BROWARD COUNTY

TRANSPORTATION DISADVANTAGED SERVICE PLAN MINOR UPDATE

September 2013

Prepared for
Broward County, Florida
and the
Florida Commission for the Transportation Disadvantaged
by the
Broward Metropolitan Planning Organization
and the
Broward County Community Transportation Coordinator
(Broward County Transportation Department)
LOCAL COORDINATING BOARD FOR TRANSPORTATION DISADVANTAGED SERVICES
Mayor Joy Cooper, Chair
Trade Centre South
100 West Cypress Creek Road, Suite 850
Fort Lauderdale, Florida 33309-2112

BROWARD METROPOLITAN PLANNING ORGANIZATION
Gregory Stuart, Executive Director
Trade Centre South
100 West Cypress Creek Road, Suite 850
Fort Lauderdale, Florida 33309-2112

COMMUNITY TRANSPORTATION COORDINATOR
Broward County Transportation Department/Paratransit Services
Stephen Ullman, Community Transit Officer
1 N. University Dr., Suite 3100-A
Plantation, FL 33324
# TRANSPORTATION DISADVANTAGED SERVICE PLAN

**UPDATE/AMENDMENT TABLE**

X indicates areas that are being updated/amendment

## I. DEVELOPMENT PLAN

<table>
<thead>
<tr>
<th>Section</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Introduction to the Service Area</strong></td>
<td>X</td>
</tr>
<tr>
<td>1. Background of the Transportation Disadvantaged Program</td>
<td></td>
</tr>
<tr>
<td>2. Designation Date/history</td>
<td></td>
</tr>
<tr>
<td>3. Organization Chart</td>
<td>X</td>
</tr>
<tr>
<td>4. Consistency Review of Other Plans</td>
<td></td>
</tr>
<tr>
<td>a. Broward County Comprehensive Plan</td>
<td></td>
</tr>
<tr>
<td>b. Strategic Regional Policy Plan for South Florida</td>
<td></td>
</tr>
<tr>
<td>c. Broward County Transit Development Plan</td>
<td></td>
</tr>
<tr>
<td>d. Commission for the Transportation Disadvantaged 5Yr/20Yr.</td>
<td></td>
</tr>
<tr>
<td>e. Broward Metropolitan Planning Organization</td>
<td></td>
</tr>
<tr>
<td>f. Broward Metropolitan Planning Organization</td>
<td></td>
</tr>
<tr>
<td>Long-Range 2035 Transportation Plan Update</td>
<td></td>
</tr>
<tr>
<td>f. Broward Metropolitan Planning Organization</td>
<td></td>
</tr>
<tr>
<td>Transportation Improvement Program</td>
<td></td>
</tr>
<tr>
<td>5. Local Coordinating Board Certification</td>
<td>X</td>
</tr>
</tbody>
</table>

## B. SERVICE AREA PROFILE AND DEMOGRAPHICS

1. Service Area Description
2. Demographics
   a. Land Use
   b. Population/Composition
   c. Employment

## C. SERVICE ANALYSIS

1. Forecasts of Transportation Disadvantaged Population
2. Needs Assessment X
3. Barriers to Coordination

## D. GOALS, OBJECTIVES, AND STRATEGIES X
TRANSPORTATION DISADVANTAGED SERVICE PLAN
UPDATE/AMENDMENT TABLE

X indicates areas that are being updated/amendment

E. IMPLEMENTATION PLAN

1. 5-Year Transportation Disadvantaged Improvement Program
2. Implementation Schedule

F. MPO PUBLIC INVOLVEMENT PLAN

II. SERVICE PLAN

A. OPERATION ELEMENT

1. Types, Hours, and Days of Service
2. Accessing Services
3. Transportation Operators and Coordination Contractors
4. Public Transit Utilization
5. School Bus Utilization
6. Vehicle Inventory
7. System Safety Program Plan Certification
8. Intercounty Services
9. Natural Disaster/emergency Preparedness
10. Marketing
11. Acceptable Alternatives

III. QUALITY ASSURANCE

A. SERVICE STANDARDS

B. LOCAL GRIEVANCE PROCEDURES/PROCESS

C. EVALUATION PROCESSES

1. CTC Evaluation Process
2. CTC Monitoring Procedures and Coordination Contractors
3. Coordination Contract Evaluation Criteria
4. Planning Agency Evaluation Process

IV. COST/REVENUE ALLOCATION AND RATE STRUCTURE JUSTIFICATION
### TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>SECTION</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTRODUCTION</td>
<td>1</td>
</tr>
<tr>
<td>I. DEVELOPMENT PLAN</td>
<td>4</td>
</tr>
<tr>
<td>Organizational Chart</td>
<td>5</td>
</tr>
<tr>
<td>Local Coordinating Board Certification</td>
<td>6</td>
</tr>
<tr>
<td>Service Analysis</td>
<td>7</td>
</tr>
<tr>
<td>Goals, Objectives and Strategies</td>
<td>9</td>
</tr>
<tr>
<td>Implementation Plan</td>
<td>10</td>
</tr>
<tr>
<td>MPO Public Involvement Plan</td>
<td>10</td>
</tr>
<tr>
<td>II. SERVICE PLAN</td>
<td>28</td>
</tr>
<tr>
<td>Operations Element</td>
<td>28</td>
</tr>
<tr>
<td>Types, Hours, and Days of Service</td>
<td>28</td>
</tr>
<tr>
<td>Accessing Services</td>
<td>30</td>
</tr>
<tr>
<td>Transportation Operators and Coordination</td>
<td>33</td>
</tr>
<tr>
<td>Public Transit Utilization</td>
<td>33</td>
</tr>
<tr>
<td>Vehicle Inventory</td>
<td>35</td>
</tr>
<tr>
<td>System Safety Program Plan Certification</td>
<td>35</td>
</tr>
<tr>
<td>Intercounty Services</td>
<td>36</td>
</tr>
<tr>
<td>Natural Disaster/Emergency Preparedness</td>
<td>36</td>
</tr>
<tr>
<td>Marketing</td>
<td>37</td>
</tr>
<tr>
<td>Acceptable Alternatives</td>
<td>37</td>
</tr>
<tr>
<td>III. QUALITY ASSURANCE</td>
<td>38</td>
</tr>
<tr>
<td>IV. COST/REVENUE ALLOCATION AND RATE STRUCTURE JUSTIFICATION</td>
<td>44</td>
</tr>
</tbody>
</table>

#### APPENDICES

A. Rate Structure  
B. Operators and Coordination Contractors  
C. Transportation Disadvantaged (TD) Application  
D. Vehicle Inventory  
E. System Safety Program Plan  
F. Paratransit Contract and Amendments  
G. TOPS Paratransit Rider’s Guide  
H. Broward County Transit (BCT) Bus Pass Eligibility Transportation Disadvantaged Program Application Review/Evaluation Determination and Eligibility Defined  
I. Broward County Transit (BCT) Rate Model
INTRODUCTION

PURPOSE OF THE PLAN

The Transportation Disadvantaged Service Plan (TDSP)/ Coordinated Human Services Transportation Plan (CHSTP) outlines services and service parameters governing the coordination of transportation services provided to the transportation disadvantaged. The TDSP/CHSTP addresses the requirements of the federal Safe, Accountable, Flexible, Efficient Transportation Equity Act: MAP-21 furthers several important goals, including safety, state of good repair, performance, and program efficiency.

MAP-21 gives FTA significant new authority to strengthen the safety of public transportation systems throughout the United States. The act also puts new emphasis on restoring and replacing our aging public transportation infrastructure by establishing a new needs-based formula program and new asset management requirements. In addition, it establishes performance-based planning requirements that align Federal funding with key goals and tracks progress towards these goals. Finally, MAP-21 improves the efficiency of administering grant programs by consolidating several programs.

This program provides formula funding to increase the mobility of seniors and persons with disabilities. Funds are apportioned based on each State’s share of the targeted populations and are now apportioned to both States (for all areas under 200,000) and large urbanized areas (over 200,000). The former New Freedom program (5317) is folded into this program. The New Freedom program provided grants for services for individuals with disabilities that went above and beyond the requirements of the Americans with Disabilities Act (ADA). Activities eligible under New Freedom are now eligible under the Enhanced Mobility of Seniors and Individuals with Disabilities program.

Projects selected for funding must be included in a locally developed, coordinated public transit-human services transportation plan; and the competitive selection process, which was required under the former New Freedom program, is now optional. At least 55 percent of program funds must be spent on the types of capital projects eligible under the former section 5310 -- public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable. The remaining 45 percent may be used for: public transportation projects that exceed the requirements of the ADA; public transportation projects that improve access to fixed-route service and decrease reliance by individuals with disabilities on complementary paratransit; or, alternatives to public transportation that assist seniors and individuals with disabilities. Using these funds for operating expenses requires a 50 percent local match while using these funds for capital expenses (including acquisition of public transportation services) requires a 20 percent local match.
MAP-21 focuses on improving the efficiency of grant program operations by consolidating certain programs and repealing other programs. Job Access and Reverse Commute (JARC) and New Freedom grants expire on September 30, 2012 and no new funding is authorized beyond fiscal year 2012. Job Access and Reverse Commute activities are now eligible under the Urbanized Area Formula program (5307) as well as the Rural Area Formula program (5311). Activities eligible under the former New Freedom program are now eligible under the Enhanced Mobility of Seniors and Individuals with Disabilities program (5310).

PLAN OVERVIEW and HISTORY

The annual update of the Broward County Transportation Disadvantaged Service Plan (TDSP) is a coordinated effort between the Broward Metropolitan Planning Organization (MPO) and the Community Transportation Coordinator (CTC) with the guidance and approval of the Local Coordinating Board (LCB). This collaboration facilitates the delivery of transportation services to persons in Broward County, Florida who are transportation disadvantaged.

The Broward County Board of County Commissioners was officially designated as the Community Transportation Coordinator (CTC) for the Broward County service area on August 15, 1990, pursuant to Chapter 427, F. S. In its role as the CTC, the Broward County Board of County Commissioners has expanded access to transportation disadvantaged services by means of added programs and service capability. The CTC reports performance information and service updates to the LCB at each meeting. The Florida Commission for the Transportation Disadvantaged (FCTD) created Local Coordinating Boards to enhance local participation in the planning and delivery of coordinated transportation services.

This document is a TDSP/CHSTP minor update required by the FCTD which contains development, service and quality assurance components. The 2013 TDSP Minor Update will address the Development Plan, the Operation Element of the Service Plan, and an update to the Cost/Revenue Allocation and Rate Structure Justification. The Broward County TDSP was developed in accordance with the legislative requirements of Rule 41-2, F.A.C., in conformance with the FCTD’s “Coordinated Transportation Contracting Instructions” dated June 1996, and incorporating the TDSP criteria provided by the FCTD.
I. DEVELOPMENT PLAN

This section of the Broward County Transportation Disadvantaged Service Plan Minor Update includes: the Organizational Chart, the Local Coordinating Board Certification, Service Analysis, the Goals, Objectives and Strategies, and the Implementation Plan of the Transportation Disadvantaged Improvement Projects.

A. INTRODUCTION TO THE SERVICE AREA

3. Organizational Chart

5. Local Coordinating Board Certification

Representative membership of the Local Coordinating Board for Transportation Disadvantaged Services is located on page 5. This membership is established pursuant to Rule 41-2.012(3), F.A.C.
Florida Coordinated Transportation System Provides Transportation Disadvantaged Individuals

**COMMISSION FOR THE TRANSPORTATION DISADVANTAGED:**
State policy board for the coordination of transportation services (7 members)

**COMMUNITY TRANSPORTATION COORDINATOR (CTC):**
Broward County Board of County Commissioners

**Transportation Department Paratransit Services Section**
Entity responsible for coordinating transportation service within a designated service area

**OPERATORS:**
Entities that provide transportation services
- Allied Medical Transportation
- Daniel Cantor Senior Center
- Lucanus Developmental Center
- Medex Transport Inc.
- City of Miramar
- NE Focal Point/City of Deerfield Beach
- NW Focal Point/City of Margate
- Tender Loving Care

**CONTRACTS WITH**

**LOCAL COORDINATING BOARD:**
Local Coordinating Board for Transportation Disadvantaged Services (LCB) Membership parallels Commission: identifies local service needs, provides guidance for coordination of services.

**Purchasing Agencies:**
State agencies involved in, or funding transportation services for their clients.
(AHCA, Broward County, Vocational Rehab)

**TRANSPORTATION DISADVANTAGED PERSONS**

**Designates**

**OFFICIAL PLANNING AGENCY:**
Metropolitan Planning Organization (MPO) or other designated planning agency

**Recommends CTC to:**

**Staffs & Appoints**

**Provides Technical Support**

**Monitors**

**Purchases Trips**
LOCAL COORDINATING BOARD MEMBERSHIP CERTIFICATION

NAME (MPO/DOPA): Metropolitan Planning Organization
ADDRESS: 100 West Cypress Creek Road, Suite 850
Ft. Lauderdale, FL  33309

The Metropolitan Planning Organization/Designated Official Planning Agency named above hereby certifies to the following:

1. The membership of the Local Coordinating Board, established pursuant to Rule 41-2.012(3), FAC, does in fact represent the appropriate parties as identified in the following list; and
2. The membership represents, to the maximum extent feasible, a cross section of the local community.

SIGNATURE: [Signature]

DATE: 9/20/13

<table>
<thead>
<tr>
<th>REPRESENTATION</th>
<th>MEMBER</th>
<th>ALTERNATE</th>
<th>TERM</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. CHAIRMAN</td>
<td>Mayor Joy Cooper</td>
<td>None</td>
<td>MPO</td>
</tr>
<tr>
<td>2. FDEA</td>
<td>Vice Chair, Edith Lederberg</td>
<td>Shirley Snipes</td>
<td>Agency</td>
</tr>
<tr>
<td>3. CITIZEN ADVOCATE</td>
<td>Diane Smith</td>
<td>Vera Sharitt</td>
<td></td>
</tr>
<tr>
<td>4. DISABLED COMMUNITY</td>
<td>Harry Kember</td>
<td>Robert Bereolos</td>
<td>11/30/2015</td>
</tr>
<tr>
<td>5. ELDERLY (60+) COMMUNITY</td>
<td>Mary Macomber</td>
<td>Robert J. Siedlecki</td>
<td>11/30/2013</td>
</tr>
<tr>
<td>6. CITIZEN ADVOCATE/ SYSTEM USER</td>
<td>Tom Ryan</td>
<td>Debbie Ryan</td>
<td>11/30/2015</td>
</tr>
<tr>
<td>7. VETERANS' COMMUNITY</td>
<td>Sharon Ross</td>
<td></td>
<td>11/30/2013</td>
</tr>
<tr>
<td>8. ECONOMICALLY DISADVANTAGED</td>
<td>Pamela Carre</td>
<td>Annette Wellington-Hall</td>
<td>11/30/2014</td>
</tr>
<tr>
<td>9. PUBLIC EDUCATION COMMUNITY</td>
<td>Carolyn German-Edwards</td>
<td>Ruth Masters</td>
<td>12/31/2013</td>
</tr>
<tr>
<td>10. FDOT</td>
<td>Jayne Pietrowski</td>
<td>Chad Roman</td>
<td>Agency</td>
</tr>
<tr>
<td>11. FDCF</td>
<td>Emilio Maicas</td>
<td>Maria Chiari</td>
<td>Agency</td>
</tr>
<tr>
<td>12. FDOE/VOCATIONAL REHABILITATION</td>
<td>S. Lynn Popejoy</td>
<td>Eva-Lyn Facey</td>
<td>Agency</td>
</tr>
<tr>
<td>13. AHCA/MEDICAID</td>
<td>Karen Porter</td>
<td>Teresa Yoder-Trau</td>
<td>Agency</td>
</tr>
<tr>
<td>14. CHILDREN AT RISK</td>
<td>Stacey Hyatt</td>
<td>Aldington Murray</td>
<td>11/30/2014</td>
</tr>
<tr>
<td>15. PRIVATE TRANSPORTATION</td>
<td>Karen Caputo</td>
<td>Sandy De Los Rios</td>
<td>11/30/2014</td>
</tr>
<tr>
<td>16. MASS/PUBLIC TRANSIT INDUSTRY</td>
<td>CTC - No Member</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>17. LOCAL MEDICAL COMMUNITY</td>
<td>Deborah Hill</td>
<td>D. Karen Beam</td>
<td>Agency</td>
</tr>
<tr>
<td>18. LOCAL WORKFORCE DEVELOPMENT BOARD</td>
<td>Melanie Magill</td>
<td>Marissa Rivera</td>
<td>Agency</td>
</tr>
</tbody>
</table>
C. SERVICE ANALYSIS

2. Needs Assessment

Broward County is the second largest county in Florida in terms of population and employment, exceeded only by Miami-Dade County. Broward County has a larger senior citizen population, with 14.3 percent of the population age 65 or older. This is higher than the national average of 12.6 percent. These conditions are key indicators of transit/paratransit use, as are automobile availability, income, traffic, urban growth and land use/site planning. All of these factors contribute to the need for public transit in Broward County.

Based on the U.S. Census Bureau 2010 estimates, the disabled and elderly comprise 32% of Broward’s population. Including the economically disadvantaged these populations comprise approximately 45% of Broward’s population. Due to reduced employment opportunities for the disabled they are also economically disadvantaged. As the “Baby Boomers” get older that percentage will rise, as will the demand for Transportation Disadvantaged services. Transportation alternatives must be readily available and accessible. Florida population is estimated to reach 22.9 million by the year 2020, with one in four Floridians over the age of 65.

Major challenges include:
- Cost of Service
- Funding; proper allocation of funding
- Keeping up with demand
- Medicaid contract requirements and reduced funding
- Regionalization

The unmet needs of the economically disadvantaged and low-income individuals include: jobs that will provide income and benefits; and transportation. The historical patterns of high vehicle ownership, low provision of public transportation and suburban sprawl have combined to create an environment in which not owning a car is a serious barrier to employment and economic self-sufficiency. Almost 98% of Broward County’s workers drive to work not only because the car is more convenient and flexible but also because public transportation headways are long and routes do not offer direct connections to where the jobs are.

Job Access Reverse Commute (JARC) Grant Projects approved by the South Florida Regional Transportation Authority (SFRTA), pending Federal Transit Administration (FTA) approval, for Broward in 2012 are:

- SFRTA - Fort Lauderdale Tri-Rail Shuttle
- City of Fort Lauderdale - Community Bus
- Branches – Way2Work
- City of Lauderhill - L-JARCS
New Freedom grant funds will be used for projects that provide transit services beyond the requirements of the Americans with Disabilities Act (ADA) by enhancing access to transit services, information and assistive devices that utilize technology that can be applied to different areas of transportation and community mobility. New Freedom Projects for 2012, pending Federal Transit Administration (FTA) approval, for Broward in 2012 are:

- Pearl Transit - Way2Work
- Fort Lauderdale - Tri-Rail/NW and Neighborhood Link

Broward MPO successfully applied for the FTA’s Veterans Transportation and Community Living Initiative (VCTLI) Grant that will enable our Health and Human Services Call Center, 2-1-1 Broward, to expand capability to provide comprehensive local transportation and community services information to veterans and their families in Broward, Miami-Dade and Palm Beach Counties. 2-1-1 Broward’s efforts to engage the veterans community include outreach to such agencies as Miami VA Healthcare; Veterans Outpatient Clinic- Broward; West Palm Beach VA Healthcare; Workforce One - Broward, which provides specific job outreach services for veterans at their Career One Stop Centers or over the phone; VFW Post 8195, serving south Broward; Stone of Hope; Mission United; Veteran’s Symposium; and Broward County Elderly and Veterans Services. These efforts have generated great enthusiasm and elicited substantial feedback and suggestions, helping to identify new veteran service providers and expand the 2-1-1 data base.

The Broward MPO, in conjunction with FDOT District 4 and Palm Beach MPO staff, continues to support the South Florida Regional Human Services & Veterans Transportation initiative for effective regional coordination. With the guidance from FTA and United We Ride, the Services & Veterans Transportation initiative promotes coordination strategies, to strengthen our TDSP/HHSTP’s and address emerging transportation issues facing the South Florida Region.

3. Barriers to Coordination

The identification of barriers is important to the establishment and operation of an efficient system of transportation disadvantaged services. Barriers to coordination and accessibility identified for the Broward County service area include:

- the fragmentation inherent in a service area encompassing thirty-one (31) municipalities,
- the manner in which information is collected, retained, and reported among providers, municipalities, agencies, and the Community Transportation Coordinator (CTC) for Broward County
- regional coordination
- lack of funding

The Broward County Transit Division operating as Broward County Transit (BCT) is
responsible for the county-wide fixed route and paratransit transportation services. Broward County Transit works closely with Broward Metropolitan Planning Organization in the development of plans and the analysis of transit issues. The process includes adhering to the established transportation/transit goals and policies, monitoring and evaluating existing service and service needs, developing improvements, and public review.

The BCT also provides Paratransit services (TOPS/Transportation Options) for individuals that meet ADA or Transportation Disadvantaged (elderly, disabled, or economically disadvantaged) eligibility requirements, in addition to regular fixed route and Community Bus services.

Furthermore, the Commission for the Transportation Disadvantaged is a primary resource for information, guidance, oversight and legislative advocacy on behalf of the statewide coordinated system.

D. GOALS, OBJECTIVES AND STRATEGIES

The Goals and Objectives of the TDSP, presented on pages 10 to 22, are consistent with Florida legislative and administrative requirements and support the goals and objectives of the Florida Commission for the Transportation Disadvantaged. The TDSP is consistent with the Broward MPO’s Long-Range Transportation Plan, BCT’s Ten-Year Transit Development Plan, and simultaneously supports other planning efforts. Every effort is made to address regional issues outlined in the Strategic Regional Policy Plan for South Florida produced by the South Florida Regional Planning Council.

Broward County’s paratransit service known as TOPS or Transportation Options is one of the nation’s largest and most effective paratransit programs. Enhanced service standards, responsiveness to client input and partnering with other local community agencies contribute to continuing improvement in the delivery of services.

E. IMPLEMENTATION PLAN

The Five-Year Transportation Disadvantaged Improvement Program and the Implementation Schedule are contained in the TDSP Implementation Plan. These sections are updated on an annual basis and are tied to TDSP Goals and Objectives.

1. Five-Year Transportation Disadvantaged Improvement Program

Broward County Transportation Disadvantaged Improvement Projects are located in Section 6 “County and Local Projects” within the Transportation Improvement Program (TIP), as adopted by the Broward Metropolitan Planning Organization. The Broward County TIP is multi-modal in nature and the TD section is developed through the input and involvement of governmental agencies, the private sector, and citizen advocates.
The TD Improvement Program projects are presented on Page 23-24.

2. Implementation Schedule

The format that Broward County uses to link TDSP Goals, Objectives, and Strategies, with the Schedule of Implementation is reflected on pages 10 to 22.

F. MPO PUBLIC INVOLVEMENT PLAN

The Broward MPO's policy on public participation is to create opportunities for all segments of the public to learn and become informed about issues and proposals under its consideration, particularly those affected by the outcomes or with special needs. This policy lays the foundation in ensuring the public is a key player in the planning and decision-making process.

The MPO maintains public involvement opportunities for transportation plans and projects for impacted communities through a wide range of methods including but not limited to: advisory committees, public meetings and workshops, public workshops on special interest issues, community meetings to reach specific neighborhoods or groups of people, transportation fairs, community events, visits to elementary schools and universities, continuous public comment opportunities at MPO and committee meetings, media stories and press releases, user satisfaction surveys, displays, periodic mailings including a transportation newsletter, press kits, web pages and e-blasts.

One of the primary goals of the Broward MPO in providing public involvement is to ensure that transportation plans reflect community input and benefit all segments of the community equitably. The Broward MPO's Public Involvement Plan following objectives reflect this goal:

1. Informing the Public
2. Educating the Public
3. Involving the Public
4. Reaching Out to Communities
5. Improving Public Involvement

The MPO regularly assesses the effectiveness of its public involvement techniques to develop strategies for improving progress toward public involvement objectives.

The Broward MPO's Public Involvement Plan can be found at: http://www.browardmpo.org/planning/public-involvement
# BROWARD COUNTY TRANSPORTATION DISADVANTAGED SERVICE PLAN

## GOAL 1: ENSURE AVAILABILITY OF TRANSPORTATION SERVICES TO PERSONS WHO ARE TRANSPORTATION DISADVANTAGED.

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective 1: Promote the provision of the most effective mix of transportation services that meets the demands for sponsored and non-sponsored trips.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Strategy #1:</strong> Maximize use of computer software by the CTC and TOPS Call Center (Inktel Direct) in the areas of routing, scheduling, and operating data.</td>
<td>#1) Number of non-sponsored trips provided</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
<tr>
<td></td>
<td>#2) Number of clients and trips allocated to each provider</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
<tr>
<td></td>
<td>#3) Number of non-sponsored trips delivered</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
</tbody>
</table>
**GOAL 1:** ENSURE AVAILABILITY OF TRANSPORTATION SERVICES TO PERSONS WHO ARE TRANSPORTATION DISADVANTAGED. (Continued)

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy #3:</strong> Continue to maintain computerized trip information to monitor and manage the provision of transportation disadvantaged services.</td>
<td>#4) number of sponsored trips</td>
<td>Ongoing</td>
<td><strong>BCT</strong></td>
</tr>
<tr>
<td><strong>Strategy #4:</strong> Continue to develop an information system for marketing transportation disadvantaged services.</td>
<td>#5) number and kinds of services</td>
<td>Ongoing</td>
<td><strong>BCT</strong></td>
</tr>
<tr>
<td><strong>Strategy #5:</strong> Expand the transit market by promoting and marketing the BCT “family of services.”</td>
<td>#6) An accounting of marketing activities.</td>
<td>Ongoing</td>
<td><strong>BCT</strong></td>
</tr>
</tbody>
</table>
**GOAL 1:** ENSURE AVAILABILITY OF TRANSPORTATION SERVICES TO PERSONS WHO ARE TRANSPORTATION DISADVANTAGED. (Continued)

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective 2: Community awareness of Transportation Disadvantaged transportation services.</td>
<td>#1) number of new Transportation Disadvantaged clients</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#2) total amount spent on marketing/public information</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#3) number of informational documents distributed</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

**Strategy #1:** Develop marketing tools to agencies serving individuals who could benefit.

**Strategy #2:** Continue efforts to market informational materials for riders of the system.
<table>
<thead>
<tr>
<th>Objective 1: Implement appropriate methods and procedures to accomplish cost-effective service delivery.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategy #1: Continue the monthly reporting process via computerized trip management system to monitor efficiency and cost effectiveness.</td>
<td></td>
<td>Monthly</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
<tr>
<td>#1) cost to County per passenger trip</td>
<td></td>
<td>Monthly</td>
<td>Ongoing</td>
<td></td>
</tr>
<tr>
<td>#2) cost to County per vehicle mile</td>
<td></td>
<td>Monthly</td>
<td>Ongoing</td>
<td></td>
</tr>
</tbody>
</table>
## BROWARD COUNTY TRANSPORTATION DISADVANTAGED SERVICE PLAN

**GOAL 2:** ENSURE THE TRANSPORTATION DISADVANTAGED PROGRAM IS DELIVERED IN THE MOST EFFECTIVE AND EFFICIENT MANNER. (Continued)

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1) Annual evaluation of CTC performance by the Local Coordinating Board</td>
<td>June 2013</td>
<td>Complete</td>
<td>LCB CTC</td>
</tr>
<tr>
<td>#2) Quality Assurance Performance Evaluation performed by Florida Commission for the Transportation Disadvantaged</td>
<td>July 2013</td>
<td>Pending</td>
<td>FCTD</td>
</tr>
<tr>
<td>#3) passenger trips per hour</td>
<td>Monthly</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
<tr>
<td>#4) passenger trips per vehicle mile</td>
<td>Monthly</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
</tbody>
</table>

**Objective 2:** Ensure effective program administration.

**Strategy #1:** Continue the monthly report format to evaluate efficiencies and effectiveness of the TD program.

**Strategy #2:** Ensure service plan adherence.

**Strategy #3:** Continue the monthly reporting process via computerized trip management system to monitor efficiency, cost effectiveness and quality.
**GOAL 2:** ENSURE THE TRANSPORTATION DISADVANTAGED PROGRAM IS DELIVERED IN THE MOST EFFECTIVE AND EFFICIENT MANNER. (Continued)

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective 3:</strong> Promote utilization of the most cost-effective transportation mode.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Strategy #1:</strong> Continue the monthly reporting process via computerized trip management system to monitor usage and effectiveness of the TD program.</td>
<td>#1) percent fixed-route trips are of total trips</td>
<td>Monthly</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#2) percent group-trips (program trips) are of total trips</td>
<td>Monthly</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#3) percent subscription trips are of total trips</td>
<td>Monthly</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#4) number of TD bus pass sales</td>
<td>Monthly</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#5) number of valid applicants</td>
<td>Monthly</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
**GOAL 3:** ENSURE THAT SAFE AND QUALITY SERVICE IS PROVIDED THROUGH THE COORDINATED SYSTEM.

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective 1: Encourage courteous service and passenger satisfaction.</td>
<td>#1) number of complaints/grievances filed against the system</td>
<td>Monthly</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Strategy #1: Conduct transportation evaluations for quality services</td>
<td>#2) analysis of quality survey results</td>
<td>June 2013</td>
<td>Complete</td>
</tr>
<tr>
<td>Strategy #2: Utilize surveys to receive feedback from riders and to maintain quality service.</td>
<td>#3) percentage of satisfied clients</td>
<td>June 2013</td>
<td>Complete</td>
</tr>
</tbody>
</table>

16
### BROWARD COUNTY TRANSPORTATION DISADVANTAGED SERVICE PLAN

**GOAL 3:** Ensure that safe and quality service is provided through the coordinated system.

(Continued)

<table>
<thead>
<tr>
<th>Objective 2: Promote service that minimizes rider travel and wait times.</th>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy #1:</strong> Adhere to the service plan.</td>
<td>#1) percent on-time (pick-up and/or drop-off)</td>
<td>Ongoing</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
<tr>
<td></td>
<td>#2) number of trip requests referred to other providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>#3) number of complaints filed</td>
<td>Monthly</td>
<td>Ongoing</td>
<td>FCTD</td>
</tr>
<tr>
<td><strong>Strategy #2:</strong> Update and promote the paratransit riders guide.</td>
<td>#4) number of guides produced and distributed</td>
<td>Ongoing</td>
<td>Ongoing</td>
<td>BCT</td>
</tr>
</tbody>
</table>
GOAL 3: ENSURE THAT SAFE AND QUALITY SERVICE IS PROVIDED THROUGH THE COORDINATED SYSTEM.
(Continued)

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective 3: Require the provision of safe and reliable service.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strategy #1: Maintain accident records for Annual Operating Report.</td>
<td>#1) vehicle accidents per 100,000 vehicle miles</td>
<td>July 2013</td>
<td>Complete</td>
</tr>
<tr>
<td></td>
<td>#2) road call rate per passenger trip</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strategy #2: Conduct FDOT System Safety Plan evaluations for transportation operators.</td>
<td>#3) FDOT Summary Report</td>
<td>July 2013</td>
<td>Complete</td>
</tr>
</tbody>
</table>
**GOAL 4: SECURE NECESSARY FUNDING TO SUPPORT THE TD PROGRAM.**

<table>
<thead>
<tr>
<th>PERFORMANCE MEASURE</th>
<th>EST. DATE OF COMPLETION</th>
<th>CURRENT STATUS</th>
<th>RESPONSIBLE AGENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective 1: Maintain and increase funding to better meet the continued demand for paratransit services.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Strategy #1:</strong> Maintain monitoring by LCB, MPO and CTC of annual reports of agencies funding TD transportation services.</td>
<td>#1) total funds received from TD Trust fund</td>
<td>July 2013</td>
<td>Complete</td>
</tr>
<tr>
<td></td>
<td>#2) total funds received from current sources</td>
<td>Ongoing</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>#3) total funds received from new sources</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Strategy #2:</strong> Continue to pursue funding for non-sponsored trips.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PERFORMANCE MEASURE</td>
<td>EST. DATE OF COMPLETION</td>
<td>CURRENT STATUS</td>
<td>RESPONSIBLE AGENCY</td>
</tr>
<tr>
<td>---------------------</td>
<td>-------------------------</td>
<td>----------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Objective 2: Encourage public and private agencies to identify and allocate sufficient funds to meet the transportation needs of their program participants.</td>
<td>#1) total funds budgeted by state agencies in the coordinated system #2) total funds spent by state agencies in the coordinated system #3) total funds budgeted to provide sponsored trips by non-state agencies #4) total funds spent to provide sponsored trips by non-state agencies #5) total funds budgeted to provide ADA trips #6) total funds spent to provide ADA trips</td>
<td>September 2013</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Strategy #1: Maintain monitoring by LCB, MPO and CTC of annual reports of agencies funding transportation service for their clients.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Goal 5: Ensure TD Program Accountability

<table>
<thead>
<tr>
<th>Objective 1: Adhere to state and federal statutes, rules, and regulations for the TD program.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategy #1:</strong> Develop and maintain schedules, (monthly, quarterly, and annual) for all pertinent activities related to the TD program in response to TD Commission, Chapter 427 and Federal law.</td>
</tr>
<tr>
<td><strong>PERFORMANCE MEASURE</strong></td>
</tr>
<tr>
<td>#1) timely submission of required documentation: i.e., CTC’s Annual Operating Report, Service Plan, Coordination Contracts, Operator Contracts, Grant Applications, Memorandum of Agreement, Monthly Billing, Quarterly Planning Grant deliverables, CTC evaluations, Progress Reports, - All accompanied by necessary endorsements and signatures.</td>
</tr>
<tr>
<td>#2) compliance with Americans with Disabilities Act of 1990 and other state and federal requirements</td>
</tr>
</tbody>
</table>
## Objective 2: Collect, compile, report, and maintain data necessary for evaluation of the local Transportation Disadvantaged program.

### Strategy #1: Evaluate monthly status reports; quality control reports; provider meetings and marketing activities.

- Completion of annual CTC performance evaluation performed by the Local Coordinating Board and recommendation by MPO.
- Est. Date of Completion: June 2013
- Current Status: Complete
- Responsible Agency: LCB, MPO

### Strategy #2: Maintain all records including complaint resolution; TD eligibility list; coordination contracts in orderly manner, facilitating audit and review activities.

- Review and dissemination of performance evaluations as conducted by Commission staff.
- Est. Date of Completion: July 2013
- Current Status: Pending
- Responsible Agency: FCTD, BCT
Funded Projects Listing

Section 6

Transportation Disadvantaged
### Broward MPO Transportation Improvement Program – FY 2013/14 – 2017/18

<table>
<thead>
<tr>
<th>Phase</th>
<th>Source</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2016/16</th>
<th>2016/17</th>
<th>2017/18</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>FM# 565 (TIP# 565) TRANSPORTATION FOR THE DISADVANTAGED</td>
<td>Lead Agency: Transportation LRTP#: 09T-Pg138</td>
<td>&quot;Non-SIS&quot;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Work: TD COMMISSION - OPERATING</td>
<td>COUNTY COMMISSION CONTRIBUTION TRANSPORTATION OF DISADVANTAGED CLIENTS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Type: State Managed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MNTT (LC)</td>
<td>LF</td>
<td>18,000,000</td>
<td>18,000,000</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>36,000,000</td>
</tr>
<tr>
<td>OPS (89)</td>
<td>LF</td>
<td>0</td>
<td>0</td>
<td>385,000</td>
<td>0</td>
<td>0</td>
<td>385,000</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>18,000,000</td>
<td>18,000,000</td>
<td>385,000</td>
<td>0</td>
<td>0</td>
<td>36,385,000</td>
</tr>
<tr>
<td>Prior Years Cost</td>
<td>36,000,000</td>
<td>Future Years Cost</td>
<td>Total Project Cost</td>
<td>72,385,000</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| FM# 2370361 (TIP# ) BROWARD CO. | Lead Agency: FDOT LRTP#: 09TPg220 | "Non-SIS" | | | | |
| Type of Work: TD COMMISSION - CAPITAL | TD COMMISSION TRIP AND EQUIPMENT GRANT PTO | | | | | |
| Project Type: State Managed | | | | | | |
| OPS (82) | TDDR | 265,000 | 0 | 0 | 0 | 0 | 265,000 |
| OPS (82) | LF | 413,192 | 0 | 0 | 0 | 0 | 413,192 |
| OPS (84) | TDTF | 3,718,727 | 0 | 0 | 0 | 0 | 3,718,727 |
| Total | | 4,386,919 | 0 | 0 | 0 | 0 | 4,386,919 |
| Prior Years Cost | 48,918,563 | Future Years Cost | Total Project Cost | 53,315,482 |

<table>
<thead>
<tr>
<th>Phase</th>
<th>Fund Source</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
<th>2016/17</th>
<th>2017/18</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>FM# 2370362 (TIP# 521) BROWARD CO.</td>
<td>Lead Agency: FDOT LRTP#: 09TPg220</td>
<td>&quot;Non-SIS&quot;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Work: TD COMMISSION - CAPITAL</td>
<td>TD COMMISSION PLANNING GRANT PTO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Type: State Managed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PLN (14)</td>
<td>TDTF</td>
<td>57,650</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>57,650</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>57,650</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>57,650</td>
</tr>
<tr>
<td>Prior Years Cost</td>
<td>723,594</td>
<td>Future Years Cost</td>
<td>Total Project Cost</td>
<td>781,244</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| FM# 2370363 (TIP# ) BROWARD FROM VOLUNTARY DOLLARS TO COMMISSION TD | Lead Agency: FDOT LRTP#: 09T-Pg220 | "Non-SIS" | | | | |
| Type of Work: TD COMMISSION - CAPITAL | TD COMMISSION - CAPITAL VOLUNTARY DOLLARS COMMISSION TD | | | | | |
| Project Type: State Managed | | | | | | |
| OPS (84) | TDTF | 1,551 | 0 | 0 | 0 | 0 | 1,551 |
| Total | | 1,551 | 0 | 0 | 0 | 0 | 1,551 |
| Prior Years Cost | 45,017 | Future Years Cost | Total Project Cost | 46,568 |
Page left Blank Intentionally
II. SERVICE PLAN

A. OPERATION ELEMENT

Broward County Mass Transit Division (BCT) serves residents through a combination of fixed route public transit, paratransit, and community bus services. Within the coordinated paratransit system, 36 agencies offer transportation to their clients.

1. Types, Hours, and Days of Service

<table>
<thead>
<tr>
<th>Types of Service</th>
<th>Hours and Days of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOPS Reservation Call Center</td>
<td>Available during the published operating hours of BCT (normally 4:40 a.m. to 12:40 a.m., Monday through Saturday; and 6:45 a.m. to 10:15 p.m., Sundays and holidays).</td>
</tr>
<tr>
<td>Ambulatory and wheelchair transportation service, fixed route and paratransit</td>
<td>Available during the published operating hours of BCT (normally 4:40 a.m. to 12:40 a.m., Monday through Saturday; and 6:45 a.m. to 10:15 p.m., Sundays and holidays).</td>
</tr>
<tr>
<td>Ambulatory and wheelchair accessible feeder service available to Tri-County Commuter Rail</td>
<td>Seven days per week, generally between 5:00 a.m. and 11:00 p.m., Monday through Friday; 6:00 a.m. to 11:30 p.m., Saturdays; and 8:00 a.m. to 6:30 p.m., Sundays and holidays.</td>
</tr>
<tr>
<td>Developmental Services provides ambulatory and wheelchair transportation</td>
<td>Generally, from 6:00 a.m. to 6:00 p.m., Monday through Friday, or as warranted by an individually sponsored program.</td>
</tr>
<tr>
<td>Local municipalities provide ambulatory and wheelchair accessible service</td>
<td>Usually on a weekday basis, Monday through Friday, from 8:00 a.m. to 5:00 p.m.</td>
</tr>
<tr>
<td>Coordinated Agencies</td>
<td>Varies by agency, usually on a weekday basis, Monday through Friday, from 8:00 a.m. to 5:00 p.m.</td>
</tr>
</tbody>
</table>
**Cost of Service**
See Appendix A “Rate Structure.”

**Use of Fixed Route Service**
All Broward County buses and community buses are wheelchair-accessible (equipped with lifts and kneelers—this is also helpful for non-wheelchair passengers who cannot navigate steps). Bus fare is $1.75 and increased effective October 1, 2010. BCT offers 31-day bus passes at discounted rates to elderly, youth, college student, and disabled riders. For information on fixed-route bus service and routes, please call 954-357-8400, option 1, or go to [http://www.broward.org/bct](http://www.broward.org/bct). Community buses range from free-of-charge to $1.00, depending on the community. For information on community bus services and routes, please go to [http://www.broward.org/bct/communitybuses.htm](http://www.broward.org/bct/communitybuses.htm)

The TOPS Paratransit Service offers free personal travel training services for elderly and disabled riders that might be able to use the bus system but are unfamiliar with it. For travel-training information, please call 954-357-7705.

All registered ADA/TD Paratransit clients may ride the Broward County fixed-route buses free of charge without affecting their paratransit eligibility. For information, please call 954-357-8400, option 2.

All registered TD Medical Paratransit clients may ride the Broward County fixed-route buses free of charge without affecting their paratransit eligibility. For information, please call 954-357-8400, option 2.

All registered TD Nutrition Paratransit clients may ride the Broward County fixed-route buses free of charge in lieu of utilizing the paratransit service. Free use of fixed route service will not cancel TD Nutrition Paratransit eligibility. For information, please call 954-357-8400, option 2.

Clients requesting transportation services are directed to the fixed route service. Those who are unable to use fixed route service are encouraged to apply for TOPS Paratransit Service. Disabled clients who can use fixed route bus service for some trips are granted ADA eligibility under “Category 4,” or conditional eligibility, and are encouraged to use paratransit service for only those trips where the bus service is not accessible. BCT continues to offer and has expanded its free “Travel Training” for disabled applicants, including mental health clients, who can use fixed route service after some one-on-one instruction and assistance. This popular program is both beneficial and cost effective.

BCT is dedicated to improving its fixed route bus system on an ongoing basis, and have completed the following improvements to enhance accessibility:

- In the past three years, 976 bus stops have been made fully ADA accessible.
- All bus drivers provide assistance upon request.
- All buses are equipped with voice annunciation systems, which provide on-board automatic voice announcements in English, Spanish and Creole. They announce bus stops, major transfer points and safety advisories.
- All signage, both inside buses and at the bus stops, complies with ADA regulations.
**Inter-County Arrangements**
Broward County works cooperatively with paratransit clients from other counties who request visitor status and can show proof of current paratransit eligibility. The CTC provides approximately 430 such inter-county trips on a weekly basis. There are currently 290 eligible clients registered as visitors with the TOPS paratransit service.

**Other Community Service Sponsored Trips**
Various community support agencies (such as United Cerebral Palsy) and other non-profit agencies that participate in the Section 5310 van program provide transportation for eligible clients in Broward County. There are currently 35 local agencies that participate in the Broward County coordinated program. See Appendix B, “Operators and Coordination Contractors”.

**Pre-Scheduled Trips**
Reservations for pre-scheduled trips must be made between the hours of 8:00 a.m. and 5:00 p.m., seven days a week. Reservations must be made one (1) day in advance.

**Same Day Service**
Same day service is provided on a very limited basis, at the discretion of the County and the Tops Reservation Center, based upon available vehicle capacity and available time slots in the schedule for that day. The contractor makes every reasonable effort to accommodate same day trip requests on a case by case basis. Broward County TOPS paratransit program does not provide emergency or stretcher transportation.

**Subscription Trips**
Subscription trips are trips for which an individual goes to and from the same origin and destination, at the same time of day, at least two days per week and requests the trip through a standing reservation rather than a daily request. ADA paratransit clients have priority for subscription trips, when subscription capacity is inadequate to meet all requests for subscription service. Contractors maintain a list of subscription clients documenting the level of subscription service provided by various funding components. Subscription trips comprise approximately 70% of total trips.

2. **Accessing Services**

Services provided by Broward County may be reached by calling the BCT Paratransit Services Section, at (954) 357-8400 or 1-800-599-5432 (toll free within Dade, Broward and Palm Beach Counties).

For the hearing impaired, BCT has TTY capability which may be accessed by calling (954) 357-8302.

Tri-County Commuter Rail feeder service may be arranged by calling 1-800-TRI-RAIL (1-800-874-7245).

Reservations may be made seven days a week, 8:00 am - 5:00pm, and must be made one day in advance.

    TOPS Reservation Number: 1-866-682-2258
Riders with trip questions or concerns can call the reservation number and speak to a reservations
agent from M-F 4:40AM to 12:40AM, Sundays and Holidays 6:45AM to 10:15PM.

Registration or certification information for other programs' clients may be reached by calling the
individual program sponsor. Broward County routinely publishes the availability of transportation
disadvantaged services in informational materials widely distributed throughout the community,
including the telephone number for BCT and the Paratransit Services Section. The Aging & Disability
Resource Center of Broward County, the Agency for Persons with Disabilities, Henderson Mental
Health and other community organizations provide similar directories of services available to the
general public, including the transportation disadvantaged. BCT publishes a Paratransit Services
Rider’s Guide, which details how a client can access the service. The Rider’s Guide is updated
periodically. All of BCT’s materials are available in large print, audio cassette, CD, Spanish and
Braille upon request.

The Florida Commission for the Transportation Disadvantaged has a TD Hotline that is available
Monday through Friday, from 8:00 a.m. to 5:00 p.m. They can be reached at 1-800-983-2435 or TTY
1-800-648-6084. These numbers are posted in all TOPS vehicles and are also included in the
Rider’s Guide.

**Client Pick-Up**

Contractor shall provide door-to-door service. Drivers shall go into the lobbies or vestibules of
buildings to seek out and/or assist a Client; however, drivers are prohibited from entering residences.
Sounding a horn at the curb is not permitted and is insufficient notification of Contractor’s arrival.
When the Client boards the vehicle, driver shall complete paperwork, or utilize an alternate
automated system, indicating that the pick-up has been made.

**Cancellations and “No-Show” Policies**

A trip is considered a “no-show” if the client calls to cancel a trip less than two hours before the
scheduled pickup time, places a request for service but does not meet the ride upon its arrival, or is
not ready to board within five minutes after the arrival of the ride during the pickup window and the
vehicle departs without them. An excessive accumulation of “no-shows” may result in suspension of
service.

When the assigned provider fails to pick up a client for a scheduled trip, with the exception of a trip
canceled by a client or a client no-show, it is considered a missed trip. Rides canceled by the
assigned provider shall be considered missed trips. Trips in which the assigned provider arrives more
than one (1) hour after the scheduled time, and the client was declared a no-show, are considered
missed trips.

**Procedures for Dispatching Backup or After-Hours’ Service**

Each contractor is responsible for all trips that have been pre-scheduled for a given day. If a vehicle
is late, clients can call the TOPS Reservation Center for the estimated time of arrival. The CTC also
has client service representatives who are available on weekdays to answer questions. If a pickup
does not occur, they may contact the County Paratransit Service Office at (954) 357-8400, or (800)
599-5432 in Broward, Dade and Palm Beach Counties, or TTY for those who are hearing impaired at
(954) 357-8302. Clients who have not been picked up by the end of 15 minutes after their scheduled
pickup time are to be transported at no cost to the client. The County or the TOPS Reservation
Center may also, at its discretion, contact another provider to provide backup service if deemed necessary. BCT also invokes contractual terms specifying financial disincentives for lateness or missed trips.

**Eligibility**

**TD**: Transportation Disadvantaged (TD) Trips - Pursuant to Chapter 427 Florida Statutes, Broward County as the Community Transportation Coordinator (CTC) under direction from the Commission for the Transportation Disadvantaged, and in cooperation with the Local Coordinating Board, developed local eligibility guidelines. The CTC requires a written application for all TD eligible clients, of whom there are currently 1,287 registered with the TOPS paratransit service (See Appendix C, “Transportation Disadvantaged Eligibility Application”). The CTC and the Coordinating Board have an established eligibility appeal process for the clients. The CTC, in cooperation with the LCB, may establish a review committee appointed by the LCB for TD eligibility appeals if so desired by the applicant. The applicant may also request a review of the application by the CTC program manager. TOPS performs over 150,000 TD trips annually.

**ADA**: ADA Eligible Trips - BCT is responsible for providing complementary paratransit services under the Americans with Disabilities Act of 1990. Clients under this service are eligible based upon Federal ADA Rules and Regulations. There are currently 17,777 eligible ADA clients registered with the TOPS paratransit service.

ADA eligibility is determined by a client’s functional ability to use a fixed route bus and/or navigate the fixed route system. Clients complete a written application. A physician of the client’s choice completes the last page. Completed applications are reviewed by the BCT eligibility team. If immediate approval is not determined, the application is referred to a third-party BCT-contracted physician. Those clients not receiving presumptive approval are sent for an assessment to determine the appropriate service - ADA paratransit or fixed route bus service. These assessments are conducted by a professionally trained team of physical and occupational therapists. The assessment comprises of functional, cognitive, visual and respiratory evaluations. When it is determined that a client is not eligible for ADA paratransit service, and fixed route service is indicated, travel training is offered at no cost to the applicant. Clients who qualify and are enrolled in ADA paratransit service must apply for re-certification prior to the expiration of their current eligibility period. The CTC has established an eligibility appeals board that meets on an as needed basis to hear appeals for “not eligible or conditionally eligibly” determinations. BCT’s Paratransit Services Section staff processed 7,359 applications for ADA and TD Paratransit service during this reporting period.

**Prioritization**

At this time in Broward County, there is no prioritization of trips. All pre-scheduled trips requested are performed.

**Fare Changes Effective January 1, 2010**

- On October 1, 2010 BCT increased its fixed route fare to $1.75 and the Paratransit Rider’s Fare increased to $3.50. This increase was also addressed during a formal public hearing. The contracted service providers will continue to retain $3.00, but the County will retain the additional $0.50. Revenue for County Fiscal Year 2010 is expected to exceed $300,000 County Board Approved – Amendment – 08.31.10.
- Implementation of the centralized reservation system and virtual fleet.
• Conduct a more thorough needs assessments - both new and renewal TD applications must be accompanied by documentation verifying monthly income (similar to the process used by other CTC’s, such as Palm Beach County).
• Research the possibility of recruiting volunteers to assist with the needs assessment, (e.g., social work graduate students at local universities)
• Formation of a sliding scale to determine an equitable Rider’s Fare for nutrition clients that currently travel free-of-charge. BCT will request the assistance of the Aging and Disability Resource Center of Broward County (formerly the Area Agency on Aging of Broward County) on this initiative.

3. Transportation Operators and Coordination Contractors

A new five-year Paratransit contract went into effect January 1, 2010. Four contractors, and four sub-contractors provide approximately 2650 daily trips (see Appendix B, “Operators and Coordination Contractors”). There are currently 13,658 eligible clients registered in the system.

TOPS providers are selected under the competitive bid process established by Florida’s Administrative Code.

4. Public Transportation Utilization

BCT provides service to 410 square miles within Broward County. BCT buses connect to Palm Beach and Miami-Dade transit systems and to Tri-Rail. BCT buses provide connections to our community’s multimodal transportation network, as well as system wide connections at three transfer terminals: Broward Central Terminal (downtown Fort Lauderdale); West Regional Terminal (Plantation) and Lauderhill Mall Transfer Facility (Lauderhill). The Northeast Transit Center (Pompano Beach) opened November 17, 2012.

The BCT fleet has 315 fixed-route buses (all of which are 100% accessible via lifts and hydraulic kneelers) providing service on 42 routes, 72 community buses operated in partnership with 18 municipalities, and the Tri-Rail feeder shuttles. BCT transports 37.9 million passengers annually. On weekdays 42 routes are in service, 30 on Saturdays, and 28 on Sundays.

BCT provides free Wi-Fi on the 441 Breeze and U.S. 1 Breeze routes and at the Broward Central Terminal. Currently BCT has seventeen 40' hybrid buses, nine articulated diesel buses and seven hybrid articulated buses in the fleet.

All buses are equipped with voice annunciation systems, which provide on-board automatic voice announcements in English, Spanish and Creole. They announce bus stops, major transfer points and safety advisories.

BCT launched the addition of Spanish and Creole languages on its Web site. The translated versions can be accessed from the BCT home page at www.broward.org/bct by selecting from the “Language Chooser” button. Bus schedules and maps are not translated, as these web pages identify departure and arrival times, bus stop locations, landmarks and other non-translatable terms.
BCT issues photo identification cards for those fixed-route users deemed eligible for a reduced fare based on age (students and seniors) and/or disability. Presenting this photo ID to bus drivers and bus pass vendors enables the user to travel at a reduced fare.

A BCT Buz Pass is a credit-card size fare card with magnetic swipe. It is a cost-savings pass for daily, unlimited travel for a specific period of time:

Bus passengers who prefer online trip planning assistance for travel on Broward County Transit (BCT) can log on to Google Transit™ at www.google.com/transit.

Google Transit is a feature of Google Maps™ that provides public transportation trip planning as an alternative to driving directions. Passengers start by entering their starting and ending destination and their expected departure or arrival time. Google Transit will provide them with up to three suggested trip plans, featuring trip maps, any transfer instructions, and estimated arrival times.

BCT has added another customer-friendly feature to its Web site. Bus passengers and authorized vendors can now purchase bus passes online, in the convenience of their home or office. Visit www.broward.org/bct and click on "Purchase Bus Pass."

The new, three-easy-step purchase is available 24-hours-a-day, seven days-a-week, on a confidential and secure Broward County online site that accepts all approved major credit cards. The 10-Ride, 7-Day and 31-Day Adult passes are available.

The 31-Day Reduced Fare passes for youth, seniors, disabled, Medicare recipients and college students cannot be purchased online as valid identification is required. These passes are sold at the main bus terminal, all County libraries and select check cashing store locations throughout Broward County. The All-Day pass is also not available for online purchase as it is sold only on board the bus.

Online bus pass orders are processed at no extra cost using standard shipping via the United States Postal Service (USPS). Online purchasers will receive an email confirming their order and should allow seven to 10 business days to receive their pass.

For more information about the online bus pass purchase, contact the Broward County Transit Communications Section at 954-357-6786.

Effective October 1, 2010, BCT increased its bus fares. The fares are as follows:

<table>
<thead>
<tr>
<th>Transit Fare Types</th>
<th>Effective October 1, 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular One-Way Fare (Base Cash)</td>
<td>$1.75</td>
</tr>
<tr>
<td>Reduced Youth</td>
<td>$0.85</td>
</tr>
<tr>
<td>Reduced Senior/Disabled/Medicare</td>
<td>$0.85</td>
</tr>
<tr>
<td>10-Ride Pass</td>
<td>$16.00</td>
</tr>
<tr>
<td>All Day Pass</td>
<td>$4.00</td>
</tr>
<tr>
<td>Reduced Youth</td>
<td>$3.00</td>
</tr>
<tr>
<td>Reduced Senior/Disabled/Medicare</td>
<td>$3.00</td>
</tr>
<tr>
<td>7-Day Pass</td>
<td>$16.00</td>
</tr>
<tr>
<td>31-Day Adult Pass</td>
<td>$58.00</td>
</tr>
<tr>
<td>Reduced Youth</td>
<td>$29.00</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Reduced Senior/Disabled/Medicare</td>
<td>$29.00</td>
</tr>
<tr>
<td>Reduced College Student</td>
<td>$40.00</td>
</tr>
</tbody>
</table>

**Effective May 1st, 2011**

| Express Regular one way fare     | $2.35   |
| Reduced Youth                   | $1.15   |
| Reduced Senior/Disabled/Medicare | $1.15   |
| 10-Ride Pass                    | $23.50  |
| 31-Day Adult Pass               | $85.00  |

**Passengers** transferring from BCT to the Miami-Dade Transit (MDT), Palm-Tran, or Tri-Rail system will be issued a free transfer and must pay the appropriate fare on the other transit system.

**Passengers transferring** from Miami-Dade Transit (MDT), Palm Tran or Tri-Rail, will be required to pay $.50 with a transfer issued by MDT, Palm Tran, or with a Tri-Rail pass.

BCT partners with the Broward County Homeless Initiative Partnership Administration (HIP) to provide discounted bus passes (50%) to those agencies in Broward County that serve homeless individuals.

5. **Vehicle Inventory**

All Broward County Vehicle Inspections are conducted annually by BCT, in accordance with Chapter 14-90, FAC per the contract for Paratransit Service.

See Appendix D, “Vehicle Inventory.”

6. **System Safety Program Plan Certification**

Broward County conducts annual vehicle inspections and System safety reviews of all Paratransit operators in accordance with chapter 14-90 FAC. A safety certification for each operator is provided to the FDOT.

**Security Program Plan**: In accordance with Chapter 14-90.004, FAC, all TOPS providers must develop and maintain a Security Program Plan. This becomes part of the System Safety Program Plan requirements. See Appendix E.

7. **Intercounty Services**

BCT provides service into Miami-Dade and Palm Beach Counties. Fixed route service into Palm Beach County includes Route 18 to Sandalfoot, and Route 10 to Mizner Park. Fixed route service into Miami-Dade County includes Route 18 to the 163rd Street Mall and Golden Glades Park, Route 2 to 207th Street & University Drive and Golden Glades Park, and Routes 1 and 4 to Aventura Mall.
The three counties have designated several transfer locations for paratransit clients who need to transfer across service areas. The three counties have an intercounty service agreement for paratransit delivery.

8. Natural Disaster/Emergency Preparedness

As a primary agency (Broward County Emergency Service Function #1), BCT, including the Paratransit Services Section, maintains a special needs transportation capability by means of contractual arrangement with transportation contractors to transport persons with special needs to/from designated shelters. Individuals are required to pre-register with Broward County Elderly & Veterans’ Services Division. The rider's fare is waived under such emergency circumstances. Individuals may have the option to contact their service provider for trips.

In order to address issues pertaining to the operation of Special Needs Shelters during emergencies and to prepare for future emergency needs of Special Needs Shelter clients, Broward County’s Human Services Department initiated the Special Needs Task Force (SNTF). The SNTF meets on a monthly basis to address issues including client eligibility, client registration, transportation services, shelter staffing, shelter inspections, shelter supplies and inventory, electrical needs, plumbing needs, medical needs, oxygen needs, public awareness, etc.

The SNTF consists of representatives from BCT, Broward County Substance Abuse and Health Care Services Division, Broward County Elderly and Veterans Services Division, Broward County Trauma Management Agency, Broward County Emergency Management Agency, Florida Department of Health, Children’s Medical Services, Memorial Healthcare System, North Broward Hospital District, South Broward Hospital District, and Broward County Public Schools.

The following activities were completed or recertified by the Broward CTC staff during this reporting period:

- Required NIMS training and certification (ICS-100, ICS-200, ICS-300 (manager), and ICS-700).
- Required training in the use of WebEOC, the new software program utilized by the County’s Emergency Operations Center (EOC).
- Broward CTC staff trained the EOC Call Center staff on policies and procedures for arranging special needs transportation during an emergency event.
- Attended workshop on the development and implementation of the new “Continuation of Operations Plan” (COOP).
- Created the Paratransit Services COOP for inclusion in BCT’s COOP.
- Updated the Paratransit Services “Hurricane Evacuation Plan” and Standard Operating Procedures.
- Attended the following:
  - Workshop on Public Information During Activations
  - Table Top Exercise Procedure Training
  - Broward County Emergency Response Team (Emergency Support Function 1 [ESF-1] Table Top Exercise
  - Broward County ESF-6, ESF-8, ESF-11 and ESF-18 Table Top Exercise
9. Marketing

BCT’s Customer Relations and Communications Section develops and implements marketing, advertising, and public relations programs to provide the public with information about current, new and enhanced bus service, special projects and events, and the benefits of riding public transportation. The section responds to a myriad of client inquiries and provides personal trip planning through the client information telephone center, and at the web-based Google Transit, accessible on the agency’s web site.

Major improvements were made to the website at www.broward.org/bct. Its redesign and a more user-friendly layout have resulted in the continuous increase in monthly hits. Enhancements to the site include ‘Transit Flash,” a monthly e-newsletter that is sent to a client e-mail database with up-to-date information, online bus pass purchasing, and Spanish and Creole translation.

BCT was the recipient of a Federal Homeland Security Grant to implement a public security and emergency awareness program. A public outreach campaign, “Transit Watch,” will educate and encourage the active participation of transit passengers to identify and assist transit officials to maintain a secure transit environment. Promotions will consist of brochures, radio and print advertisements, an instructive web-video on the BCT web site, posters, and a designated call-in telephone line. “Transit Watch” was introduced in summer 2009.

10. Acceptable Alternatives

Multimodalism is a trend in public transit geared to meet passengers’ needs for several methods of accessible and timely transportation. BCT is well on the way to multimodal status with its Bus Your Bike service that allows passengers to take their bicycles on the bus as a secondary transportation option. Bicycles are transported on racks located on the front of all BCT buses.

BCT also has partnerships with Tri-Rail, Transportation Management Association, and Community Buses. By using these many different forms of transportation, Broward County residents can assist in reducing traffic congestion and environmental pollution.

Tri-Rail is South Florida’s commuter train, operated by the South Florida Regional Transportation Authority (SFRTA), which runs along a 71-mile corridor parallel to Interstate 95 and services Palm Beach, Broward and Miami-Dade counties. Connecting wheelchair accessible bus service is available from all Tri-Rail stations, and shuttles connect passengers to the area’s three international airports: Miami International Airport, Fort Lauderdale/Hollywood International Airport, and Palm Beach International Airport. Representatives from both the CTC and the Planning Agency serve on the SFRTA ADA Advisory Committee.

TMAX EXPRESS: TMAX Express/Sun Trolley connects key downtown locations including Olde Town and Las Olas Riverfront, and also connects downtown to the beach via Las Olas Boulevard. It provides convenient lunchtime shuttle service for downtown employees and now has a new courthouse route. Express also provides a park and ride shuttle service operating between
Lauderdale Lakes Marketplace and downtown Fort Lauderdale.

Emergency Ride Home: If you work in downtown Fort Lauderdale for an employer who is a TMA (South Florida Commuter Services) member, and you rideshare, walk or bicycle, and are unexpectedly stranded at work or have a personal or family emergency, the TMA will provide you with a free ride to your home or wherever the emergency dictates.

III. QUALITY ASSURANCE

Chapter 427, F.S., Rule 41-2, F.A.C., and the Local Coordinating Board Operating Guidelines prescribe the CTC Evaluation process which summarizes the CTC's strengths and weaknesses over the past year in terms of implementing the Chapter and Rule, the terms of the MOA, and the goals and objectives appearing in the TDSP. The LCB is charged with the responsibility of conducting this Evaluation of the CTC. The LCB and staff perform the evaluation process, utilizing FCTD approved criteria. A copy of the Evaluation is provided to the MPO and the FCTD. The 2012 CTC Evaluation was approved by the LCB on June 17, 2013 and the MPO on July 11, 2013, and submitted to the Commission for the Transportation Disadvantaged on July 15, 2013. The Evaluation recommended that the CTC continue in its role and was approved by the CTD.

A. GRIEVANCE PROCEDURES/PROCESS

Paratransit Service Complaint and Grievance Procedure

The Complaint and Grievance provide the transportation disadvantaged general public a forum to address complaints and grievances relative to contract non-compliance.

COMPLAINT AND GRIEVANCE PROCEDURES
LOCAL COORDINATING BOARD
FOR TRANSPORTATION DISADVANTAGED SERVICES

The complaint and grievance rights of the user are posted in a location that is generally visible to sighted clients and are periodically explained verbally to sight impaired clients.

COMPLAINT PROCEDURES

1. The client or client's advocate contacts the Call Center, using the telephone number posted in the vehicles, and expresses dissatisfaction with the service citing a date and time and the reason for the complaint. If the complaint is related to matters of policy, the CTC explains that the service provided was within the CTC's scope of service and closes the matter.

2. If the complaint is not about a matter of policy, the Call Center, records the complaint in the Computerized Transportation Management System (CTMS). The CTMS assigns a tracking number to the complaint. 
   a) After taking the complaint, the call center will ask the client if they want the tracking number and to be advised of the resolution outcome.
   b) If the client says yes, the call center must note the request on the complaint form that is sent to the
CTC; CTC will follow up with the client.

3. The CTC forwards the complaint to the appropriate contractor who is required to respond to safety complaints immediately and other complaints within 24 hours.

4. The contractor responds to the complaint, either acknowledging that the complaint is valid, or disputing the complaint with documentation showing that the contractor was in compliance with its contract. If the contractor determines that the complaint is valid, the contractor also informs the CTC that it is taking corrective action.

5. The CTC determines whether or not the documentation is sufficient or that the complaint is valid.

6. The client is contacted by the CTC and advised of the resolution of the complaint and, if valid, the corrective action taken by the contractor.

If the client is not satisfied with the CTC’s explanation of the complaint resolution, the CTC should inform the client that it will look further into the matter if the client is willing to forward a written explanation. The following Grievance Procedures would then apply:

**GRIEVANCE PROCEDURES**

1. A letter stating the problem is sent to the Community Transportation Coordinator (CTC) Program Manager. The letter should outline the nature of the alleged complaint, the transportation operator involved and, where applicable, the date, time and place where the incident occurred.

2. A written response to the complainant on the status of the complaint must be transmitted by the CTC Program Manager within ten (10) working days of the receipt of the letter. In addition, the written response shall advise grievant of the following:
   a) The existence of the Ombudsman helpline and provide grievant with the helpline’s toll free telephone numbers; and
   b) If applicable, the existence of the Medicaid Fair Hearing process

3. If the complainant is not satisfied with the reply or if the complaint has not been settled to the satisfaction of the complainant, the complainant may, within ten (10) working days of receiving the CTC Program Manager’s response, request that a meeting be convened by the CTC Program Manager. The CTC Program Manager must schedule the meeting, within ten (10) working days of the notice by the complainant that such a meeting is requested, among the person or agency registering the complaint, the CTC Program Manager, the operator under contract, and the contracting agency.

4) If the complaint cannot be resolved as outlined above, the complainant must notify the CTC Program Manager by certified mail, return receipt requested, within ten (10) working days of the date of the meeting, of the complainant’s intention to appeal the decision to the Coordinating Board.

5) Upon receipt of complainant’s letter requesting appeal, the CTC Program Manager shall request the Coordinating Board to consider said appeal and to convene the Grievance Committee.
GRIEVANCE COMMITTEE PROCEDURES

1) The Grievance Committee has the power to hold hearings, conduct investigations and take testimony in all matters relating to complaints or grievances brought before the Committee.

2) If the CTC Program Manager receives notice of an appeal, a notice of hearing is served on the operator stating the nature of the complaint and the time and place of the hearing scheduled before the Grievance Committee.

3) Notice provided by the CTC Program Manager must provide the operator of services with no less than ten (10) days, excluding Saturdays, Sundays and legal holidays, written notice of the time, date, and place of the hearing. The said Notice of Hearing must be sent by certified mail, return receipt requested, to the last known address of the operator of the services.

4) In any hearing before the Grievance Committee irrelevant, immaterial or unduly repetitious evidence will be excluded. All other evidence of a type commonly relied upon by reasonably prudent persons in the conduct of their affairs will be admissible whether or not such evidence would be admissible in the courts of Florida.

5) Each party has the right to be represented by counsel, to call and examine witnesses, to introduce exhibits, to examine opposing witnesses on any relevant matter, even though the matter was not covered under direct examination, and to impeach any witness regardless of which party first called the witness to testify.

6) After an evidentiary hearing, the Grievance Committee submits to the Coordinating Board its recommended order consisting of findings of fact, conclusions of law and recommendations.

7) The Coordinating Board may adopt the recommended order as its final order. The Coordinating Board may reject or modify the conclusions of law and recommend final action, but may not reject or modify the findings of fact, unless it first determines from a review of the complete record and states with particularity in its final order, that the findings of fact were not based on competent substantial evidence or that the proceedings in which the findings were based did not comply with the essential requirements of law.

8) All meetings and hearings must be open to the public and advertised, but the public will not be given the opportunity to participate. Minutes will be kept at each hearing.

9) Appeal from the decision of the Coordinating Board is by certiorari to the circuit court in accordance with the Florida Rules of Appellate Procedure.
B. EVALUATION PROCESS

1. CTC Monitoring Procedures of Operators and Coordination Contractors

Operators:

a. Contractors are required to provide the Broward County Transit Division (BCT) with updated Driver Rosters by the tenth (10) calendar day of each month. Each roster shall indicate driver's name, date of hire, training dates, last Drug and Alcohol test, Motor Vehicle Record review date, and the date of the latest criminal record check. Contractors are also required to maintain updated Driver Rosters in the Computerized Trip Management System (CTMS) supplied to them by BCT.

b. Contractors must provide BCT with evidence that all drivers have completed the training program offered by BCT prior to any such driver providing service, and must attend a refresher class or repeat new driver training at a minimum of once every two years. This training shall be included as part of the monthly operating summary package. Additionally, drivers are required to participate in a driver training program developed by BCT. Contractors must require all personnel providing transportation to possess the following, which shall be filed with BCT prior to such personnel providing paratransit service: a current, valid Broward County Chauffeur’s Registration in accordance with the requirements of Chapter 22-1/2, Broward County Code of Ordinances.

c. BCT requests State of Florida Motor Vehicle Reports for contractor's drivers on a periodic basis. In the event such a report shows evidence of any violations, BCT will promptly notify the contractor and the Taxi Section of the Broward County Permitting, Licensing and Consumer Protection Division. The contractor must have procedures in place to periodically review their drivers' Motor Vehicle Reports. Compliance is monitored by BCT staff.

d. The training program includes methods for measuring the effectiveness of the training in developing skill and improving performance. The methods shall be based on performance indicators which measure proficiency and not solely on the contractor meeting minimum training hours required. Such measurement procedure shall be provided to BCT upon request.

e. BCT performs annual evaluations of the contractors ensuring compliance with the System Safety Program Plan, locally approved standards, Florida Commission for the Transportation Disadvantaged (CTD) standards, Florida Department of Transportation (FDOT) standards, annual operating data and insurance requirements.

f. BCT’s direct involvement in the day-to-day operations of the service includes, but is not limited to: on-street monitoring of drivers and vehicles, inspections of equipment, customer service functions, contract compliance oversight, and quality control. Full cooperation is provided by the contractors for BCT’s monitoring programs. Contractors provide full access to all driver records at the operating facilities. Contractors are required to make available a work station, desk, telephone, and chair for use by a BCT representative, if so requested, at the contractors’ facilities. BCT’s on-street monitoring shall include, but is not limited to: on-time performance, knowledge of the service area and routing, driver assistance, manifest accuracy and
g. Contractors provide BCT with service data, via summary reports generated by the Computerized Trip Management System (CTMS), and a weekly invoice for each component of service for the previous week (Monday through Sunday) by close of business each Wednesday. This information shall include, but is not limited to, the following: number of one-way passenger trips by type of trip; total hours of vehicle service; copies of the daily reports for driver activity or other daily reports showing starting and ending times, and starting and ending mileage, for each vehicle used by each driver; copies of trip tickets, log sheets, or driver manifests; the weekly reimbursement charges for services rendered the previous week, and trips requests that are denied (Please note that BCT operates with a zero trip denial rate. If one contractor is unable to perform a requested trip due to capacity constraints, another contractor performs the trip).

h. Contractors must keep separate denial forms/logs, by component, of all requests for service that cannot be accommodated. Contractors shall fill out all information required on the log for each ride request that could not be accommodated. A cumulative denial form/log shall be filled out, showing all rides denied for the week, and shall be included as part of the monthly service summary submitted to BCT (Please note that BCT operates with a zero trip denial rate. If one contractor is unable to perform a requested trip due to capacity constraints, another contractor performs the trip).

i. Pursuant to the Federal Transit Administration's standards for precision, accuracy, and accountability, BCT is required to report data to the National Transit Database (NTD). As may be required by the Federal Transit Administration, or BCT, contractors shall collect NTD data and other "service supplied" information or "service consumed" information, as said terms are defined in Section 15 of the Federal Transit Administration Regulations. Contractors are responsible for the collection of financial and operational data, including on-board operational and passenger-related data, for transmittal to BCT on BCT -approved forms as follows: operational and passenger-related data shall be submitted to BCT no less than weekly, financial data shall be submitted to BCT no less than quarterly, and designated "service supplied" data shall be submitted to BCT thirty (30) days prior to the termination of BCT’s fiscal year. All source documents for Section 15 filings shall be subject to audit and shall be maintained by the contractors for five (5) years following final payment under their agreement with BCT.

j. Contractors must provide written monthly reports to BCT by the tenth (10th) day of the month following the month of service. All required information shall be collected and reported individually for each funding component of service. Such reports shall be submitted on a form developed by the contractor and approved by BCT, and shall include, but not be limited to the following:

k. Brief Narrative: A brief narrative highlighting the month's activities, any unusual events, trends and other noteworthy observations.

l. Ridership: Number of one-way passenger trips, Personal Care Attendants, and Companions
on a day-by-day basis, for each funding and fare entity and category.

m. Miles and Hours: Total hours of service and vehicle miles on a day-by-day basis.

n. Cost of Service: Total service revenue based upon the contracted rates, collected fares, and net revenue to provide service (total revenue less imputed fares).

o. Service Quality Measures: On-time performance data, trips completed, missed trips, and trip denials with an explanation.

p. Efficiency Measures: Appropriate measures to include passengers per mile, hour, or vehicle trip.

q. Fleet Data: Updated fleet listings and status of all vehicles.

r. Other: Accident/incident reports/briefs/findings, training activities/certifications, including sensitivity training and education, key personnel changes, and suggested improvements.

s. All vehicles, wheelchair lifts or ramps, and wheelchair securement devices are inspected annually by BCT staff. All vehicles must be approved, inspected and display an inspection sticker issued by BCT prior to providing service. If any complaints are received concerning any aspect of a vehicle or its equipment, the vehicle must report to BCT’s facility the next business day for an inspection. Any vehicle found to be in violation of any contractual standard must be removed from service until such violation is remedied.

t. BCT reserves the right, through its agreements with the contractors, in its sole discretion, at any time, to inspect vehicles and maintenance facilities during normal working hours, and to review contractors’ maintenance records.

u. Day-to-day monitoring is also conducted through BCT’s Complaint Procedure. All client complaints shall be referred to BCT’s Paratransit Customer Services. The contractors shall not respond directly to a client who desires to file a service complaint. BCT personnel may make initial contact with the contractors to obtain a verbal response and to determine the validity and resolution of the complaint. All complaints are entered into Computerized Trip Management System (CTMS). A copy of the complaint will be forwarded to the contractor for a written (or electronic) response to BCT. Contractors’ responses shall be made within three (3) business days of receipt of the complaint. Complaints of a more serious nature, such as injury, driver misconduct, and client safety issues shall be responded to by the end of that business day. Complaints are tallied each month, indicating the total number of complaints, and type of complaints, for each contractor. The complaint standard (maximum allowed) is established at 2.9 complaints per 1,000 trips in a given month.

v. BCT works closely with the CTD’s Ombudsman Program staff to resolve all service complaints and inquiries. BCT investigates each item as described above (see #13), contacts all concerned parties, and sends the CTD’s Ombudsman Program staff a report on the resolution of the complaint/inquiry.
**Coordination Contractors**: BCT performs annual evaluations of the coordination contractors ensuring CTD standards, annual operating data, drug and alcohol testing programs, vehicle inspections and insurance requirements.

**IV. COST/REVENUE ALLOCATION AND RATE STRUCTURE JUSTIFICATION**

The TOPS paratransit contract went into effect on January 1, 2010. Four (4) providers, and four (4) subcontractors signed a five-year contract with Broward County.

The rate structure justification can be broken down in two parts. The first details the contractors’ functions and the second details the Community Transportation Coordinator’s functions. See Appendix A, Rate Structure “TD Trust Fund Service Rates.”

TOPS Reservation Call Center: Telephone In-take; Scheduling

Contractor: Dispatching; Vehicle Maintenance; Trip Reconciliation/Billing

CTC:  
- Application Intake  
- Eligibility Screening  
- Eligibility Testing  
- Eligibility Certification  
- Re-certification  
- Client Information Source  
- Client Service

Community Outreach  
- Complaint Processing  
- Daily Service Monitoring  
- Reporting  
- Marketing  
- Vehicle Inspections/Safety Systems  
- Trip Reconciliation/Billing
APPENDIX A

RATE STRUCTURE
<table>
<thead>
<tr>
<th>TYPE OF SERVICE TO BE PROVIDED</th>
<th>UNIT (Passenger Mile or Trip)</th>
<th>COST PER UNIT $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory</td>
<td>passenger trip</td>
<td>$23.51</td>
</tr>
<tr>
<td>Wheelchair</td>
<td>passenger trip</td>
<td>$40.30</td>
</tr>
<tr>
<td>31-Day Reduced Pass</td>
<td>per pass</td>
<td>$29.00</td>
</tr>
</tbody>
</table>
APPENDIX B

OPERATORS and COORDINATION CONTRACTORS
<table>
<thead>
<tr>
<th>BUSINESS NAME</th>
<th>PHONE</th>
<th>EXT</th>
<th>CONTACTS</th>
<th>E-MAIL</th>
<th>STREET ADDRESS</th>
<th>CITY</th>
<th>ZIP</th>
<th># Veh</th>
<th>Rec'd</th>
<th>BUSINESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACTS-Agency for Community Treatment Services</td>
<td>813-248-4899</td>
<td>234</td>
<td>Ken Salzer</td>
<td><a href="mailto:ksalzer@acttsfl.org">ksalzer@acttsfl.org</a></td>
<td>4612 North 58th Street</td>
<td>Tampa</td>
<td>33610</td>
<td>3</td>
<td>Y</td>
<td>Child Foster Care</td>
</tr>
<tr>
<td>AMT - Allied Medical Transport</td>
<td>954-681-4373</td>
<td>Rashelle Rowe</td>
<td><a href="mailto:alliedmedicaltransport@yahoo.com">alliedmedicaltransport@yahoo.com</a></td>
<td>5896 Rodman Street</td>
<td>Hollywood</td>
<td>33023</td>
<td>88</td>
<td>Y</td>
<td>Non-Emrgy Trans</td>
<td></td>
</tr>
<tr>
<td>Ann Strock Center</td>
<td>954-584-8000</td>
<td>Charlotte Taylor</td>
<td><a href="mailto:cmthetaylor@annstockcenter.org">cmthetaylor@annstockcenter.org</a></td>
<td>1790 SW 43rd Way</td>
<td>Ft. Lauderdale</td>
<td>33317</td>
<td>16</td>
<td>Y</td>
<td>ICF/IID Preschool, Gr Home</td>
<td></td>
</tr>
<tr>
<td>ARC Broward Achievement &amp; Rehabilitation Ctr.</td>
<td>954-745-9400</td>
<td>4157</td>
<td>Judy Ellis</td>
<td><a href="mailto:jellis@arcbroward.com">jellis@arcbroward.com</a></td>
<td>10250 NW 53rd Street</td>
<td>Sunrise</td>
<td>33351</td>
<td>22</td>
<td>Y</td>
<td>Dis Soc Serv Agency</td>
</tr>
<tr>
<td>Archways, Inc.</td>
<td>954-763-2030</td>
<td>Aliek Turner-Nestor</td>
<td><a href="mailto:ant@archways.org">ant@archways.org</a></td>
<td>919 NE 13th Street</td>
<td>Ft. Lauderdale</td>
<td>33304</td>
<td>2</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BARC Housing, Inc.</td>
<td>954-745-9400</td>
<td>4157</td>
<td>Pat Fonseca</td>
<td><a href="mailto:pfonseca@arcbroward.com">pfonseca@arcbroward.com</a></td>
<td>10250 NW 53rd Street</td>
<td>Sunrise</td>
<td>33351</td>
<td>8</td>
<td>Y</td>
<td>Dis Soc Serv Agency</td>
</tr>
<tr>
<td>Broward Children’s Center, Inc.</td>
<td>954-943-7338</td>
<td>105 Margaret Brunnerlth</td>
<td><a href="mailto:margaret@bcckids.org">margaret@bcckids.org</a></td>
<td>200 SE 19th Avenue</td>
<td>Pompano Beach</td>
<td>33060</td>
<td>15</td>
<td>Y</td>
<td>Child Special Health Needs</td>
<td></td>
</tr>
<tr>
<td>Cerebral Palsy Adult Home, Inc.-Woodhouse</td>
<td>954-786-0344</td>
<td>134 Randall Bishop</td>
<td><a href="mailto:randallbishop@woodhouseencl.org">randallbishop@woodhouseencl.org</a></td>
<td>1404 NE 7th Street</td>
<td>Lauderhill</td>
<td>33341</td>
<td>8</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of Deerfield Beach, NEFP 2</td>
<td>954-480-4449</td>
<td>Frieda Caldas</td>
<td><a href="mailto:fcaldas@deerfield-beach.com">fcaldas@deerfield-beach.com</a></td>
<td>227 NW 2nd Street</td>
<td>Deerfield Beach</td>
<td>33441</td>
<td>8</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of Hallandale Beach, Hepburn Center</td>
<td>954-457-1460</td>
<td>Victor de Souza</td>
<td><a href="mailto:vdesouza@hallandalebeach.gov">vdesouza@hallandalebeach.gov</a></td>
<td>750 NW 68th Avenue</td>
<td>Hallandale Beach</td>
<td>33009</td>
<td>5</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of Lauderdale</td>
<td>954-572-1475</td>
<td>Jane Sullivan</td>
<td>jsullivan@ Lauderdale-fl.gov</td>
<td>7500 W Oakland Park Blvd</td>
<td>Lauderdale</td>
<td>33319</td>
<td>9</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>City of Margate, NVFP (2) reports</td>
<td>954-673-0300</td>
<td>Kelly Diaz</td>
<td><a href="mailto:kdiaz@margatefl.com">kdiaz@margatefl.com</a></td>
<td>8009 NW 10th Street</td>
<td>Margate</td>
<td>33063</td>
<td>18</td>
<td>Y</td>
<td>Sr Clr</td>
<td></td>
</tr>
<tr>
<td>City of Miramar, MSSC (2) reports</td>
<td>954-495-3844</td>
<td>Melissa Stuart</td>
<td><a href="mailto:melissa@mi.miramar.us">melissa@mi.miramar.us</a></td>
<td>8700 Miramar Pkwy</td>
<td>Miramar</td>
<td>33023</td>
<td>14</td>
<td>Y</td>
<td>Sr Transport</td>
<td></td>
</tr>
<tr>
<td>City of North Lauderdale</td>
<td>954-722-0000</td>
<td>487 Susanna Laurenti</td>
<td><a href="mailto:slaurienti@northlauderdale.org">slaurienti@northlauderdale.org</a></td>
<td>701 SW 71st Avenue</td>
<td>North Lauderdale</td>
<td>33068</td>
<td>3</td>
<td>Y</td>
<td>Community Transport</td>
<td></td>
</tr>
<tr>
<td>City of Tamarac Senior Ctr.</td>
<td>954-597-3833</td>
<td>Daniela Mokonado</td>
<td><a href="mailto:danila.mokonado@tamarac.gov">danila.mokonado@tamarac.gov</a></td>
<td>8001 Noh Hill Road</td>
<td>Tamarac</td>
<td>33321</td>
<td>5</td>
<td>Y</td>
<td>Community Transport</td>
<td></td>
</tr>
<tr>
<td>Daniel D Cantor Senior Ctr.</td>
<td>954-742-2299</td>
<td>Natalie Grunewald</td>
<td><a href="mailto:natie@cantorcenter.org">natie@cantorcenter.org</a></td>
<td>5000 Noh Hill Road</td>
<td>Sunrise</td>
<td>33351</td>
<td>5</td>
<td>Y</td>
<td>Sr Clr</td>
<td></td>
</tr>
<tr>
<td>Douglas Gardens North - DGN, Inc.</td>
<td>404-438-0063 183</td>
<td>208</td>
<td>Nancy Zombeck</td>
<td><a href="mailto:nzmbeck@mhba.com">nzmbeck@mhba.com</a></td>
<td>705 SW 88th Avenue</td>
<td>Pembroke Pines</td>
<td>33025</td>
<td>1</td>
<td>Y</td>
<td></td>
</tr>
<tr>
<td>Glory House USA, Inc.</td>
<td>954-985-6600</td>
<td>Velery Campbell</td>
<td><a href="mailto:velerycampbell@gmail.com">velerycampbell@gmail.com</a></td>
<td>3409 Bahama Dr.</td>
<td>Miramar</td>
<td>33023</td>
<td>1</td>
<td>Y</td>
<td>Home/Comm Based Waiver</td>
<td></td>
</tr>
<tr>
<td>Gulf Coast Jewish Family &amp; Community Serv</td>
<td>727-479-1874</td>
<td>Richard Steiner</td>
<td><a href="mailto:valerycampbell@gmail.com">valerycampbell@gmail.com</a></td>
<td>14041 1st Blvd.</td>
<td>Clearwater</td>
<td>33760</td>
<td>1</td>
<td>Y</td>
<td>Residential treatment</td>
<td></td>
</tr>
<tr>
<td>Henderson Mental Health</td>
<td>954-777-1623</td>
<td>John Aquino</td>
<td><a href="mailto:jaquino@hendersonbehavioralhealth.org">jaquino@hendersonbehavioralhealth.org</a></td>
<td>4740 N State Rd</td>
<td>Lauderdale Lakes</td>
<td>33319</td>
<td>43</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inkeletal Direct - Tops Reservoir Center</td>
<td>305-523-1137</td>
<td>Carlos Escar</td>
<td><a href="mailto:carlos.escar@inktel.com">carlos.escar@inktel.com</a></td>
<td>13975 NW 58th Court</td>
<td>Miami Lakes</td>
<td>33014</td>
<td>0</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joseph Meyerhoff Senior Center SEFP</td>
<td>954-986-9805</td>
<td>Carmen Porte</td>
<td><a href="mailto:cporto@meyerhoffcenter.org">cporto@meyerhoffcenter.org</a></td>
<td>3081 Taft Street</td>
<td>Hollywood</td>
<td>33061</td>
<td>4</td>
<td>Y</td>
<td>Sr Resd Adult Daycare</td>
<td></td>
</tr>
<tr>
<td>Lucasus Developmental Ctr. (2 reports)</td>
<td>954-981-4019</td>
<td>Chris Buckley</td>
<td><a href="mailto:cbuckley@lucasuscenter.com">cbuckley@lucasuscenter.com</a></td>
<td>6411 Taft Street</td>
<td>Hollywood</td>
<td>33064</td>
<td>77</td>
<td>Y</td>
<td>Adults w/ Intellectual Dis</td>
<td></td>
</tr>
<tr>
<td>Medex Transportation, Inc</td>
<td>954-927-6700</td>
<td>Paula Weich</td>
<td><a href="mailto:pwelch@medexmediabac.com">pwelch@medexmediabac.com</a></td>
<td>2025 Harding Street</td>
<td>Hollywood</td>
<td>33020</td>
<td>31</td>
<td>Y</td>
<td>Non-Emrgy Trans</td>
<td></td>
</tr>
<tr>
<td>NW Federated Women's Club</td>
<td>954-714-3500</td>
<td>Sandra Hunter</td>
<td><a href="mailto:sandrah1237@gmail.com">sandrah1237@gmail.com</a></td>
<td>2185 NW 19th Street</td>
<td>Ft. Lauderdale</td>
<td>33311</td>
<td>1</td>
<td>Y</td>
<td>Sr Clr</td>
<td></td>
</tr>
<tr>
<td>Quality Community Services, Inc</td>
<td>954-753-7778</td>
<td>Sandra Monaros</td>
<td><a href="mailto:eternaliving@att.net">eternaliving@att.net</a></td>
<td>3700 Georgia Ave Ste 10-C</td>
<td>Palm Beach</td>
<td>33405</td>
<td>0</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rayfield Family Literacy</td>
<td>786-425-0113</td>
<td>Bernetta Carter</td>
<td><a href="mailto:benettacarter@aol.com">benettacarter@aol.com</a></td>
<td>427 South State Road 7</td>
<td>Hollywood</td>
<td>33023</td>
<td>5</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Soref Jewish Community Center</td>
<td>954-780-6700</td>
<td>Donald Drew</td>
<td><a href="mailto:drcree@scjcc.org">drcree@scjcc.org</a></td>
<td>8501 W Sunrise Blvd.</td>
<td>Plantation</td>
<td>33313</td>
<td>1</td>
<td>Y</td>
<td>Childcare/Sr Prog</td>
<td></td>
</tr>
<tr>
<td>St. Elizabeth Gardens</td>
<td>954-945-1497</td>
<td>John A Cameron</td>
<td><a href="mailto:cameron@chaffia.com">cameron@chaffia.com</a></td>
<td>801 NE 33rd Street</td>
<td>Pompano Beach</td>
<td>33064</td>
<td>1</td>
<td>Y</td>
<td>HUD Elderly Housing</td>
<td></td>
</tr>
<tr>
<td>St. Joseph's Tower</td>
<td>954-495-5150</td>
<td>Ann Brown</td>
<td><a href="mailto:abrown@chaffia.com">abrown@chaffia.com</a></td>
<td>3475 NW 30th Street</td>
<td>Lauderdale Lakes</td>
<td>33311</td>
<td>1</td>
<td>Y</td>
<td>HUD Elderly Housing</td>
<td></td>
</tr>
<tr>
<td>Sunrise Community, Inc.</td>
<td>954-744-1129</td>
<td>Jorge Viego</td>
<td><a href="mailto:jorge@sunrisegroup.org">jorge@sunrisegroup.org</a></td>
<td>5450 STIRLING ROAD</td>
<td>DAVIE</td>
<td>33314</td>
<td>1</td>
<td>Y</td>
<td>Dev Dis</td>
<td></td>
</tr>
<tr>
<td>Sunrise Opportunities, Inc</td>
<td>954-744-1129</td>
<td>Jorge Viego</td>
<td><a href="mailto:jorge@sunrisegroup.org">jorge@sunrisegroup.org</a></td>
<td>5450 STIRLING ROAD</td>
<td>DAVIE</td>
<td>33314</td>
<td>5</td>
<td>Y</td>
<td>Dev Dis</td>
<td></td>
</tr>
<tr>
<td>Tender Loving Care Transportation Services, Inc</td>
<td>954-917-8099</td>
<td>Darlene Ponder</td>
<td><a href="mailto:icaduldtransport@aol.com">icaduldtransport@aol.com</a></td>
<td>611 NW 31st Avenue</td>
<td>Pompano Beach</td>
<td>33060</td>
<td>16</td>
<td>Y</td>
<td>Non-Emrgy Trans</td>
<td></td>
</tr>
<tr>
<td>TMS Management Group, Inc.</td>
<td>727-828-1641</td>
<td>Dave McDonald</td>
<td><a href="mailto:daviddonald@tmsmg.com">daviddonald@tmsmg.com</a></td>
<td>13825 icoll Blvd Ste 613</td>
<td>Clearwater</td>
<td>33707</td>
<td>0</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Intervention Early Services</td>
<td>754-204-0312</td>
<td>Paula Locke</td>
<td><a href="mailto:tieschangel@yahoo.net">tieschangel@yahoo.net</a></td>
<td>4099 N State Road 7</td>
<td>Tamarac</td>
<td>33319</td>
<td>0</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United Cerebral Palsy of Broward County, Inc.</td>
<td>954-314-2040</td>
<td>Patricia Murphy</td>
<td><a href="mailto:pat.murphy@ucpsofFlorida.org">pat.murphy@ucpsofFlorida.org</a></td>
<td>3117 SW 13th Court</td>
<td>Ft. Lauderdale</td>
<td>33312</td>
<td>25</td>
<td>Y</td>
<td>Treatment/Care</td>
<td></td>
</tr>
<tr>
<td>Woodhouse, Inc.</td>
<td>954-786-0344</td>
<td>134 Randall Bishop</td>
<td><a href="mailto:randallbishop@woodhouseinc.org">randallbishop@woodhouseinc.org</a></td>
<td>1001 NE 3rd Avenue</td>
<td>Pompano Beach</td>
<td>33060</td>
<td>3</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

All the above operators and coordinators provide transportation to residents of Broward County. These residents attend various agencies, schools, training facilities or simply enhance their social abilities as any resident able to use the fixed-route service is able to accomplish. These operators and coordinators provide transportation with assistance from local, state, federal and private dollars. Updated 9-2013
APPENDIX C

TRANSPORTATION DISADVANTAGED (TD) APPLICATION
TD, as defined in Chapters 427 and 411 of the Florida Statutes are as follows:

427.011 Definitions.—For the purposes of ss. 427.011-427.017:
(1) “Transportation disadvantaged” means those persons who because of physical or mental disability, income status, or age are unable to transport themselves or to purchase transportation and are, therefore, dependent upon others to obtain access to health care, employment, education, shopping, social activities, or other life-sustaining activities, or children who are handicapped or high-risk or at-risk as defined in s. 411.202.

411.202 Definitions.—As used in this chapter, the term:
(8) “Handicapped child” means a preschool child who is developmentally disabled, mentally handicapped, speech impaired, language impaired, deaf or hard of hearing, blind or partially sighted, physically handicapped, health impaired, or emotionally handicapped; a preschool child who has a specific learning disability; or any other child who has been classified under rules of the State Board of Education as eligible for preschool special education services, with the exception of those who are classified solely as gifted.
(9) “High-risk child” or “at-risk child” means a preschool child with one or more of the following characteristics:
(a) The child is a victim or a sibling of a victim in a confirmed or indicated report of child abuse or neglect.
(b) The child is a graduate of a perinatal intensive care unit.
(c) The child’s mother is under 18 years of age, unless the mother received necessary comprehensive maternity care and the mother and child currently receive necessary support services.
(d) The child has a developmental delay of one standard deviation below the mean in cognition, language, or physical development.
(e) The child has survived a catastrophic infectious or traumatic illness known to be associated with developmental delay.
(f) The child has survived an accident resulting in a developmental delay.
(g) The child has a parent or guardian who is developmentally disabled, severely emotionally disturbed, drug or alcohol dependent, or incarcerated and who requires assistance in meeting the child’s developmental needs.
(h) The child has no parent or guardian.
(i) The child is drug exposed.
(j) The child’s family’s income is at or below 100 percent of the federal poverty level or the child’s family’s income level impairs the development of the child.
Predicated on the preceding, BCT utilizes the following eligibility guidelines to determine TD entitlement:

INCOME ELIGIBILITY –

ADULT – Shall be at or below 100 percent of the current/applicable Federal Poverty Level Guidelines

VERIFIED BY – Last pay stub for the year or income tax return for the previous calendar year

CHILD – Child’s family’s income is at or below 100 percent of the current/applicable Federal Poverty Level Guidelines

VERIFIED BY - Last pay stub for the previous year or income tax return for the previous calendar year for all residing in household

MENTAL OR PHYSICAL DISABILITY* –

ADULT -- Physical or mental disability will be verified by physician statement

CHILD --- Physical or mental disability will be verified by physician statement. All other eligible conditions will be require appropriate verification documentation

AGE –

TD eligibility, based on income, physical/mental disability or other qualifying condition listed in 411.202 F.S., is available to an individual regardless of age

*An in-person Functional Evaluation (FE), provided by an independent contractor, is ordinarily required to determine can use the fixed route system. Transportation assistance is provided as necessary to-and-from the FE appointment. The FE determines if the applicant can utilize the fixed route system and when the TD shared-ride service is required.
Dear TOPS Applicant:

Thank you for your interest in TOPS, Broward County’s shared-ride, door-to-door transportation program for persons who are prevented from independently using Broward County Transit (BCT) fixed-route bus services due to barriers in combination with their disability(ies) for some or all trips.

With TOPS, we can offer transportation under two separate programs:

**Florida Transportation Disadvantaged Program**, for eligible persons who cannot access fixed-route bus service or obtain their own transportation due to disability, age, or income.

**ADA Paratransit Service Program**, for eligible persons with physical, cognitive, emotional, visual or other disabilities which functionally prevent them from using the BCT fixed-route bus system permanently, temporarily or under certain conditions.

Enclosed are separate applications for each program. Choose the one that best addresses your needs: TD for bus pass program and/or medical transportation only (please specify); ADA for all other transportation. Please have the application fully completed by you and your Florida licensed/certified Health Care Provider before returning it to us. The information you provide is confidential and is used to determine eligibility only.

**NOTICE OF COLLECTING SOCIAL SECURITY NUMBER FOR GOVERNMENT PURPOSE**

Broward County collects your social security number for a number of different purposes. The Florida Public Records Law (specifically, section 119.071(5), Florida Statutes (2007)), requires the County to give you this written statement explaining the purpose and authority for collecting your social security number.

<table>
<thead>
<tr>
<th>Form</th>
<th>Purpose</th>
<th>Authorization</th>
</tr>
</thead>
<tbody>
<tr>
<td>TD program eligibility forms</td>
<td>To conduct eligibility verification, cross-checks, and to monitor for possible abuse.</td>
<td>County policy (See Note 1).</td>
</tr>
</tbody>
</table>

**Note:** Broward County collects your Social Security Number in the performance of a duty or responsibility the County must complete in accordance with law or business necessity. In the event a law does not specifically provide the County with the authority to collect your Social Security Number, it is imperative that the County collect your Social Security Number and this is expressly provided in section 119.071(5)2.b.
Transportation Disadvantaged (TD) eligible customers are those who cannot access a fixed-route bus service or obtain their own transportation due to disability, age, or income. It is a coordinated statewide effort to group customers together for a shared ride service. The Florida Transportation Disadvantaged grant that pays for trips in this category is funded by a $1.50 vehicle registration fee and voluntary donations.

To be considered for our Transportation Disadvantaged (TD) program, please complete every question:

**NOTE:** A valid Florida Driver’s License /or a valid Florida ID is required.

**PLEASE PRINT**

LAST Name: ___________________________ FIRST Name: ___________________________

Address: ________________________________________________ Apt/Rm#: ____________

City, State & Zip Code: ______________________________________

Phone: ___________________________ Social Security #: ___________ - - - - - - - -

Date of Birth (mm/dd/yyyy): ___________ FL Drivers Lic or FL ID : ___________________________

Emergency Contact (First Name, Last Name & Phone):

Mobility: □ Scooter/PWR-WC □ Wheelchair □ Walker □ Cane □ Crutches □ Cognitive
□ AMBI □ Leg/Back Braces □ Oxygen □ Hearing □ Visual – Acuity Corrected:

I Am applying for: □ Medical only □ Bus Pass only □ Both □ Other ___________________________

Do you have Medicaid? □ Yes □ No If Yes, Program code: ___________ Medicaid#: ___________

Your Monthly Income $ ___________________________ Household’s Monthly Income $ ___________________________

Number of persons in household _________ Is there a vehicle at your household? □ Yes □ No

What is your current means of Transportation? (check all that apply): □ TOPS! □ Drive □ EMT
□ Bus □ Shuttle □ Taxi □ Private Car □ Walk □ Bike □ Family □ Friends □ Residential Facility

Reasons condition(s) prevent bus travel and why other transportation is not available: (write on back if needed)

____________________________________

We, the undersigned, certify the information provided in this application is true and correct. We, the undersigned, understand that providing false or misleading information, or making false statements on behalf of others constitutes fraud and is considered a felony under the laws of the State of Florida.

Doctor’s Name (print): ___________________________________________ Dr.’s Florida License #: ___________________________

Doctor’s Signature: ___________________________________________ Dr.’s Telephone #: ___________________________

Client’s Signature: ___________________________________________ (Dr. info not required for Bus Pass Program)

TD Page 1 of 1
Please read this completely before submitting an ADA application

ADA Paratransit Service

Broward County Transportation Department’s ADA Paratransit Service is offered in accordance with the Americans with Disabilities Act (ADA) of 1990. The ADA Paratransit Service is for persons with physical, cognitive, emotional, visual or other disabilities which functionally prevent them from using the Broward County Transit (BCT) fixed-route bus system permanently, temporarily or under certain conditions.

Disability alone does not create eligibility for ADA Paratransit Service. The decision is based solely on the applicant’s functional ability to use BCT buses. The BCT fixed-route bus system is fully accessible, with wheelchair accessible buses and major transfer facilities. The unavailability of fixed-route service, difficulties using fixed-route or long travel times do not constitute eligibility for Paratransit.

Passenger fare is due upon boarding for every trip. Please use exact change as drivers do not carry cash. Fare is REQUIRED prior to entering vehicle. Failure to pay the fare may result in loss of transportation privileges.
**ADA Eligibility Criteria**

The law is specific in defining eligibility for ADA complementary paratransit services. A person must have a physical, cognitive or mental limitation, which prohibits his/her independent use of accessible fixed route public transportation.

**Category 1** Individuals who, as the result of a physical (including visual impairments), mental, or emotional impairment, and without the assistance of another individual (except the operator), cannot board, ride, or disembark from an accessible vehicle some or all of the time.

**Category 2** An individual who can independently use an accessible vehicle, but none is available on his/her route some or all of the time.

**Category 3** Individuals who have a specific impairment-related condition that prevents getting to/from a stop within the service area some or all of the time.

**Eligibility criteria does NOT include:**

Age, lack of service in your town, beyond ¾ mile from fixed-route bus service, inconvenience, discomfort, financial status, or inability to drive. A diagnosis of a potentially limiting illness or condition is not sufficient; you and your provider must describe how your disability prevents you from getting to, boarding/disembarking, and/or riding on fixed-route transit services independently.

When completing your application, assess your potential travel throughout the entire bus system during all seasons, not just those in your immediate neighborhood or those that you normally use.
The Application Process

All applicants seeking eligibility for the ADA Paratransit Service must go through an eligibility determination process. The ADA Paratransit eligibility application process includes, but is not limited to, a medical verification of the disability, a review of the applicant’s own assessment of their ability to use BCT buses, and a functional assessment. Information provided by treating health care facilities or medical professionals may also be considered. Incomplete application forms will be returned for completion and additional information may be requested during the processing of an eligibility request.

All requested information must be provided and the application process complete before an eligibility determination can be rendered.

Evaluation Procedure and Functional Assessments

An in-person functional evaluation is usually required to determine if the applicant can use the BCT fixed-route system. Transportation assistance is provided as necessary to and from the evaluation appointment. The purpose of the evaluation is to determine when, and under what circumstances, the applicant can use BCT buses and when Paratransit shared-ride service is required. The functional physical evaluation consists of a simulated bus travel experience, including boarding a bus, maneuvering a curb and a curb cut, and crossing the street. Skills evaluated include balance, strength, coordination and range of motion. The cognitive functional assessment consists of certain standardized tests designed to measure skills such as memory, attention span and route-finding ability. Functional vision and respiratory considerations are reviewed. Variables in the environment, as well as the applicant’s ability to perform the tasks required to use the bus, are also considered.
Types of Eligibility

Once determined eligible for ADA Paratransit service, you will be assigned an eligibility classification. The eligibility classification is consistent with your ability to use fixed-route transit. These classifications include:

**Unconditional** - Individual is not able to use accessible fixed-route transit under any circumstances and is eligible for all trips on the paratransit service.

**Conditional** - Individual is able to use BCT buses most of the time, but would, under certain circumstances and for certain trips, be prevented from using BCT buses independently.

**Temporary** - Individual is not able to use accessible fixed-route transit at this time, however the condition or circumstance(s) leading to eligibility is reasonably expected to improve in the future.

Mobility aid requirements

NOTE: Service vehicles are equipped with lifts that will accommodate mobility devices that are no longer than 48-inches and no wider than 30-inches, with the combined weight of the passenger and the device not to exceed 600 pounds. Devices that exceed these standards may not be transportable.

A WC-19 compliant mobility device is the newest part of transit safety technology. Mobility devices built to this standard have suitable points for attaching tie-down straps and it is recommended that mobility aids used in Paratransit be WC-19 compliant.
Alternative Programs and Appeals

“Travel Training” service is available free of charge to those who need help in learning how to use the BCT bus system.

In addition, other accommodations such as accessible bus stops, route announcements, and easy-to-read signs make using the BCT bus system possible for many people with disabilities.

Individuals who do not meet the eligibility criteria for ADA Paratransit service or do not complete the ADA eligibility process may be eligible for alternative programs that provide transportation to specific destinations such as medical appointments.

Information regarding the ADA eligibility appeals process is available from the BCT ADA Paratransit eligibility unit. Applicants who are determined not eligible, or who do not agree with the conditions established for their use of BCT ADA Paratransit Service, may request a review at an informal or formal hearing level.

BROWARD
COUNTY
FLORIDA

Call us at......... : (954) 357-8400
TTY Access....... : (954) 357-8302
Toll Free:......... : 1 (800) 599-5432

This document can be made available in audio cassette or other appropriate alternative formats by request.
All questions must be answered. Incomplete forms will be returned.

INSTRUCTIONS FOR COMPLETING THIS FORM:

The applicant (or someone assisting the applicant) must complete all applicable pages and sign in all places where the applicant’s signature is required. The Florida licensed medical professional most familiar with your disabling condition(s) must complete and sign the MEDICAL VERIFICATION section on all forms where the medical professional’s signature is required.

We must have original signatures as we cannot accept copies or faxes.

All applicants must be at least 13 years old to travel without a parent.

All applicants, whether new or persons applying for recertification, must complete a new application. The ADA certification process may involve an in-person functional evaluation to determine if the applicant can use the BCT fixed-route bus system. BCT will pay for this evaluation.

The application process will not be complete until all forms and any in-person assessments have been completed.

If you have any questions or need assistance completing this form, please contact:

954-357-8400 (Voice)  1-800-599-5432 (Toll Free)
954-357-8302 (TTY)    www.broward.org/bct/pages/paratransit.aspx

WHEN COMPLETED, PLEASE MAIL THIS FORM TO:
BROWARD COUNTY TRANSIT, PARATRANSIT SERVICES
1 N. UNIVERSITY DR, PLANTATION, FL 33324

Due to safety, security and other concerns, applications are only accepted by mail.
Part 1
General Information

PLEASE PRINT NEATLY

Last Name: ________________ First Name: ________________ MI: ______
Street Address: ___________________________ Apt: ______ Bldg: ______
Bldg./Subdivision Name: ________________ E-mail: ____________________
City: ___________________________ State: ______ Zip Code: ______
Home Phone: ________________ Other Phone: ____________________
Social Security #: ________________ Date of Birth: ________________

If someone assisted you in completing this form, please identify them below:
Name: __________________________________________________________________ Phone: ________________

In which format(s) do you require information and material to be sent to you?
☐Large Print  ☐Audio Tape  ☐Audio CD  ☐CD-ROM  ☐Other: ______

In case of emergency, whom should we notify?
Name: __________________________________________________________________ Phone: ________________
Relationship: __________________________________________________________________
Other Phone or E-mail: __________________________________________________________________

Please indicate below the reason you are seeking Paratransit eligibility
☐ I can use BCT sometimes, as long as I can get to and from the bus stops.
☐ I can use BCT if the trip I am making does not require a bus transfer.
☐ I can use BCT, but find it time consuming and/or inconvenient.
☐ Because of my disability, I can never use the BCT fixed-route bus service.
Part 2 – Information about Applicant’s Disability

1. Please identify all conditions that prevent you from independently using BCT fixed-route bus services some or all of the time.

| ☐ Arthritis         | ☐ Cancer            | ☐ Arteriosclerosis   |
| ☐ Cerebral Palsy    | ☐ Cognitive (D)     | ☐ Asthma             |
| ☐ Multiple Sclerosis| ☐ Diabetes          | ☐ Chronic ObstructivePulmonary Disease |
| ☐ Muscular Dystrophy| ☐ Epilepsy/Seizure Disorder (C) | ☐ Congestive Heart Failure |
| ☐ Parkinson’s Disease| ☐ Hearing Impairment| ☐ Cystic Fibrosis    |
| ☐ Paraplegia        | ☐ HIV/AIDS          | ☐ Emphysema          |
| ☐ Quadriplegia      | ☐ Kidney Disease/Dialysis | ☐ Heart Attack      |
| ☐ Stroke/Cerebral Trauma (Date of occurrence) | ☐ Lupus | ☐ Peripheral Vascular Disease |
| ☐ Mental Illness    | ☐ Mental Health (D) | ☐ Thrombosis         |
| ☐ Developmental Delay | ☐ Surgery (Date) | ☐ Other:______________ |
| ☐ Other:_____________ | ☐ Visual Impairment (B) | The licensed/certified health care provider familiar with your most limiting condition needs to complete ONE Provider Verification Form: A-General Medical, B-Visual Impairment, C-Epilepsy or Seizure Disorders, D-Cognitive or Mental Health disabilities. It is optional to submit additional completed verification forms if you want to provide more information about other conditions that affect your functionality. |

2. Is the disability described above temporary or permanent?

- ☐ Temporary, I expect it to last for another _______ months
- ☐ Permanent
- ☐ I don’t know

3. Do you use any of the following mobility aids or equipment?

- ☐ Oxygen
- ☐ Leg braces
- ☐ Long white cane
- ☐ Alphabet/Picture Board
- ☐ Service animal - Describe: ____________________________
- ☐ I do not use any of the above aids or equipment
4. Do you require the assistance of a Personal Care Attendant* (PCA) (Someone who must assist you with daily life functions)?

* Personal Care Attendant (PCA) shall mean someone who is designated or employed specifically to help the eligible client meet their personal needs, including traveling. A PCA may always travel with an eligible client. PCA not provided by BCT and is authorized only when a justifiable need is established.

☐ YES, I need assistance with:
☐ Eating ☐ Mobility ☐ Reading ☐ Transfers
☐ Medication ☐ Other: ______________________________________

☐ NO, I do not need assistance when I travel.

Part 3 – Questions About Using County Buses

5. Have you ever used the BCT buses?

☐ YES, I typically use the BCT buses ______ times a week
☐ YES, I used to but stopped on ________ because: __________________________
☐ NO

6. What might help you ride the BCT buses? Check all that apply

☐ A communication aid
☐ Route and schedule information
☐ Being able to get BCT buses with lifts
☐ Learning to use BCT buses with travel training
☐ If the bus stops were closer to where I live and where I need to go
☐ Other, describe: ____________________________________________
☐ None of these would help

7. Can you ask for and follow written or oral instructions to use BCT buses?

☐ YES ☐ NO ☐ SOMETIMES

If you choose either NO or SOMETIMES, check all that apply

☐ I probably could with instruction
☐ I get confused and might get lost
☐ Other people cannot understand me
☐ Other: ____________________________________________
8. Are you able to get to and from bus stops on your own?

☐ YES  ☐ NO  ☐ SOMETIMES.

If you choose either NO or SOMETIMES, check all that apply

☐ I feel unsafe traveling alone
☐ I probably could with travel training
☐ I get confused and cannot find my way
☐ I cannot travel outside when it is too hot
☐ I cannot if the street or sidewalk is too steep
☐ I cannot cross busy streets and intersections
☐ I cannot get to places if there are no curb-cuts
☐ I cannot find my way at night because of a vision problem
☐ Other: __________________________________________

9. How far can you travel on your own OR using your mobility aid?

☐ I cannot get outside my house/apartment
☐ I can get to the curb in front of my house/apartment
☐ I can get up to 3 blocks
☐ I can get up to 6 blocks
☐ I can get up to 9 blocks or more

10. Can you WAIT up to 30 minutes for a county bus at a bus stop?

☐ YES
☐ YES, but only if the stop has a bench and shelter
☐ YES, but I do not like to wait that long
☐ NO, explain: __________________________________________

11. Are you able to use a bus ramp or lift?

☐ YES  ☐ NO  ☐ SOMETIMES  ☐ I do not know, I have never tried

If you choose either NO or SOMETIMES, check all that apply

☐ I am not familiar with bus ramps or lifts
☐ I cannot climb the stairs
☐ I probably could with travel training
☐ I do not want to use the lift
☐ Other: __________________________________________
12. If you are able to get on and off county buses, can you get to a seat or wheelchair position by yourself and ride the bus?

☐ YES  ☐ NO  ☐ SOMEBTIMES  ☐ I do not know, I have never tried

If you choose either NO or SOMETIMEs, **check all that apply**

☐ I have a balance problem
☐ I need a seat nearest the door
☐ I have trouble finding a seat
☐ Other: ________________________________

13. If you are able to get on and off county buses, do you know where to get off the bus or can you find out by yourself?

☐ YES  ☐ NO  ☐ SOMETIMEs  ☐ I do not know, I have never tried

If you choose either NO or SOMETIMEs, **check all that apply**

☐ I get confused and cannot remember where I am going
☐ I can if the driver calls out the stops
☐ I probably could with travel training
☐ Other: ________________________________

14. What are the barriers in your environment that combined with your disability prevent you from using the BCT independently? Some examples may include:

☐ Busy street to cross ☐ Inclines ☐ Time of day
☐ Lack of curb cuts ☐ No crosswalk light ☐ Distance
☐ Construction
☐ No sidewalk/sidewalk condition (Describe): __________________________
☐ Other: ________________________________

15. Is your condition affected by weather?  ☐ Yes ☐ No

If yes, please explain______________________________

_________________________________________
16. Provide any additional information that explains your functional level of mobility or the barriers/conditions that prevent you from using BCT fixed-route bus services. (Attach as much documentation and extra pages as you need)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

17. Provide the name/address of travel destinations that you currently go to or plan to make:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

18. Additionally, describe types of activities you engage in and if you do these independently (such as bike riding, working, sports you participate in). If you need assistance, describe what types of assistance you need in order to perform the activity.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Part 4 - Applicant Certification

Sign below to indicate that the information you have given is correct to the best of your knowledge. If you are unable to sign, your power of attorney may sign; attach proof of POA.

I understand that the purpose of this application is to determine if there are times when I cannot use BCT fixed-route bus service and must therefore use ADA Paratransit services. I certify, to the best of my knowledge, that the information in this application is true and correct. I understand that providing false or misleading information, or making false statements on behalf of others constitutes fraud and is considered a felony under the laws of the State of Florida.

I understand that providing false or misleading information may result in a reevaluation or revocation of my eligibility.

X ________________________________ Date ______________

Applicant's Signature

Sign below to indicate permission for your health provider to release information for the sole purpose of facilitating your eligibility determination or providing you with transportation. If you are unable to sign, your power of attorney may sign; attach proof of POA.

I hereby authorize my Health Care Provider to release any information necessary to determine TOPs eligibility to BCT.

X ________________________________ Date ______________

Applicant's Signature

**Applicant’s Checklist:**
- [ ] There is a signature and date in both spaces above.
- [ ] My completed portion of the application, with the appropriate Provider’s Verification Form, has been given to my health care provider.
- [ ] The Provider’s Verification Forms A-General Medical, B-Visual Impairment, C-Epilepsy & Seizure Disorder, and/or D-Cognitive or Mental Health disabilities, are complete.

NEXT SECTION TO BE COMPLETED BY LICENSED/CERTIFIED HEALTH CARE PROVIDER ONLY
By completing and signing this document, you the health care professional, certify the truth and accuracy of the information provided on this application, to the best of your professional knowledge. The Americans with Disabilities Act of 1990 requires that BCT provide services to persons who are unable to use the fixed-route bus system due to a disability. The information you provide will allow the BCT to make an appropriate evaluation of eligibility. To qualify for Paratransit service, an individual must meet at least one of the following criteria:

**Category 1** Individuals who, as a result of a physical or mental impairment (including visual impairments), and without the assistance of another individual (except the operator) cannot board, ride, or disembark from an accessible transit vehicle.

**Category 2** Individuals who can independently use accessible vehicles, but none are available on their route.

**Category 3** Individuals who have a specific impairment-related condition that prevents them from independently getting to/from a stop.

The licensed/certified health care provider familiar with your most limiting condition needs to complete **ONE** Provider Verification Form: A-General Medical, B-Visual Impairment, C-Seizure or Epilepsy Disorders, D-Cognitive or Mental Health disabilities. It is optional to submit additional completed verification forms, but you may do so if you want to provide more information.

*Information which you provide will assist us in determining the applicant’s functional ability to use public transportation. It is essential that you be precise and comprehensive. False or misleading information diverts resources away from persons legitimately qualified to use this program.*
TOPS Paratransit Eligibility Form A:
Licensed Provider’s Form (General Medical)

Applicant’s Name: __________________________ Date of Birth: ______
Applicant’s Address: ___________________________________________
Relationship to the applicant: _____________________________________
How long have you provided services/treatment for the applicant?_______

1. What is the medical condition that prevents applicant from accessing, boarding, disembarking, and/or riding on BCT bus system independently?  
(Note: BCT fixed-route buses are 100% accessible. Eligibility criteria does not include age, inability to drive or that service would “benefit” the applicant.)

2. Date of onset _____________________________________________

3. How does the applicant’s disability in combination with any barriers in the environment, prevent the applicant from independent use of the BCT fixed route services? ________________________________

4. Does the applicant have the ability to travel in complex, crowded places? Consider the location, time of day and accessibility.  
☐ Yes ☐ No ☐ Sometimes  
If no or sometimes, please explain: __________________________

5. Is the applicant’s functional limitation permanent?  
☐ Yes ☐ No  If no, what is the expected duration?  
# of Months ______ # of Years ______ Unsure ______

6. For safety reasons, should the applicant travel (on TOPS) at all times with a personal care attendant (PCA)?  
☐ Yes ☐ No  If yes, please explain: __________________________

GENERAL MEDICAL FORM A P1 of 2
7. For safety reasons can the applicant be left unattended at pickup or drop-off locations? □ Yes □ No  If no, please explain: __________
____________________________________________________________________

8. Do you agree with the applicant’s self-assessment?  
□ Yes □ No  If no, please explain: __________________________
____________________________________________________________________

9. Is there any additional information about conditions/barriers that prevent the applicant from using the fixed route some or all of the time?
____________________________________________________________________

10. Provider’s Checklist:  
□ I have provided a live signature (not photocopied, or stamped)  
□ I have completed all contact information below, including a State Board License # or Certification # (not NPI, DEA).

I certify that the information given above is correct to the best of my knowledge.

X ____________________________ DATE __________
Signature of Licensed Health Care Provider

Clearly print your contact information below:

NAME________________________BOARD CERT # or LIC#___________
PHONE #_________________________FAX # ____________________
BUSINESS ADDRESS _________________________________________
EMAIL ______________________________________________________

When application is fully complete, please return this signed original to your patient, who will then submit the completed package to our offices.

THANK YOU FOR YOUR TIME AND INPUT.
By completing and signing this document, you, the health care professional, certify the truth and accuracy of the information provided on this application, to the best of your professional knowledge. The Americans with Disabilities Act of 1990 requires that BCT provide services to persons who are unable to use the fixed-route bus system due to a disability. The information you provide will allow the BCT to make an appropriate evaluation of eligibility. To qualify for Paratransit service, an individual must meet at least one of the following criteria:

**Category 1** Individuals who, as a result of a physical or mental impairment (including visual impairments), and without the assistance of another individual (except the operator) cannot board, ride, or disembark from an accessible transit vehicle.

**Category 2** Individuals who can independently use accessible vehicles, but none are available on their route.

**Category 3** Individuals who have a specific impairment-related condition that prevents them from independently getting to/from a stop.

The licensed/certified health care provider familiar with your most limiting condition needs to complete ONE Provider Verification Form: A-General Medical, B-Visual Impairment, C-Seizure or Epilepsy Disorders, D-Cognitive or Mental Health disabilities. It is optional to submit additional completed verification forms, but you may do so if you want to provide more information.

Information which you provide will assist us in determining the applicant's functional ability to use public transportation. It is essential that you be precise and comprehensive. False or misleading information diverts resources away from persons legitimately qualified to use this program.
TOPS Paratransit Eligibility Form B:  
Licensed or Certified OMS Provider’s Verification Form  
(Visual Impairment)

Applicant’s Name: _______________________ Date of Birth: ____________
Applicant’s Address: ________________________________________________
Relationship to the applicant: ________________________________________
How long have you provided services/treatment for the applicant? _______

1. Please specify the applicant’s Visual Impairment: ______________
2. Applicant’s Best Corrected Visual Acuity: _________________
3. Date of onset _________________________________________________
4. Is applicant’s functional limitation permanent? ☐ Yes ☐ No  

If no, what is the expected duration?  
# of months______ # of years______ unknown______
5. What is the prognosis? ________________________________________
6. Please note mobility aids used by applicant: ______________________
7. Has the applicant received mobility/travel training to use the fixed route  
Bus system? ☐ Yes ☐ No ☐ Unknown  

If yes, what were the outcomes? __________________________________

How does the applicant’s disability, combined with any environmental  
barriers, prevent independent use of the BCT fixed route bus service?  
_________________________________________________________________
8. Please comment on applicant’s ability to perform the following tasks:
   • Independently use a mobility aid: ________________________________
   • Independently cross streets/intersections: ______________________
   • Independently travel in various conditions (lighting, weather, background noise):
   • Independently navigate paths of travel, inclines, uneven terrain:
   • Independently orient oneself to surroundings, and plan or follow a route:
   • Independently detect stops/bus terminals: ______________________
   • Independently navigate curbs/steps w/mobility device (if applicable):

9. For safety reasons should the applicant travel (on TOPS) at all times with a personal care attendant (PCA)? □ Yes □ No If yes, please explain ________________________________

10. For safety reasons is the applicant able to be left unattended at pickup or drop-off locations? □ Yes □ No If no, please explain ________________________________

11. Any additional information about conditions/barriers that prevent the applicant from using the fixed route some or all of the time ________________________________

12. Provider’s Checklist:
   □ I have provided a live signature (not photocopied, or stamped)
   □ I have completed all contact info below, including a State Board License # or Certification # (not NPI, DEA).

I certify that the information given above is correct to the best of my knowledge. X____________________________ DATE ________

Signature of Licensed Health Care Provider

Clearly print your contact information below:
NAME______________________STATE BOARD CERT # or LIC#_______
PHONE #____________________FAX # _________________________
BUSINESS ADDRESS _____________________________________________
EMAIL ______________________________________________________

When application is fully complete, please return this signed original to your patient, who will then submit the completed package to our offices.

TOPS VISION FORM B P2 of 2
By completing and signing this document, you the health care professional, certify the truth and accuracy of the information provided on this application, to the best of your professional knowledge. The Americans with Disabilities Act of 1990 requires that the BCT provide services to persons who are unable to use the fixed-route bus due to a disability. The information you provide will allow the BCT to make an appropriate evaluation of eligibility. To qualify for Paratransit service, an individual must meet at least one of the following criteria:

**Category 1** Individuals who, as a result of a physical or mental impairment (including visual impairments), and without the assistance of another individual (except the operator) cannot board, ride, or disembark from an accessible transit vehicle.

**Category 2** Individuals who can independently use accessible vehicles, but none are available on their route.

**Category 3** Individuals who have a specific-impairment related condition that prevents them from independently getting to/from a stop.

The licensed/certified health care provider familiar with your most limiting condition must complete ONE Provider Verification Form: A-General Medical, B-Visual Impairment, C-Epilepsy or Seizure Disorder, D-Cognitive or Mental Health disabilities. It is highly recommended that you submit additional completed verification forms if you have other conditions that affect your level of function.

Information which you provide will assist us in determining the applicant's functional ability to use public transportation. It is essential that you be precise and comprehensive. False or misleading information diverts resources away from persons legitimately qualified to use this program.
TOPS Paratransit Eligibility Form C:
Licensed Provider’s Verification Form (Epilepsy or Seizure Disorder)

Applicant’s Name:________________________ Date of Birth: __________
Applicant’s Address: ___________________________________________
Relationship to the applicant: _____________________________________
How long have you provided services/treatment for the applicant?__________

1. Type of Seizure: __________________________________________
2. Seizure Frequency:__________________________________________
3. Does the seizure alter consciousness or awareness? ☐ Yes ☐ No
4. Are the seizures preceded by an aura? ☐ Yes ☐ No
5. Are there any triggers to the seizures? ☐ Yes ☐ No
If yes, what are they? __________________________________________

6. What behaviors are exhibited during/following the applicant’s seizure?________________________________________

7. Is the applicant taking prescribed seizure medications that affect functional ability to independently use the BCT fixed-route bus services? ☐ Yes ☐ No If yes, please note the effects of the medication.

Would the applicant be able to travel independently on BCT fixed-route buses if they are medication compliant? ☐ Yes ☐ No

8. Is the applicant’s functional limitation permanent? ☐ Yes ☐ No
If no, what is expected duration?
   # of Months_____  # of Years_____  unknown_____

9. What advice or limitations on independent travel have you communicated to the applicant?________________________________________
10. For safety reasons should the applicant travel (on TOPS) at all times with a personal care attendant (PCA)? □ Yes □ No
   If yes, please explain ____________________________________________
   ______________________________________________________________
   ______________________________________________________________

11. For safety reasons can the applicant be left unattended at pickup or drop-off locations? □ Yes □ No If no, please explain__________
   ______________________________________________________________

12. Please provide any additional information on the applicant’s ability to travel independently on the BCT fixed-route services.
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

13. Provider’s Checklist:
   □ I have provided a live signature (not photocopied, or stamped)
   □ I have completed all contact info below including State Board License #Or Certification # (not NPI, DEA).

   I certify that the information given above is correct to the best of my knowledge.
   X __________________________ DATE ______
   Signature of Licensed Health Care Provider

Clearly print your contact information below:

NAME ___________________ STATE CERT # or BOARD LIC# ________
PHONE # ___________________ FAX # ______________________________
BUSINESS ADDRESS ________________________________
EMAIL ____________________________________________

When application is fully complete, please return this signed original to your patient, who will then submit the completed package to our offices.

THANK YOU FOR YOUR TIME AND INPUT.
By completing and signing this document, you, the health care professional, certify the truth and accuracy of the information provided on this application, to the best of your professional knowledge. The Americans with Disabilities Act of 1990 requires that the BCT provide services to persons who are unable to use the fixed-route bus system due to a disability. The information you provide will allow the BCT to make an appropriate evaluation of eligibility. To qualify for Paratransit service, an individual must meet at least one of the following criteria:

**Category 1** Individuals who, as a result of a physical or mental impairment (including visual impairments), and without the assistance of another individual (except the operator) cannot board, ride, or disembark from an accessible transit vehicle.

**Category 2** Individuals who can independently use accessible vehicles, but none are available on their route.

**Category 3** Individuals who have a specific-impairment related condition that prevents them from independently getting to/from a stop.

The licensed/certified health care provider familiar with your most limiting condition must complete ONE Provider Verification Form: A-General Medical, B-Visual Impairment, C-Epilepsy or Seizure Disorder, D-Cognitive or Mental Health disabilities. It is highly recommended that you submit additional completed verification forms if you have other conditions that affect your level of function.

*Information which you provide will assist us in determining the applicant's functional ability to use public transportation. It is essential that you be precise and comprehensive. False or misleading information diverts resources away from persons legitimately qualified to use this program.*
TOPS Paratransit Eligibility Form D: Licensed Provider’s Verification Form (Cognitive or Mental Health Conditions)

Applicant’s Name: __________________________ Date of Birth:_______
Applicant’s Address: _______________________________________________
Relationship to the applicant:________________________________________
How long have you provided services/treatment for the applicant?__________

1. What is the applicant’s diagnosis (DSM-IV)? __________________
2. Date of onset? ________________________________________________
3. What is the prognosis? _________________________________________
4. Is the applicant taking medications related to this disability that affect functional ability to independently use the BCT fixed-route bus services? □ Yes  □ No
   a. If yes, please describe any side effects the patient has reported.
   ___________________________________________________________________
   b. Is this applicant med-compliant?  □ Yes   □ No

5. Is the applicant receiving treatment/therapy that affects functional ability to independently use the BCT fixed-route bus services?   □ Yes   □ No
   If yes, please specify treatment/therapy and indicate an expected duration.
   Treatment ________________________ Duration ________________________
   Treatment ________________________ Duration ________________________

6. Is the applicant’s disability the same every day? □ Yes   □ No
   If no, please explain _____________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
7. Are any of the following affected by the individual’s disability? Check all that apply.

- Orientation
- Concentration
- Monitoring time
- Problem-solving
- Coping Skills
- Judgment
- Short term memory
- Communication
- Gait or balance
- Long term memory
- Consistency
- Social behavior
- Aggression
- Performance
- Anxiety
- Other

Please explain how the above interferes with safe travel.

____________________________________________________________
____________________________________________________________
____________________________________________________________
____________________________________________________________

8. Describe how the applicant’s disability affects his/her ability to independently complete the following travel tasks:

- Orient oneself to environment
- Travel alone outside
- Leave the house on time
- Seek and act on directions
- Find way to/from bus stop or station
- Cross streets
- Wait for a bus
- Board correct bus
- Ride on a bus
- Transfer to a second bus or exit at the correct destination
- Understand time and follow a schedule
- Know when he/she is lost
- Get help if he/she is lost
- Recognize and avoid dangers
9. Please provide information on how the applicant’s disability, combined with any environmental barriers, prevents independent use of the bus fixed route services.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

10. For safety reasons, should the applicant travel (on TOPS) at all times with a personal care attendant (PCA)? □ Yes □ No If yes, please explain. ___________________________________________________________________________________

11. For safety reasons, should the applicant receive hand-to-hand transfer at pickup or drop-off locations? □Yes □ No If Yes, please explain.

________________________________________________________________________

12. Is there any other information that would be an indication of the applicant’s inability to independently use fixed-route public transportation?

________________________________________________________________________

13. Provider’s Checklist:
□ I have provided a live signature (not photocopied, or stamped)
□ I have completed all contact information below including a State Board License # or Certification # (not NPI, DEA).

I certify that the information given above is correct to the best of my knowledge.

X ____________________________ DATE __________
Signature of Licensed Health Care Provider

Clearly print your contact information below:
NAME ____________________ STATE CERT # or BOARD LIC# __________
PHONE # __________________ FAX # ____________________________
BUSINESS ADDRESS ______________________________________________
EMAIL ________________________________

When application is fully complete, please return this signed original to your patient, who will then submit the completed package to our offices.

THANK YOU FOR YOUR TIME & INPUT.
APPENDIX D

VEHICLE INVENTORY
<table>
<thead>
<tr>
<th>Provider</th>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMT</td>
<td>2000</td>
<td></td>
<td></td>
<td>HOLDING B</td>
<td>HOLDING B</td>
<td>HOLDING BIN</td>
<td>0</td>
<td>HOLDING B</td>
<td>400392.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2998</td>
<td></td>
<td></td>
<td>HOLDING B</td>
<td>HOLDING B</td>
<td>HOLDING BIN</td>
<td>0</td>
<td>HOLDING B</td>
<td>0.0</td>
<td>280799.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2926</td>
<td>WC</td>
<td>Fixed ami: 1</td>
<td>FORD</td>
<td>E350</td>
<td>1FTNS24W29</td>
<td>2009</td>
<td>850WFN</td>
<td>280799.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2102</td>
<td>AMB</td>
<td>Fixed ami: 12</td>
<td>CHEVY</td>
<td></td>
<td>1GGAHG354361</td>
<td>2006</td>
<td>76TTFB</td>
<td>426654.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2118</td>
<td>AMB</td>
<td>Fixed ami: 13</td>
<td>FORD</td>
<td>E350</td>
<td>1FBSS31L88D</td>
<td>2008</td>
<td>265KJI</td>
<td>1554850.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2107</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td></td>
<td>1FTNS2EW5A</td>
<td>2010</td>
<td>ACE665</td>
<td>163675.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2108</td>
<td>AMB</td>
<td>Flex - NONE</td>
<td>FORD</td>
<td></td>
<td>1FTNS2EW7A</td>
<td>2010</td>
<td>ACE663</td>
<td>191603.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2103</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td>E-350</td>
<td>1FBSS31L76H</td>
<td>2006</td>
<td>G941UT</td>
<td>3000012.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2104</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td>E-350</td>
<td>1FBSS31LX3H</td>
<td>2003</td>
<td>V688RJ</td>
<td>335016.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2109</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td></td>
<td>1FBSS31L34H</td>
<td>2004</td>
<td>76TTFB</td>
<td>670346.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2111</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td></td>
<td>1FBSS31LX4H</td>
<td>2004</td>
<td>76TTFB</td>
<td>575511.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2112</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td></td>
<td>1FBSS31L73H</td>
<td>2003</td>
<td>769TBF</td>
<td>244337.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2114</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td></td>
<td>1FBSS31LX8D</td>
<td>2008</td>
<td>264KJLQ</td>
<td>299975.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2115</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td>E350</td>
<td>1FBSS31LX8D</td>
<td>2008</td>
<td>267KJL</td>
<td>1800144.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2116</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td>E350</td>
<td>1FBSS31LX8D</td>
<td>2008</td>
<td>105TFE</td>
<td>1760456.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2117</td>
<td>AMB</td>
<td>Fixed ami: 14</td>
<td>FORD</td>
<td>E350</td>
<td>1FBSS31L67D</td>
<td>2007</td>
<td>120TFE</td>
<td>1895190.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2731</td>
<td>AMB</td>
<td>Fixed ami: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1DJHN44A48B</td>
<td>2008</td>
<td>106TFE</td>
<td>220535.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2733</td>
<td>AMB</td>
<td>Fixed ami: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>2DJHN44H38R</td>
<td>2008</td>
<td>270KJL</td>
<td>230413.0</td>
<td>0.0</td>
</tr>
<tr>
<td>AMT</td>
<td>2734</td>
<td>AMB</td>
<td>Fixed ami: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>2DJHN44H38R</td>
<td>2008</td>
<td>100TFE</td>
<td>224384.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Provider</td>
<td>Vehicle #</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
</tr>
<tr>
<td>----------</td>
<td>-----------</td>
<td>----------------</td>
<td>-------------</td>
<td>----------</td>
<td>---------</td>
<td>--------------</td>
<td>------</td>
<td>---------</td>
<td>----------</td>
<td>-----------</td>
</tr>
<tr>
<td>AMT</td>
<td>2710</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E19B</td>
<td>2009</td>
<td>256KJI</td>
<td>316616.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2711</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E599</td>
<td>2009</td>
<td>256KJI</td>
<td>198355.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2712</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>234509.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2714</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E39B</td>
<td>2009</td>
<td>256KJI</td>
<td>210618.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2715</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>211174.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2716</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>255603.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2717</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E19B</td>
<td>2009</td>
<td>256KJI</td>
<td>222596.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2718</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>216973.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2719</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>207980.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2720</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>231653.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2721</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>197681.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td></td>
<td>2722</td>
<td>AMB</td>
<td>Fixedambi:6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44E09B</td>
<td>2009</td>
<td>256KJI</td>
<td>202207.0</td>
<td>7/7/2009</td>
</tr>
<tr>
<td>Provider</td>
<td>Vehicle Id</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
</tr>
<tr>
<td>----------</td>
<td>------------</td>
<td>----------------</td>
<td>-------------</td>
<td>------</td>
<td>-------</td>
<td>-----------</td>
<td>------</td>
<td>-------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>AMT</td>
<td>2724</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>2D8HN44H38R</td>
<td>2008</td>
<td>013YTE</td>
<td>204842.0</td>
<td>204842.0</td>
</tr>
<tr>
<td></td>
<td>2725</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>2D8HN44H88R</td>
<td>2008</td>
<td>1041FL</td>
<td>191125.0</td>
<td>191125.0</td>
</tr>
<tr>
<td></td>
<td>2726</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>2D8HN44H28R</td>
<td>2008</td>
<td>042XQV</td>
<td>280682.0</td>
<td>280682.0</td>
</tr>
<tr>
<td></td>
<td>2727</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>2D8HN44H98B</td>
<td>2008</td>
<td>041XQV</td>
<td>211487.0</td>
<td>211487.0</td>
</tr>
<tr>
<td></td>
<td>2728</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44H28B1</td>
<td>2008</td>
<td>043XQV</td>
<td>691452.0</td>
<td>691452.0</td>
</tr>
<tr>
<td></td>
<td>2729</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D8HN44H28B2</td>
<td>2008</td>
<td>012YTE</td>
<td>288461.0</td>
<td>288461.0</td>
</tr>
<tr>
<td></td>
<td>2910</td>
<td>WC</td>
<td>Fixed ambit: 4</td>
<td>FORD</td>
<td>E250</td>
<td>1FTE24WX7</td>
<td>2007</td>
<td>ACEF04</td>
<td>283345.0</td>
<td>283345.0</td>
</tr>
<tr>
<td></td>
<td>2911</td>
<td>WC</td>
<td>Fixed ambit: 5</td>
<td>FORD</td>
<td>E250</td>
<td>1FTE35E0A</td>
<td>2010</td>
<td>ACED38</td>
<td>289010.0</td>
<td>289010.0</td>
</tr>
<tr>
<td></td>
<td>2934</td>
<td>WC</td>
<td>Fixed ambit: 5</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTE24WX2A</td>
<td>2010</td>
<td>ACED37</td>
<td>269624.0</td>
<td>269624.0</td>
</tr>
<tr>
<td></td>
<td>2930</td>
<td>WC</td>
<td>Fixed ambit: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTE24WX9</td>
<td>2009</td>
<td>699YVC</td>
<td>388387.0</td>
<td>388387.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provider</th>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMT</td>
<td>2931</td>
<td>WC</td>
<td>Fixed ambit: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS24W49</td>
<td>2009</td>
<td>527YVC</td>
<td>251745.0</td>
<td>251745.0</td>
</tr>
<tr>
<td></td>
<td>2932</td>
<td>WC</td>
<td>Fixed ambit: 1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24WX9</td>
<td>2009</td>
<td>960YVC</td>
<td>378290.0</td>
<td>378290.0</td>
</tr>
<tr>
<td>Vehicle M</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>------</td>
<td>-------</td>
<td>--------</td>
<td>------</td>
<td>--------</td>
<td>----------</td>
<td>---------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2922</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24W17</td>
<td>2007</td>
<td>558VDR</td>
<td>324192.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2923</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24W27</td>
<td>2007</td>
<td>557VDR</td>
<td>3030765.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2924</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24W08</td>
<td>2008</td>
<td>L903MA</td>
<td>1238646.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2925</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24W28</td>
<td>2008</td>
<td>L900MA</td>
<td>324705.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2921</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24W07</td>
<td>2007</td>
<td>7765SG</td>
<td>2723070.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2968</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS2EW7C</td>
<td>2012</td>
<td>BPCX94</td>
<td>220462.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle Id</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>------</td>
<td>-------</td>
<td>-------</td>
<td>------</td>
<td>--------</td>
<td>----------</td>
<td>--------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2938</td>
<td>FORD</td>
<td>E-250</td>
<td>IFTNE1EW9A</td>
<td>2010</td>
<td>ACE66</td>
<td>304598.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2969</td>
<td>FORD</td>
<td>E150</td>
<td>IFTNE1EWAC</td>
<td>2012</td>
<td>AWQ3316</td>
<td>25310.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2945</td>
<td>FORD</td>
<td>E150</td>
<td>IFTNE1EW0A</td>
<td>2010</td>
<td>227711V</td>
<td>1800787.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current Inspection

Provider | Vehicle Id | Accessibility | Description | Make | Model | VIN   | Year | Tag #  | Odometer | Date   |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AMT</td>
<td>2970</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW0C</td>
<td>2012</td>
<td>AWQ3335</td>
<td>266481.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2947</td>
<td>Fixed w/c: 2</td>
<td>FORD E250</td>
<td>IFTNE1EW2A</td>
<td>2010</td>
<td>36FL2T5</td>
<td>970918.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2948</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW5A</td>
<td>2010</td>
<td>36FL2T6</td>
<td>400868.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2949</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW7A</td>
<td>2010</td>
<td>36FL2T4</td>
<td>266354.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2950</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW3A</td>
<td>2010</td>
<td>36FL2T5</td>
<td>155185.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2951</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW2A</td>
<td>2010</td>
<td>36FL2T5</td>
<td>155185.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2952</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW6A</td>
<td>2010</td>
<td>36FL2T5</td>
<td>155185.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2953</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EWXX</td>
<td>2010</td>
<td>36FL2T5</td>
<td>155185.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2954</td>
<td>Fixed w/c: 2</td>
<td>FORD E-250</td>
<td>IFTNE1EW8A</td>
<td>2010</td>
<td>36FL2T5</td>
<td>986388.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>WC</td>
<td>2955</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW5B</td>
<td>2011</td>
<td>36FL2T5</td>
<td>417210.0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Current Inspection

Provider | Vehicle Id | Accessibility | Description | Make | Model | VIN   | Year | Tag #  | Odometer | Date   |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AMT</td>
<td>2956</td>
<td>Fixed w/c: 2</td>
<td>FORD E150</td>
<td>IFTNE1EW4A</td>
<td>2010</td>
<td>36FL2T5</td>
<td>167374.0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

83
<table>
<thead>
<tr>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2957</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW4C</td>
<td>2012</td>
<td>AQU7319</td>
<td>797330.0</td>
<td></td>
</tr>
<tr>
<td>2958</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW7C</td>
<td>2012</td>
<td>AQU7261</td>
<td>187441.0</td>
<td></td>
</tr>
<tr>
<td>2959</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW3C</td>
<td>2012</td>
<td>AQU7331</td>
<td>571742.0</td>
<td></td>
</tr>
<tr>
<td>2960</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW9B</td>
<td>2011</td>
<td>AQY731</td>
<td>565425.0</td>
<td></td>
</tr>
<tr>
<td>2961</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW2B</td>
<td>2011</td>
<td>AFET60</td>
<td>85952.0</td>
<td></td>
</tr>
<tr>
<td>2962</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE1EW7B</td>
<td>2012</td>
<td>AQY1750</td>
<td>140174.0</td>
<td></td>
</tr>
<tr>
<td>2963</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW8CD</td>
<td>2012</td>
<td>150MKW</td>
<td>64922.0</td>
<td></td>
</tr>
<tr>
<td>2964</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW7C</td>
<td>2012</td>
<td>151MKW</td>
<td>640530.0</td>
<td></td>
</tr>
<tr>
<td>2965</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE1EW4C</td>
<td>2012</td>
<td>BIDN97</td>
<td>88898.0</td>
<td></td>
</tr>
</tbody>
</table>

**Current Inspection**

<table>
<thead>
<tr>
<th>Provider</th>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMT</td>
<td>2966</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE2EW2C</td>
<td>2012</td>
<td>BPCX93</td>
<td>164119.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2967</td>
<td></td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE2EWCD</td>
<td>2012</td>
<td>BPCX95</td>
<td>141418.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2106</td>
<td>AMB</td>
<td>Flex - NONE</td>
<td>CHEVY</td>
<td>IFTNS24W07</td>
<td>2007</td>
<td>765TFB</td>
<td>243445.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2946</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE1EWXA</td>
<td>2010</td>
<td>556TNT</td>
<td>281705.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2944</td>
<td>WC</td>
<td>Fixed w/c: 0</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE1EW4A</td>
<td>2010</td>
<td>805TPC</td>
<td>282053.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle ID</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
<td>Notes</td>
</tr>
<tr>
<td>------------</td>
<td>----------------</td>
<td>-------------</td>
<td>------</td>
<td>-------</td>
<td>-------</td>
<td>------</td>
<td>-------</td>
<td>----------</td>
<td>---------</td>
<td>-------</td>
</tr>
<tr>
<td>2941</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNE1EW8A</td>
<td>2010</td>
<td>806TFC</td>
<td>198854.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2942</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNE1EW9A</td>
<td>2010</td>
<td>P403GZ</td>
<td>267688.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2935</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNE1EW5A</td>
<td>2010</td>
<td>ACEE61</td>
<td>248783.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2936</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNE1EW2A</td>
<td>2010</td>
<td>ACEE64</td>
<td>319565.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9999</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TAXI HOLDING</td>
<td>0</td>
<td>TAXI HOLDING</td>
<td>3118.0</td>
</tr>
</tbody>
</table>

B&L

BCT_TEST

Current Inspection Provider

<table>
<thead>
<tr>
<th>Vehicle ID</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>TEST</td>
<td>TEST</td>
<td>TESTER</td>
<td>2005</td>
<td>0</td>
<td>144040.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1234</td>
<td></td>
<td>Fixed w/c: 0</td>
<td>TEST</td>
<td>TEST</td>
<td>TESTER</td>
<td>2005</td>
<td>0</td>
<td>144040.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1233</td>
<td></td>
<td>Fixed ambi: 8</td>
<td>TEST</td>
<td>TEST</td>
<td>TEST</td>
<td>2009</td>
<td>TES</td>
<td>12346.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CANT

<table>
<thead>
<tr>
<th>Vehicle ID</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>5001</td>
<td>WC</td>
<td>Fixed ambi: 12</td>
<td>CHEVY</td>
<td>3500</td>
<td>185444</td>
<td>2013</td>
<td>2435.0</td>
<td>333768.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5008</td>
<td>WC</td>
<td>Fixed w/c: 1</td>
<td>CHEVY</td>
<td>3500</td>
<td>162698</td>
<td>2011</td>
<td>X8443B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5009</td>
<td>WC</td>
<td>Fixed w/c: 1</td>
<td>CHEVY</td>
<td>3500</td>
<td>162749</td>
<td>2011</td>
<td>X8442B</td>
<td>135889.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5010</td>
<td>WC</td>
<td>Fixed w/c: 1</td>
<td>FORD</td>
<td>1PD1E4PSXC</td>
<td>AUW1864</td>
<td>2013</td>
<td>69110.0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5006</td>
<td>AMB/ WC</td>
<td>Fixed w/c: 16</td>
<td>CHEVY</td>
<td>CHAMPION</td>
<td>25659</td>
<td>2009</td>
<td>X2085B</td>
<td>134877.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5007</td>
<td>AMB/ WC</td>
<td>Fixed w/c: 16</td>
<td>CHEVY</td>
<td>CHAMPION</td>
<td>25813</td>
<td>2009</td>
<td>X2084B</td>
<td>136285.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4999</td>
<td></td>
<td></td>
<td>FORD</td>
<td>HOLDING BIN</td>
<td>2010</td>
<td>HOLDING B</td>
<td>0.0</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LUC
<table>
<thead>
<tr>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>4053</td>
<td>WC</td>
<td>Fixed ambi: 8 Fixed w/c: 1 Flex 1: 2 Flex 2: 4 Flex 3: 4 Flex 4: 2</td>
<td>CHEVY</td>
<td>C4500</td>
<td>1GBE4V1G89F</td>
<td>2009</td>
<td>X2869B</td>
<td>145345.0</td>
<td></td>
</tr>
<tr>
<td>4050</td>
<td>WC</td>
<td>Fixed ambi: 8 Fixed w/c: 1 Flex 1: 2 Flex 2: 4 Flex 3: 4 Flex 4: 2</td>
<td>CHEVY</td>
<td>C4500</td>
<td>1GBE4V1G09</td>
<td>2009</td>
<td>X0372B</td>
<td>115181.0</td>
<td></td>
</tr>
<tr>
<td>4403</td>
<td>WC</td>
<td>Fixed ambi: 4 Fixed w/c: 2 Flex - NONE</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE14W77</td>
<td>2007</td>
<td>825MKZ</td>
<td>29865.0</td>
<td></td>
</tr>
<tr>
<td>4404</td>
<td>WC</td>
<td>Fixed ambi: 4 Fixed w/c: 2 Flex - NONE</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE14W57</td>
<td>2007</td>
<td>829MKZ</td>
<td>29579.0</td>
<td></td>
</tr>
<tr>
<td>4405</td>
<td>WC</td>
<td>Fixed ambi: 4 Fixed w/c: 2 Flex - NONE</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE14WX7</td>
<td>2007</td>
<td>824MKZ</td>
<td>29986.0</td>
<td></td>
</tr>
<tr>
<td>4406</td>
<td>WC</td>
<td>Fixed ambi: 4 Fixed w/c: 2 Flex - NONE</td>
<td>FORD</td>
<td>E150</td>
<td>1FTNE14W37D</td>
<td>2007</td>
<td>828MKZ</td>
<td>24864.0</td>
<td></td>
</tr>
<tr>
<td>4209</td>
<td>WC</td>
<td>Fixed ambi: 1 Flex 1: 2 Flex - NONE</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE24WX6</td>
<td>2006</td>
<td>768TZY</td>
<td>344143.0</td>
<td></td>
</tr>
<tr>
<td>4052</td>
<td>WC</td>
<td>Fixed ambi: 16 Fixed w/c: 1 Flex 1: 2 Flex - NONE</td>
<td>FORD</td>
<td>E450</td>
<td>1FD4E45S38D</td>
<td>2009</td>
<td>X71980</td>
<td>153506.0</td>
<td></td>
</tr>
<tr>
<td>4032</td>
<td>WC</td>
<td>Fixed ambi: 16 Fixed w/c: 1 Flex 1: 2 Flex - NONE</td>
<td>CHEVY</td>
<td>C5500</td>
<td>1GBE5V1G16F</td>
<td>2006</td>
<td>X70657</td>
<td>209796.0</td>
<td></td>
</tr>
<tr>
<td>4054</td>
<td>WC</td>
<td>Fixed ambi: 12 Fixed w/c: 1 Flex 1: 4 Flex 2: 2 Flex 3: 2</td>
<td>CHEVY</td>
<td>C4500</td>
<td>1GBE4V1G89F</td>
<td>2009</td>
<td>X2868B</td>
<td>206259.0</td>
<td></td>
</tr>
<tr>
<td>4055</td>
<td>WC</td>
<td>Fixed ambi: 12 Fixed w/c: 1 Flex 1: 4 Flex 2: 2 Flex 3: 2</td>
<td>CHEVY</td>
<td>C4500</td>
<td>1GBE4V1G19F</td>
<td>2010</td>
<td>X2867B</td>
<td>136301.0</td>
<td></td>
</tr>
<tr>
<td>4077</td>
<td>AMB</td>
<td>Fixed ambi: 13 Fixed w/c: 0 Flex - NONE</td>
<td>FORD</td>
<td>1FTN82EWXA</td>
<td>2010</td>
<td>X73010</td>
<td>137582.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4078</td>
<td>AMB</td>
<td>Fixed ambi: 13 Fixed w/c: 0 Flex - NONE</td>
<td>FORD</td>
<td>1FTN82EW6A</td>
<td>2010</td>
<td>X73011</td>
<td>167103.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4079</td>
<td>AMB</td>
<td>Fixed ambi: 13 Fixed w/c: 0 Flex - NONE</td>
<td>FORD</td>
<td>1FTN82EWOA</td>
<td>2010</td>
<td>X73012</td>
<td>153402.0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

86
<table>
<thead>
<tr>
<th>Vehicle #</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>4080</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EW2A</td>
<td>2010</td>
<td>X73013</td>
<td>147608.0</td>
<td></td>
</tr>
<tr>
<td>4081</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EW7A</td>
<td>2010</td>
<td>X4065B</td>
<td>226712.0</td>
<td></td>
</tr>
<tr>
<td>4082</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EW3A</td>
<td>2010</td>
<td>X4066B</td>
<td>158316.0</td>
<td></td>
</tr>
<tr>
<td>4083</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EW5A</td>
<td>2010</td>
<td>X4067B</td>
<td>151098.0</td>
<td></td>
</tr>
<tr>
<td>4084</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EWXA</td>
<td>2010</td>
<td>X4066B</td>
<td>149947.0</td>
<td></td>
</tr>
<tr>
<td>4085</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EW1A</td>
<td>2010</td>
<td>X4069B</td>
<td>144058.0</td>
<td></td>
</tr>
<tr>
<td>4086</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS2EW5A</td>
<td>2010</td>
<td>X4070B</td>
<td>228536.0</td>
<td></td>
</tr>
<tr>
<td>4401</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS24W46</td>
<td>2006</td>
<td>827MKZ</td>
<td>280937.0</td>
<td></td>
</tr>
<tr>
<td>4402</td>
<td>FORD</td>
<td>E250</td>
<td>IFTNS24W56</td>
<td>2006</td>
<td>826MKZ</td>
<td>257846.0</td>
<td></td>
</tr>
<tr>
<td>Provider</td>
<td>Vehicle ID</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
</tr>
<tr>
<td>----------</td>
<td>------------</td>
<td>----------------</td>
<td>-------------</td>
<td>-------</td>
<td>-------</td>
<td>--------------</td>
<td>-------</td>
</tr>
<tr>
<td>LUC</td>
<td>4044</td>
<td>WC</td>
<td>Fixedambi:10</td>
<td>CHEVY</td>
<td>C4500</td>
<td>1GBE4V1G47F</td>
<td>2008</td>
</tr>
<tr>
<td>WC</td>
<td>4045</td>
<td>WC</td>
<td>Fixedambi:10</td>
<td>CHEVY</td>
<td>C4500</td>
<td>1GBE4V1G48F</td>
<td>2008</td>
</tr>
<tr>
<td>WC</td>
<td>4048</td>
<td>WC</td>
<td>Fixedambi:4</td>
<td>CHEVY</td>
<td>GOSH</td>
<td>1GBJG31K281</td>
<td>2008</td>
</tr>
<tr>
<td>WC</td>
<td>4057</td>
<td>WC</td>
<td>Fixedambi:1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS2E7W0AD</td>
<td>2010</td>
</tr>
<tr>
<td>WC</td>
<td>4058</td>
<td>WC</td>
<td>Fixedambi:1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS2E7W7A</td>
<td>2010</td>
</tr>
<tr>
<td>WC</td>
<td>4060</td>
<td>WC</td>
<td>Fixedambi:1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS2E7W4A</td>
<td>2010</td>
</tr>
<tr>
<td>WC</td>
<td>4061</td>
<td>WC</td>
<td>Fixedambi:1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS2E7W9A</td>
<td>2010</td>
</tr>
<tr>
<td>Provider</td>
<td>Vehicle M</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year Tag #</td>
</tr>
<tr>
<td>----------</td>
<td>-----------</td>
<td>---------------</td>
<td>-------------</td>
<td>------</td>
<td>-------</td>
<td>-----</td>
<td>------------</td>
</tr>
<tr>
<td>LUC</td>
<td>4038</td>
<td>WC</td>
<td>Fixedambi: 22</td>
<td>CHEVY</td>
<td>C5500</td>
<td>1GBE5V1G1X6</td>
<td>2006</td>
</tr>
<tr>
<td></td>
<td>4033</td>
<td>WC</td>
<td>Fixed w/c: 1</td>
<td>CHEVY</td>
<td>C5500</td>
<td>1GBE5V1G26F</td>
<td>2006</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixedambi: 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixedambi: 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex 2: 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex 3: 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<p>| MDX      | 199       | MEDEX HO      | MEDEX HO    | MEDEX HO | MEDEX HO | HOLDING BIN | 0 | HOLDING B | 0.0 |
|          | 137       | AMB           | AMB         | AMB      | AMB      | CROWN VI    | 2FAFP71V98X | 2008 | BELA69 | 281021.0 |
|          | 248       | AMB           | AMB         | AMB      | AMB      | PLACE HOL   | PL ACHOL   | 0   |       | 260992.0 |</p>
<table>
<thead>
<tr>
<th>Provider</th>
<th>Vehicle ID</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDX</td>
<td>142</td>
<td>WC</td>
<td>Fixed ambit: 1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS2EWH9C</td>
<td>2012</td>
<td>BQU976</td>
<td>39371.0</td>
</tr>
<tr>
<td></td>
<td>143</td>
<td>WC</td>
<td>Fixed ambit: 1</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24L86D</td>
<td>2006</td>
<td>652MTQ</td>
<td>269685.0</td>
</tr>
<tr>
<td></td>
<td>105</td>
<td>AMB</td>
<td>Fixed ambit: 7</td>
<td>FORD</td>
<td>E150</td>
<td>1FMRE11L06H</td>
<td>2006</td>
<td>064TRH</td>
<td>243717.0</td>
</tr>
<tr>
<td></td>
<td>106</td>
<td>AMB</td>
<td>Fixed ambit: 7</td>
<td>FORD</td>
<td>E150</td>
<td>1FMRE11W15</td>
<td>2005</td>
<td>719TWW</td>
<td>223849.0</td>
</tr>
<tr>
<td></td>
<td>130</td>
<td>WC</td>
<td>Fixed ambit: 7</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNS24L76H</td>
<td>2006</td>
<td>649MTQ</td>
<td>318762.0</td>
</tr>
<tr>
<td></td>
<td>138</td>
<td>AMB</td>
<td>Fixed ambit: 14</td>
<td>FORD</td>
<td>E350</td>
<td>1FBS3BL9A0</td>
<td>2010</td>
<td>BELE72</td>
<td>209881.0</td>
</tr>
<tr>
<td></td>
<td>128</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D4GP25B56B</td>
<td>2006</td>
<td>450TEU</td>
<td>277139.0</td>
</tr>
<tr>
<td></td>
<td>109</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D4GP25BX6B</td>
<td>2006</td>
<td>T300DM</td>
<td>275370.0</td>
</tr>
<tr>
<td></td>
<td>110</td>
<td>AMB</td>
<td>Fixed ambit: 6</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1DBH44H08B</td>
<td>2008</td>
<td>513TRQ</td>
<td>262695.0</td>
</tr>
<tr>
<td></td>
<td>107</td>
<td>AMB</td>
<td>Fixed ambit: 11</td>
<td>FORD</td>
<td>E350</td>
<td>1FBE31L54H</td>
<td>2004</td>
<td>105TWY</td>
<td>236379.0</td>
</tr>
<tr>
<td></td>
<td>108</td>
<td>AMB</td>
<td>Fixed ambit: 11</td>
<td>FORD</td>
<td>E350</td>
<td>1FBE31L6SH</td>
<td>2005</td>
<td>651MTQ</td>
<td>256389.0</td>
</tr>
<tr>
<td></td>
<td>124</td>
<td>AMB</td>
<td>Fixed ambit: 11</td>
<td>FORD</td>
<td>E350</td>
<td>1FBE31L06B</td>
<td>2006</td>
<td>730HKG</td>
<td>340377.0</td>
</tr>
<tr>
<td>Current Inspection Provider</td>
<td>Vehicle Id</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>------------</td>
<td>----------------</td>
<td>------------------</td>
<td>------</td>
<td>-------</td>
<td>------------</td>
<td>------</td>
<td>--------</td>
<td>----------</td>
</tr>
<tr>
<td>MDX</td>
<td>145</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS24W66</td>
<td>2006</td>
<td>196TEW</td>
<td>2565981.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>132</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNE24W36</td>
<td>2007</td>
<td>ATZD87</td>
<td>260052.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>133</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS2EW0B</td>
<td>2011</td>
<td>BBRP67</td>
<td>256137.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>134</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS2EW4B</td>
<td>2011</td>
<td>BBRP59</td>
<td>213773.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>135</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS2EW5B</td>
<td>2011</td>
<td>BBRP40</td>
<td>74954.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>136</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS2EW9B</td>
<td>2011</td>
<td>BBRP66</td>
<td>152476.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>137</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>MEDEX</td>
<td>E-250</td>
<td>MEDEX</td>
<td>2002</td>
<td>AATY64</td>
<td>194630.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 2: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>138</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS24W66</td>
<td>2006</td>
<td>183HCH</td>
<td>242819.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 2: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>139</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNE24293H</td>
<td>2003</td>
<td>AATY65</td>
<td>270274.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 2: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>140</td>
<td>WC</td>
<td>Fixed ambi: 2</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS24L56H</td>
<td>2006</td>
<td>ATXY53</td>
<td>264490.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 2: 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>141</td>
<td>WC</td>
<td>Fixed ambi: 2</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS24W8C</td>
<td>2012</td>
<td>V779829</td>
<td>517518.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 2: 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>129</td>
<td>WC</td>
<td>Fixed ambi: 1</td>
<td>FORD</td>
<td>E-250</td>
<td>1FTNS24W85</td>
<td>2005</td>
<td>79773M</td>
<td>298835.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Flex: 1: 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MISC</td>
<td>533</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>E450</td>
<td>1FDXE45P26H</td>
<td>2006</td>
<td>201238</td>
<td>80125.0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>541</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>E450</td>
<td>1FDJE45P49D</td>
<td>2009</td>
<td>XB6566</td>
<td>79719.0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>544</td>
<td>Fixedambi: 14</td>
<td>FORD</td>
<td>E450</td>
<td>1FDJE45FL8BD</td>
<td>2011</td>
<td>XC9718</td>
<td>40373.0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>542</td>
<td>Fixedambi: 18</td>
<td>FORD</td>
<td>E450</td>
<td>1FDJE45P99D</td>
<td>2009</td>
<td>XB6565</td>
<td>147448.0</td>
<td></td>
</tr>
<tr>
<td>NEFP</td>
<td>297</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>TURTLE T</td>
<td>1FDXE45F62H</td>
<td>2002</td>
<td>218879</td>
<td>944494.0</td>
</tr>
<tr>
<td></td>
<td>271</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>CHEVY</td>
<td>2010 TITAN</td>
<td>1GBE45V19299</td>
<td>2009</td>
<td>XC7630</td>
<td>130579.0</td>
</tr>
<tr>
<td></td>
<td>299</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>TURTLE T</td>
<td>1FDXE45F31H</td>
<td>2003</td>
<td>221569</td>
<td>145721.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Inspection Provider</th>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEFP</td>
<td>279</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>CHEVY</td>
<td>BUS</td>
<td>1GBJ31P7212</td>
<td>2002</td>
<td>211636</td>
<td>129286.0</td>
<td>1989</td>
</tr>
<tr>
<td></td>
<td>278</td>
<td>WC</td>
<td>Fixedambi: 12</td>
<td>FORD</td>
<td>TURTLE T</td>
<td>1FDXE45P84H</td>
<td>2005</td>
<td>222214</td>
<td>120590.0</td>
<td>2005</td>
</tr>
<tr>
<td></td>
<td>273</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>CHEVY</td>
<td>4500</td>
<td>1GB653BL8D</td>
<td>2011</td>
<td>XC2542</td>
<td>40307.0</td>
<td>2011</td>
</tr>
<tr>
<td></td>
<td>272</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>CHEVY</td>
<td>4500</td>
<td>1GB653BL7B1</td>
<td>2011</td>
<td>XC2543</td>
<td>104147.0</td>
<td>2011</td>
</tr>
<tr>
<td>NWFP</td>
<td>26</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>GOSHEN G</td>
<td>FDFE45S4CD</td>
<td>2012</td>
<td>XI187C</td>
<td>12365.0</td>
<td>2012</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>AMB</td>
<td>Fixedambi: 22</td>
<td>FORD</td>
<td>E450</td>
<td>1FDXE45F33H</td>
<td>2003</td>
<td>28592</td>
<td>101806.0</td>
<td>2003</td>
</tr>
<tr>
<td></td>
<td>23</td>
<td>WC</td>
<td>Fixedambi: 8</td>
<td>CHEVY</td>
<td>3500</td>
<td>1GBJ31UX61</td>
<td>2006</td>
<td>YA272</td>
<td>125550.0</td>
<td>2006</td>
</tr>
<tr>
<td></td>
<td>24</td>
<td>WC</td>
<td>Fixedambi: 8</td>
<td>CHEVY</td>
<td>3500</td>
<td>1GBJ31K481</td>
<td>2008</td>
<td>XA513</td>
<td>111120.0</td>
<td>2008</td>
</tr>
<tr>
<td></td>
<td>18</td>
<td>AMB</td>
<td>Fixedambi: 14</td>
<td>FORD</td>
<td>E350</td>
<td>1FBS31LXW</td>
<td>1998</td>
<td>XI73017</td>
<td>102102.0</td>
<td>1998</td>
</tr>
<tr>
<td></td>
<td>21</td>
<td>AMB</td>
<td>Fixedambi: 11</td>
<td>FORD</td>
<td>E350</td>
<td>1FBN31P06D</td>
<td>2006</td>
<td>37375</td>
<td>113360.0</td>
<td>2006</td>
</tr>
<tr>
<td></td>
<td>22</td>
<td>AMB</td>
<td>Fixedambi: 11</td>
<td>FORD</td>
<td>E350</td>
<td>1FBN31P26D</td>
<td>2006</td>
<td>37376</td>
<td>106476.0</td>
<td>2006</td>
</tr>
<tr>
<td>Provider</td>
<td>Vehicle Id</td>
<td>Accessibility</td>
<td>Description</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
</tr>
<tr>
<td>----------</td>
<td>------------</td>
<td>----------------</td>
<td>-------------</td>
<td>-------</td>
<td>-------</td>
<td>--------------</td>
<td>------</td>
<td>------------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>NWFP</td>
<td>3</td>
<td>AMB</td>
<td>Fixedambi: 11</td>
<td>FORD</td>
<td>E350</td>
<td>1FBNE31L22H</td>
<td>2002</td>
<td>25066</td>
<td>114339.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>WC</td>
<td>Fixed w/c: 0 0</td>
<td>FORD</td>
<td>E350</td>
<td>1FTSS34F62H</td>
<td>2002</td>
<td>35847</td>
<td>155752.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Fixed w/c: 0 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>25</td>
<td>WC</td>
<td>Fixedambi: 12</td>
<td>CHEVY</td>
<td>GO8HAN - 3</td>
<td>1G83G282B0B</td>
<td>2011</td>
<td>X9084B</td>
<td>125552.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>WC</td>
<td>Fixed w/c: 6 0</td>
<td>FORD</td>
<td>E350</td>
<td>1FTSS34F82H</td>
<td>2002</td>
<td>X73018</td>
<td>128896.0</td>
<td>2013.0</td>
</tr>
<tr>
<td>SWFP</td>
<td>935</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>F450</td>
<td>1FDXE45S12H</td>
<td>2002</td>
<td>213248</td>
<td>198634.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>937</td>
<td>WC</td>
<td>Fixed w/c: 1</td>
<td>FORD</td>
<td>F450</td>
<td>1FDXE45S12H</td>
<td>2002</td>
<td>220259</td>
<td>171743.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>945</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>E450</td>
<td>1FDXE45F33H</td>
<td>2003</td>
<td>221581</td>
<td>189153.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>948</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>F450</td>
<td>1FDXE45P15H</td>
<td>2005</td>
<td>237157</td>
<td>171947.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>938</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>F450</td>
<td>1FDXE45P86H</td>
<td>2006</td>
<td>237166</td>
<td>176563.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>927</td>
<td>WC</td>
<td>Fixedambi: 12</td>
<td>SWFP OLD V</td>
<td>SWFP OLD V</td>
<td>0</td>
<td>104056.0</td>
<td>2013.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>962</td>
<td>WC</td>
<td>Fixedambi: 16</td>
<td>FORD</td>
<td>F450</td>
<td>1FDXE45P87D</td>
<td>2007</td>
<td>XA4715</td>
<td>173630.0</td>
<td>2013.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provider</th>
<th>Vehicle Id</th>
<th>Accessibility</th>
<th>Description</th>
<th>Make</th>
<th>Model</th>
<th>VIN</th>
<th>Year</th>
<th>Tag #</th>
<th>Odometer</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>SWFP</td>
<td>943</td>
<td>WC</td>
<td>Fixedambi: 9</td>
<td>FORD</td>
<td>VANTERR</td>
<td>1FDWE35L74</td>
<td>2004</td>
<td>221580</td>
<td>181781.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>944</td>
<td>WC</td>
<td>Fixedambi: 9</td>
<td>FORD</td>
<td>VANTERR</td>
<td>1FDWE35L94</td>
<td>2004</td>
<td>221582</td>
<td>157920.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>938</td>
<td>AMB</td>
<td>Fixedambi: 4</td>
<td>CHEVY</td>
<td>MALIBU</td>
<td>1G1ND5202M</td>
<td>2002</td>
<td>217675</td>
<td>175594.0</td>
<td>2013.0</td>
</tr>
<tr>
<td></td>
<td>901</td>
<td>AMB</td>
<td>Fixedambi: 4</td>
<td>CHEVY</td>
<td>MALIBU</td>
<td>1G1ZE5817F</td>
<td>2007</td>
<td>XA2167</td>
<td>151901.0</td>
<td>2013.0</td>
</tr>
<tr>
<td>Vehicle Id</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>----------</td>
<td>-----------</td>
<td>---------------</td>
<td>------</td>
<td>-------</td>
<td>----------</td>
<td>--------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>600</td>
<td>CHEVY</td>
<td>E350</td>
<td>1FB5531L76H1</td>
<td>2004</td>
<td>X4064B</td>
<td>252589.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>610</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE24W16</td>
<td>2006</td>
<td>X0738B</td>
<td>309429.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>720</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D4GD25R77B</td>
<td>2007</td>
<td>X70555</td>
<td>225379.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>730</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D4GP258B67B</td>
<td>2007</td>
<td>X70554</td>
<td>246293.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>740</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D46P258B68B</td>
<td>2006</td>
<td>X73035</td>
<td>196239.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>760</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>1D4GP25875B</td>
<td>2005</td>
<td>X82848</td>
<td>248735.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>670</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE232W2A</td>
<td>2010</td>
<td>X5979B</td>
<td>256135.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle Id</td>
<td>Make</td>
<td>Model</td>
<td>VIN</td>
<td>Year</td>
<td>Tag #</td>
<td>Odometer</td>
<td>Date</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>------</td>
<td>-------</td>
<td>--------</td>
<td>------</td>
<td>--------</td>
<td>----------</td>
<td>--------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>680</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE2E4W0A</td>
<td>2010</td>
<td>X5981B</td>
<td>224451.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>690</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE2E4W7A</td>
<td>2010</td>
<td>X5980B</td>
<td>255752.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>640</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE2E4W4A</td>
<td>2010</td>
<td>X5978B</td>
<td>162731.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>660</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE24W77</td>
<td>2007</td>
<td>X3573A</td>
<td>234688.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>630</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE24W57</td>
<td>2007</td>
<td>X7478A</td>
<td>199205.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>650</td>
<td>FORD</td>
<td>E250</td>
<td>1FTNE24W87</td>
<td>2007</td>
<td>X3566A</td>
<td>235077.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>750</td>
<td>DODGE</td>
<td>CARAVAN</td>
<td>ID4GP45R06B</td>
<td>2006</td>
<td>X4097B</td>
<td>205483.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX E

SYSTEM SAFETY and SECURITY CERTIFICATION
SYSTEM SAFETY COMPLIANCE REVIEW

ALLIED MEDICAL TRANSPORT, INC.
BY
BROWARD COUNTY TRANSPORTATION DEPARTMENT

ON-SITE REVIEW DATE: April 24, 2012

SUBMITTED BY: ______________________     FOR REVIEW YEAR  2012

STEVEN KIDD
Paratransit Supervisor

INTRODUCTION
Allied Medical Transport Inc. is one of four (4) transportation providers contracted by Broward County to perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida's Transportation Disadvantaged program. On April 24, 2012, BCTD conducted an on-site Safety Compliance Review of Allied Medical Transport Inc, at 5896 Rodman St. Hollywood, FL 33023. The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, Florida Administrative Code. A brief overview of Allied Medical Transport Inc’s operation is described in this introduction.

Allied Medical Transport Inc, hereinafter called AMT dispatched vehicles and conducted operations from 5696 Rodman St. Hollywood, FL. After this review AMT subsequently moved to 2170 Blount Rd. Pompano Beach, where they continue to use an appropriate mix of accessible vans and wheelchair vans for paratransit services. Most operational records are generated and stored at their corporate address. Some records are shared with and are available to BCT via the StrataGen/ADEPT computer system. AMT maintains an acceptable record keeping system, which includes, but is not limited to, hard copy personnel files, vehicle records, maintenance expense records, incident/accident/insurance records, pre-trip vehicle inspection checklists, training records, and vehicle safety and equipment records. Some records are hand-written and some are kept using popular office software, such as Microsoft Word and Excel. StrataGen/ADEPT is currently used for trip monitoring, route review and dispatch functions. Most policies, procedures and plans are maintained by management personnel in hard copy and electronic format. Notice of Policy is posted on-site where appropriate.

This review was conducted by Steven Kidd, Paratransit Supervisor, Craig Collins, BCT Safety & Security Manager and Theresa Basedow, Administrative Assistant with full cooperation and assistance from Diamdre Carter, Manager, with several other management/supervisory personnel assisting when needed. Except where noted otherwise, this review consisted of random inspections of all applicable records, and interviews with management personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCT Paratransit office. In appropriate areas, a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratagen/adept data. While the Counties budget crisis is somewhat under control, all contractors and subcontractors have been advised of continued scrutiny in all areas, including but not limited to, the eligibility process, trip booking, and review of billing records in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on-time performance being a priority.
1. SYSTEM SAFETY PROGRAM PLAN (SSPP)

AMT has a revised SSPP, which contains all required elements as well as policies/procedures from prior plans and manuals. AMT's SSPP and attachments are kept in both printed and electronic formats to easily change pages when revisions occur. This plan is the basic Paratransit SSPP template, used by BCT providers, and tweaked to AMT's method of operation. AMT staff stated that the plan will continue to take on future updates, with the goal to be compliant with Rule 14-90, Florida Administrative Code, as appropriate. Future years may involve adoption of the applicable portions of BCT's revised SSPP to supplement, enhance and standardize as suitable. Craig Collins recommended some minor changes to the business/personal wireless communication plan.

2. ANNUAL VEHICLE INSPECTION COMPLIANCE

During the 2012 vehicle inspection process, approximately 92 vehicles were produced for the required annual inspection. Most vehicles passed on initial inspection or re-inspection. AMT retired some of the older, poorer condition vehicles acquired to meet start-up demands which later proved too costly to repair to TOPS standards. In addition, during this review, it was learned that 1 vehicle had just exceeded 350,000 miles and was removed from service per contract. AMT remains the largest fleet under the current TOPS contract. AMT has been reasonably compliant with the 2 additional inspections in April and September for older vehicles, and has been more aggressive about replacing older, high mileage vehicles. AMT appears to have been more thorough in making sure that no vehicle went out for service without a current inspection sticker.

3. PROOF OF VALID DRIVER’S LICENSE RECORDS

AMT staff reported that motor vehicle reports (MVRs) are run by their insurance carrier when employment starts and as needed. Current MVR’s were not available during this review and AMT was required to produce these during post review follow-up via a corrective action notice. Random samples of these records appeared to be in acceptable order. Driver license expirations and Chauffeur Registration expirations can be tracked in StrataGen/Adept, and reports can be run by the provider as often as necessary. AMT Adept reports showed some licensure expirations that appeared to be data entry not being kept up. AMT staff was reminded they should be proactive in monitoring all license & credential expiration dates. In addition spot checks are made by County and providers put on notice when Adept drivers reports suggest a license could be expired.
4. DRIVER TRAINING /QUALIFICATIONS

From the information submitted, it appears that each driver receives an appropriate level of AMT training to meet mandated standards. Driver instruction consists of class and road training with an experienced staff member. During the review, cross checks revealed a fair number of drivers that did not have their training dates documented in the Stratogen database. This issue was addressed and it appears that AMT fully understands the importance of documenting contract compliance. AMT was reminded of the importance to staying on top of all data entry, and specifically training dates. AMT was advised that further spot checks could be done and that they needed to assign training date monitoring to a responsible person, and include supervisory oversight. All driver medical certificates were found to be up to date.

5. DRUG-FREE WORKPLACE POLICY

AMT is an established drug-free workplace. All new employees are advised of this policy and sign a copy of the policy, which is made part of each employee’s personnel file. Posters advising employees of this policy are posted in obvious places at the work site. Based on a random review, all drug/alcohol policy & practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar has done follow-up with all providers to assure compliance and offer assistance where needed.

6. PRE-TRIP VEHICLE INSPECTION RECORDS

AMT procedure and the County contract require that all vehicles be inspected by the driver each day prior to starting service. AMT has a check-list type daily pre-trip inspection form for this purpose. The forms are designed to discover problem areas, and help keep an eye on overall vehicle condition. Spot checks of these documents revealed a few errors, but within generally acceptable levels of tolerance. AMT indicated they will take realistic measures to make sure that all pre-trip inspections are done every morning before the vehicle hits the road for service and that all forms are complete.

7. VEHICLE PREVENTIVE MAINTENANCE/ REPAIR RECORDS

At 4 week intervals, all vehicles are scheduled for an oil change and preventive maintenance (PM) check which includes such things as: tires, brakes, steering and other safety-sensitive areas. AMT’s vehicle maintenance records appear to be acceptable, and PM is performed as scheduled. AMT keeps file folders on each vehicle and that, generally speaking, documentation was in order.
8. **ACCIDENT REPORTING/EVALUATION**

AMT has an acceptable accident reporting and evaluation plan. Review of applicable files indicates AMT does a satisfactory job of coordinating risk management and loss issues with their insurance carrier. Random review indicates that documentation is obtained and updated as each accident/incident is investigated and processed. AMT’s internal accident documentation is compliant, and cross check of the company’s accident/incident files maintained at BCTD suggests that events are generally reported in a timely manner. AMT needs to be aware that the County is often the 1st party to hear of a potential accident claim and providers must move quickly to provide claim information as requested. All providers are advised to enter accidents/incidents in the Adept Safety/Security module and give County a heads up on items that involve injury or possible legal action. During the first half of 2012, the required monthly accident/incident summary was submitted to BCTD in a timely manner.

9. **OPERATIONAL AND SAFETY PROCEDURES**

All drivers receive an appropriate orientation regarding AMT’s operational rules, safety expectations and company policy from supervisory personnel. AMT uses outside assistance for some personnel type functions, including payroll. AMT provides employees with updated employee resource materials and continues to revise their employee handbook. One issue that was thoroughly reviewed this year was compliance with driver hour’s rules mandated by rule chapter 14-90. AMT was found to have several drivers that exceed the 12 hour wheel time rule during this review period. Suggestions were offered to cure this problem and AMT took steps to make sure this does not occur again. Besides AMT’s increased scrutiny, BCT will follow-up as appropriate to insure 14-90 compliance.

10. **WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION**

During the annual inspection, all wheelchair lift and ramp-equipped vehicles were tested. All lift-equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were checked for cleanliness and operation. Lift and ramp operation was checked for each vehicle during the annual inspection process. All the above equipment was found to be in acceptable condition at the time of the inspection or after re inspection for vehicles which had needed repairs or adjustments. AMT’s training in the use of lift and securement/restraint equipment appears in order. Repair to the lift equipment is done by M&J Lift Repair, an AMT employee certified in Braun lift repair or under warranty for newer vehicles.
11. SECURITY PLAN

AMT has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCT is comprehensive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCT’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

AMT has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year agreement as a contractor. Based on this review, AMT has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider assuming they finalize the items referenced above and in particular the data entry monitoring & driver hour oversight.

It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency. In addition to the above, future years are expected to bring further coordination between the SSPP review process done by BCT fixed route, Community bus and Paratransit. Paratransit providers can expect further standardization and refinement of their SSPP documents, and possible visits from other BCT staff involved in the oversight of 14-90.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submitted to FDOT as part of the 14-90 compliance process(see next page).
SAFETY AND SECURITY CERTIFICATION

Name: Contractor's Name: Allied Medical Transport
Address: 2170 Blount Rd.
City and State: Pompano Beach, Fl. 33069

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012.

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012.

Signature: _____________________________________________
Title: Owner or Manager Name and Title
_____________________________________________________
Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ___________20__, by, ____________________________, who is personally known to me.

______________________________
Notary Public
(SEAL)
INTRODUCTION

Lucanus Developmental Center is one of Four (4) transportation providers contracted by Broward County to perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida’s Transportation Disadvantaged program. On April 23, 2012, BCTD conducted an on-site Safety Compliance Review of Lucanus Developmental Center, at 6411 Taft St. Hollywood, FL 33024. The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, Florida Administrative Code. A brief overview of Lucanus Developmental Center’s operation is described in this introduction.

Lucanus Developmental Center, hereinafter called LUC dispatches vehicles and conducts operations from the above location. LUC uses an appropriate mix of accessible vans and wheelchair vans for paratransit services. Most operational records are generated and stored at the Taft Street address. Some records are shared with and available to BCTD via the StrataGen/ADEPT computer system. Lucanus Developmental Center maintains a good record keeping system, which includes, but is not limited to, hard copy personnel files, vehicle records, maintenance expense records, incident/accident/insurance records, pre-trip vehicle inspection checklists, training records, and vehicle safety and equipment records. Some records are hand-written and some are kept using popular office software, such as Microsoft Word and Excel. StrataGen/ADEPT is currently used for trip review, routing and dispatch functions. Most policies, procedures and plans are maintained by management personnel in hard copy and electronic format. Notice of Policy is posted on-site where appropriate.

This review was conducted by Steven Kidd, Paratransit Supervisor; Craig Collins, BCT’s Safety and Security Manager; and Theresa Basedow, Administrative Assistant with full cooperation and assistance from Clifford Buckley, Operations Supervisor, and Chris Buckley, owner. Except where noted otherwise, this review consisted of random inspections of all applicable records, and interviews with management personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCTD Paratransit office. LUC did a better job of supplying pre-inspection materials, as requested, making the actual review less time consuming. In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data.

While the Counties budget crisis is somewhat under control, all contractors have been advised of continued scrutiny in all areas in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on-time performance being a priority.
1. **SYSTEM SAFETY PROGRAM PLAN (SSPP)**

Lucanus Developmental Center has a revised SSPP, which contains all required elements as well as policies/procedures/documents from prior System safety plans. This plan is well organized and addresses all mandated areas. Management staff stated that the plan will receive updates each year, and will continue to be compliant with Rule 14-90, Florida Administrative Code, as appropriate. For 2012, suggestions were offered to clarify the personal and business wireless communication policy for drivers. LUC has done an admirable job in adapting the best practice template to the LUC business model and vowed to make necessary updates. Future years may involve adoption of the applicable portions of BCT’s revised SSPP to supplement, enhance and standardize as appropriate.

2. **ANNUAL VEHICLE INSPECTION COMPLIANCE**

During the 2012 vehicle inspection process, 64 vehicles were produced for the required annual inspection. All vehicles passed on initial inspection or re-inspection. The LUC fleet makes up approximately ¼ of the Tops fleet and Luc is the 2nd largest TOPS provider. Overall, the Lucanus Developmental Center fleet was found to be in good condition. LUC acquired quite a few new/newer vehicles during contract startup in January 2010. Running new vehicles has resulted in fewer breakdowns and customer complaints. LUC has a dedicated utility team to make sure the vehicles are kept clean and up to contract standards.

3. **PROOF OF VALID DRIVERS LICENSE RECORDS**

After a corrective action notice, LUC was able to produce recent Motor Vehicle Reports (MVR’s) following the SSPP review. Driver license expirations and Chauffeur Registration expirations can be tracked in ADEPT, and status reports can be produced by LUC as often as necessary. LUC continues to show improvement in driver license data maintenance, and credential monitoring.

4. **DRIVER TRAINING & QUALIFICATIONS**

From the information submitted, it appears that each driver receives an appropriate level of training to meet mandated standards. Driver instruction consists of classroom and over the road training with an experienced driver. LUC has a supervisor certified to do most of the required training. LUC was still updating recent training information in the Adept computer system at the time of this review. A successful recommendation is contingent upon updating all driver data, keeping it current and monitoring drivers appropriately. All driver medical certificates were found to be up to date as well as distracted driver training.
5. **DRUG FREE WORKPLACE POLICY**

Lucanus Developmental Center is an established drug-free workplace. All new employees are advised of this policy and sign a copy of the policy, which is made part of each employee’s personnel file. Signage advising employees of this policy is posted in conspicuous places at the work site. Based on a random review, all drug/alcohol policies and practices appear to be in compliance with applicable standards. Solantic Inc. does all testing, including but not limited to pre-employment, random, post accident and reasonable suspicion. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

Lucanus Developmental Center policy and contractual standards require that each vehicle be inspected by the driver each day prior to service. Lucanus Developmental Center has a checklist-type daily pre-trip inspection form for this purpose. The forms are designed to discover problem areas, and help keep an eye on overall vehicle condition. Spot checks of these documents revealed an acceptable level of compliance. LUC indicated they will take realistic measures to make sure that all pre-trip inspections are done; all forms are complete and supervisors immediately follow-up on vehicles with problems during the pre-trip.

7. **VEHICLE PREVENTIVE MAINTENANCE/ REPAIR RECORDS**

Every 5000 miles all vehicles are scheduled for an oil change and preventive maintenance (PM) check which includes lights, tires, brakes, steering and other safety sensitive areas. Lucanus Developmental Center’s vehicle files were in satisfactory order and up-to-date. Random review of repair receipts indicates that preventive maintenance and repairs are performed as required. LUC was advised to use repair facilities with proper licensure and competency.

8. **ACCIDENT REPORTING/EVALUATION**

LUC has a complete accident reporting and assessment plan. Review of applicable files indicates Lucanus Developmental Center does a satisfactory job of coordinating risk management and loss issues with their insurance carrier. Random review indicates that documentation is obtained and updated as each accident/incident is investigated and processed. LUC insurance certificates were up-dated shortly after the on –site visit. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made.
9. OPERATIONAL AND SAFETY PROCEDURES

All drivers receive a detailed orientation on LUC’s operational rules, safety expectations and company policy from company supervisors. LUC handles most of these tasks in-house. Lucanus Developmental Center has a revised employee handbook and other resource manuals to assist drivers and other staff. These materials cover both appropriate safety and operational matters.

10. WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION

During the annual vehicle inspection, all wheelchair lift and ramp equipped vehicles were tested. All lift equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were checked for cleanliness and functionality. Lift and ramp operation was checked for each vehicle during the annual inspection process. Some lift repairs are being done under factory warranty; other repairs have been done by M & J lift repair.

11. SECURITY PLAN

Lucanus Developmental Center has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCTD is comprehensive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

LUC has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year agreement as a contractor. Based on this review, LUC has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency. Future years are expected to bring further coordination between the SSPP review process done by BCT fixed route, Community bus and Paratransit. Paratransit providers can expect further standardization and refinement of their SSPP documents, and possible visits from other BCT staff involved in the oversight of 14-90. After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submitted to FDOT as part of the 14-90 compliance process.(form below).
SAFETY AND SECURITY CERTIFICATION

Name: Contractor's Name:
Address:
City and State:

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012.

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012.

Signature: ____________________________________
Title: Owner or Manager Name and Title

____________________________________
Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of __________20__, by, ___________________________ , who is personally known to me.

________________________
Notary Public

(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW

MEDEX TRANSPORT, INC.

BY

BROWARD COUNTY TRANSPORTATION DEPARTMENT

ON-SITE REVIEW DATE: April 23, 2012

SUBMITTED BY: ____________________     FOR REVIEW YEAR  2012

STEVEN KIDD          Paratransit Supervisor
INTRODUCTION

Medex Transport Inc. is one of Four (4) transportation providers contracted by Broward County to perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida's Transportation Disadvantaged program. On April 23, 2012, BCTD conducted an on-site Safety Compliance Review of Medex Transport Inc., at 2025 Harding St. Hollywood, FL 33020. The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, Florida Administrative Code. A brief overview of Medex Transport Inc’s operation is described in this introduction.

Medex Transport Inc, hereinafter called MDX dispatches vehicles and conducts operations from the above location. MDX uses an appropriate mix of accessible vans and wheelchair vans for paratransit services. Most operational records are generated and stored at the Harding Street address. Some records are shared with and available to BCTD via the StrataGen/ADEPT computer system. MDX maintains a good record keeping system, which includes, but is not limited to, hard copy personnel files, vehicle records, maintenance expense records, incident/accident/insurance records, pre-trip vehicle inspection checklists, training records, and vehicle safety and equipment records. Some records are hand-written and some are kept using popular office software, such as Microsoft Word and Excel. StrataGen/ADEPT is currently used for trip monitoring, route generation and dispatch functions. Most policies, procedures and plans are maintained by management personnel in hard copy and electronic format. Notice of Policy is posted on-site where appropriate.

This review was conducted by Steven Kidd, Paratransit Supervisor; Craig Collins, BCT’s Safety and Security Manager full with cooperation from Paula Welch, Operations Manager. Except where noted otherwise, this review consisted of random inspections of all applicable records, and interviews with management personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCTD Paratransit office. MDX did a good job of providing pre-inspection materials, making the actual review clear and straightforward. In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data. While the Counties budget crisis is somewhat under control, all contractors have been advised of continued scrutiny in all areas in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on-time performance being a priority.
1. **SYSTEM SAFETY PROGRAM PLAN (SSPP)**

Medex Transport is part of the new provider team that was brought on board starting 1/1/2010 to enhance Broward County’s ability to effectively deliver paratransit services at a lower cost. Medex’s has a revised SPP, which contains all required elements as well as policies/procedures and directives from prior years SSPP's. This SSPP follows the standard best practice format and will be updated as needed, with the goal to be compliant with Rule Chapter 14-90, Florida Administrative Code. MDX staff has done an acceptable job in preparing the SSPP’s “pre visit” documentation for the 2012 review. For 2012, suggestions were offered to clarify the personal and business wireless communication policy for drivers. Future years may involve adoption of the applicable portions of BCT’s revised SSPP to supplement, enhance and standardize as appropriate.

2. **ANNUAL VEHICLE INSPECTION COMPLIANCE**

In December 2011, 33 vehicles were produced for the required annual inspection. All vehicles passed on initial inspection or re-inspection. Overall, the Medex fleet improved from last year's substandard inspection performance and MDX appears to be on their way to better compliance in this area.

3. **PROOF OF VALID DRIVERS LICENSE RECORDS**

MDX staff reported that motor vehicle reports (MVR's) are run by staff twice a year as required by contract. Random samples of these records appeared to be in acceptable order. Driver License expirations and Chauffeur Registration expiration can be tracked in StrataGen, and reports can be run by the provider as often as necessary. Several updates were required on last review and MDX staff was reminded of the importance of keeping data current at all times and to stay on top of credentialing expiration dates.

4. **DRIVER TRAINING /QUALIFICATIONS**

From the information submitted, it appears that each driver receives an appropriate level of training to meet mandated standards. Driver instruction consists of class and road training with an experienced staff member. It was reported that MDX has updated applicable training records in the Stratogen/ Adept system. All driver medical certificates were found to be up to date & driver hours did not exceed 14-90 rules.
5. **DRUG FREE WORKPLACE POLICY**

Medex is an established drug free workplace. All new employees are advised of this policy and sign a copy of the policy, which is made part of each employee's personnel file. Posters advising employees of this policy are posed in conspicuous places at the work site. Based on a random review, all drug/alcohol policy & practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

Medex procedure and the County contract require that all vehicles be inspected by the driver prior to service. Medex has a check list type daily pre-trip inspection form that was revised in March 2012 to better capture required information and standardize the way drivers complete the form. Spot checks of these documents prior to March revealed that some forms were missing and others were not complete. While this review shows improvement from the prior year it appears further supervision is needed in this area. Medex was again advised to take proactive measures to continue its improvement in this area.

7. **VEHICLE PREVENTIVE MAINTENANCE/REPAIR RECORDS**

At 3500 mile intervals, all vehicles are scheduled for an oil change and preventive maintenance (PM) check which includes such things as: tires, brakes, steering and other safety sensitive areas. Medex’s vehicle files were in acceptable order and up to date. In addition, random review of repair records indicates that preventive maintenance and repairs are performed as necessary. Medex has a computerized record keeping system thru its parent company.

8. **ACCIDENT REPORTING/EVALUATION**

Medex has an acceptable accident reporting and assessment plan. Review of applicable files indicates Medex does a satisfactory job of coordinating risk management and loss issues with their insurance carrier. Random review indicates that documentation is obtained and updated as each accident/incident is investigated and processed. Medex’s internal accident documentation is sound, and cross check of the company’s accident/incident files maintained at BCTD suggest that events are reported in a timely manner. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made. During the first half of 2012, the required monthly accident/incident summary was submitted to BCTD in a timely manner.
9. **OPERATIONAL AND SAFETY PROCEDURES**

All drivers receive appropriate track on Medex’s operational rules, safety expectations and company policy from company supervisors. Medex uses their parent company in New York for some human resource functions, including payroll. MDX has an employee handbook and other resource manuals to assist drivers. Copies of the revised employee handbook and other operational procedures are on file with Broward County.

10. **WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION**

During the annual inspection, all wheelchair lift and ramp equipped vehicles were tested. All lift equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were checked for cleanliness and operation. Lift and ramp operation was checked for each vehicle during the annual inspection process and all were found to be in acceptable order either on initial inspection or re-inspection.

11. **SECURITY PLAN**

Medex uses the template FDOT Security plan with minor changes for the Medex business model. With Craig Collin’s suggested revisions, the Medex SPP will meet requirements. Furthermore MDX will continue to update their plan as appropriate. The plan filed with BCTD is inclusive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

**SUMMARY OF REVIEW AND COMMENTS**

Medex has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year contract. Based on this review, Medex has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider, provided they stay on top of items requiring corrective action, as per the May 14, 2012 follow-up action report. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency.
In addition to the above, future years are expected to bring further coordination between the SSPP review process done by BCT fixed route, Community bus and Paratransit. Paratransit providers can expect further standardization and refinement of their SSPP documents, and possible visits from other BCT staff involved in the oversight of 14-90.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will be submitted to FDOT as part of the 14-90 compliance process. (see following page)
SAFETY AND SECURITY CERTIFICATION

Name: Contractor's Name: 
Address: 
City and State: 

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012.

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012.

Signature: ____________________________________
Title: Owner or Manager Name and Title

Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ___________20__,
by, __________________________, who is personally known to me.

__________________________
Notary Public

(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW

CITY OF DEERFIELD BEACH (SUBCONTRACTOR)
For Medex Transport, Inc.

BY

BROWARD COUNTY TRANSPORTATION DEPARTMENT
ON-SITE REVIEW DATE: April 18, 2012

SUBMITTED BY: ____________________       FOR REVIEW YEAR 2012

STEVEN KIDD
PARATRANSIT SUPERVISOR
INTRODUCTION

The NE FOCAL POINT SENIOR CENTER, (hereinafter called NEFP) is one of five (5) subcontractors, who work under one of the contracted paratransit service providers in Broward County. The providers and their subcontractors perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida’s Transportation Disadvantaged program. NEFP provides transportation to/from their senior center, as well as limited service to other destinations within their service area.

On April 18, 2012, the Broward County Transportation Department (BCTD) conducted an on-site Safety Compliance Review of NEFP at 227 NW 2nd Street, Deerfield Beach, FL 33441. The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, Florida Administrative Code. A brief overview of NEFP’s operation is described in this introduction.

NEFP performs vehicle and driver related activities, and other operational and management functions at the Deerfield office. All safety and operational records are generated and stored at the above location, or in accordance with the City of Deerfield Beach’s policy on record retention. NEFP maintains a meticulous record keeping system, has outstanding documentation of policies and procedures and appropriate manuals for drivers and supervisors. Notice of Policy is posted on-site where appropriate.

This review was conducted by Steven Kidd, Paratransit Supervisor and Craig Collins, Safety/Security Manager, and Theresa Basedow, Administrative Assistant with full cooperation and assistance from Elizabeth “Peaches” Harper, Transportation Coordinator and Frieda Caldes, Deputy Director. Except where noted otherwise, this review consisted of random inspections of all applicable records and documents, and interviews with supervisory and/or administrative personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCTD Paratransit office. The NEFP did an excellent job of providing pre- inspection materials, making the actual review very clear and straightforward. While the County’s budget crisis is somewhat under control, all contractors and subcontractors have been advised of continued scrutiny in all areas, including but not limited to, the eligibility process, trip booking, and review of billing records in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on-time performance being a priority.

In most areas of review a cross check was made with other available record sources, such as monthly reports and Stratogen/adept data. Described below are the major areas of inspection and review findings.
1. SYSTEM SAFETY PROGRAM PLAN (SSPP)

NEFP has a revised SSPP, which contains all required elements as well as policies/procedures from the City’s Human Resource Department, Risk Management Division, garage (fleet services), and the Senior Center. This plan is well-prepared and addresses all mandated areas. The plan was updated in 2012 and will continue to be updated when changes are introduced or as required. Focal Point transportation staff and supervisors have demonstrated a special effort in putting together this safety plan, and applying the plan to its operation.

2. ANNUAL VEHICLE INSPECTION COMPLIANCE

Around December 2011, eight (8) vehicles were produced for annual inspection. All vehicles were in compliance and passed on initial inspection or on re-inspection if a problem area was found. NE Focal Point staff was very cooperative and did an excellent job having the vehicles ready for inspection at the appointed time. NEFP still has a large percent of vehicles older than 2006, however they removed several vehicles that they did not want to install County AVL systems.

3. PROOF OF VALID DRIVER’S LICENSE RECORDS

Random samples of driver files were reviewed. Proof of valid driver’s licenses was in superb order. Motor vehicle reports (MVRs) are run every 3 months and spot checks found all to be acceptable. All drivers are city employees, thus exempt from the chauffeur registration requirement. The City’s Risk Management section assists in monitoring driver records and coordinates information with Focal Point Transit Staff.

4. DRIVER TRAINING QUALIFICATIONS

Each driver receives an appropriate level of training to meet mandated standards. Focal Point transportation supervisors have implemented an applied training tracking system to document driver training. Instruction primarily consists of hands-on training with experienced staff and refresher training (in-service) documented with sign-in logs and summary reports. Quarterly training reports are prepared to document all training activities. NEFP provided a summary matrix of all driver qualifications and training dates, and will continue to update this as changes occur. All driver medical certificates were found to be up to date and all drivers completed the required distracted driver training.
5. **DRUG-FREE WORKPLACE POLICY**

NEFP is an established drug-free workplace. All new employees are made aware of this policy and provided with information on drug testing. Pre-employment, random, post-accident and reasonable suspicion drug tests are performed by Dr. Joseph Arena’s office as part of the Cities drug test pool. Based on a random review, all drug/alcohol policy & practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

NEFP requires each vehicle to be inspected by the driver prior to leaving the parking lot. NEFP utilizes a checklist-type pre-trip inspection form for this purpose. The form and process currently in use has been successfully utilized for many years. Samples reviewed appeared to be in order with no issues needing resolution in this area.

7. **VEHICLE PREVENTIVE MAINTENANCE /REPAIR RECORDS**

At three (3) month intervals, all vehicles are scheduled for an oil change and comprehensive preventive maintenance check which includes such things as tires, brakes, steering and other safety-sensitive areas. Vehicles needing immediate attention can be brought into the City garage at 401 SW 4th St. in Deerfield Beach. All maintenance is tracked by a computer program at the City garage, with hard copies on file at the Focal Point. A cross-check indicated that noted deficiencies are promptly prioritized and emergency and/or scheduled repairs are accomplished in a timely manner. A loose-leaf binder is maintained at the Focal Point, documenting the entire maintenance history of every vehicle.

8. **ACCIDENT REPORTING/EVALUATION**

NEFP’s Accident Reporting/Evaluation Program is closely monitored by the City’s Risk Management Division. Random inspection indicates that accidents and incidents are carefully tracked through completion including, but not limited, to appropriate action taken by the City’s accident review board. All records appear complete with very few accidents or incidents. The City of Deerfield Beach is self-insured and carries excess liability coverage. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made. The City of Deerfield Beach reported no significant accidents during this review period and appears to maintain insurance as required.
9. OPERATIONAL AND SAFETY PROCEDURES

All new drivers receive comprehensive orientation regarding NEFP’s transportation rules, safety expectations and City policy. The Focal Point issues its employees an Employee Handbook, Risk Management Manual and Transportation Handbook which detail all safety and operational issues. A review of these documents indicates that the City places a priority on safety and keeping employees up-to-date on important operational and security matters.

10. WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION

During the annual inspection, all wheelchair lift-equipped vehicles were tested and found to be in acceptable working order on inspection or in some cases reinspection, if the lift was not working properly when initially inspected. All tie-down straps & belts were found to be clean, operational and the required type for Paratransit Service. All drivers receive comprehensive wheelchair lift and securement training. Some of the training is from videos and publications provided by equipment manufacturers, such as Kinnedyne, Q-Straint, Ricon and Braun. Other training is hands on, taught by experienced staffers.

11. SECURITY PLAN

NE Focal Point Staff has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCTD is comprehensive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

NEFP has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year contract as a subcontractor. Based on this review, NEFP has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submit to FDOT as part of the 14-90 compliance process.(see below).
SAFETY AND SECURITY CERTIFICATION

Name: Contractor’s Name: 
Address: 
City and State: 

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012

Signature: ____________________________________
Title: Owner or Manager Name and Title __________________________
Company Name __________________________

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ___________20__, by, __________________________, who is personally known to me.

________________________
Notary Public
(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW
CITY OF PEMBROKE PINES, SOUTHWEST FOCAL POINT (subcontractor)
For Lucanus Development Center, Inc.
BY
BROWARD COUNTY TRANSPORTATION DEPARTMENT

ON-SITE REVIEW DATE: April 16, 2012

SUBMITTED BY: ____________________          FOR REVIEW YEAR 2012
STEVEN KIDD
PARATRANSIT SUPERVISOR

123
INTRODUCTION

The City of Pembroke Pines/Southwest Focal Point Senior Center, is one of 5 five subcontractors, who work under one of the contracted paratransit service providers in Broward County. The providers and their subcontractors perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida’s Transportation Disadvantaged program. The City of Pembroke Pines/Southwest Focal Point Senior Center, hereinafter called SWFP provides transportation, (through The Transportation Authority) to/from their senior center, as well as limited service to other destinations within their service area.

On April 16, 2012, the Broward County Transportation Department (BCTD) conducted an on-site Safety Compliance Review of the City at the SWFP facility at 301 Northwest 103rd Avenue, Pembroke Pines, Florida 33026.

The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, FL Administrative Code. A brief overview of SWFP’s operation is described in this introduction.

The SWFP performs all transportation-related activities, and other operational and administrative functions at the 103rd Ave. office. All safety and operational records are generated and stored at the above location, or in accordance with the SWFP’s policy on record retention. The SWFP maintains a well-organized record-keeping system, updated manuals for drivers and staff, and excellent documentation of policies and procedures. ‘Notice of Policy’ is posted on-site where appropriate.

This review was conducted by Steven Kidd, BCTD Paratransit Supervisor, Craig Collins, BCT’s Safety and Security Manager and Theresa Basedow, Administrative Assistant with full cooperation and assistance from Jacque-Ann Isaacs, SWFP Transportation Supervisor, Mercedes McBay, Transportation coordinator, and Richard Passero, President of The Transportation Authority, Inc.

Except where noted otherwise, this review consisted of random inspections of all applicable records, and consultation with supervisory personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCTD Paratransit office. SWFP/Transportation Authority staff did an excellent job of providing pre-inspection materials, making the actual review very clear and straightforward. All contractors and subcontractors have been advised of continued scrutiny in all areas, as well as customer service expectations.

In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data. Described below are the major areas of inspection and review findings.
1. **SYSTEM SAFETY PROGRAM PLAN (SSPP)**

SWFP has a revised SSPP, which contains all required elements as well as policies/procedures from the City’s Human Resource Division, Risk Management office, garage (fleet services), and the Senior Center /Transportation Authority. This plan is well organized and addresses all required areas of concern. The plan was last updated in April 2012, and will continue to be amended as appropriate. Focal Point transportation staff and supervisors have demonstrated a special effort in putting together this safety plan, and applying the plan to its operation. Future years may involve adoption of the applicable portions of BCT’s revised SSPP to supplement, enhance and standardize as appropriate.

2. **ANNUAL VEHICLE INSPECTION COMPLIANCE**

In December 2011 and into early 2012 the entire SW fleet received the requisite annual inspection. Currently, 18 vehicles are approved for TOPS service. It should be noted that several vehicles were later taken out of service by the provider due to provider’s decision not to install County AVL technology in these units. Of the vehicles currently approved, some are older than 2006 and must undergo the additional April/September inspections. Several random spot inspections conducted on site during the SSPP suggest that the SWFP vehicles are kept in good condition at all times. Annual inspection results are on file with the BCTD.

3. **PROOF OF VALID DRIVERS LICENSE RECORDS**

Random samples of driver license records were reviewed and found to be in compliance. SW Focal Point Supervisors receive monthly motor vehicle transcripts and carefully review each driver’s record to make sure that all drivers meet program standards. Drivers are employees of Transportation Authority, Inc, the contractor of transit services for the City and hence will adhere to all transportation policies and procedures set forth by the City of Pembroke Pines.

4. **DRIVER TRAINING /QUALIFICATIONS**

Each driver receives the appropriate level of training to meet mandated standards. SWFP staff tracks training electronically and with hard file copy. Training consists of both on the road and classroom instruction. Transportation supervisors have the benefit of the City resources to assist with training/monitoring. SWFP provided a summary matrix of all driver qualifications and training dates, and will update this as scheduled trainings are completed. All
driver medical certificates were found to be up to date.

5. **DRUG FREE WORKPLACE POLICY**

SWFP is an established drug free workplace. All new employees are made aware of this policy and provided with detailed information on the drug-testing program. Posters advising employees of this policy are posted in conspicuous places at the work site. All required drug tests are performed by Occupational Medical Centers of America (Occumed). Based on a random review, all drug/alcohol policy & practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

SWFP requires that each vehicle be inspected by the driver prior to leaving the Transportation Center. SWFP continues to use their recently revised vehicle pre-trip inspection form which was found to be one of the most complete forms of this type in our system. Samples reviewed appeared to be complete and accurate. Identified problem areas were spot-checked against maintenance records and found to be resolved appropriately.

7. **VEHICLE PREVENTIVE MAINTENANCE / REPAIR RECORDS**

At 3,000 mile intervals, all vehicles are scheduled for a routine oil change service and extensive preventive maintenance check which includes such things as tires, brakes, steering and other safety sensitive areas. Vehicles needing immediate attention are brought to All Star Fleet at 13975 Pembroke Rd. in Pembroke Pines. The City garage tracks all maintenance on a centralized database. In addition, transportation staff maintains a repair summary using Microsoft Excel.

8. **ACCIDENT REPORTING/EVALUATION**

The SWFP accident reporting/evaluation program is closely monitored by the City’s Risk Management Division. Random inspection indicates that accidents and incidents are carefully tracked thru conclusion, including, but not limited to appropriate action taken by an accident review board. All records appear complete with very few accidents or incidents. The City of Pembroke Pines is self insured and performs most accident / insurance functions in house. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made. During the first half of 2012, the required monthly accident/incident
summary was submitted to BCTD in a timely manner.

9. OPERATIONAL AND SAFETY PROCEDURES

All new drivers receive comprehensive orientation on SWFP/The Transportation Authority Inc. rules, safety expectations and City policy. The SW Focal Point issues all drivers a transportation handbook, accident/incident reporting directives and a “Driver Training Manual” with emphasis on all safety and operational issues. A review of these documents indicates that SWFP City places a priority on safety and keeping employees current on key operational and security matters.

10. WHEELCHAIR SECUREMENT PROCEDURES & EQUIPMENT

During the annual inspection, all wheelchair lift equipped vehicles were tested and found to be in good working order. All lift-equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, and related equipment, were found to be clean, operational and the required type for paratransit service. Drivers receive wheelchair securement training via DVD, video tape, on the job training with experienced drivers, as well as monthly refresher “in-service” training seminars.

11. SECURITY PROGRAM PLAN

SW Focal Point has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCTD is comprehensive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

SWFP has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year contract as a subcontractor. Based on this review, SWFP has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency. After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will be submitted to FDOT as part of the 14-90 compliance process.
SAFETY AND SECURITY CERTIFICATION

Name: Contractor's Name:
Address: 
City and State: 

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012.

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012.

Signature: __________________________________
Title: Owner or Manager Name and Title

__________________________________________
Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ___________20__, by, ____________________________, who is personally known to me.

_________________________
Notary Public

(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW

TENDER LOVING CARE INC.

BY

BROWARD COUNTY TRANSPORTATION DEPARTMENT

ON-SITE REVIEW DATE: April 30, 2012

SUBMITTED BY: ____________________ FOR REVIEW YEAR 2012

STEVEN KIDD
Paratransit Supervisor
INTRODUCTION

Tender Loving Care Inc. is one of four (4) transportation providers contracted by Broward County to perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida's Transportation Disadvantaged program. On April 30, 2012, BCTD conducted an on-site Safety Compliance Review of Tender Loving Care Inc, (hereinafter called TLC), at 611 NW 31st Ave. Pompano Beach, FL. 33069. The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, Florida Administrative Code. A brief overview of TLC’s operation is described in this introduction.

TLC dispatches vehicles from, and conducts operations at the above location. TLC uses wheelchair vans, passenger vans and minivans to transport their riders. Most operational records are generated and stored at the Pompano Beach address. TLC maintains a satisfactory record keeping system, which includes, but is not limited to hard copy personnel files, vehicle records, maintenance expense accounts, incident/accident records, pre-trip vehicle inspection checklists, training records, and vehicle safety and equipment records. Some records are hand written and some are kept using popular office products such as Microsoft word and excel. TLC uses the Stratogen/Adept software provided by BCT for all trip monitoring, route creation, dispatch, vehicle and driver tracking as well as complaint response and safety/security functions. Most policies, procedures and plans are maintained in electronic and printed formats. Notice of Policy is posted on-site where appropriate.

This review was conducted by Steven Kidd, Paratransit Supervisor; Craig Collins, BCT’s Safety and Security Manager and Theresa Basedow, Administrative Assistant, with full cooperation and assistance from Darlene Ponder, CEO and Sharon Brown, Operations Manager. Except where noted otherwise, this review consisted of random inspections of all applicable records, and interviews with management personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCT Paratransit office. TLC’s review was started on April 18 but needed to be rescheduled due to TLC’s poor preparation and no management person on hand to answer questions. In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data. While the Counties budget crisis is somewhat under control, all contractors and subcontractors have been advised of continued scrutiny in all areas, including but not limited to, the eligibility process, trip booking, and review of billing records in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on-time performance being a priority. Described below are the major areas of inspection and review findings.
1. **SYSTEM SAFETY PROGRAM PLAN (SSPP)**

Tender Loving Care has a revised SSPP, which contains all required elements as well as policies/procedures from past System Safety Program Plans, and other models that have been approved in earlier periods. TLC presented as cooperative and willing to stay compliant with Rule Chapter 14-90, Florida Administrative Code, as appropriate. Management has done an acceptable job of fine tuning the plan for the April 2012 review, and stated they would keep this document updated. Minor revisions that were needed as pointed out by Craig Collins will be followed up on by TLC. As pointed out earlier, after a rough start on April 18th, TLC regrouped and was well organized on April 30th. They had required documentation and the Manager most familiar with the day to day operations available. Future years may involve adoption of the applicable portions of BCT's revised SSPP to supplement, enhance and standardize as appropriate.

2. **ANNUAL VEHICLE INSPECTION COMPLIANCE**

In December 2011, 17 vehicles were submitted for the required annual inspection. All vehicles passed on initial inspection or re-inspection. Overall, the Tender Loving Care fleet was found to be in acceptable condition, however approximately ½ of the vehicles failed on the initial inspection and required the vehicle to be repaired and re-inspected. TLC now has several units that require the extra “older vehicle” inspections in April and September, and this will serve as a reminder that this must be done and proof submitted to County in a timely manner.

3. **PROOF OF VALID DRIVERS LICENSE RECORDS**

Motor vehicle reports (MVR's) for each driver are run by Tender Loving Care’s insurance carrier when employment starts and thru an on line data service after hire and between chauffeurs registration renewal. The MVR's submitted were outdated so as part of the post inspection follow-up action, TLC was asked to provide recent MVR's. Random samples of these records appeared to be in good order. Driver License expirations and Chauffeur Registration expirations are tracked via Stratogen. An improvement was noted in the area of keeping driver information up to date in Stratogen/adept. Cross checks of various data sources were all reliable and random files pulled for review were all up to date.
4. **DRIVER TRAINING /QUALIFICATIONS**

From the information submitted, it appears that each driver receives an appropriate level of TLC training to meet mandated standards. Driver instruction consists of classroom and over the road training with an experienced driver. TLC no longer has Logistacare to assist with training mandates, and handles many training functions in-house. TLC has taken steps to get Sharon Brown certified to train in several areas. All driver medical certificates were found to be up to date.

5. **DRUG FREE WORKPLACE POLICY**

Tender Loving Care is an established drug free workplace. All new employees are advised of this policy and sign a copy of the policy, which is made part of each employees personnel file. Posters advising employees of this policy are posed in conspicuous places at the work site. Based on a random review, all drug/alcohol policy & practices appear to be in compliance with applicable standards. An informal review of these records indicates that US Healthworks does their entire drug testing, and there is satisfactory evidence of compliance in this area. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

Tender Loving Care procedure requires that all vehicles be inspected by the driver prior to service. Tender Loving Care has a check list type daily pre-trip inspection form for this purpose. Spot checks of these documents revealed an acceptable level of tolerance. TLC indicated they will take reasonable measures to make sure that all pre-trip inspections are done, all forms are complete and needed repairs are prioritized and performed.

7. **VEHICLE PREVENTIVE MAINTENANCE/ REPAIR RECORDS**

Management suggested that every 3000 miles, all vehicles are scheduled for an oil change and preventive maintenance (PM) check which includes such things as: tires, brakes, steering and other safety sensitive areas. Maintenance records indicate that PM’s are done monthly or every other month rather than by mileage. TLC’s vehicle files were in less than satisfactory order and not up to date. Additional follow-up was required in this area and suggestions provided on best practices to document vehicle repair and be proactive about identifying potential problems. TLC was also advised that if they do use a date based tracking system that it should not only document which vehicles were seen on which date, but also have clear, well organized invoices and records.
8. **ACCIDENT REPORTING/EVALUATION**

Tender Loving Care has an acceptable accident reporting and assessment plan. Review of applicable files indicates Tender Loving Care has a satisfactory plan in place to coordinate risk management and loss issues with their insurance carrier. Random review indicates if an accident occurs, documentation will be obtained and reported to appropriate stakeholders in an appropriate and timely manner. Tender Loving Care’s internal accident/incident planning steps are sound, and loss experience appears small. TLC appears to have resolved insurance coverage issues from prior years and was able to provide acceptable documentation. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made. During the first half of 2011, the required monthly accident/incident summary was submitted to BCTD in a timely manner.

9. **OPERATIONAL AND SAFETY PROCEDURES**

All drivers receive an extensive orientation on Tender Loving Care’s operational rules, safety expectations and company policy from company supervisors, videos and other appropriate sources. In addition, TLC appears to put emphasis on safety considerations and stresses this in their business model. Tender Loving Care has an employee handbook that is appropriate in size and scope for the scale of their operation. These materials cover both proper safety and operational matters.

10. **WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION**

During the annual inspection, all wheelchair lift and ramp equipped vehicles were tested. All lift equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were checked for cleanliness and operation. Lift and ramp operation was checked for each vehicle during the annual inspection process. Some lift repairs are being done under factory warranty, however most repairs are being done by M&J lift repair.

11. **SECURITY PLAN**

TLC has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCT is inclusive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCT’s Paratransit Services office. TLC updated their plan in April 2012 and made changes requested by the BCT Safety and Security Manager.
SUMMARY OF REVIEW AND COMMENTS

Tender Loving Care Inc. has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year agreement as a contractor. Based on this review, TLC has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider assuming they continue with their efforts outlined in the follow-up action plan.

It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submitted to FDOT as part of the 14-90 compliance process.(form attached)
SAFETY AND SECURITY CERTIFICATION

Name: Contractor’s Name: Tender Loving Care, Inc.
Address: 611 NW 31 Ave.
City and State: Pompano Beach, Fl 33069

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012

Signature: ____________________________________
Title: Owner or Manager Name and Title
____________________________________
Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ___________20__,
by, _____________________________, who is personally known to me.

__________________________
Notary Public
(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW
DANIEL D. CANTOR SENIOR CENTER (SUBCONTRACTOR)
For Lucanus Developmental Center, Inc.

BY

BROWARD COUNTY TRANSPORTATION DEPARTMENT
ON-SITE REVIEW DATE: April 17, 2012

SUBMITTED BY: ______________________          FOR REVIEW YEAR 2012
STEVEN KIDD
PARATRANSIT SUPERVISOR
INTRODUCTION

The Daniel Cantor Senior Center, is one of five subcontractors, who work under one of the contracted paratransit service providers in Broward County. The providers and their subcontractors perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida's Transportation Disadvantaged program. The Daniel Cantor Senior Center, (hereinafter called CTR) provides transportation to/from their senior center, as well as limited service to other destinations within their service area. On April 17, 2012, BCTD conducted an on-site Safety Compliance Review of CTR at 5000 Nob Hill Rd. Sunrise, FL 33351.

The purpose of the review was to determine compliance with the applicable provisions of Rule 14-90, Florida Administrative Code. A brief overview of CTR’s operations is described in this introduction.

CTR performs all vehicle and driver related activities, and other operational and management functions at 5000 Nob Hill Rd. All safety and operational records are generated and stored at the above location. CTR maintains a practical recordkeeping system, has good documentation of policies and procedures, and appropriate manuals for drivers and other personnel. Notice of Policy is distributed to staff, as appropriate.

This review was conducted by Steven Kidd, Paratransit Supervisor, and Craig Collins, BCT Safety and Security Manager and Theresa Basedow, Administrative Assistant with full cooperation and assistance from Victoria Young, Transportation Coordinator. Samples of forms and supporting materials gathered during this review are maintained in the BCTD Paratransit office. CTR did an acceptable job of providing pre- inspection materials, making the actual review clear and straightforward. While the Counties budget crisis is somewhat under control, all contractors and subcontractors have been advised of continued scrutiny in all areas, including but not limited to, the eligibility process, trip booking, and review of billing records in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on-time performance being a priority.

In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data. Described below are the major areas of inspection and review findings.
1. SYSTEM SAFETY PROGRAM PLAN (SSPP)

CTR’s has a revised SSPP, which contains all required elements as well as policies/procedures from their employee handbook, actions mandated by the Area agency on Aging and guidelines from the funding sources. This plan is useful for CTR’s type of operation and the revisions include use of the standard FDOT template, and wireless communications updates. The plan also has some internal documents that are unique to CTR, and will continue to be amended, as appropriate. Transportation staff and supervisors have demonstrated a special effort in putting together this safety plan, and applying the plan to its operation. Future years may involve adoption of the applicable portions of BCT’s revised SSPP, and use of a generally accepted model to supplement, enhance and standardize as appropriate.

2. ANNUAL VEHICLE INSPECTION COMPLIANCE

In December, 2011, six (6) vehicles were produced for annual inspection. All vehicles were in compliance and passed on initial inspection or re-inspection if minor repairs were needed. As in past years, the transportation staff was careful in making sure that the inspection process went quickly and that the vehicles were in road worthy condition. Inspection results are on file with BCTD. Several vehicles were spot checked while on site, and all were found to be in acceptable condition.

3. PROOF OF VALID DRIVER’S LICENSE RECORDS

MVR’s were not available during the onsite visit. During follow-up investigation, current motor vehicle reports (MVRs) were obtained and reviewed and found to be acceptable. Proof of valid driver’s licenses and Chauffeur’s Registrations were found to be in compliance, based on samples reviewed. CTR has made some changes to their procedure to insure that MVR’s are run at least twice a year, and that the records are carefully reviewed by supervisory personnel.

4. DRIVER TRAINING /QUALIFICATIONS

CTR indicated that all drivers receive the acceptable level of training to meet mandated standards. CTR staff uses an Excel training tracking system and Adept reports to document driver training activity. Instruction consists of both on-the-road and classroom training. CTR was reminded that documentation of all training is a provider responsibility. All driver medical certificates were found to be up to date and all drivers completed the required distracted driver training.
5. **DRUG-FREE WORKPLACE POLICY**

CTR is an established drug-free workplace. All new employees are made aware of this policy and provided with comprehensive information on CTR’s drug testing program. Posters advising employees of this policy are posted in conspicuous places at the work site. All required drug tests are performed by ASAP Programs, and their local collection sites. Based on a random review, all drug/alcohol policies & practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed in this area.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

CTR requires each vehicle to receive a thorough inspection by the driver prior to leaving the center’s parking lot. CTR continues to utilize a 5-day checklist type “Vehicle Pre-trip Inspection” report for this function. The form was revised several years ago to be more comprehensive and similar to our best practices model. Samples reviewed appeared to be complete, accurate and filed in an orderly manner.

7. **VEHICLE PREVENTIVE MAINTENANCE/REPAIR RECORDS**

At 3,000 mile intervals, all vehicles are scheduled for an oil change and extensive preventive maintenance/safety check which includes such things as tires, brakes, steering and other safety-sensitive areas. Vehicles needing immediate attention can be brought into Preferred Automotive, Inc, or Bob’s Automotive for any repair. All wheelchair lift repair is done by Jeff Williams of M&J Lift Repair. All maintenance is tracked on a spreadsheet using Microsoft Excel and reviewed by transportation supervisors.

8. **ACCIDENT REPORTING/EVALUATION**

CTR’s accident reporting and evaluation program continues to be closely monitored by their insurance company. CTR has a good overall safety record, and minimal loss history. Good training and adherence to best practices appear to be contributing factors to reducing CTR’s liability exposure. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made. During the first half of 2012, most required monthly accident/incident summaries were submitted to BCTD in a timely manner.
9. OPERATIONAL AND SAFETY PROCEDURES

All new drivers receive comprehensive orientation on CTR’s transportation rules, safety expectations and operational policy. CTR issues its employees a employee handbook and provides appropriate training which emphasizes all safety and operational issues. A review of these documents indicates that CTR places a concern on safety and keeping employees current on important operational, safety and security issues.

10. WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION

During the annual inspection, all wheelchair lift-equipped vehicles were tested and found to be in good working order. All lift-equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were found to be clean, operational and the required type for paratransit service. Wheelchair lift/securement training is done by experienced drivers during the initial 6-8 weeks of on-the-job training. CTR indicated that drivers receive refresher training in lift operations & securement / restraint on an annual basis.

11. SECURITY PROGRAM PLAN

CTR staff has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCTD is complete and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

CTR has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year contract as a subcontractor. Based on this review, CTR has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submit to FDOT as part of the 14-90 compliance process.(see below)
SAFETY AND SECURITY CERTIFICATION

Name:  
Contractor's Name:  
Address:  
City and State:

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012.

4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2012.

Signature: ____________________________________
Title:   Owner or Manager Name and Title
____________________________________
Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ___________20__,
by, ____________________________, who is personally known to me.

__________________________
Notary Public

(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW

NORTHWEST FOCAL POINT SENIOR CENTER (SUBCONTRACTOR)
For Allied Medical Transportation, Inc.

BY

BROWARD COUNTY TRANSPORTATION DEPARTMENT
ON-SITE REVIEW DATE: April 17, 2012

SUBMITTED BY: ____________________          FOR REVIEW YEAR 2012

STEVEN KIDD
PARATRANSIT SUPERVISOR
INTRODUCTION

The NW FOCAL POINT SENIOR CENTER is one of 5 five subcontractors, who work under one of the contracted paratransit service providers in Broward County. The providers and their subcontractors perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida's Transportation Disadvantaged program. The NW FOCAL POINT SENIOR CENTER, (hereinafter called NWFP) provides transportation to/from their senior center, as well as limited service to other destinations within their service area. The NWFP is described as an unincorporated, not-for-profit organization that is included as a dependent district of the City of Margate.

On April 17, 2012, BCTD conducted an on-site Safety Compliance Review of the NWFP at 6009 NW 10 St. Margate, Fl 33060. The purpose of the review was to determine compliance with the applicable provisions of Rule, Chapter 14-90, Florida Administrative Code. A brief overview of NWFP’S operation is described in this introduction.

The NWFP performs vehicle and driver related activities, and other operational and management functions at the Margate headquarters. All safety and operational records are created and stored at the above location, or in accordance with the City of Margate’s policy on record retention. The NWFP maintains an systematized record keeping system, has excellent documentation of policies and procedures and appropriate manuals for staff and management. Notice of Policy is posted on-site where appropriate.

Steven Kidd, Paratransit Supervisor, Craig Collins, BCT Safety and Security Manager and Theresa Basedow, Administrative Assistant conducted this review, with full cooperation and assistance from; Kelly Diaz, Project Director and Terry Lieberman, Operations Manager. Except where noted otherwise, this review consisted of random inspections of all applicable records, and interviews with administrative personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCT Paratransit office. The NWFP did an outstanding job of providing pre- inspection materials, making the actual review very clear and straight forward. While the Counties budget crisis is somewhat under control, all contractors and subcontractors have been advised of continued scrutiny in all areas, including but not limited to, the eligibility process, trip booking, and review of billing records in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on -time performance being a priority.

In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data. Described below are the major areas of inspection and review findings.
1. **SYSTEM SAFETY PROGRAM PLAN (SSPP)**

NWFP has a revised SSPP for 2012, which contains all required 14-90 particulars as well as policies/procedures from the City’s Human Resource Department, Risk Management Division, Senior center and garage (fleet services). This plan is well organized and addresses all required areas of concern. The plan is updated when changes are introduced, and will continue to be amended as appropriate. NW Focal Point transportation staff and supervisors have done an excellent job in putting together this SSPP, and applying the plan to its operation. Future years may involve adoption of the applicable portions of BCT’s revised SSPP to supplement, enhance and standardize as appropriate.

2. **ANNUAL VEHICLE INSPECTION COMPLIANCE**

In December 2011, 9 vehicles were produced for annual inspection. All vehicles were in compliance and passed on initial inspection. As in past years, NW Focal Point Staff was tremendously cooperative and did an excellent job having the vehicles staged and ready for inspection at the appointed time. All vehicles present a clean, safe and well maintained appearance. It was noted that some vehicles were older than 2006 and require the additional inspections in April and September as per the contract for Paratransit Services.

3. **PROOF OF VALID DRIVERS LICENSE RECORDS**

Random samples of driver files and motor vehicle reports (MVR's) were reviewed and found to be in compliance. Proof of valid drivers licenses were also in full compliance. Drivers all had current Broward County Chauffeurs Registrations. The City’s Risk Management office closely monitors driver records and networks critical information with Focal Point Program Staff to make sure driver licensure is current and meets contract and/or 14-90 standards.

4. **DRIVER TRAINING & QUALIFICATIONS**

Each driver receives an appropriate level of training to meet mandated standards. NWFP transportation staff has implemented a tracking system to document driver qualifications as well as the tracking tools provided by County thru its Adept software. Training consists of “in service” and on the job training and documented with sign in logs and summary reports. Transportation staff utilizes the City of Margate’s Human Resources office to support, assist and monitor as necessary. All driver medical certificates were found to be up to date and all drivers completed the new distracted driver training.
5. **DRUG FREE WORKPLACE POLICY**

The NWFP is an established drug free workplace. All new employees are made aware of this policy and provided with written information regarding drug testing. Posters advising employees of the drug/alcohol policy are posed in conspicuous places at the work site. All required Pre employment drug tests are performed by Total Compliance Network. Other drug tests are done by Solantic medical centers. Based on a random review, all drug/ alcohol practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

The NWFP requires each vehicle to be inspected by the driver prior to leaving the agency’s parking lot. The NWFP utilizes a checklist type “vehicle inspection sheet” for this purpose. Samples reviewed appeared to be complete and correct.

7. **VEHICLE PREVENTIVE MAINTENANCE / REPAIR RECORDS**

At 3,000 mile intervals, all vehicles are scheduled for an oil change and extensive preventive maintenance check which includes such things as tires, brakes, steering and other safety sensitive areas. Vehicles needing immediate attention are brought to the City of Margate’s Public Works garage. All maintenance is tracked by the Public Works garage using City mandated record keeping procedures. Based on random review, all maintenance and repair activities were in compliance with applicable state mandates and Tops contract standards.

8. **ACCIDENT REPORTING/EVALUATION**

The City of Margate’s Risk Management Division closely monitors the NWFP’s accident reporting/evaluation program. Random inspection indicates that accidents and incidents are carefully tracked thru conclusion, including, but not limited to appropriate action taken by the City’s Safety Officer, if necessary. All records appear complete with documentation of several randomly selected incidents in order. The Northwest Focal Point Senior Center carries appropriate excess liability coverage, and the City of Margate is self insured. All providers are constantly reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made. During the first half of 2012, the required monthly accident/incident summary was submitted to BCTD in a timely manner.
9. OPERATIONAL AND SAFETY PROCEDURES

All drivers receive a complete orientation on NW FOCAL POINT SENIOR CENTER’s transportation rules, safety expectations and operational policy, as well as monthly refresher “in services”. The NWFP issues all drivers a Driver Manual and a Transportation Handbook which describe all safety and operational expectations. A review of these documents indicates that this contractor places a high priority on safety and keeping employees current on important operational and security matters.

10. WHEELCHAIR SECUREMENT PROCEDURES & INSPECTION

During the annual inspection, all wheelchair lift equipped vehicles were tested and found to be in good working order. All lift equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were found to be clean, operational and the required type for paratransit service. All Drivers receive comprehensive wheelchair lift and securement training from qualified staff and 80 hours of on-the-job training with an experienced driver. The NWFP continues to provide refresher training on lift operation and use of securement/restraint devices at least once per year.

11. SECURITY PLAN

NW Focal Staff has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCTD is complete and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

NWFP has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year contract as a subcontractor. Based on this review, NWFP has demonstrated a above average level of 14-90 and contract compliance, and it is recommended that they continue as a TOP’s Paratransit provider. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submit to FDOT as part of the 14-90 compliance process. (next page).
SAFETY AND SECURITY CERTIFICATION

Name: Contractor's Name:  
Address:  
City and State:  

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.


4. That the Transit Division staff has performed all required safety inspections and security reviews at the address listed above, for 2011.

Signature: ____________________________________  
Title: Owner or Manager Name and Title  
______________________________________________  
Company Name

NOTARY PUBLIC

STATE OF FLORIDA  
COUNTY OF BROWARD  

The foregoing instrument was acknowledged before me this _____ day of ___________20__, by, ________________________________, who is personally known to me.

__________________________  
Notary Public  
(SEAL)
SYSTEM SAFETY COMPLIANCE REVIEW
CITY OF MIRAMAR (SUBCONTRACTOR)
For Allied Medical Transportation, Inc.
BY
BROWARD COUNTY OFFICE OF TRANSPORTATION

ON-SITE REVIEW DATE: April 16, 2012

SUBMITTED BY: ____________________          FOR REVIEW YEAR 2012
STEVEN KIDD
PARATRANSIT SUPERVISOR
INTRODUCTION

The City of Miramar Senior Center, is one of 5 five subcontractors, who work under one of the contracted paratransit service providers in Broward County. The providers and their subcontractors perform paratransit service to persons with disabilities in accordance with the Americans with Disabilities Act, and the State of Florida's Transportation Disadvantaged program. The City of Miramar Senior Center, (hereinafter called MSSC) provides transportation to/from their senior center, as well as limited service to other destinations within their service area.


The purpose of the review was to determine compliance with the applicable provisions of Rule, Chapter 14-90, Florida Administrative Code. A brief overview of Miramar / ADRC's operation is described in this introduction.

MSSC performs all transportation related activities, and most other operational and administrative functions at their office on Miramar Parkway. All safety and operational records are generated and stored at the above location, or in accordance with the City of Miramar’s policy on record retention. MSSC maintains an appropriate record keeping system, has acceptable documentation of policies and procedures and updates materials for drivers and staff. ‘Notice of Policy’ is posted on-site where suitable.

This review was conducted by Steven Kidd, Paratransit Supervisor, Craig Collins, BCT’s Safety and Security Manager and Theresa Basedow, Administrative Assistant with cooperation and support from Melissa Stuart, Transportation Clerk

Except where noted otherwise, this review consisted of random inspection of all applicable records, and consultation with supervisory personnel. Samples of forms and supporting materials gathered during this review are maintained in the BCTD Paratransit office. While the Counties budget crisis is somewhat under control, all contractors and subcontractors have been advised of continued scrutiny in all areas, including but not limited to, the eligibility process, trip booking, and review of billing records in order to better control costs and increase efficiency. At the same time, providers are being asked to take a fresh look at providing great customer service with on -time performance being a priority.

In most areas of review a “cross check” was made with other available record sources, such as monthly reports, BCT inspection records and Stratogen/adept data. Described below are the major areas of inspection and review findings.
1. **SYSTEM SAFETY PROGRAM PLAN (SSPP)**

MSSC has a revised SSPP, which contains all required elements as well as policies/procedures from the City’s Human Resource Department, Risk Management Division, garage (fleet services), and the Senior Center uses a combination of policies/procedures from the City of Miramar/Social Services Department, the Cities Human Resource Department, Risk Management Division, and Fleet Services office to form the basis for their SSPP. This combination of documents meets standards and addresses all required areas of concern. A large loose leaf notebook with SSPP materials is handy and updated as needed. Future years may involve adoption of the applicable portions of BCT’s revised SSPP to supplement, enhance and standardize as appropriate.

2. **ANNUAL VEHICLE INSPECTION COMPLIANCE**

During the 2012 inspection period, 6 vehicles were produced for annual inspection. All passed on initial inspection. 2 vehicles are 2006 and require the additional April/September inspections. MSSC continues to improve in the area of inspection preparation and the overall vehicle condition. Inspection results are on file with BCTD.

3. **PROOF OF VALID DRIVERS LICENSE RECORDS**

Random samples of driver license photocopies were reviewed and were found to match expiration dates in adept. Miramar was unable to produce recent MVR’s at the time of review however did supply them after a corrective action notice was issued. Miramar was reminded of contract requirements for MVR review. Drivers are city employees, thus exempt from the chauffeur registration requirement.

4. **DRIVER TRAINING /QUALIFICATIONS**

Based on random review, it appears that each driver receives the proper level of training to meet mandated standards. Miramar transportation staff has implemented an well-organized training tracking arrangement to document driver credentials. Training consists of both on the road and classroom instruction. MSSC is still learning the Stratogen/Adept program and will need to make sure all contractually required training is entered, including, but not limited to Sunsational Service. MSSC has the benefit of City resources to assist in training and monitoring driver performance and qualifications. All driver medical certificates were found to be up to date and all drivers completed the required distracted driver training.
5. **DRUG FREE WORKPLACE POLICY**

MSSC is an established drug free workplace. All new employees are made aware of this policy and provided with detailed information on the drug-testing program. Posters advising employees of this policy are posted in conspicuous places at the work site. All required drug tests are performed by Occupational Medical Centers of America (Occumed). Based on a random review, all drug/alcohol policy & practices appear to be in compliance with applicable standards. Wanda Del Toro, BCT’s Drug & Alcohol czar will be doing follow-up with all providers to assure compliance and assistance where needed.

6. **PRE-TRIP VEHICLE INSPECTION RECORDS**

MSSC requires each vehicle to be inspected by the driver prior to leaving the Transportation Center. MSSC has an acceptable vehicle pre-trip inspection form and procedures in place to assure that inspections are performed and the records filed. Vehicle pre-trip issues identified by drivers were cross-checked against maintenance records and found to be resolved in a timely fashion. All providers were asked to update their pre trip form to include checking the inspection sticker.

7. **VEHICLE PREVENTIVE MAINTENANCE / REPAIR RECORDS**

At 5,000 mile intervals, all vehicles are scheduled for a routine oil change service and extensive preventive maintenance check which includes such things as tires, brakes, steering and other safety sensitive areas. Vehicles needing immediate attention are brought into the City garage for expedited service. The City garage tracks all maintenance on a centralized database. All samples reviewed randomly appeared to be in good order. In addition, transportation staff maintains a repair summary of all repairs. Unique to Miramar is the use of a Pro Key system that lets drivers and supervisory staff know when preventative maintenance is nearing.

8. **ACCIDENT REPORTING/EVALUATION**

MSSC’s Accident Reporting/Evaluation Program is closely monitored by the City’s Risk Management Division. Random inspection indicates that accidents and incidents are carefully tracked thru conclusion, including, but not limited to appropriate action taken by safety staff. Prior to the onsite review, Miramar produced all insurance documentation in a timely manner. The City of Miramar is partly self insured and performs most accident / insurance functions in house. All providers are reminded that it is the provider’s responsibility to make sure that new insurance certificates are furnished to BCTD as dates expire or other changes are made.
9. OPERATIONAL AND SAFETY PROCEDURES

All new drivers receive a comprehensive orientation on MSSC’s transportation rules, safety expectations and City policy. MSSC’s issues all drivers appropriate transportation procedure resources and accident/incident reporting directives which call attention to all safety and operational issues. A review of these documents indicates that the City places a priority on safety and keeping employees current on key operational and security matters. Transportation staff is fortunate to have the support of other City Departments to assist in policy making, training and documentation.

10. WHEELCHAIR SECUREMENT PROCEDURES & EQUIPMENT

During the annual inspection, all wheelchair lift equipped vehicles were tested. It appears that all lift issues from past years have been resolved and lifts were found to be in good condition for 2012. All lift-equipped vehicles had the required certifications permanently attached to the lift assembly. All tie-down straps, belts, etc., were found to be clean, operational and the required type for paratransit service. Drivers receive wheelchair securement training via video tape, on the job training with experienced drivers, as well as monthly refresher trainings.

11. SECURITY PLAN

MSSC Transit staff has met all SPP requirements and will update this plan when needed or as appropriate. The plan filed with BCTD is comprehensive and covers all required areas. Due to the nature of this document, it is kept separate and secure at BCTD’s Paratransit Services office.

SUMMARY OF REVIEW AND COMMENTS

MSSC has been an important part of the Paratransit provider team and is well on their way to successfully completing their 3rd year under a five (5) year contract as a subcontractor. Based on review, his provider has demonstrated a satisfactory level of 14-90 compliance, and it is recommended that they continue as a TOP’s Paratransit provider. It should be noted that a number of changes have been made in 2012 which should bring more stability and efficiency in the future. These include, but are not limited to, installation of AVL’s and other advanced technologies that will help to better monitor performance and efficiency.

After completion of this review, the last step will be for each provider to submit a signed and notarized Safety and Security Certification form to BCT, which in turn will submit to FDOT as part of the 14-90 compliance process. (See next page).
SAFETY AND SECURITY CERTIFICATION

Name: Contractor's Name:
Address:
City and State:

The Paratransit Contractor named above hereby certifies the following:

1. The adoption of a System Safety Program Plan (SSPP) and a Security Program Plan (SPP) in accordance, and at a minimum, with established standards set forth in Chapter 14-90, Florida Administrative Code.

2. Compliance with the adopted standards of the SSPP and SPP.

3. Performance of safety inspections on all Vehicles operated in accordance with Rule 14-90.009, Florida Administrative Code, for 2012

4. That the Transit Division staff has performed all required Safety Plan inspections and security reviews at the address listed above, for 2012

Signature: ____________________________________
Title: Owner or Manager Name and Title
____________________________________
Company Name

NOTARY PUBLIC

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this _____ day of ____________20__, by, ____________________________, who is personally known to me.

__________________________
Notary Public

(SEAL)
APPENDIX F

PARATRANSIT CONTRACT and AMENDMENTS
a. The percentage of Trips set forth on Exhibit "B" is not a guarantee and CONTRACTOR shall not have any claim for compensation of any kind or nature if CONTRACTOR shall not receive the percentage of Trips set forth on Exhibit "B"; and

b. The percentage of Trips may be adjusted by COUNTY as stated elsewhere in this Agreement.

ARTICLE 3
SCOPE OF SERVICES AND SERVICE DESCRIPTION

3.1 Program Objectives: The purpose of this program is to provide transportation services to qualified individuals with disabilities in accordance with the mandates of the ADA and TD, in accordance with the mandates of Chapter 427, Florida Statutes and to those persons meeting the criteria as defined by COUNTY, all of whom are hereinafter referred to as "Clients." It is COUNTY's intent that these services be provided in a method that is cost effective and provides the best possible quality service to the Clients. COUNTY reserves the right to enroll additional service providers into the program to meet these Program Objectives.

3.1.1 Additional Service Providers: The COUNTY may enroll additional Paratransit service providers (beyond those with which the County contracts contemporaneously herewith) for the reasons outlined below:

A. In the event that four percent (4%) of all requested Trips system wide remain wait listed at the start of the day of service for more than five (5) days in any consecutive ten (10) day period, this shall be deemed evidence that the current resources of the system are not sufficient to handle the demand of the system and COUNTY shall have the right, in its sole discretion, to enroll additional service providers to meet the Program Objectives.

B. In the event that additional service elements are added to the Paratransit program, and the addition of these service elements has the effect of increasing Trips, COUNTY shall have the right, in its sole discretion, to meet that additional trip demand in any manner it determines appropriate which may include enrolling additional service providers in order to meet additional Trip demand.

C. In the event of a natural disaster, act of God, act of war or national emergency, COUNTY may enroll additional service providers as necessary to meet the Program Objectives which additional providers shall remain until COUNTY determines that the Paratransit contractors have the ability to meet the Program Objectives. Upon such determination, COUNTY shall provide Paratransit Contractors or CONTRACTOR with not less than 30 days notice prior to the reassignment of trips back to CONTRACTOR.

3.1.2 Redistribution of Trips: COUNTY, as outlined below, retains the right to modify the percentage of Trips and to make other adjustments in the level of service assigned to CONTRACTOR as set forth on Exhibit "B."
A. COUNTY may exercise this right in the event that a current Paratransit contractor is removed from the Paratransit Program either voluntarily or involuntarily. In the event COUNTY exercises this right, the Trips formerly assigned to the removed Paratransit contractor shall be redistributed to the remaining Paratransit contractors. The Paratransit contractor with the lowest blended per Trip reimbursement rate shall have first preference, with any remaining Trips assigned to the Paratransit contractor with the next lowest blended per trip reimbursement rate. This method of redistribution shall continue until all of the Trips have been redistributed. However, upon redistribution of Trips, no individual CONTRACTOR's Trips may exceed forty-five percent (45%) of the overall Program Trips.

B. COUNTY may exercise this right in the event that a current Paratransit contractor or CONTRACTOR lacks sufficient vehicle capacity, as determined by COUNTY, to properly provide its assigned percentage of Trips. In the event that COUNTY exercises this right, any Trips determined by COUNTY to exceed a Paratransit contractor's vehicle capacity shall be redistributed to the remaining Paratransit contractors. The Paratransit contractor with the lowest blended per Trip reimbursement rate shall have first preference, with any remaining Trips assigned to the Paratransit contractor with the next lowest blended per trip reimbursement rate. This method of redistribution shall continue until all of the Trips have been redistributed. However, upon redistribution of Trips, no individual CONTRACTOR's Trips may exceed forty-five percent (45%) of the overall Program Trips.

C. The COUNTY may exercise this right in the event that a current Paratransit contractor or CONTRACTOR is unable to satisfactorily perform its percentage of assigned Trips, as determined by COUNTY, for any reason other than vehicle capacity. In the event that the COUNTY exercises this right, the Paratransit contractor with the lowest blended per Trip reimbursement rate shall have first preference, with any remaining Trips assigned to the Paratransit contractor with the next lowest blended per trip reimbursement rate. This method of redistribution shall continue until all of the Trips have been redistributed. However, upon redistribution of Trips, no individual CONTRACTOR's Trips may exceed forty-five percent (45%) of the overall Program Trips.

D. Any adjustments shall be preceded by notice detailing such changes. All adjustments may be temporary or permanent. Notice shall be provided thirty (30) days prior to service component or Trip assignment adjustments and CONTRACTOR shall comply with said changes. COUNTY and CONTRACTOR may agree to implement such changes based on a shorter notice period.

E. The foregoing notwithstanding, the COUNTY shall not be under any obligation to redistribute Trips or make other adjustments in the level of service for any Paratransit contractor or CONTRACTOR that is failing to comply with their obligations under this Agreement and COUNTY may exercise any and all legal rights available, including, but not limited to Termination as set forth in Article 15 herein.
3.2 **Memorandum of Agreement (MOA):** CONTRACTOR agrees to comply with all of the requirements of local, state, and federal laws relating to the provisions of transportation services and to perform all services hereunder in accordance with all of the terms and conditions of the MOA, attached hereto as Exhibit "C" and incorporated herein by reference, as currently existing or as may be amended from time to time.

3.3 **CONTRACTOR Services:** CONTRACTOR shall furnish at its sole cost and expense all facilities, labor, materials, and equipment required to provide all necessary service in the manner and form provided herein with the exception of those facilities, labor, materials, and equipment provided for by COUNTY pursuant to specific provisions of this Agreement. Paratransit services shall be governed by this Agreement, the MOA, the TDSP, and the ADA Paratransit Service Plan as currently enacted and as may be amended from time to time.

3.4 **Trip Types and Requirements:** Pursuant to the mandates of the ADA, CONTRACTOR agrees that it shall not discriminate as to trip purpose and shall comply with all local, state, and federal laws and regulations that apply to the provision of transportation under the ADA, Transportation Disadvantaged Services required by Chapter 427, Florida Statutes, Chapter 41-2, Florida Administrative Code, and specific policies and procedures which relate to local sponsor agency requirements. COUNTY, in its sole discretion retains the right to adjust the assignment of any and all Trip types. Trip types shall consist of the following:

- **3.4.1 COUNTY Event Trips:** CONTRACTOR shall provide trips on request from COUNTY staff to individuals involved with COUNTY activities such as, but not limited to, advisory board meetings, public hearings, ADA Eligibility and Appeals transportation, special activities, natural disasters, act of God, act of war or national emergency, and special events. No per trip rider's fare shall be collected. These Trips may include evacuation and reverse evacuation transportation for special needs Clients, as well as other transportation deemed necessary by COUNTY. Service may be provided on an on-demand or will-call basis and may be provided to individuals who are not Clients.

  COUNTY reserves the right to require additional service including the use of vehicles and drivers to meet demand of special events and/or situations. Such service may include large public events and Special Needs transportation for other COUNTY agencies. Reimbursement rates may be made by the trip, by the hour, by the mile, or a combination thereof, depending on the circumstances. No per trip rider's fare shall be collected.

- **3.4.2 Demand Trips:** CONTRACTOR shall provide, if scheduled, Demand Trips which are prescheduled trips in which an individual calls to request a trip.

- **3.4.3 Group Trips:** CONTRACTOR shall provide, if scheduled, Group Trips in which a vehicle is used to transport four or more clients and/or companions from a common origin address to a common destination address. A Group Trip is priced per trip and not by individual Client.
3.4.4 Miami Special Trips: CONTRACTOR, if selected by COUNTY to provide Miami Special Trips, shall provide Miami Special Trips each Tuesday and Thursday to individuals from various locations in Broward County to and from the Downtown Miami Central Medical District. Clients receiving this service shall be transported from the County Service Area to the Downtown Miami Central Medical District at a prescheduled group time and shall return at a prescheduled group time. Miami Special Trips shall accommodate both ambulatory and wheelchair Clients and shall be considered non-ADA service. CONTRACTOR shall provide a maximum of two vehicles each Tuesday and Thursday and the vehicles shall accommodate wheel chairs if requested. Reservations shall be accepted on a space available basis.

3.4.5 Multi-Load Trips: CONTRACTOR, shall provide, if scheduled Multi Load Trips in which three or more Clients are picked up at multiple origin addresses and dropped at a common destination address, or trips in which three or more Clients are picked up at a common origin address and dropped at multiple destination addresses.

3.4.6 Nutrition Trips: CONTRACTOR shall provide, if scheduled Nutrition Trips which are group trips to congregate meal sites and day programs for seniors as designated by the Agency and Disability Resource Center/Meals-On-Wheels program. Nutrition trips are considered non-ADA service.

3.4.7 Subscription Trips: CONTRACTOR shall provide, if scheduled Trips that have been reserved by the subscription method.

3.4.8 Same Day Service: Requests for service made on the same day may be provided at the discretion of CONTRACTOR based upon available vehicle capacity and available time slots within the schedule for that day. CONTRACTOR shall make every reasonable effort to accommodate same day trip requests.

3.4.9 Back-Up Service: COUNTY may order back-up service when the original or back-up provider responsible for transporting a Client is over thirty (30) minutes late. COUNTY reserves the right to use other transportation resources to meet trip demand, such as the limited use of other available vehicles for overflow trips. In the event that a Client shall be a no-show for a back up provider, the back-up provider shall be paid for the trip.

Back-Up Service Disincentive: In the event that back-up service is required, CONTRACTOR shall be subject to three (3) disincentives: the lost revenue from the trip which was not provided, a Late Arrival disincentive of one ($1.00) for each minute the passenger(s) had to wait past the end of their scheduled Pick-up Window and the Missed Trip disincentive as described in Section 4.6.2 of this Agreement.

3.4.10 Will Call Service: CONTRACTOR shall provide, if scheduled, Will Call Service. Will Call Service is a return trip with an undetermined Pick-up Window at the time the reservation was made.
3.5 Funding Agencies: Various local agencies may participate in the purchase of Paratransit services under this Agreement by entering into agreements with COUNTY. CONTRACTOR shall ensure that all procedures of the various funding agencies are complied with and that a sensitive and responsive working relationship is maintained with these agencies.

3.6 Client Eligibility: Up-to-date Client eligibility and certification information shall be maintained by COUNTY in the CTMS database, which shall include any limitation or conditions on the services the Client may receive. If an individual is provided service for which they are not eligible according to the documentation in CTMS, COUNTY shall not reimburse CONTRACTOR for such Trip(s).

3.7 Provision of Service: CONTRACTOR shall provide transportation services as follows:

3.7.1 Dispatching of Trips: All Trips shall be scheduled by the Reservation Center on COUNTY supplied CTMS. All CONTRACTOR Trips shall be dispatched through CONTRACTOR’s local dispatch facility on COUNTY supplied CTMS.

A. CONTRACTOR shall not restrict or prioritize dispatching based upon trip purpose unless specifically directed by COUNTY.

B. CONTRACTOR shall use its best efforts to regularly assign drivers to routes in order to provide the best continuity of service to Clients.

C. Any changes made to an existing reservation shall be accompanied by supporting documentation in the form of a CTMS log entry and notice to the Reservation Center.

D. CONTRACTOR shall be responsible for routing vehicles in stop order (discharge order).

E. In the event a Client arrives late for an appointment, CONTRACTOR shall inform the Reservation Center and the Client will be scheduled for a prioritized Will-Call.

3.7.2 Daily Service Hours: COUNTY has an obligation to provide Paratransit transportation throughout the County Service Area during the regular hours of COUNTY’s fixed route operations. The first pick-up shall begin at the start of the service hours and the last pick-up shall not be later than 45 minutes prior to the end of the service hours. The hours listed below are based on the current fixed route service hours and may be changed from time to time at sole discretion of COUNTY:

Monday through Saturday 4:40 a.m. to 12:40 a.m.
Sundays and Holidays 6:45 a.m. to 10:15 p.m.

Paratransit service shall be provided per COUNTY’s holiday schedule for fixed route service on: New Year’s Day, Labor Day, Memorial Day, Independence Day, Thanksgiving Day and Christmas Day.
CONTRACTORs that provide Demand Response Trips shall provide Paratransit transportation throughout the COUNTY Service Area during the regular hours of COUNTY's fixed route operations.

3.7.3 Client Pick-Up: CONTRACTOR shall provide door-to-door service as defined in Article 1 herein. Drivers shall go into the lobbies or vestibules of buildings to seek out and/or assist a Client; however, drivers are prohibited from entering residences. Sounding a horn at the curb is not permitted and is insufficient notification of CONTRACTOR's arrival. When the Client boards the vehicle, driver shall complete paperwork, or utilize an alternate automated system, indicating that the pick-up has been made. The following information, at a minimum, shall be recorded by the driver:

A. Actual pick-up time.
B. Actual vehicle odometer mileage.
C. Actual fare collected from the Rider.
D. Client signature on the ride ticket, manifest, or route sheet.
E. Other information as may be required by COUNTY.

3.7.4 Failure to Respond upon Vehicle Arrival: If the Client does not respond upon the vehicle's arrival at the pick-up point, the driver shall immediately radio the dispatcher to assist in making reasonable attempts to contact the Client. If the Client does not appear, the driver shall request instructions from the dispatcher. After waiting the contractual required amount of time (See Dwell Time, Section 4.2.1), the dispatcher may direct the driver to continue on to the next scheduled pick-up. Reasonable attempts should be made to reach the Client by telephone. For the purpose of this paragraph, "reasonable attempt" shall mean that CONTRACTOR shall call the Client if there are telephone numbers available in the CTMS.

3.7.5 Notification, No-Shows, Denials:

3.7.5.1 Notification: CONTRACTOR shall notify COUNTY of:

A. Clients who refuse to pay the per trip rider's fare.
B. Clients that the CONTRACTOR recommends be suspended due to violent, seriously disruptive, or illegal behavior.
C. Other violations of COUNTY issued Rider's Guide.

3.7.5.2 No-Shows: CONTRACTOR shall record no-shows in the CTMS within thirty (30) minutes of the occurrence.
3.7.5.3 Denial/Refusal of Service:

A. CONTRACTOR may refuse to provide Paratransit service to Clients if vehicle fleet capacity is insufficient to accommodate the users at the time they wish to travel. When service is refused for vehicle capacity reasons, CONTRACTOR shall immediately contact the Reservation Center so transportation may be arranged with another CONTRACTOR.

B. CONTRACTOR may not deny a Trip assignment based upon trip length, mobility device used by the Client, geographic location within the service area, or time of day within the hours of service. All requests made within County Service Area, during service hours, and with vehicle capacity shall be honored.

C. CONTRACTOR may refuse to provide Paratransit service to Clients who engage in violent, seriously disruptive or illegal conduct.

CONTRACTOR shall document and record all refusals in the CTMS as they occur and provide the appropriate notice to the Reservation Center so alternative service may be provided in a timely manner. In addition to logging the denial in the CTMS, CONTRACTOR may be requested to submit to COUNTY a denial form/log that shall detail specifically the reason for the trip denial, the alternatives offered to the caller, and all other information pertaining thereto.

Any pattern or practice of trip denial or referral of trips which negatively impacts the Paratransit service may be cause for corrective action including, but not limited to, the redistribution of Trips and may be considered a breach of contract subject to the provisions of Article 15 herein.

3.7.6 Drugs, Alcohol, Smoking: Driving while under the influence of drugs and/or alcohol or smoking, shall be strictly prohibited. A Client's use of drugs, the consumption of alcoholic beverages, or the smoking of any substance shall be strictly prohibited while on board as a passenger utilizing Paratransit service. CONTRACTOR shall:

A. Establish such anti-drug and alcohol programs as may be required by federal regulations.

B. Establish and implement a drug and alcohol testing program that complies with Federal Transit Administration regulations 49 CFR part 655, as may be amended from time to time; to produce documentation necessary to establish its compliance with 49 CFR part 655; and permit any authorized representative of the U.S. Department of Transportation or its operating administrations, the FDOT, or Broward County Mass Transit Division, to inspect facilities and records associated with the implementation of the drug and alcohol testing program required by 49 CFR part 655. It is understood that failure to comply with any requirement outlined in 49 CFR part 655, or failure to submit to any required certification or documentation shall be considered a material breach of contract and grounds for contract termination under for-cause provisions.
C. Report applicable testing summaries annually, or as may be prescribed by COUNTY's Contract Administrator and/or COUNTY's Program Manager for Drug and Alcohol Testing.

3.7.7 Permissible Client Transportation Accompaniment, Requirements, Reimbursable Expenses:
The following is a list of categories which sets forth permissible accompaniments for Paratransit Clients during transportation, the requirements related thereto, and reimbursable expenses for such accompaniments:

3.7.7.1 Personal Care Attendant (PCA): Clients that are coded in CTMS as "PCA" may bring one PCA with them during transportation subject to the following:

A. Personal Care attendants may include, but are not limited to, nurses, caretakers, or parents of Clients.

B. Clients that are coded "PCA" shall self-determine the need for a PCA at the time of travel, whether occasionally or for every trip, and shall not be required to bring a PCA; provided, however, a PCA shall be required in the event a Client would otherwise be suspended from service and the presence of a PCA would mitigate the need for a suspension.

C. A Client shall indicate, at the time of reservation, whether or not he or she travels with a PCA.

D. PCAs may only ride at the same time(s) and to and from the same destination(s) as the Client.

E. A PCA does not pay the per trip rider's fare when riding with a Client, and PCA travel is not reimbursable as a separate trip.

F. A PCA shall comply with all of CONTRACTOR's ride requirements including signing the ride manifest.

3.7.7.2 Companion: ADA Paratransit Clients shall be allowed to reserve space for one companion when they make their reservation(s).

A. One companion may travel with ADA Paratransit Client in addition to a PCA.

B. A Companion may only ride at the same time(s), and to and from the same origin(s) and destination(s) as the ADA Paratransit Client.

C. A Companion shall pay the same per trip rider's fare as the Client. Only one companion trip per client is a reimbursable Trip.
D. A Companion shall comply with all of CONTRACTOR’s ride requirements including signing the ride manifest.

3.7.7.3 Service Animals: Any animal which is identified and trained to be a service animal needed by a Client, PCA, or companion to help with daily activities shall be transported. Service animals are not allowed to occupy seats. They must be leashed and either kept on the floor of the vehicle or carried on the lap of the Client. Service animals are not reimbursable as a service trip. Drivers shall not assist service animals.

3.7.7.4 Personal Belongings: Personal Belongings as defined in Article 1 herein may be transported with a Paratransit Client. Drivers may not assist Clients with any personal belongings. Clients may transport only belongings that they can reasonably carry at one time without assistance. Excessive grocery bags, luggage or the moving of belongings, furniture, and other large personal items are not appropriate for this service. CONTRACTOR shall not be responsible for items left on vehicle except as set in Section 3.8.9.

3.7.8 Driver Trip Tickets/Log Sheets: CONTRACTOR shall use driver trip tickets, manifests, or log sheets as directed and approved by COUNTY, to record trip information. These forms shall be specifically completed and maintained as documentation of service provided. CONTRACTOR shall not be reimbursed, in the event that COUNTY receives an incomplete trip ticket/log sheet, until such document is completed to the satisfaction of COUNTY. No reimbursement shall be processed, or paid, after sixty (60) days of the actual trip date. In the event that automated swipe-card procedures are installed by COUNTY, such procedures shall replace any use of written trip tickets/log sheets.

3.7.9 Drivers: CONTRACTOR is required to keep a daily record for each driver indicating:

A. Driver’s name.
B. Date of service.
C. Vehicle number.
D. Time the driver leaves for in-service transportation (pull-out time).
E. Odometer reading at start of in-service transportation.
F. Time of first pick-up.
G. Time of last drop-off.
H. Odometer reading at end of in-service transportation.
1. Time of arrival back at the terminal (pull-in time).

Any form utilized by CONTRACTOR for this purpose shall be approved by COUNTY and may be incorporated into CONTRACTOR's driver's log.

3.7.10 Identification Cards: In the event that COUNTY implements a policy regarding identification cards which would require a Client to present such card while using the service, CONTRACTOR agrees to cooperate with COUNTY in the enforcement of said policy. COUNTY reserves the right to change the Client identification cards at any time; such change may include, but not be limited to, cards encased in plastic sealers, swipe card format, or picture identification cards.

3.7.11 Telephone Services:

3.7.11.1 Courteous and Polite Dealings: CONTRACTOR shall ensure that personnel assigned to service telephone lines maintain a courteous and polite attitude in all dealings relating to the provision of services. All personnel assigned to service telephone lines shall announce their names in all telephone calls related to the services addressed within this Agreement.

3.7.11.2 Hotline: CONTRACTOR shall provide a "hotline" telephone number (unpublished), for exclusive use by COUNTY and Reservation Center. The telephone hotline shall provide for direct communication in resolving day-to-day operational issues and shall be active and functioning during all hours of service delivery. The hotline shall be answered within five (5) rings and on-hold time shall be kept at a minimum. The maximum on-hold time shall not exceed ninety (90) seconds. The hotline telephone number shall be supplied to COUNTY and Reservation Center prior to initiating service and shall not be provided to any other parties.

Telephone Service Disincentive: A CONTRACTOR Disincentive in the amount of Fifty Dollars ($50.00) per incident of any improper Telephone Service under this section shall be assessed for each incident.

3.7.12 Unauthorized Service: CONTRACTOR shall not be reimbursed for service provided to unauthorized Clients, to unauthorized locations, or service which is provided by unauthorized vehicles.

3.7.13 Wheelchair to Seat Transfer: CONTRACTOR may ask Clients who use wheelchairs if they wish to transfer from wheelchair to seat once aboard a vehicle. Such transfer is entirely at the discretion of the Client and service may not be refused or denied based upon the decision of the Client. The use of any special equipment or assistance from the driver is not permitted. Wheelchairs must be safely secured in the vehicle after Client has transferred to a seat.

3.7.14 Client Seatbelt and Safety: All Clients, including those who use a wheelchair, are required to be secured by a seatbelt, either fastened by themselves or with assistance from the driver. CONTRACTOR shall ensure that all Clients utilize safety belts. CONTRACTOR shall
immediately report to COUNTY any incident of a Client's failure to comply with this policy. Any report of unsafe driving and unsafe or uncomfortable vehicles shall be acted upon, and corrective action shall be taken by CONTRACTOR and COUNTY so as to achieve a solution consistent with satisfactory performance of the objectives of this Agreement.

Client Seatbelt and Safety Disincentive: Any reported violation of this safety standard determined to be valid by COUNTY shall be subject to a disincentive assessment of Ten Dollars ($10.00) per incident.

3.7.15 Grievance Procedure: A formal grievance procedure, set forth in Exhibit "D" attached hereto and incorporated herein by reference, pertaining to the provision of service, has been established by the BCCB in accordance with Florida Commission for the Transportation Disadvantaged requirements as per Chapter 41 of the Florida Administrative Code. CONTRACTOR, upon execution of this Agreement, acknowledges that CONTRACTOR has been provided with a copy of the procedures.

3.7.16 Equal Access to Service: CONTRACTOR shall provide all services addressed herein to all Clients without regard to location or without regard to or consideration of race, age, religion, color, gender, sexual orientation (Broward County Code and Ordinance Chapter, Chapter 16-1/2), national origin, marital status, physical or mental disability, political affiliation, or any other factor which cannot be lawfully used as a basis for service delivery. COUNTY reserves the right to require CONTRACTOR to provide full documentation of all trips provided within these classifications. Failure to provide full and equal access of Paratransit services to Clients may result in termination of this Agreement as per Article 15 herein.

3.7.17 Subcontractors: CONTRACTOR may utilize direct service subcontractors only with the prior written consent and approval of Broward County Board of County Commissioners. Names and qualifications of all subcontractors shall be submitted to COUNTY prior to contract award, or at any point where a change (addition or deletion) of subcontractor(s) is to be considered. Any subcontractor utilized by CONTRACTOR shall be subject to all terms and conditions of this Agreement.

3.7.18 Confidentiality: CONTRACTOR shall maintain as confidential all Client information, whether provided by COUNTY or otherwise obtained by CONTRACTOR. Information concerning a COUNTY Paratransit Client shall not be disclosed unless directly related to the administration of COUNTY's or CONTRACTOR's responsibilities with respect to services provided under this Agreement and/or in accordance with applicable public records laws, rules, and regulations, by Court Order, or by written consent of the Client, his/her attorney, responsible parent, or guardian.

3.7.19 Solicitation Prohibited: Names and addresses of COUNTY Paratransit Clients shall not be distributed for any purpose without prior COUNTY approval. CONTRACTOR may not solicit or entice Clients with incentives, discounts, or gifts.
3.7.20 TD Operating Standards: CONTRACTOR shall adhere to all TD Operating Standards, as currently enacted or as may be amended from time to time. The TD Operating Standards include, but are not limited to the following:

A. Drug and Alcohol testing policy.
B. A policy on transporting escorts and children.
C. A policy on usage of child restraint devices.
D. A policy regarding the personal property a passenger may bring along on a trip.
E. Established vehicle transfer points, as appropriate.
F. Posting in vehicles of a local toll-free telephone number for complaints and the TD helpline phone number.
G. Out-of-service area trips.
H. Vehicle cleanliness, safety and comfort.
I. Billing requirements and invoice processing standards.
J. Maintenance of a passenger/trip database by the CTC.
K. Adequate seating in vehicles, as described herein.
L. A driver identification policy.
M. A policy on driver assistance.
N. A "no smoking, eating and drinking in vehicle" policy.
O. A passenger no-show policy.
P. A two-way communication system.
Q. Functioning vehicle air conditioning and heating systems.

3.8 Vehicle Requirements: Appropriate type vehicles to be used in providing service under this agreement include mid-size or larger sedans, minivans, and vans. Sedans used in TOPS service must have four doors and be mid-size/intermediate class or larger. COUNTY staff shall have the final determination on appropriateness of any vehicle and CONTRACTOR is strongly encouraged to verify the acceptability of any vehicle before purchasing it.
All vehicles, including demand-response sedans used in this service shall be governed by and must comply with the requirements of the Broward County Code of Ordinances. CONTRACTOR shall have all vehicles inspected by COUNTY and shall bear the cost of such inspections, if any. The vehicle inspection requirement does not require permitting or licensing by Broward County NEMT ("Non Emergency Medical Transportation") because the vehicles utilized to provide the services pursuant to this Agreement are exempt from the licensing requirements set forth in Chapter 3½, Medical Services and Nonemergency Medical Transportation Services, Broward County Code of Ordinances. All vehicles shall have windows in all passenger seating locations. Retro-fitted/conversion "cargo" vans without added windows are not acceptable.

3.8.1 **Vehicle Availability:** CONTRACTOR shall maintain a fleet of vehicles adequate to perform each and every obligation herein. In addition, CONTRACTORs providing general service trips shall provide no less than fifty percent (50%) of the dedicated fleet to be equipped with lift/ramp and wheelchair securement devices. CONTRACTOR shall maintain an additional ten percent (10%) of the total vehicles in service as spare vehicles. CONTRACTOR shall inform COUNTY, in a timely manner, of fleet availability and CONTRACTOR's inability to efficiently perform all requested trips. In cases where CONTRACTOR is unable to perform all requested trips, procedures as outlined in Section 3.7.5.3A shall be followed.

3.8.2 **Vehicle Location and Contact:** It shall be the responsibility of CONTRACTOR to have knowledge of, and be able to report on, the status of every pick-up and drop-off. The driver shall also immediately notify the dispatcher of all breaks, lunches, breakdowns, accidents, or any other event that may impact on-time performance.

3.8.3 **Vehicle Inspection:** All vehicles, wheelchair lifts or ramps, and wheelchair securement devices used for Paratransit service shall meet all applicable ADA regulations, be approved by COUNTY, and are subject to annual and random COUNTY inspection. All vehicles must be approved, inspected and display an inspection sticker issued by COUNTY prior to providing service. A manual operating pole is required for emergency backup lift operation, as required by ADA regulations. CONTRACTOR shall meet or exceed the standards and requirements for accessible vehicles set forth in Architectural and Transportation Barriers Compliance Board (ATBCB) as published in 49 CFR Sections 37.161, 37.163, 37.167, 37.169, 38.21, and 38.23-38.33, as currently enacted, and as may be amended from time to time. Failure to provide adequate vehicles to meet the terms and conditions of this Agreement may result in termination of the Agreement as provided by Article 15 herein.

**Vehicle Inspection Disincentive:** Any vehicle providing TOPS service without a current inspection sticker will be assessed Two Hundred Fifty Dollars ($250.00) per day contract disincentive.

3.8.4 **Vehicle Signage:** All vehicles used in TOPS service shall display two (2) COUNTY-issued program (TOPS) signs affixed on the exterior: one sign on each vehicle side; and a minimum of one service (complaint) telephone number sign(s) posted in the interior of the vehicle. COUNTY reserves the right to require the exact placement of all signs on a vehicle. Each vehicle shall have CONTRACTOR's fleet vehicle number posted on the vehicle. TOPS signs must be
removed from a vehicle upon the sale or removal of a vehicle from TOPS service.

**Vehicle Signage Disincentive:** Violation of the signage requirements shall result in a Fifty Dollars ($50.00) per incident contract disincentive.

3.8.5 **Vehicle Age/Mileage:** All Vehicles utilized in performing the services hereunder shall comply with the following age/mileage requirements. A Vehicle may be utilized to provide TOPS service provided it does not exceed Three Hundred Fifty Thousand miles (350,000). In the event that a vehicle performing services hereunder is six years old (a 2003 model year vehicle would exceed six years of model age on January 1, 2010) but under 350,000 miles, the vehicle may remain in service provided the vehicle passes an inspection performed by an ASE certified mechanic at a properly licensed auto repair facility in Broward County every April and September. The inspection report/results must be received by the Transportation Department no later than April 30th and September 30th. No vehicle may remain in service if the mileage exceeds 350,000 regardless of the age of the vehicle.

**Vehicle Age Disincentive:** Reimbursement for trips shall be withheld for trips provided by non-authorized vehicles and a financial disincentive of Two Hundred Fifty Dollars ($250.00) per incident shall apply.

3.8.6 **Vehicle Breakdowns:** If a vehicle breaks down in service, CONTRACTOR shall dispatch a backup vehicle to the site of the breakdown. The backup vehicle shall be dispatched and placed en route within thirty (30) minutes of notification of the break down.

**Backup Vehicle Disincentive:** Violation of the Backup Vehicle requirement shall result in a Fifty Dollars ($50.00) per incident contract disincentive.

3.8.7 **Computerized Information Tracking System:** COUNTY may, and reserves the right to, require CONTRACTOR to install automatic vehicle locators (AVL), global positioning systems (GPS), mobile data computers (MDC), interactive voice response systems (IVR), and/or like technology in CONTRACTOR’s vehicles and at CONTRACTOR’s facility. The cost of equipment, installation and training shall be at COUNTY’s expense. CONTRACTOR agrees to make its vehicles and facility available for the installation of any necessary equipment and further agrees to operate the equipment in compliance with all direction from COUNTY. CONTRACTOR shall be solely responsible for securing and paying for any recurring wireless (cellular) data and voice service, deemed necessary by COUNTY, from vendors approved by the COUNTY.

3.8.8 **Wheelchair Restraint System:** An ADA-compliant four-point tie-down system with shoulder strap, such as "Q'Straint," "Kennedyne," or a COUNTY-approved equivalent, shall be located at each wheelchair area. All wheelchair tie-downs (wheelchair securement devices) shall be oriented to allow the Client to ride facing forward in the vehicle. Securement of a wheelchair in a side-facing manner is strictly prohibited. A separate passenger seat belt is required for each passenger. Tie-downs are to be fully adaptable so as to fit all ADA-compliant wheelchairs. All vehicles shall be equipped with operable seat belts and/or ADA approved tie-downs at all seating and wheelchair locations. CONTRACTOR shall strongly encourage Clients to utilize...
their mobility devices as regulated by the ADA in vehicles.

3.8.9 **Personal Property in Vehicles:** Any personal property of a Client found in a vehicle shall be retained by CONTRACTOR for a minimum of sixty (60) days after which, with the prior approval of COUNTY, CONTRACTOR may dispose of said property pursuant to law. During the sixty (60) day period CONTRACTOR shall make reasonable efforts to identify the owner of the property and return the property.

3.8.10 **Vehicle Insect Extermination:** All vehicles shall undergo insect extermination as necessary to eliminate the presence of insects. The vehicle shall not be placed in service while any noxious fumes or detectable odors remain.

3.8.11 **Vehicle Standards:** It is the responsibility of CONTRACTOR to ensure that each vehicle meets all standards and requirements as established in the TDSP, MOA, FCTD, and Chapter 341, Florida Statutes, Chapter 14-90 Florida Administrative Code, as currently enacted or as may be amended from time to time. In addition, the following are the minimum standards that must be met by CONTRACTOR at all times while providing the services hereunder:

A. All vehicles must have one operational seatbelt per passenger available for use at all times.

B. All vehicles must carry an effective fire extinguisher aboard whenever passengers are onboard.

C. All vehicles must have a rear view mirror and dual side mirrors.

D. All vehicles must have a functioning speedometer indicating speed in miles per hour and a functioning odometer indicating distance in miles to the nearest tenth of a mile.

E. All vehicles must have a functioning interior light within the passenger compartment.

F. The vehicles are to be equipped with an operable air-conditioning and heating system. If the air-conditioning system becomes inoperable during the day, the vehicle may continue to provide service only for the remainder of that day.

G. Vehicle exterior is to be free of grime, oil, or other substance, and be free from cracks, breaks, dents, and damaged paint that noticeably detracts from the overall appearance of the vehicle.

H. Body molding shall be in place, or if removed, holes filled and painted.

I. The interior shall be free from dirt, grime, oil, trash, or other material that could soil items placed therein and shall be free of protruding metal or other objects that could damage items placed therein.
J. Passenger compartment is to be clean, free of torn upholstery or floor coverings, damaged or broken seats, and protruding sharp edges.

K. Broward County Operating Permits, if required, shall be displayed properly. CONTRACTOR shall bear the production cost of the sticker or tag.

L. Vision shall be unobstructed on all four (4) sides of vehicles.

M. Vehicle shall be equipped with a two-way mobile radio and/or cellular telephone in good working order which shall be audible to the driver at all times.

N. All vehicles, except sedans, shall have an attached running board or lowered fixed step as part of the body.

O. No smoking in the vehicle.

P. All vehicles shall be cleaned, inside and out, daily.

Q. Each vehicle shall have COUNTY’s telephone number for complaints and CONTRACTOR’s telephone number posted in a conspicuous place in the vehicle, and given verbally by the driver upon request.

Vehicle Standard Disincentive: A contract disincentive of Fifty Dollars ($50.00) per incident shall apply for each and every violation of the vehicle standards.

3.8.12 Vehicle Maintenance: CONTRACTOR shall maintain all vehicles and equipment used in COUNTY’s Paratransit service in optimal working condition so as to minimize breakdowns and decrease the possibility of accidents.

COUNTY will conduct an annual System Safety review of each CONTRACTOR to comply with safety requirements of Chapter 14-90, Florida Administrative Code, as currently enacted or as may be amended from time to time.

COUNTY reserves the right, in its sole discretion, at any time, to inspect vehicles and maintenance facilities during normal working hours, to review CONTRACTOR’s maintenance records and inspect vehicles.

Any vehicle found not to be in conformance with the above standards set forth in this Agreement, must be removed from service until correction of the deficiency. COUNTY further reserves the right to inspect vehicles to be used in the program at any time, and order its removal from service if not found to be in conformity with this Agreement. Vehicles shall be subject to an annual inspection performed by COUNTY or its agent.

Non-Authorized Vehicle Disincentive: Failure to comply with these requirements shall be cause for disallowance of compensation for service rendered in the noncompliant vehicle.
3.8.13 Vehicle Registration: CONTRACTOR shall provide COUNTY with updated vehicle (fleet) listings by making entries into the Vehicle Registration screen of the CTMS. Vehicles must be registered in the CTMS prior to providing service.

Vehicle Registration Disincentive: A contract disincentive in the amount of Two Hundred Fifty Dollars ($250.00) shall be deducted for each failure to comply with the Vehicle Registration requirement.

3.8.14 Dedicated Fleet: CONTRACTOR shall dedicate vehicles to be used for performing TOPS services as described in this agreement. All vehicles that bear the inspection sticker described in paragraph 3.8.3 above shall be limited to transporting eligible Clients, companions, and escorts of the TOPS program while performing the services herein. CONTRACTOR may not transport persons not receiving the services hereunder at any time there is a TOPS passenger in the vehicle.

3.9 Accidents: The following are the standards relating to reporting accidents and repairing damage.

3.9.1 Accident Reporting: Every accident, or any incident involving a Client, with or without bodily injury or property damage, shall be verbally reported to a member of COUNTY’s Paratransit staff immediately upon CONTRACTOR’s discovery, or within that period of time CONTRACTOR should have discovered the accident or incident upon the use of prudent business practices. In addition, CONTRACTOR shall submit a written report within two (2) business days of the accident or incident. CONTRACTOR shall also be required to submit the pertinent information via the CTMS. A summary of monthly accident occurrences shall be part of the monthly operating summary. The contract standard for vehicle accidents is 2.5 per 100,000 miles.

Accident Reporting Disincentive: Failure to report an accident/incident within the required time period shall result in CONTRACTOR being assessed a per accident contract disincentive of Two Hundred Fifty Dollars ($250.00) for the first day, and Fifty Dollars ($50.00) for each additional day that the report is late.

3.9.2 Accident Damage Repairs: CONTRACTOR shall repair all accident damage to vehicles within sixty (60) days from the date of the accident; provided however, that no vehicle shall be used in service, if the vehicle does not meet all the vehicle standards set forth in the Agreement.

Accident Damage Repair Disincentive: In the event that COUNTY determines that CONTRACTOR failed to repair a vehicle within the time requirements set forth herein, the vehicle shall be removed from active service until such repairs are completed. Compensation for service rendered in the violating vehicle shall be disallowed.
APPENDIX G

TOPS PARATRANSIT RIDER’S GUIDE
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact Information</td>
<td>1</td>
</tr>
<tr>
<td>Phone Numbers</td>
<td>1</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>1</td>
</tr>
<tr>
<td>Web Address</td>
<td>1</td>
</tr>
<tr>
<td>Service Information</td>
<td>2</td>
</tr>
<tr>
<td>TOPS! Service</td>
<td>2</td>
</tr>
<tr>
<td>Service Hours</td>
<td>2</td>
</tr>
<tr>
<td>Service Area</td>
<td>2</td>
</tr>
<tr>
<td>Door-To-Door Service</td>
<td>2</td>
</tr>
<tr>
<td>Reservations And Scheduling</td>
<td>3</td>
</tr>
<tr>
<td>Making A Reservation</td>
<td>3</td>
</tr>
<tr>
<td>Making A Reservation On-Line</td>
<td>4</td>
</tr>
<tr>
<td>Subscriptions</td>
<td>4</td>
</tr>
<tr>
<td>Travel Time</td>
<td>5</td>
</tr>
<tr>
<td>The Service Window</td>
<td>5</td>
</tr>
<tr>
<td>Using The Service</td>
<td>6</td>
</tr>
<tr>
<td>Riding TOPS! Paratransit Vehicles</td>
<td>6</td>
</tr>
<tr>
<td>Paratransit Fares Co-Pay</td>
<td>6</td>
</tr>
<tr>
<td>Boarding With A Mobility Device</td>
<td>6</td>
</tr>
<tr>
<td>Companions</td>
<td>7</td>
</tr>
<tr>
<td>Personal Care Attendants</td>
<td>7</td>
</tr>
<tr>
<td>Transporting Children</td>
<td>7</td>
</tr>
<tr>
<td>Transporting Packages</td>
<td>8</td>
</tr>
<tr>
<td>Transporting Service Animals</td>
<td>8</td>
</tr>
<tr>
<td>Other Considerations</td>
<td>8</td>
</tr>
<tr>
<td>Drivers Requirements</td>
<td>9</td>
</tr>
<tr>
<td>Cancellations</td>
<td>10</td>
</tr>
<tr>
<td>Cancel A Reservation</td>
<td>10</td>
</tr>
<tr>
<td>Cancel A Reservation On-Line</td>
<td>10</td>
</tr>
<tr>
<td>Cancellation And “No-Show” Policies</td>
<td>10</td>
</tr>
<tr>
<td>Visitors</td>
<td>11</td>
</tr>
<tr>
<td>Visitor Riding Privileges</td>
<td>11</td>
</tr>
<tr>
<td>Compliments Or Complaints</td>
<td>11</td>
</tr>
<tr>
<td>Filing A Compliment Or Complaint</td>
<td>11</td>
</tr>
<tr>
<td>Fixed Route Services</td>
<td>12</td>
</tr>
<tr>
<td>Public Transit</td>
<td>12</td>
</tr>
<tr>
<td>Travel Training</td>
<td>12</td>
</tr>
<tr>
<td>Paratransit Eligibility</td>
<td>12</td>
</tr>
<tr>
<td>Eligibility And Renewal</td>
<td>12</td>
</tr>
<tr>
<td>ADA Eligibility</td>
<td>13</td>
</tr>
<tr>
<td>TD Eligibility</td>
<td>13</td>
</tr>
</tbody>
</table>
TOPS! Paratransit Rider’s Guide

TOPS! Paratransit Rider's Guide is designed to help riders become acquainted or re-acquainted with Broward County Transit's award winning Paratransit program. It also provides riders with the necessary guidelines to effectively use the service.

This Rider’s Guide is not intended to create a contract and violation or deviation of any of the goals, objectives and practices contained in this guide will not give rise to a cause of action nor create any presumption that a legal duty has been breached. In addition, TOPS! may change the goals, objectives and policies set forth in the Rider’s Guide at any time without liability to anyone.

Contact Information

Phone Numbers
For information, general assistance, eligibility, “where’s my ride” inquires or to register compliments or complaints call:..................... 1-866-682-2258
  Monday - Saturday 4:40 a.m. – 12:40 a.m.
  Sunday 6:45 a.m. – 10:15 p.m.
For Ride Reservations: .................................................... 1-866-682-2258
  Sunday - Saturday 8:00 a.m. – 5:00 p.m.
Hearing-Speech Impaired/TTY: ............................................. 954-357-8302
BCT & Paratransit Customer Service: ................................. 954-357-8400

Mailing Address
TOPS!
1 N University Dr STE 3100-A
Plantation FL 33324

Web Address
www.broward.org/bct/pages/paratransit.aspx
Service Information

TOPS! Service

In accordance with the Americans with Disabilities Act (ADA) and the Commission for the Transportation Disadvantaged (TD), Paratransit service is provided by Broward County for the purpose of delivering transportation services to individuals who, because of a functional disability, cannot access or use the public transportation system. Broward County's Paratransit program is called TOPS! - referring to the many Transportation OPtionS that are available.

TOPS! is a shared ride service with a mandatory fare co-pay
TOPS! does not provide emergency or stretcher transportation
TOPS! does not provide Personal Care Attendants (PCAs)
TOPS! does not provide wheelchairs or other mobility aids.

Service Hours

TOPS! Paratransit operates during the same days and hours as Broward County's fixed route bus service, which is generally from early morning until late at night. Please contact customer service for specific hours and holiday schedules.

Service Area

Federal regulations define the ADA Paratransit service area as being within three-quarters (¾) of a mile on either side of a fixed route bus. This includes the urbanized area of Broward County, and portions of northern Miami-Dade County and southern Palm Beach County. Service is available from Broward County to limited destinations in Palm Beach and Miami-Dade counties by both fixed route bus and Paratransit. Connections to Tri-Rail commuter trains are also available by both fixed route bus and Paratransit services.

Door-To-Door Service

Service is “Door-To-Door” for all passengers. Door-To-Door refers to main entrance locations only. Passengers will not be escorted beyond
the ground floor lobby of any residence or public building. Drivers do not go upstairs, into houses, nursing homes, or doctor's offices to locate riders. If the pickup address is located inside a gated community or requires special access, it is the rider's responsibility to arrange entry for the vehicle. If a vehicle is unable to enter the pickup area and the rider fails to meet the vehicle outside, you will be considered a “No-Show” for the trip.

Reservations And Scheduling

Making A Reservation

To make a reservation, please call our Call Center: 1-866-682-2258. Reservations may be made up to three days before the date you plan to travel. Next day reservations must be made before 5:00 p.m. Same day service is not available but you may contact the Call Center and inquire if they can accommodate you on a "space-available" basis.

Paratransit transportation is comparable to fixed route bus trips. A minimum 60 minute wait is required between your appointment time and your next pickup time.

When reserving a ride, please provide the following information:

- Your Identification Number
- First and Last names
- Telephone number
- Requested appointment or pickup time
- The complete pickup address including an apartment/suite number, gate/security code, building identification & zip code
- The complete destination address including an apartment/suite number, gate/security code, building identification & zip code and telephone number
- Indicate if the rider will be accompanied by a PCA and/or a companion. (See Personal Care Attendant section for details.)

After the trip information has been gathered, the call-taker will enter your trip request into the scheduling system. You will be informed that your reservation has been accepted. You will not be given a Service
Window at this time. See “The Service Window” section below for details.

**Making A Reservation On-Line**

Reservations can also be made on-line via the web on our website at: [http://www.broward.org/bct/pages/paratransit.aspx](http://www.broward.org/bct/pages/paratransit.aspx)

Look for the “To make a reservation” section and click on the “**My TOPS! Trips**” button. You will be presented with your account **Dashboard**. From there, you will be able to book a trip or view your past trip information and your account details.

Click on “Schedule a new trip” and you will be presented with a set of easy-to-navigate prompts that will guide you through the reservation process. **All reservations must be made before 5:00p.m.** The system will keep track of your trips so future reservations to the same locations will be faster and easier to schedule. You will **not** be given a **Service Window** at this time. See “The Service Window” section for more details.

If you need assistance, please call our Call Center at **1-866-682-2258**.

**Subscriptions**

Subscriptions (also known as “standing orders”) are used for trips that are made at least twice a week, to and from the same locations, at the same time, on the same days of the week. Examples of subscription trips are trips to work, school, dialysis or physical therapy. Subscription trips are placed for a minimum of one month. Once arranged, a subscription trip is automatic and additional telephone calls are not necessary. To place a subscription order, please call the Call Center and inform call-taker that you wish to do so.

*It is the rider’s responsibility to cancel specific subscription trips that are not needed or will not be utilized.*

Subscription service is considered a privilege and may be discontinued for due cause.

**Standing orders are automatically cancelled on Federal holidays.** Riders who need service on a Federal holiday must make a trip reservation with the call center. Contact our Call Center at **1-866-682-2258** for a list of observed holidays.
Travel Time

Estimated travel time is similar to the same trip, including transfers, if made by fixed route bus including the time it would take to walk from your point of origin to the bus stop and the time it would take to walk from the bus stop to your destination; or approximately twice the time a direct trip would take.

When scheduling an appointment, tell the call-taker the appointment time. We will schedule your Service Window to ensure you arrive before your appointment time.

When requesting a pick-up, we will schedule your Service Window to be within 30 minutes of the requested pick-up time.

You will receive your Service Window times in the evening between 5pm and 9pm via an automated phone call. See “The Service Window” section for details.

The Service Window

The Service Window is a thirty (30) minute time frame in which your ride will arrive for you. For example, if you are given a Service Window of 9:00-9:30 this means the earliest time your ride will arrive will be 9:00 and the latest time it may arrive is 9:30. It may also arrive at any time in between, so you must be ready and waiting for the vehicle’s arrival.

You will receive your Service Window for each of your trips the night before travel, between 5:00 p.m. and 9:00 p.m., via our automated call-back system. If there is a problem with the Service Window provided or if you wish to cancel the trip, you must call the Call Center. The system will call you via the most current number we have on file for you, so be sure to keep your telephone numbers up to date. If you have an answering machine or voice mail, the system will leave a message for you.

On the day of travel, your ride will arrive within the thirty (30) minute Service Window. When the TOPS! vehicle is an estimated ten (10) minutes away from your location you will receive an automated Advanced Arrival Reminder Notification call.

TOPS! drivers operate on a schedule that allows a maximum five-
minute wait for a rider after arriving at the pickup location. If you are not ready to board within five minutes of the vehicle's arrival, you will be considered a "No-Show" and the vehicle will depart without you.

Riders are not required to board a vehicle earlier than the start of the Service Window.

If the vehicle did not arrive during the scheduled Service Window, call: 1-866-682-2258 for assistance.

Using The Service

Riding TOPS! Paratransit Vehicles

For easy identification, all vehicles in the TOPS! program display a TOPS! logo. Since there are several different companies servicing the TOPS! program, it is important to ensure the arriving TOPS! vehicle is for you, and not another rider. Vans and wheelchair vans are the most common vehicle types. Providers are not required to honor specific vehicle type requests.

Taxicab service is not part of the TOPS! program.

Paratransit Fares Co-Pay

Co-pay is required PRIOR to entering vehicle. Failure to make co-pay may result in loss of transportation privileges.

- The one way fare per trip is currently $3.50
- Fares are to be paid to the driver prior to boarding vehicle
- Please have the exact fare since drivers do not make change
- Riders going to/from designated nutrition site locations for nutrition purposes only may qualify for reduced fares
- Rides arriving 15 minutes or more after the end of the Service Window will not be charged the co-pay fare

Boarding With A Mobility Device

It is recommended that all wheelchair and scooter devices are WC-19 compliant so they can be properly secured.
Vehicles used in TOPS! service are equipped with lifts that will accommodate wheelchair or scooter devices that are no longer than 48-inches and no wider than 30-inches. Also, the combined weight of the rider and the mobility aid cannot exceed 600 lbs. **Mobility devices exceeding these standards may not be transportable.**

TOPS! drivers will assist individuals in manual wheelchairs over one curb and/or step, but may not carry an individual or their mobility devices. All drivers are trained to operate the vehicle lifts. All wheelchairs and scooters will be secured with four (4) point tie downs.

Riders without mobility devices may board the vehicle via the lift upon request. **Only TOPS! drivers will operate the lift.**

**Companions**

One companion may accompany an ADA Paratransit eligible rider. Both must be picked up and dropped off at the same address, at the same time. **Accompanying companions must pay the full co-pay fare.** TOPS! must know in advance if a companion is traveling with you. When making the reservation, indicate at that time that a companion will accompany you on the trip.

**Personal Care Attendants**

A Personal Care Attendant (PCA) is a person traveling as an aide to assist with life-functions and to facilitate safe travel. A PCA must be approved to be eligible to travel with a rider. A letter must be submitted from your physician stating what functional limitations make it necessary for the additional assistance. If your PCA has not yet been approved, they may travel as a companion (see above). Both the PCA and the rider must be picked up and dropped off at the same address at the same time. PCAs pay no fare. TOPS! must know in advance if a PCA is traveling with you. When making a reservation, indicate that a PCA will accompany you.

**Transporting Children**

All children younger than four (4) years of age must be transported in an appropriate child safety seat. All clients and companions, including
children, must pay the one way fare. TOPS! **does not provide child safety seats.** No one under the age of eighteen (18) is permitted to ride in the front seat of any TOPS! vehicle.

**Transporting Packages**

Drivers are **not required** to assist with rider’s packages or personal belongings. Remember that TOPS! vehicles are shared by other riders, many of whom travel with large mobility devices, such as power scooters. Space is not available for bulky or numerous items. Riders may not transport explosives, illegal substances, flammable liquids or materials hazardous to themselves, the driver or other riders. Riders may transport self-carrying portable oxygen containers. Riders possessing or using illegal drugs will be denied Paratransit transportation.

**Transporting Service Animals**

All service animals must be properly controlled. Service animals must ride on the floor or, if appropriate, in the lap of the rider and may **not** use vehicle seats. Riders are responsible for the behavior and hygiene needs of service animals. Service can be refused or discontinued if a service animal is seriously disruptive. There is no additional charge for service animals. All other animals may travel only in a properly secured cage or travel container.

**Other Considerations**

For the comfort and safety of all riders the following policies apply:

1) Seat belts **must** be worn at all times while riding in any vehicle
2) No eating, drinking or smoking at any time in any TOPS! vehicle
3) No riding under the influence of alcohol or illegal drugs
4) No littering in the vehicles
5) No physical and no verbal abuse of others
6) Specific providers and drivers cannot be requested
7) Requests for specific vehicle types such as sedans or rear-loading vans cannot be accommodated
8) For certain clients attending day programs, a responsible person must
be home to receive the client. Failure to adhere will result in progressive disciplinary measures.

9) No sound-generating equipment is to be played aloud aboard the vehicles. Riders must use ear phones or head phones.

10) Please be aware that drivers may be limited and/or restricted in parking, waiting and levels of assistance, while loading and unloading at the airport/seaport. We suggest alternative arrangements be considered for pick up at airport/seaport locations.

11) Please contact the Call Center with changes of address or telephone number(s) so that our records are kept current.

12) Disruptive, physically or verbally abusive riders will be subject to **suspension of service**.

13) Riders may not allow their Paratransit privileges to be utilized by someone other than themselves.

14) Drivers offer assistance to all riders and assist riders when entering and leaving the vehicle. This includes offering a steadying arm when walking, assistance in bringing a rider's wheelchair or other mobility device to and from the main door and, if requested, assisting with unlocking or opening a main entrance door of a building or residence.

15) Drivers must follow their assigned service schedule.

16) Riders cannot change schedules or locations while being transported.

**Drivers Requirements**

Drivers are **not** allowed to…

- …lift or carry riders or enter residences
- …accept Tips or Gratuities
- …play loud music in the vehicle
- …maneuver wheelchairs up or down flights of stairs consisting of 2 or more steps
- …perform any personal care assistance for riders, including assisting riders to dress, giving medications, operating medical equipment such as oxygen and I.V. units
• ...smoke in the vehicles at any time
• ...make personal calls while driving a TOPS! vehicle
• ...text while driving

**Cancellations**

**Cancel A Reservation**

To cancel a reservation, call: **1-866-682-2258**. Indicate if one-way or complete round-trip service is being cancelled. Keep in mind that reservations cancelled less than two (2) hours before the start of the service window are considered “Late Cancels.”

**Cancel A Reservation On-Line**

From the TOPS! web-site, look for the “To make a reservation” section and click on the “Book A Trip” link. You will be presented with your account *Dashboard*. From here, you will be able to cancel any scheduled trips that are at least two (2) hours before the start of the service window. If you need to cancel a reservation that is less than two (2) hours before the start of the service window, you will need to call the Call Center at: **1-866-682-2258**.

**Cancellation And “No-Show” Policies**

An excessive accumulation of “No-Shows” may result in **suspension of service, or other corrective actions as appropriate**. A trip is a “No-Show” if the rider:

• Cancels a trip less than one hour before the scheduled pickup time
• Places a request for service but does not meet the ride upon its arrival
• Is not ready to board within five minutes after the arrival of the vehicle during the pickup window and the ride departs without them
Visitors

Visitor Riding Privileges

ADA Paratransit provides service for persons with disabilities who are visiting from outside the service area, and who have been certified ADA Paratransit eligible from another jurisdiction. Proof of ADA Paratransit eligibility must be provided to obtain “Visitor Status” within the Broward County program. Twenty-one “Days of Visitor Service” may be used during a one year period. After using twenty-one days during the twelve month period, the visitor must complete the local eligibility process to continue using the service or wait until the start of the next year twelve month period to receive further service.

Compliments Or Complaints

Filing A Compliment Or Complaint

Compliments, complaints and your suggestions are welcomed! Simply call our Customer Service department at: 954-357-8400. When prompted, select option 2.

When calling, give specific and relevant details regarding the trip. Share concerns about specific rides or incidents as soon after the actual occurrence as possible.

Every complaint will be investigated. When a complaint is filed, TOPS! will:

- Record the description of the problem
- Research the complaint
- Resolve all complaints within a reasonable time frame
- Resolution of safety sensitive complaints will occur within 24 hours (when possible)
- Upon request, rider will be notified by telephone or letter of the complaint's resolution

TOPS! is committed to protecting our rider’s confidentiality.
Fixed Route Services

Public Transit

Fixed route public transit buses offer access for individuals with disabilities on more than 290 buses operating throughout Broward County, with connections to transit systems into Miami-Dade and Palm Beach counties and to Tri-Rail.

Fixed route public transit operates on timetables and does not require advanced reservations. Riders may travel together and in groups spontaneously without concern regarding available space or advanced notice. All routes are wheelchair accessible.

Fares for regular fixed route bus service are lower than fares for Paratransit service. Additionally, seniors and riders with disabilities may qualify for a reduced fare. For information on reduced fares or passes, please contact Broward County’s Fixed Route Services Customer Service at 954-357-8400.

Several bus pass programs are also available to qualified individuals. Call Broward County’s Fixed Route Customer Service for details.

Travel Training

TOPS! Paratransit has developed a free program to help you use fixed route buses. A professional travel trainer provides personal and group lessons at no charge to teach riders how to use the county’s fixed route buses.

Fixed route transit allows you the freedom to travel at your best time, to go when you want to go, where you want to go, without Identification Numbers or advance notice. Learn to travel the fixed route bus service by calling 954-357-7705 for more information about travel training.

Paratransit Eligibility

Eligibility And Renewal

Full eligibility criteria to use Broward County’s TOPS! service can be found on the TOPS! web-site and is also attached to each application.
Please review the eligibility criteria before submitting an application. 

Prior eligibility does not mean automatic recertification. You should receive a renewal notice within 30 days of eligibility expiration. Eligibility is generally valid from 3 months up to three years. Riders must reapply prior to expiration of their eligibility. If you do not receive expiration notification please call Customer Service at 954-357-8400.

**ADA Eligibility** To be ADA eligible, the application process must be complete. The applicant must be at least thirteen (13) years old to travel without a parent and must have a functional disability that prevents access to and/or the use of public transportation.

**TD Eligibility** To be considered TD eligible you must be a Transportation Disadvantaged person who, because of mental or physical disability, income status or age are unable to transport themselves or to purchase transportation and are, therefore, dependent upon others to obtain access to health care, employment, education, shopping, social activities, or other life-sustaining activities, or children who are high-risk or handicapped or at-risk as defined in F.S.411.202.

**TD HELPLINE: 1-800-983-2435**
TTY 1-800-648-6084
Mon - Fri 8am - 5pm

The TD Help Line is sponsored by:
The Florida Commission for the Transportation Disadvantaged

The TD Helpline is a service of the Florida Commission for the Transportation Disadvantaged, whose mission is to ensure the availability of efficient, cost effective and quality transportation services for Florida’s transportation disadvantaged persons.

Broward County is an equal opportunity employer and provider of services. Due to anticipated Program changes, this is a temporary publication. Cost estimate to inform the public about Broward County Transit's Paratransit program is not available at this time.

Version: 08/29/2013
APPENDIX H

Broward County Transit (BCT) Bus Pass Eligibility Transportation Disadvantaged Program Application Review/Evaluation Determination and Eligibility Defined
TD door-to-door and TD bus pass eligibility are governed by the same Florida Statutes, 427 and 411. Therefore, the eligibility requirements should be identical.

The following represents the current BCT practice and proposed suggestions.

Currently:
1. BCT accepts the applicant’s statement concerning “Your Monthly Income” on the TD Program Application Form (TDAF) as stated (not verified).
2. BCT accepts the applicant “Mobility” statement on the TDAF as stated. TDAF indicates, “Dr. info not required for Bus Pass Program” (not verified).

Proposed eligibility requirements:

Predicated on the preceding Florida Statutes, BCT should utilize the following eligibility guidelines to determine TD entitlement:

INCOME STATUS –

ADULT – Shall be at or below 100 percent of the current/applicable Federal Poverty Level Guidelines

VERIFIED BY – Last two current pay stubs for the current year or income tax return for previous calendar year if pay stubs are greater than 30 days old.

A. If applicant indicates $0 income, signed statement, on agency letterhead, indicating applicant is residing at agency (i.e. shelter, etc.) and is not working. $0 income applicants shall be required to document annually, from original TD effective date, statement from agency verifying income.

B. If applicant resides with family, total household income to be verified as meeting poverty level income. $0 income applicants shall be required to document annually, from original TD effective date, total household income.

CHILD – Child’s family’s income is at or below 100 percent of the current/applicable Federal Poverty Level Guidelines

VERIFIED BY - Last pay stub for the previous year or income tax return for the previous calendar year for all residing in household. Income applicants shall be required to document annually, from original TD effective date, total household income.
Child or adult application will remain in pending file for 60 days, from date of additional information request, waiting for requested documentation. If required documentation is not received within 60 timeframe, the application is cancelled. Applicant may reapply. (This procedure is currently in practice in another Florida county).

MENTAL OR PHYSICAL DISABILITY –

ADULT -- Physical or mental disability will be verified by physician statement

CHILD --- Physical or mental disability will be verified by physician statement. All other eligible conditions in F.S. 411.202 will require appropriate verification documentation

AGE –

TD eligibility, based on income, physical/mental disability or other qualifying condition listed in 427.011 or 411.202 F.S., is available to any individual regardless of age

Proposed TD bus pass program changes;

1. Eliminate bus pass program to all except income eligible.

2. Co-payment -

   Client will participate in ownership of TD program via bus pass co-payment.

   A. $5 – 10 ride
   B. $10 – 31 day

   (Co-pay program is currently in use by another Florida county)

3. Do not include TDAF with ADA application

4. Travel trainer and trainee do not need bus passes for bus travel training. Trainer ID badge to allow bus access for trainee(s) while training

5. A BCT bus pass is not to be distributed without all requirements being completed
LAST NAME: ___________________________  FIRST NAME: ____________________ M.I.: ____

BIRTH DATE: _____________    TD QUALIFYING EVENT(S):    PHY   MH   INCOME   (CHILD-QE)

DOCUMENT(S) REVIEWED: _______________________________________________________

DOCUMENT(S) EVALUATION FINDINGS: ____________________________________________

ADDITIONAL INFORMATION REQUESTED:  Y   N   IF YES, WHAT INFORMATION:

ADDITIONAL INFORMATION DUE BY: _____________   NOT RECEIVED:   APP CLOSED

DATE ADDITIONAL DOCUMENT(S) RECEIVED: _____________

DOCUMENT(S) REVIEWED: _______________________________________________________

DOCUMENT(S) EVALUATION FINDING: _____________________________________________

APPROVED:    YES      NO    (TOPS! – BP)     FINDINGS LETTER SENT DATE: _____________

REVIEWS BY: ______________________________________            DATE: ________________

ENTERED IN SYSTEM DATE: ________________
APPENDIX I

Broward County Transit (BCT) RATE MODEL
Once completed, proceed to the Worksheet entitled "Comprehensive Budget"
Comprehensive Budget Worksheet

1. Complete applicable GREEN cells in columns 2, 3, 4, and 7

<table>
<thead>
<tr>
<th>Prior Year's ACTUALS</th>
<th>Current Year's APPROVED Budget, as amended</th>
<th>Upcoming Year's PROPOSED Budget</th>
<th>% Change from Prior Year to Current Year</th>
<th>% Change from Current Year to Upcoming Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

**REVENUES** (CTC/Operators ONLY / Do NOT include coordination contractors!)

<table>
<thead>
<tr>
<th>Source</th>
<th>Current</th>
<th>Upcoming</th>
<th>% Change from Prior Year to Current Year</th>
<th>% Change from Current Year to Upcoming Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Non-Gov</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Farebox</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicaid Co-Play Received</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations/ Contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In-Kind, Contributed Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local Government</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>District School Board</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compl. ADA Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>County Cash</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>County In-Kind, Contributed Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utility cash</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utility In-Kind, Contributed Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Cash</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other In-Kind, Contributed Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CTD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Non-Spons. Trip Program | | | | Used the dollar amounts from the Grants Program Distribution FY 2012-2013
| Non-Spons. Capital Equipment | | | | |
| Rural Capital Equipment | | | | |
| Other (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | 0.0%
| USDOT & FDOT | | | | |
| 49 USC 5307 | | | | |
| 49 USC 5310 | | | | |
| 49 USC 5311 (Operating) | | | | |
| 49 USC 5311(capital) | | | | |
| Block Grant | | | | |
| Service Development | | | | |
| Commuter Assistance | | | | |
| Other DOT (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | 0.0%
| AHCA | | | | |
| Medicaid | | | | |
| Other (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | |
| MIP | | | | |
| Acct., Drug & Mental Health | | | | |
| Family Safety & Preservation | | | | |
| Comm Care, In-Home & Adult Serv. | | | | |
| Other MIP (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | |
| DOH | | | | |
| Children Medical Services | | | | |
| County Public Health | | | | |
| Other DOH (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | |
| DOE (School) | | | | |
| Carl Perkins | | | | |
| WIF of Blind Services | | | | |
| Vocational Rehabilitation | | | | |
| Day Care Programs | | | | |
| Other DOE (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | |
| AWI | | | | |
| WAGES/Workforce Board | | | | |
| Other AWI (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | |
| DOEA | | | | |
| Elder Americans Act | | | | |
| Community Care for Eldery | | | | |
| Other DOEA (specify in explanation) | | | | |
| Bus Pass Program Revenue | | | | |
| DCA | | | | |
| Community Services | | | | |
| Other DCA (specify in explanation) | | | | |
| Bus Pass Admin. Revenue | | | | |

Note: County cash contributions significantly dropped.
Comprehensive Budget Worksheet

**Version 1.4**

**CTC:** Broward County Transit  
**County:** Broward County

1. Complete applicable **GREEN** cells in columns 2, 3, 4, and 7

<table>
<thead>
<tr>
<th>Prior Year's ACTUALS from Oct 1st to Sept 30th of 2012</th>
<th>Current Year's APPROVED Budget, as amended from Oct 1st to Sept 30th of 2013</th>
<th>Upcoming Year's PROPOSED Budget from Oct 1st to Sept 30th of 2014</th>
<th>% Change from Prior Year to Current Year</th>
<th>% Change from Current Year to Upcoming Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

- Confirm whether revenues are collected as a system subsidy VS a purchase of service at a unit price.

- Explain Changes in Column 6 That Are > ±10% and Also > ±$50,000

**APD**
- Office of Disability Determination
- Developmental Services
- Other APD (specify in explanation)
- Bus Pass Program Revenue

**DU**
- Specify in explanation
- Bus Pass Program Revenue

**Other Fed or State**
- XXX
- XXX
- Bus Pass Program Revenue

**Other Revenues**
- Interest Earnings
- XXX
- Bus Pass Program Revenue

**Balancing Revenue to Prevent Deficit**
- Actual or Planned Use of Cash Reserve

**Balancing Revenue is Short By =**
- None
- None

**Total Revenues = $3,713,197 $4,407,038 $5,103,849**

**EXPENDITURES (CTC/Operators ONLY / Do NOT include Coordination Contractors)**

**Operating Expenditures**
- Labor $76,438 $99,794 $124,722 30.6% 25.0%
- Fringe Benefits $21,282 $26,550 $32,772 24.3% 23.3%
- Services $96,336 $124,078 $155,197 24.9% 25.1%
- Materials and Supplies $2,877 $3,600 $4,440 24.5% 27.7%
- Utilities
- Casualty and Liability $3,446 $2,446 $1,840 41.9% 23.9%
- Taxes $5,846 $6,000 $5,440 30.5% 25.9%
- **Purchased Transportation**
  - Purchased Bus Pass Expenses $90,000 $90,000 $90,000 0.0% 0.0%
  - School Bus Utilization Expenses
- **Contracted Transportation Services**
  - $3,192,508 $3,174,000 $3,306,407 18.2% 14.9%
- **Other**
  - $248,000 $280,000 $300,000 20.4% 25.9%
- **Miscellaneous**
  - Operating bond service - Principal & Interest
  - Leases and Rentals
  - Contr. to Capital Equip. Replacement Fund
  - Vendor contributed Services $344 $244 $244 -10.7% 0.0%
  - Allocated Indirect

**Capital Expenditures**
- Equip. Purchases with Grant Funds
- Equip. Purchases with Local Revenue
- Equip. Purchases with Rate Generated Rev.
- Capital Debt Service - Principal & Interest

**ACTUAL YEAR LOSS**

- $2

**Total Expenditures =**

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labor</td>
<td>$76,438</td>
<td>$99,794</td>
<td>$124,722</td>
</tr>
<tr>
<td>Fringe Benefits</td>
<td>$21,282</td>
<td>$26,550</td>
<td>$32,772</td>
</tr>
<tr>
<td>Services</td>
<td>$96,336</td>
<td>$124,078</td>
<td>$155,197</td>
</tr>
<tr>
<td>Materials and Supplies</td>
<td>$2,877</td>
<td>$3,600</td>
<td>$4,440</td>
</tr>
<tr>
<td>Utilities</td>
<td>$3,446</td>
<td>$2,446</td>
<td>$1,840</td>
</tr>
<tr>
<td>Taxes</td>
<td>$5,846</td>
<td>$6,000</td>
<td>$5,440</td>
</tr>
<tr>
<td>Purchased Transportation</td>
<td>$90,000</td>
<td>$90,000</td>
<td>$90,000</td>
</tr>
<tr>
<td>Contracted Transportation Services</td>
<td>$3,192,508</td>
<td>$3,174,000</td>
<td>$3,306,407</td>
</tr>
<tr>
<td>Other</td>
<td>$248,000</td>
<td>$280,000</td>
<td>$300,000</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>$344</td>
<td>$244</td>
<td>$244</td>
</tr>
<tr>
<td>Total Expenditures</td>
<td>$3,713,199</td>
<td>$4,407,038</td>
<td>$5,103,849</td>
</tr>
</tbody>
</table>

**See NOTES Below.**

- Actual year LOSSES are shown as Balancing Revenue or Local Non-Government revenue.
# Budgeted Rate Base Worksheet

**Version 1.4**  
**CTC:** Broward County Transit  
**County:** Broward County

1. Complete applicable **GREEN** cells in column 3; **YELLOW** and **BLUE** cells are automatically completed in column 3.

2. Complete applicable **GOLD** cells in column 5.

---

**REVENUES (CTC/Operators ONLY)**

<table>
<thead>
<tr>
<th>Local Non-Govt</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare/Disability</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Medicaid/Disability</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>VA/Other Contributions</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other AWI</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Local Government</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>City/County Board</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>County Cash</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Local Revenues</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Mayor's Office</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>County Cash</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Local Revenues</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Mayor's Office</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CTO</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bus Pass Program Revenue</td>
<td>7,064,857</td>
<td>7,064,857</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>USDOT &amp; FOOT</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>49 USC § 5317</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>49 USC § 5312</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>49 USC § 5311 (Carpenter)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>49 USC § 5308</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Block Grant</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Federal</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Interagency Assistance</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Grant</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AHCA</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Park Amusement</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>DCF</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult Drug &amp; Mental Health</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Alcohol, Tobacco &amp; Prevention</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Foster Care Inc &amp; Adult Serv</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other DCF</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOJ</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>territory</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>US/State Services</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>County Public Health</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOE (state)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>TE of Govt Services</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Comprehensive Services</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other DOE</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AWW</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Workforce Board</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>AWW</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DOEA</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Older Americans Act</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Community Care for Elders</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other DOEA</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DCA</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Services</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Park Amusement</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Bus Pass Program Revenue</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

---

**Notes:**

1. **YELLOW** cells are NEVER Generated by Applying Authorized Rates.

2. **BLUE** cells should be funds generated by rates in this spreadsheet.

---

**Budgeted Rate Subsidy Revenue**

<table>
<thead>
<tr>
<th>Upcoming Year’s BUDGETED Revenues</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>from Oct 1st of 2013 to Sept 30th of 2014</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What amount of the Budgeted Revenue</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>that is rate generated at the rate per unit determined by this spreadsheet OR used as local match for these trip revenues?</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Budgeted Rate Subsidy Revenue</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Excluded from the Rate Base</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

**Funds Excluded from Budgeted Rate Subsidy Revenue**

<table>
<thead>
<tr>
<th>From Funds Earmarked by the Funding Source</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>49 USC 5310</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>49 USC 5307</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>49 USC 5311 (Carpenter)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Medicaid</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>49 USC 5312</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

**Funds to be Matched**

<table>
<thead>
<tr>
<th>Local Match</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>405,761</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

**Notes:**

1. Fill in that portion of budgeted revenue in Column 2 that will be **GENERATED** through the application of authorized per mile, per trip, or combination per trip plus per mile rates. Also, include the amount of funds that are Earmarked as local match for Transportation Services and **NOT** Capital Equipment purchases.

2. If the Farebox Revenues are used as a source of Local Match Dollars, then identify the appropriate amount of Farebox Revenue that represents the portion of Local Match required on any state or federal grants. This does not mean that Farebox is the only source for Local Match.

3. Please review all Grant Applications and Agreements containing state and/or Federal funds for the proper Match Requirement levels and allowed sources.

---

**GOLD cells**

Fill in that portion of Budgeted Rate Subsidy Revenue in Column 4 that will come from Funds Earmarked by the Funding Source for Purchasing Capital Equipment. Also include the portion of Local Funds earmarked as Match related to the Purchase of Capital Equipment if a match amount is required by the Funding Source.
Budgeted Rate Base Worksheet

CTC: Broward County Transit

County: Broward County

1. Complete applicable **GREEN** cells in column 3; **YELLOW** and **BLUE** cells are automatically completed in column 3.

2. Complete applicable **GOLD** cells in column 5.

### Upcoming Year's Budgeted Revenues

<table>
<thead>
<tr>
<th></th>
<th>Oct 1st of 2013</th>
<th>Sept 30th of 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### What amount of the Budgeted Revenue in col. 2 will be generated at the rate per unit determined by this spreadsheet, or used as local match for these type revenues?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### What amount of the Subsidy Revenue in col. 4 will come from funds to purchase equipment, or will be used as match for the purchase of equipment?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### EXPENDITURES (CTC/Operators ONLY)

#### Operating Expenditures

<table>
<thead>
<tr>
<th>Category</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages Benefits</td>
<td>$124,722</td>
<td>$123,719</td>
</tr>
<tr>
<td>Materials and supplies</td>
<td>$1,500</td>
<td>$1,589</td>
</tr>
<tr>
<td>Utilities</td>
<td>$1,497</td>
<td>$1,497</td>
</tr>
<tr>
<td>O&amp;M</td>
<td>$1,660</td>
<td>$1,660</td>
</tr>
<tr>
<td>Purchased Transportation</td>
<td>$80,000</td>
<td>$80,000</td>
</tr>
<tr>
<td>Depreciation Expense</td>
<td>$4,765,607</td>
<td>$4,765,607</td>
</tr>
<tr>
<td>Other</td>
<td>$90,000</td>
<td>$90,000</td>
</tr>
<tr>
<td>Operating Lease - Principal &amp; Interest</td>
<td>$2,241</td>
<td>$2,241</td>
</tr>
<tr>
<td>Capital Debt Service - Principal &amp; Interest</td>
<td>$2,241</td>
<td>$2,241</td>
</tr>
<tr>
<td>Total Expenditures</td>
<td>$5,183,846</td>
<td>$5,183,846</td>
</tr>
</tbody>
</table>

### Capital Expenditures

<table>
<thead>
<tr>
<th>Category</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Expenditures</td>
<td>$90,000</td>
<td>$90,000</td>
</tr>
</tbody>
</table>

### Adjusted Expenditures Included in Rate Base

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$5,073,846</td>
<td>$5,073,846</td>
</tr>
</tbody>
</table>

### Rate Base Adjustment Cell

If necessary and justified, this cell is where you could optionally adjust proposed service rates up or down to adjust for program revenue (or unapproved profit), or losses from the Actual period shown at the bottom of the Comprehensive Budget Sheet. This is not the only acceptable location or method of reconciling for excess gains or losses. If allowed by the respective funding sources, excess gains may also be adjusted by providing system subsidy revenue or by the purchase of additional trips in a period following the Actual period. If such an adjustment has been made, provide notation in the respective explanation area of the Comprehensive Budget tab.

### Once Completed, Proceed to the Worksheet entitled “Program-wide Rates”
Worksheet for Program-wide Rates

CTC: Broward County Tr
County: Broward County

1. **Complete Total Projected Passenger Miles and ONE-WAY Passenger Trips (GREEN cells) below**

Do **NOT** include trips or miles related to Coordination Contractors!
Do **NOT** include School Board trips or miles UNLESS.......

**INCLUDE** all ONE-WAY passenger trips and passenger miles related to services you purchased from your transportation operators!
Do **NOT** include trips or miles for services provided to the general public/private pay UNLESS...
Do **NOT** include escort activity as passenger trips or passenger miles unless charged the full rate for service!
Do **NOT** include fixed route bus program trips or passenger miles!

**PROGRAM-WIDE RATES**

<table>
<thead>
<tr>
<th>Total Projected Passenger Miles</th>
<th>2,057,982</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate Per Passenger Mile</td>
<td>$ 2.44</td>
</tr>
<tr>
<td>Total Projected Passenger Trips</td>
<td>183,156</td>
</tr>
<tr>
<td>Rate Per Passenger Trip</td>
<td>$ 27.37</td>
</tr>
</tbody>
</table>

**Fiscal Year**

| 2013 - 2014                     |

| Avg. Passenger Trip Length      | 11.2 Miles |

**Rates If No Revenue Funds Were Identified As Subsidy Funds**

| Rate Per Passenger Mile         | $ 2.44 |
| Rate Per Passenger Trip         | $ 27.37 |

**Once Completed, Proceed to the Worksheet entitled “Multiple Service Rates”**

**Vehicle Miles**

The miles that a vehicle is scheduled to or actually travels from the time it pulls out from its garage to go into revenue service to the time it pulls in from revenue service.

**Vehicle Revenue Miles (VRM)**

The miles that vehicles are scheduled to or actually travel while in revenue service. Vehicle revenue miles exclude:

- Deadhead
- Operator training, and
- Vehicle maintenance testing, as well as
- School bus and charter services.

**Passenger Miles (PM)**

The cumulative sum of the distances ridden by each passenger.
Worksheet for Multiple Service Rates

1. Answer the questions by completing the GREEN cells starting in Section I for all services
2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers

<table>
<thead>
<tr>
<th>CTC: Broward County</th>
<th>Version 1.4</th>
</tr>
</thead>
</table>

SECTION I: Services Provided

1. Will the CTC be providing any of these Services to transportation disadvantaged passengers in the upcoming budget year?  

<table>
<thead>
<tr>
<th>Ambulatory</th>
<th>Wheelchair</th>
<th>Stretcher</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

Go to Section II for Ambulatory Service

STOP! Do NOT Complete Sections II - V for Stretcher Service

SECTION II: Contracted Services

1. Will the CTC be contracting out any of these Services TOTALLY in the upcoming budget year?  

<table>
<thead>
<tr>
<th>Ambulatory</th>
<th>Wheelchair</th>
<th>Stretcher</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

Go to Section III for Ambulatory Service

Go to Section III for Wheelchair Service

Do NOT Complete Section II for Stretcher Service

Do NOT Complete Section II for Group Service

2. If you answered YES to #1 above, do you want to arrive at the billing rate by simply dividing the proposed contract amount by the projected Passenger Miles / passenger trips?  

<table>
<thead>
<tr>
<th>Ambulatory</th>
<th>Wheelchair</th>
<th>Stretcher</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

Leave Blank

Do NOT Complete Section II for Stretcher Service

Do NOT Complete Section II for Group Service

3. If you answered YES to #1 & #2 above, how much is the proposed contract amount for the service?  

Effective Rate for Contracted Services:

- per Passenger Mile =  
- per Passenger Trip =  

<table>
<thead>
<tr>
<th>Ambulatory</th>
<th>Wheelchair</th>
<th>Stretcher</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leave Blank</td>
<td>Leave Blank</td>
<td>Do NOT Complete Section II for Stretcher Service</td>
<td>Do NOT Complete Section II for Group Service</td>
</tr>
</tbody>
</table>

4. If you answered #3 & want a Combined Rate per Trip PLUS a per Mile add-on for 1 or more services, INPUT the Desired per Trip Rate (but must be less than per trip rate in #3 above) =  

Rate per Passenger Mile for Balance =  

<table>
<thead>
<tr>
<th>Ambulatory</th>
<th>Wheelchair</th>
<th>Stretcher</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leave Blank</td>
<td>Leave Blank</td>
<td>Do NOT Complete Section II for Stretcher Service</td>
<td>Do NOT Complete Section II for Group Service</td>
</tr>
</tbody>
</table>

Combination Trip and Mile Rate
**Worksheet for Multiple Service Rates**

1. Answer the questions by completing the GREEN cells starting in Section I for all services.
2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers.

### SECTION III: Escort Service

1. Do you want to charge all escorts a fee?  
   - Yes
   - No
   
   Skip #2 - #4 and Section #I and Go to Section V

2. If you answered Yes to #1, do you want to charge the fee per passenger trip OR per passenger mile?  
   - Pass. Trip
   - Leave Blank

3. If you answered Yes to #1 and completed #2, for how many of the projected Passenger Trips/Passenger Miles will a passenger be accompanied by an escort?  
   - Leave Blank

4. How much will you charge each escort?  
   - Leave Blank

### SECTION IV: Group Service Loading

1. If the message "You Must Complete This Section" appears to the right, what is the projected total number of Group Service Passenger Miles? (otherwise leave blank)  
   - Leave Blank

   And what is the projected total number of Group Vehicle Revenue Miles?  
   - Leave Blank

### SECTION V: Rate Calculations for Multiple Services

1. Input Projected Passenger Miles and Passenger Trips for each Service in the GREEN cells and the Rates for each Service will be calculated automatically.  
   - Miles and Trips you input must sum to the total for all Services entered on the "Program-wide Rates" Worksheet, MINUS miles and trips for contracted services if the rates were calculated in Section II above.

   * Be sure to leave the service BLANK if you answered NO in Section I or YES to question #2 in Section II

   **Rates For FY: 2013 - 2014**

<table>
<thead>
<tr>
<th>Service</th>
<th>2013 Rate</th>
<th>2014 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambul</td>
<td>$2.09</td>
<td>$2.09</td>
</tr>
<tr>
<td>Wheel Chair</td>
<td>$3.59</td>
<td>$3.59</td>
</tr>
<tr>
<td>Stretcher</td>
<td>Leave Blank</td>
<td>Leave Blank</td>
</tr>
<tr>
<td>Group</td>
<td>Leave Blank</td>
<td>Leave Blank</td>
</tr>
</tbody>
</table>

   **Projected Passenger Miles (excluding totally contracted services addressed in Section II)**: 2,057,982

   Rate per Passenger Mile = $2.09

   **Projected Passenger Trips (excluding totally contracted services addressed in Section II)**: 183,156

   Rate per Passenger Trip = $23.51

2. If you answered #1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services,...

   **INPUT the Desired Rate per Trip (but must be less than per trip rate above)**: $2.09

   Rate per Passenger Mile for Balance = $2.09

   **If No Revenue Funds Were Identified As Subsidy Funds**

<table>
<thead>
<tr>
<th>Service</th>
<th>2013 Rate</th>
<th>2014 Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambul</td>
<td>$2.09</td>
<td>$2.09</td>
</tr>
<tr>
<td>Wheel Chair</td>
<td>$3.59</td>
<td>$3.59</td>
</tr>
<tr>
<td>Stretcher</td>
<td>Leave Blank</td>
<td>Leave Blank</td>
</tr>
<tr>
<td>Group</td>
<td>Leave Blank</td>
<td>Leave Blank</td>
</tr>
</tbody>
</table>
**Worksheet for Multiple Service Rates**

1. Answer the questions by completing the GREEN cells starting in Section I for all services.
2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers.

---

**Program These Rates Into Your Medicaid Encounter Data**