, etc)

### ***FTA-5311 Eligibility***

***FTA 5311 funding is available for general public transportation services in non-urban (less than 50,000 population) regions of Colorado.***

Does your agency provide transit service that is open and promoted to the general public in rural areas? (Yes or No) If yes, please describe

Does your agency provide transit service within a rural area or to or from a rural area? (Yes or No ) If yes, please describe

Does your agency provide meal delivery or other incidental (non-passenger) services (such as cargo delivery)? **(Yes or No ) If yes:** Do these services conflict with the provision of transit service or result in a reduction of service to transit passengers? Please describe.

### ***FTA-5310 Eligibility***

***The FTA Section 5310 Program is designed to provide capital and operating funding assistance for public transportation services designed to meet the needs of seniors and persons with disabilities. Applicants must be one of the following to be eligible for “traditional” 5310 funds:***

- ***A private non-profit organization directly providing transportation services;***
- ***A local public body approved by the State (CDOT) to coordinate services for seniors and individuals with disabilities; or***
- ***A local public body certifying that it serves a region where no private non-profit organization is available.***

***Applicants must be one of the following to be eligible for “Non Traditional” Other 5310 funds:***

- ***A private non profit organization***
- ***A state or local governmental authority***
- ***An operator of public transportation that receives a Section 5310 award indirectly through a recipient.***

Does your agency provide or plan to provide transit service for seniors and individuals with disabilities? (Yes or No) If yes, please describe.

Is your agency (**drop down list:** 1) A private nonprofit organization, 2) A state or Local governmental authority, or Tribal government 3) A Private transportation operator who provides shared-ride surface transportation service on a regular basis, 4) none of the above ?

If your agency is a state or local governmental authority, is it: 1) approved by the State (CDOT) to coordinate services for seniors and individuals with disabilities 2) certifying that there are no nonprofit organizations readily available, able and willing in the area to provide the service 3) none of the above, Please describe if 3 is selected.

Is the transit service your agency provides included in a locally developed, Coordinated Public Transit Human Services Transportation Plan (Coordinated Plan). If yes, please describe (Plan Name, Page #, etc)

Does your agency provide meal delivery or other incidental (non-passenger) services (such as cargo delivery) that conflict with the provision of transit service or result in a reduction of service to transit passengers? ( Yes or No) If yes, please describe.

### ***FTA-5339 Eligibility***

***The FTA Section 5339 program offers capital funding to public transportation operators through a variety of sub-programs. CDOT administers Section 5339 capital discretionary***

*funding provided to the states. Eligible subrecipients of Section 5339 include public agencies or private nonprofit organizations engaged in public transportation, including those providing services open to a segment of the general public, as defined by age, disability, or low income.*

Does your agency provide public transportation, including services open to a segment of the general public, as defined by age, disability, or low income? (Yes or No) If yes, please describe.

***FASTER State Funds Funds Eligibility***

*Eligible Recipients of FASTER State Funds Funds include local public and private nonprofit entities and tribal governments that offer either public transportation or Open Door Specialized Transportation*

Does your agency provide Closed Door specialized transportation service that is only open to your clients or those of another organization? (Yes or No) If yes, please describe.

## Section 4. Project Information

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### Contact Information

Please enter information below for the **Local Agency Project Manager for this request-- someone who could be called for additional information, if needed.**

Name

Title

Email

Work Phone Number

Cell Phone Number

Please enter information below for an **Alternative Local Agency Project Manager.**

Name

Title

Email

Work Phone Number

Cell Phone Number

## Project Details

Please answer the following questions about the project for which you are seeking funding.

Project Title [Limited to 70 characters] (For example, “City of Mapleville bus replacements and expansion buses 2019.”)

### Project Description

Help text: Provide a brief project description. Please indicate your fleet’s top priorities for funding, given that available grant funds may be limited due to demand. Note: Details on the **merits** of this project request should be provided in the Section 5 Project Criteria portion of this application, not here.

Agency Service Area (Select all counties that apply.)

Are any of the requested vehicles being proposed to be used by a lessee or private operator under contract? (Yes or No) If yes, please identify the proposed lessee/operator and contractual arrangement.

## Vehicle Purchase Details

Using the table below, provide details about each vehicle you are requesting to purchase. This means that even if you are requesting more than one identical vehicle, they must be entered individually. For vehicle type, please indicate van, minivan, body on chassis, coach, etc. For Seating Capacity, please indicate both ambulatory seats and wheelchair positions (e.g., “14/2”). For “How did you arrive at a purchase price?”, indicate whether, for example, it’s from a CDOT price agreement, a piggyback, past experience, vendor estimate, etc. For fuel type, indicate gas, diesel, CNG, propane, hybrid or electric.

If you are requesting to purchase a cutaway bus, a full size ADA van, or an ADA minivan, CDOT encourages you to purchase the vehicle using the price agreement negotiated by CDOT. Refer to CDOT’s new price agreements [[hyperlink “price agreements”](#)] for assistance in estimating the purchase cost of the vehicle. If you intend to purchase a vehicle from the CDOT price agreement, identify each vehicle and its options using the spreadsheet found [there\[hyperlink to the spreadsheet\]](#), and upload the spreadsheet for each vehicle to the Attachments for this application.

+ New Application Detail

Action	Vehicle Type	Approximate Size (In Feet)	Seating Capacity	Estimated Purchase Price	How Did You Arrive at Purchase Price?	ADA Compliant	Fuel Type
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<<<The following materials in Section 4 are for all three application types.>>>

If you are requesting to purchase a cutaway bus, a full size ADA van, or an ADA minivan, and you do not propose to purchase the vehicle(s) using the price agreement negotiated by CDOT, please provide a detailed justification for such.

**CDOT only provides grants to purchase vehicles that meet minimum ADA requirements, due to limited funding and its commitment to accessibility.**

Only those transit vehicle manufacturers listed on FTA's eligible TVMs list (\*[hyperlink TVMs list](#)), or that have submitted a goal methodology to FTA that has been approved, or that has not been disapproved, at the time of solicitation are eligible to bid.

[[hyperlink TVM website: https://www.transit.dot.gov/regulations-and-guidance/civil-rights-ada/eligible-transit-vehicle-manufacturers](https://www.transit.dot.gov/regulations-and-guidance/civil-rights-ada/eligible-transit-vehicle-manufacturers)]

**If you select a vendor(s) for another type of vehicle outside the price agreement or from a piggyback arrangement, then you will need to provide the basis for your cost estimates.**

## Section 5. Project Criteria

### <<Questions for Application Type “Replace Conventional Rolling Stock”>>

CDOT will evaluate your vehicle replacement project based on age/mileage and extenuating circumstances (accident, maintenance issues, etc.) of the vehicle being replaced.

Using the table below, choose the vehicle(s) from your capital inventory which you intend to replace. Using the select function, COTRAMS will auto-populate this information. If you need to update the information about a vehicle to be replaced, exit this application and go to the Capital Inventory section in COTRAMS.

[Table 5-1]

Capital Inventory - Vehicles							
Model Year	Manufacturer	Model	VIN	Fleet ID	Vehicle Condition	Vehicle In Use	Search: <input type="text"/>
<input type="checkbox"/>						false	
<input type="checkbox"/>						false	
<input type="checkbox"/>						false	

Besides age and/or mileage, what other reasons, if any, are there for replacing the selected vehicle(s) above? This is where you could list the merits of the request, special situations, etc.

For every vehicle you are selecting, it was assumed that the vehicles will be retired, not kept in the fleet; if you are not proposing to retire a vehicle, please explain the circumstances.

### Project Implementation Plan

Describe the extent to which the project is ready to implement within a reasonable time period. Please indicate the project start date and end date, including major milestones.

### << Questions for Application Type “Replace conventional rolling stock with alt fuel rolling stock” >>

CDOT will evaluate your vehicle replacement project for alt fuel (Settlement) funding based on the age/mileage and extenuating circumstances (accident, maintenance issues, etc.) of the vehicle being replaced, but also based on your agency’s long-term alternative fuel vehicle plan, your methodology for implementing that plan, and your technical capability and preparedness for implementation.

In the following table, provide information about the conventionally fueled vehicles you propose to replace with alt fuel vehicles. If you need to update the information about a vehicle to be replaced, exit this application and go to the Capital Inventory section in COTRAMS.

[Table 5-2]

Model Year	Manufacturer	Model	VIN	Fleet ID	Vehicle Condition	Vehicle In Use
						false
						false
						false

Agencies seeking settlement funding for alternative fuel replacement of diesel buses must have a comprehensive plan to implement that agency’s long-term and short-term goals, demonstrating a thorough understanding and consideration of the effects and challenges presented in using alternative fuel vehicles within your fleet and services. Please describe the following aspects of your agency’s plans and include in your application any relevant supporting documents or resources:

1. Describe the scope of your agency’s long-term alternative fuel vehicle plan as it relates to this specific funding request. Include in the description of the total number of alt-fuel vehicles that will eventually exist in your fleet, their fuel types, any facility, infrastructure and charging/fueling equipment that is required, and the timeline and/or phases in which this overall plan is expected to be implemented.

2. Describe your agency's operational considerations, including anticipated effects, risks and/or changes required to service routes or schedules, vehicle maintenance and fueling, and training by using alternative fuel vehicles.
3. Describe your agency's plan for power delivery, including the scope and costs of needed facility modifications, negotiations with your utility provider and the extent to which they are prepared, capable, and willing to deliver the needed energy/fuel-type for your fleet, and how you will mitigate demand charges if applicable.
4. Describe your agency's financial plan to implement its alt-fuel goals including detailed overall implementation costs and considerations for how the expected long-term impacts on operational and capital budgets will be handled.
5. Describe the specific related charging equipment required for this project and its cost..

### <<Questions for Application Type "Expand Existing Fleet">>

Responses to these questions will be evaluated in part based on the extent to which you can provide evidence or supporting documentation. You may provide any documentation in the Attachments section below.

#### **Demonstration of Need**

Describe how your fleet expansion request will address an unmet need, improve the safety and operation of the transit system, improve the connectivity of the transit system, or other reason.

#### **Business Case**

To what extent have you identified additional costs associated with the expanded fleet (e.g., operating and maintenance costs)? Please discuss anticipated costs, revenues, and long-term sustainability.

#### **Demonstration of Benefits**

Describe how the proposed project will improve the condition of the transit system, improve the reliability of transit service for its riders, and/or enhance access and mobility within the service area. (For instance, will more hours of services will be provided ? will it expand services to a larger geographic area ? how many more trips will be provided ?)

#### **Project Implementation Plan**

Describe the extent to which the project is ready to implement within a reasonable time period. Please indicate the project start date and end date.



## Section 6. Budget and Local Match

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### <<Questions for Application Type “Replace Conventional Revenue Rolling Stock”>>

Do you have any funding source preferences for your vehicle replacement requests? [yes, /no, leave to the discretion of CDOT; required.] If yes, please explain preferences.

#### Funding Request Breakdown for Conventional Fuel Vehicle(s)

Below is a funding request breakdown for each conventional fuel replacement vehicle you requested in Section 4. Federal and State funds may be used to fund up to 80 percent of project costs. All awards require a minimum local match of 20 percent. The match must be in cash, not in-kind donation.

[Table 6-1]

Action	* Vehicle Description	* Federal/State Share (Up to 80%)	* Local Share (Min of 20%)	Total Cost
 	test	\$80.00	\$20.00	\$100.00

[+ New](#)

### <<<Questions for Application Type “Replace conventional rolling stock with alt fuel rolling stock”

The state of Colorado is making funds available resulting from a diesel emissions settlement for the purchase of alternative fuel vehicles. An alternative fuel vehicle is a vehicle that runs on a fuel other than traditional petroleum fuels (gasoline or diesel); popular types include electric, propane and CNG vehicles. These “Settlement” funds may be used to pay 110% of the incremental cost of an alternative fuel vehicle and 100% of the cost of charging related equipment and installation. For more information about the Settlement program, see the accompanying guidance document (*link/title here--don't have completed yet*).

**The Settlement funds will only pay for the incremental cost of the alt fuel vehicle. If you are requesting federal/state funds for the “base” vehicle:** Do you have any funding source preferences for the vehicle replacement requests? [yes, /no, leave to the discretion of CDOT; required.] If yes, please explain preferences.

#### Funding Request Breakdown for Alternative Fuel Vehicle(s)

**If you are requesting funding for multiple vehicles, provide information about each vehicle individually in the table below. For each alt fueled Settlement vehicle requested, enter the following:**

- **A brief Vehicle Description, including the fuel type and vehicle size (e.g., electric 40 foot bus) of the alt fuel vehicle.**
- **The Alt Fuel Vehicle Cost, based on thorough research on your part, since CDOT has no price agreement covering most alt fuel vehicles.**
- **The estimated cost of an equivalent conventional fuel vehicle, in terms of similarly sized vehicles. This should be the same amount as the corresponding “base” vehicle in the Section 5 table.**
- **The Electric Charging Request is the amount you may request for equipment and costs related to installation of such equipment, not to exceed \$100,000.**

**The final two columns (Vehicle Settlement Share and Total Settlement Request will be calculated for you based on your data in the first four fields.**

**[Table 6-2]**

Vehicle Description	Alt Fuel Vehicle Cost	Equivalent cost of conventional vehicle	Electric charging request	Vehicle Settlement share (auto-calculation )	Total Settlement Request (auto-calculation)
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Settlement funds will pay only for the incremental cost of an alt fueled vehicle, leaving the applicant with responsibility for paying for the “base” (conventional fueled) vehicle share. It is presumed that applicants will be requesting to supplement the Settlement funds with CDOT-administered federal/state funds for the base vehicle; if that is the case, make sure you included the “base” vehicle in the table in Section 5. If you are NOT requesting federal/state funds with which to supplement the Settlement funds, please indicate such here, specifying which vehicle(s).

Award of CDOT-administered federal/state funds is not guaranteed to accompany a Settlement award. If you are seeking to supplement Settlement funds with CDOT-administered Federal/State funds for the “base” vehicle, what would be your plan if you are not successful in obtaining the Federal/State funds? That is, would your agency have sufficient local funds to proceed with an alt fuel purchase, or would you have to decline the award(s)? Please explain.

Conversely, CDOT might not award your agency Settlement funds but might offer funds for a conventional fuel vehicle. If you are not awarded Settlement funds for any of the vehicles listed here, would you accept an award of funds for the base (conventional fueled) vehicle? Please respond by addressing each of the alt fueled vehicles requested.

The Settlement program requires that all alt fueled vehicles replace a specific, identified, conventionally fueled vehicle. That identified vehicle must be scrapped; the vehicle’s frame rails must be cut completely in half and a 3-inch hole cut in the engine block. The identified vehicle must be drivable and must have been registered, operated, and insured in Colorado for the previous two years (to ensure that the program achieves real emission reductions and to prevent abuse). Can you identify such a qualified vehicle for each Settlement vehicle requested and do you agree to comply with this requirement? [Yes/No, required]

**<<Questions for Application Type “Expand Existing Fleet”>>**

**The table below indicates the Federal/State and Local Share amounts for the vehicles you requested in Table 4, based on an 80% Federal/State and 20% Local match ratio.**

[Table 6-3]

New Record
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Vehicle Description	Federal/State Share (Up to 80%)	Local Share (Min of 20%)
	\$	\$

Save
Close

<<< The below local match section applies to all three application types>>>

**Matching Funds Information**

According to data in the table(s) found in Section 6, the total match required for all the vehicles being requested is \$\_\_\_\_\_

Applicants must identify the source(s) of local matching funds, the amount, and the status (i.e., whether such funds are currently available for the project or will need to be secured if the project is selected for funding).

+ New

Action	* Source	* Amount	* Status ⓘ
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\* Source

\* Amount

\* Status

*Local match status.*

Save

Close

### Additional Financial Aid Available

Do you wish to apply for a second grant specifically to cover the majority of your local share for conventional vehicle replacements? This would be a FASTER grant to cover 80% of the local share of an FTA grant. This option is only available at the discretion of CDOT, and is reserved for worthy projects that cannot proceed without additional financial assistance. If you request this type of assistance and receive it, CDOT will work with you at a later time to adjust your local match. [yes/no]

If yes, provide justification for this request:


### Section 7. Attachments

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Please attach any documents that correspond with responses you've included in the preceding sections of this application. These documents include, but are not limited to, Proof of local match, preventive maintenance plans, project implementation plans, etc. Also, if you have any other information or comments you wish to provide, provide them here or in the Attachments.

#### Add Attachments

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 No file chosen Upload document

Action

Document Name

Update Date/Time

## Section 8. Certify and Submit Application

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**I certify that my agency's information is up-to-date under the Agency Information tab in COTRAMS.**

**I certify that my agency's inventory information is up-to-date under the Capital Inventory tab in COTRAMS.**

**I certify that the information I provided on and in connection with this application is true, accurate, and complete.**

**I understand if the requested grant is awarded , my agency will be required to place a lien on the title with CDOT as the lienholder for the useful life of the vehicle asset.**

**I understand if the requested grant is awarded, my agency will adhere to all reporting requirements.**

Certifying Official [text field, required]

Certifying Official \*

Signature

Reset*Sign above*Accept & Save Signature

Before submitting the application, please make sure you have completed all of the required fields and have entered all of the information as accurate as possible. If you need to submit another operating application, please contact DTR for help in releasing another application onto COTRAMS.

**If you do not see a Submit button, it is because you did not answer Yes to the question in the beginning of the application related to completing your Agency Profile and Capital Inventory information. Please go back and update your Agency Profile and then select Yes to the question "My organization's COTRAMS profile has been updated." and " My organization's Capital Inventory in COTRAMS has been updated"**

You will receive an email once your application has been submitted. If you do not receive an email, please contact Tom Mauser at 303-547-5972 or email at [tom.mauser@state.co.us](mailto:tom.mauser@state.co.us).