

SECTION IX- COMPLETE APPLICATION CHECKLIST OF DOCUMENTS

The following documents are to be attached to this application.

X	NJT Attachment A	Organizational Chart
N/A	NJT Attachment B	Vendor Organization Chart
N/A	NJT Attachment C	Policies and Procedures same as submitted in 2016
N/A	NJT Attachment D	CHSTP Addendums/Updates
N/A	NJT Attachment E	CHSTP Written Agreements
X	NJT Attachment F	Contracts Program receives funds from (if applicable)
N/A	NJT Attachment G	Indirect Cost Plan
X	NJT Attachment H	Vehicle Inventory (use spreadsheet provided)
N/A	NJT Attachment I	Non-Vehicle Inventory (5311 only if applicable, use spreadsheet provided)
X	NJT Attachment J	Marketing Materials
X	NJT Attachment K1	Notarized Copies of Public Notice
X	NJT Attachment K2	List of Organizations for Public Hearing Notice
X	NJT Attachment K3	Large Print Vehicle Notice
X	NJT Attachment K4	Library Public Notice Information
X	NJT Attachment K5	Website Screen Shot Public Notice
X	NJT Attachment K6	CAC Meeting Public Notice
<input type="checkbox"/>	NJT Attachment K7	Public Hearing Transcript
X	NJT Attachment L	SCDRTAP Application Cover Letter
X	NJT Attachment M	SCDRTAP Resolution
N/A	NJT Attachment N	Opinion of Council Letter (5311 only)
N/A	NJT Attachment O	ADA Certification of Equivalent Service
N/A	NJT Attachment P	Capital Public Notice (5311 only if applicable)
N/A	NJT Attachment Q	5333(b) Certification Letter (5311 only)
N/A	NJT Attachment R	5311 Application Cover Letter
N/A	NJT Attachment S	5311 Resolution
N/A	NJT Attachment T	Innovative Grant Map (5311 only if applicable)

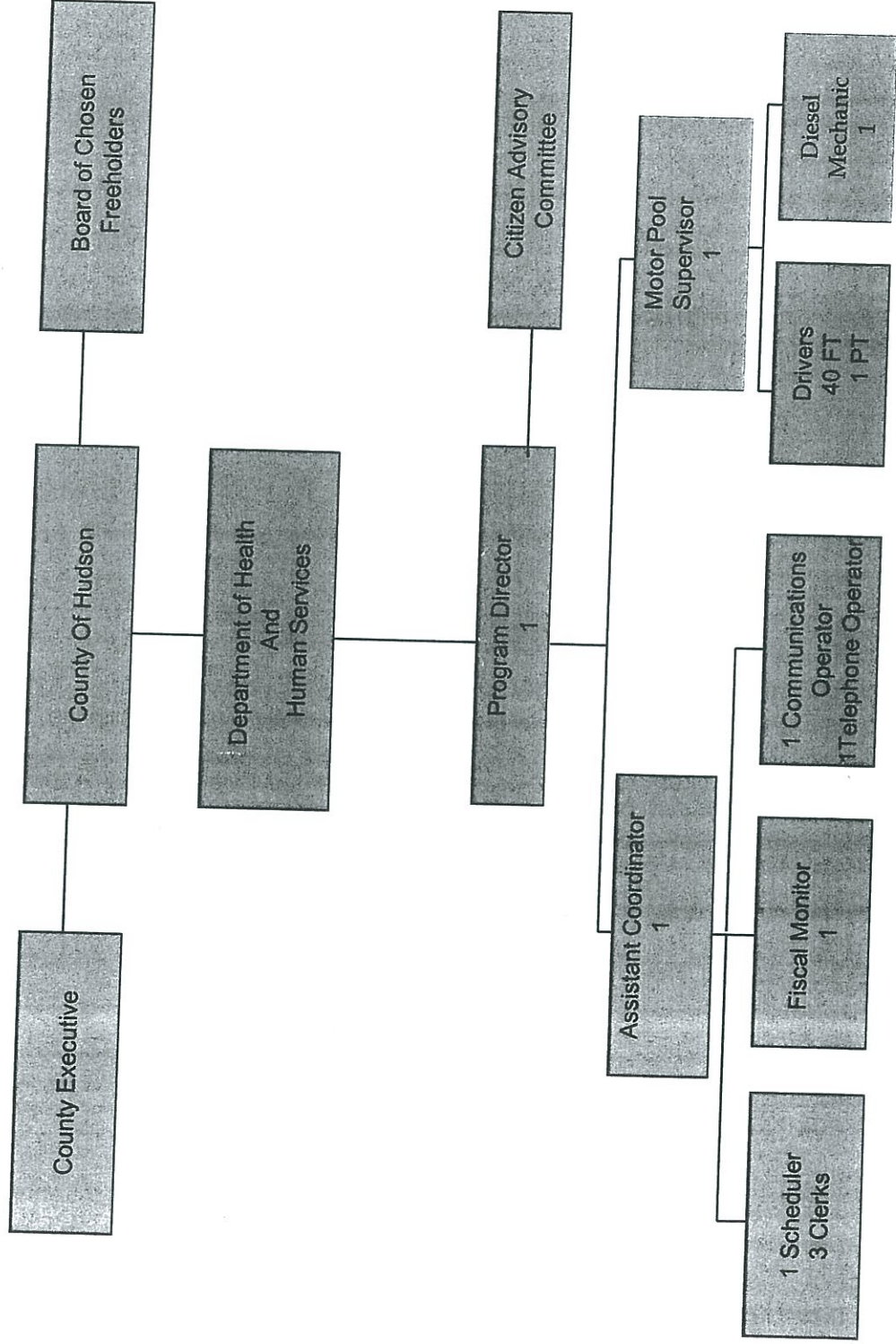
Excel Spreadsheet attachments

- 2015 Actual Expenditures by funding source
- 2017 Proposed budget by funding source
- Vehicle Inventory - H
- Non-Vehicle Assets

Addendums:

- Addendum C: Transportation Providers and Labor Representatives Spreadsheet 2017 is attached separately

TRANSCEND ORGANIZATIONAL CHART



**COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A**

Resolution #:
726-12-2015

NOTE: A separate Annex A must be completed for each funded program.

AGENCY NAME: Hudson County **PROGRAM NAME:** TRANSCEND **PROGRAM #:** 401

PART 1: GENERAL AGENCY INFORMATION

SECTION 1: IDENTIFICATION

Contract Ceiling: \$246,381 Effective Dates: 1/1/2016 to 12/31/2016

Provider Agency: Hudson County TRANSCEND

Mailing Address: 830 Bergen Ave
Jersey City, NJ 07306

Federal Identification #: 226002443

Charitable Registration #: n/a

Type of Corporation: () Non-Profit () Profit (x) Public

Chief Executive Officer: Thomas DeGise, County Executive

Address: 583 Newark Ave.
Jersey City, NJ Telephone #: 201-795-6402

Official Notices relevant to this contract should be sent to:

Name: Kevin Crimmins

Title: Director

Address: 830 Bergen Ave Email: kcrimmins@hcnj.us

Jersey City, NJ 07306 Telephone # 201-369-4320

Please List Authorized Signatories for contract documents, checks, and invoices:
(Provide full name and title of each signatory)

Name Kevin Crimmins

Title Director

Name Jim Ostaszewski

Title Assistant Coordinator

**COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A**

Resolution #:
726-12-2015

AGENCY NAME: Hudson County PROGRAM NAME: TRANSCEND PROGRAM #: 401

PART 1: GENERAL AGENCY INFORMATION

SECTION 2: ESSENTIAL AGENCY DOCUMENTS

The following two (2) pages list the essential documents, which must be part of your official files and must be updated as they change. Please use the following numerical codes to indicate the names of each document. Documents that are followed by an asterisk must be current and submitted as a part of this contract package. If a particular document is pending, list the Anticipated Submission Date in the appropriate space.

- (1) *Document is unchanged and was submitted to Hudson County - DHHS.*
 (2) *Document is changed and attached.*
 (3) *Current document pending or not yet submitted to Hudson County - DHHS.*
 (4) *Not applicable.*

<u>Status</u>	<u>Name of Document</u>	<u>Anticipated Submission Date</u>
<u>Permanent Documents</u>		
()	Certificate of Incorporation	
()	Tax Exempt Certificate or Letter	
()	Agency Wide Organizational Chart	
()	Local Certificate of Occupancy	
()	New Jersey Certificate of Good Standing	
<u>Annual and Periodic Documents</u>		
()	Annual Report (if available)	
()	List of Names, Addresses and Terms of Current Board Members	
()	Current Audit	
()	Current IRS 990 Form (Private Non-Profit Agencies only)	
()	Lease or Mortgage (s)	
()	Consultant Agreement (s)	
()	Job Descriptions	
()	License to Provide Service, if necessary	
()	Insurance Summary	

Affiliation Agreements: List any existing affiliation agreements, MOUs or MOAs below:

<u>Affiliate</u>	<u>Program</u>
<hr/>	<hr/>

I certify, as an authorized representative of the provider agency, that the information contained in this section is current, complete and in accordance with the appropriate existing Federal, State, or Local regulations or/and policies.

BY: _____
(Signature)

Title: Transcend Director
(Print Title)

Kevin Crimmins
(Print Name)

Date: _____

**COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A**

AGENCY NAME: Hudson County PROGRAM NAME: TRANSCEND PROGRAM #: 401

SECTION 1A: PROGRAM SUMMARY SHEET

Agency Name: Hudson County Federal ID #: 22-6002443
Program Name: TRANSCEND

Site Address(es): 830 Bergen Ave

Jersey City, NJ 07306

Definition of Unit of Service: One Way Trip Unit Cost: \$25.50

Estimated Number of Units to be Provided: 28,986

Service Catchment Areas: Hudson County

Program Component Capacity: Transportation of Seniors on County Vehicles

Target Population (specify age, demographic and geographic information):

We will provide transportation for people with disabilities or 60 years of age and older, who are residents of Hudson County.

Provide a brief overview of the program:

We will provide transportation for people with disabilities or 60 years of age and older, who are residents of Hudson County, to locations in Hudson County. We provide trips for employment, nutrition, recreation, shopping, education and medical appointments. The service is curb to curb with accommodations for people with disabilities. All of our vehicles are accessible.

COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A

Resolution #:
726-12-2015

AGENCY NAME: Hudson County PROGRAM NAME: TRANSCEND PROGRAM #: 401

PART 2: PROGRAM COMPONENT INFORMATION

SECTION 1B: PROGRAM SUMMARY SHEET (use if applicable)

Referrals may be processed through the following Provider Agency Representative.

Name/Position: TRANSCEND Reservation Clerks

Phone #: 201-369-4320

Describe the Referral/Admissions Procedure for this program component:

Prior to using the service an eligible consumer must register with a reservation clerk. Registration is done via telephone. Any person claiming to be disabled that is under the age of 60 must present a note from their doctor stating their disability.

The following documents are required to process a referral:

Registrations are done via telephone. If a person is claiming to be disabled and under the age of 60 they must provide a letter from their doctor advising what their disability is.

Indicate which documents must accompany the client upon admission:
See above

COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A

Resolution #:
726-12-2015

AGENCY NAME: Hudson County PROGRAM NAME: TRANSCEND PROGRAM #: 401

PART 2: PROGRAM COMPONENT INFORMATION

SECTION 2: PROGRAM COMPONENT CALENDAR

Complete Section 2 for each Program Component.

Program: 401 Type of Service: Transportation

Specify hours of operation:

Monday through Friday 8AM to 8PM

Emergency Provisions:

n/a

Service will not be provided on the following days:

<u>H/T/C/ *</u>	<u>Occasion</u>	<u>Date(s)</u>
<u>Holiday</u>	<u>New Years Day</u>	<u>01/01/2016</u>
<u>Holiday</u>	<u>Thanksgiving</u>	<u>11/24/2016</u>
<u>Holiday</u>	<u>Christmas Observed</u>	<u>12/26/2016</u>

Mark each occasion either 'H' for a holiday, 'T' for a non-service training day or 'C' for closing other than holiday or training day.

**COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A**

Resolution #:
726-12-2015

AGENCY NAME: Hudson County PROGRAM NAME: TRANSCEND PROGRAM #: 401

Part 2: PROGRAM COMPONENT INFORMATION

SECTION 3: MONTHLY CONTRACT LEVEL OF SERVICE

Unit of Service: Transportation Unit Description: One Way Trip Unit Cost: \$25.50

(1) Contracted Month, Year	(2) Possible Services Days	(3) Approved 'H/T' Days	(4) Monthly Service	(5) Total Monthly Units
1 ST 2337	21	2	19	2337
2 ND 2337	21	1	20	4674
3 RD 2571	23	1	22	7245
4 TH 2454	21	0	21	9699
5 TH 2454	22	1	21	12153
6 TH 2571	22	0	22	14724
7 TH 2337	21	1	20	17061
8 TH 2693	23	0	23	19754
9 TH 2454	22	1	21	22208

Attachment F

10 TH 2337	<u>21</u>	<u>1</u>	<u>20</u>	<u>24545</u>
11 TH 2104	<u>22</u>	<u>4</u>	<u>18</u>	<u>26649</u>
12 TH 2337	<u>22</u>	<u>1</u>	<u>20</u>	<u>28986</u>
Annual Totals 28986	<u>261</u>	<u>13</u>	<u>247</u>	<u>28986</u>

1. Fill in the monthly projected number of units
2. Fill in the number of service days for each month
3. Fill in the number of holidays and/or training days that will result in program closings
4. Fill in the adjusted number of monthly service days
5. Multiply column 1 (Projected Units) by column 4 (Adjusted Service Days) to get the total monthly units

**COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
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Resolution #:
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AGENCY NAME: Hudson County **PROGRAM NAME:** TRANSCEND **PROGRAM #:** 401

SECTION 4: SERVICE OUTCOMES (Attach additional pages if necessary)

For each program component please identify goals, objectives, activities, outcomes, supporting documentation and reporting timeframes using the following definitions and template. Speak to the overarching impact that services will have on recipients over a period of time that may reach beyond the contract term. Please use the form on the following page to report this information.

GOALS: Goals articulate the desired results or end point that Hudson County can expect to be achieved through the provision of contracted services. Goal statements speak to the overarching impact that services will have on recipients over a period of time that may reach beyond the contract term.

OBJECTIVES: Objectives define services in qualitative terms. They detail the purpose of program activities and impart a clear understanding of contracted services. Objectives are short term milestones to be achieved during the contract period; they are easy to understand, specific, attainable and they reflect the overarching goals of the program component.

SERVICE ACTIVITIES: Service Activities specify the tasks performed to achieve the identified goals and objectives. They reflect program operations and functionally define contracted services. All service activities are tangible, observable and measurable.

OUTCOMES: Outcomes quantify the program's impact on the target population. They are tied directly to program goals rather than to each objective or service activity. Benchmarks are established to indicate successful program performance in achieving the specified goals. Please indicate your methods for documenting progress toward your identified goals and objectives.

**COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE ON AGING
ANNEX A**

Resolution #:
726-12-2015

AGENCY NAME: Hudson County PROGRAM NAME: TRANSCEND PROGRAM #: 401

SECTION 4: SERVICE OUTCOMES

GOALS	OBJECTIVES (Including number to be served)	SERVICE ACTIVITIES	OUTCOMES	TIME FRAME
To provide 28,986 trips during the year of 2016.	We will provide transportation for medical appointments, employment, education, nutrition, recreation and shopping. We anticipate providing service to approximately eight hundred eligible consumers.	We project that we will provide 2416 trips per month.	Monthly reports will be submitted of the trips provided.	1/1/2016 thru 12/31/2016

Attachment F



State of New Jersey

DEPARTMENT OF MILITARY AND VETERANS AFFAIRS
POST OFFICE BOX 340
TRENTON, NEW JERSEY 08625-0340



CHRIS CHRISTIE
Governor
Commander-in-Chief

MICHAEL L. CUNNIFF
Major General
The Adjutant General

4 March 2016

Mr. Kevin Crimmins
County of Hudson
Hudson County Department of Health and Human Services
830 Bergen Avenue
Jersey City, NJ 07306

Dear Mr. Crimmins:

Enclosed are two sets of contracts that are being negotiated between the NJ Department of Military & Veterans Affairs and Hudson County, Hudson County Department of Health and Human Services Property to provide transportation to veterans for medical purposes or appointments at the VA regional offices. The term of the contract is one year, 1 July 2016 to 30 June 2017 with a limit of \$15,000. The enclosed documents include:

- A. Standard Provider Agreement
- B. Transportation Grant - Annex A
- C. Annex B-2: Contract Rate Information Form

Please complete the required information, sign and return all copies to me no later than June 15, 2016. If you have any questions, call me at (609) 530-6949.

Sincerely,

Patricia Richter
Chief
Veterans Benefits Bureau

New Jersey Department of Military and Veterans Affairs

Transportation Grant Annex A

AGENCY INFORMATION

Name of Agency: Hudson County Department of Health & Human Services

Street Address: 830 Bergen Avenue, 8A City: Jersey City State: NJ

County: Hudson ZIP: 07306

Agency Executive Director/CEO: Thomas A. DeGise, County Executive

Project Title: Transcend Veterans Program

Program Administrator (if known): Kevin Crimmins

PROJECT INFORMATION

Number of trips to be provided @ 100% reimbursement of contract: 1,000.

Minimum number of trips to be provided @ 90% of contract 900 (Reimbursement will be reduced if at least 90% of the rides are not provided. Counties will be notified after this Departments Mid-Year review in February.)

FUNDING INFORMATION

Total State Funds Requested: \$ 15,000.

Total Agency Funds/In-Kind Match: \$ N/A

Total Operating Budget (Sum of State Funds Requested and Agency Funds/In-Kind Match):

\$ 15,000

SIGNATURE OF AGENCY EXECUTIVE DIRECTOR/CEO

DATE

Thomas A. DeGise, County Executive

Attach additional sheets if needed.

1. Provide a brief narrative summary describing existing programs operated by your agency.

The Office of Senior Citizen and Disabled Resident Transportation Assistance provides transportation for seniors, disabled residents and Veterans residing in Hudson County. This program provides for demand response and subscription trips for medical, employment, nutritional, shopping, recreational and educational needs for eligible persons. This service is primarily provided to locations within the County but does provide limited service to out of County destinations. Some of the trip destinations include Beth Israel, Clara Maas, St Michael's, University Hospital, all in Essex County, and Hackensack Hospital in Bergen County. We also provide transportation to the Veterans Administration Hospital in East Orange and Veterans Regional Offices in Newark three times a week.

County of Hudson

AGENCY

Transcend Veterans

PROJECT TITLE

Attach additional sheets if needed.

1. List below the existing problem(s) or need(s) citing specific information or resources which document the reason for your transportation program. Provide demographic information. Report how you assessed need and what other programs or services exist in your geographic area. No rationale about the general benefits of the transportation program is necessary.

Hudson County is based in an urban area with one of the largest senior and disabled populations in New Jersey. In the last two years we have experienced a reduction of public transportation services and discontinued bus lines, within the County. Transcend, the County's para-transit system, is challenged to accommodate all requests for services due to a reduction in funding. All funding sources are being explored to address the transportation needs of the County.

2. Please describe in detail the type of transportation services that will be provided to eligible clients.

Service will be provided on mini buses that accommodate a minimum of eight ambulatory and two wheelchair consumers. All Transcend drivers have a CDL-B license, with a passenger endorsement. All drivers are required to receive Defensive Driver Training every two years and Passenger Assistance Training every three years. Upon request, veterans are transported to facilities within Hudson County on a daily basis. Trips to the Veterans Hospital in East Orange are scheduled for Tuesday, Wednesday and Thursday of each week. Requests for service can be made by calling 201-369-4320, Monday through Friday 9:00AM to 4:00PM, with 72 hour notification.

Attach additional sheets if needed.

1. Please describe in narrative the method to be used for identifying clients.

All clients making application for service will be pre-screened through the Veterans Service Office, 115 Christopher Columbus Dr. Jersey City, NJ and must provide copy of their DD-214 for review.

Please translate the above narrative into measurable objectives, strategies, and time frames.

<u>OBJECTIVES</u>	<u>STRATEGIES</u>	<u>TIME FRAME</u>
1. To provide transportation to Veterans for medical Appointments at their doctor's offices and clinics.	Work with local & County Veterans services offices to screen applicants for eligibility.	7-1-2016 to 6-30-2017
2. Continue to provide service on, Tues. Wed. Thurs., to the VA Hospital in East Orange for all Hudson County Veterans.	Coordinate a schedule to accommodate the appointment times of those veterans seeking transportation for medical appointments.	7-1-2016 to 6-30-2017

Attach additional sheets if needed.

1. Please describe in narrative the method to be used in providing transportation services to eligible clients.

Transcend provides non emergency curb to curb transportation service to eligible consumers, with passenger assistance by the driver if needed. The driver is not permitted to enter the client's home. Service is provided on a first come first serve basis. Scheduling is coordinated through a central dispatch office and consumers may contact the telephone number , 201-369-4320 to make reservations. Reservation are accepted Monday through Friday from 8AM to 4PM. Regular transportation service hours are 8AM through 7PM Monday through Friday.

Please translate the above narrative into measurable objectives, strategies, and time frames.

OBJECTIVES

The object is to provide 1000 trips to eligible veterans transportation to appointments in a timely and efficient manner.

STRATEGIES

Transcends strategy is to coordinate transportation requests from eligible veterans by collaborating with local, county & state veterans offices and community providers.

TIME FRAME

7-1-2016 to 6-30-2017

County of Hudson

AGENCY

Transcend Veterans

PROJECT TITLE

Attach additional sheets if needed.

1. Please describe in narrative the method by which the program will be internally evaluated (i.e. measurement of Program Goals, consumer surveys, etc.).

The following metrics will be used to evaluate the program;

- Manifests are monitored on a daily basis for the number of trips, number of clients, number of cancellations and no shows.
- We have a Citizens Advisory Committee (CAC), consisting of 15 members, who are users of the service. The CAC convenes six times per year to discuss areas that need improvement and to ensure the program is delivering the necessary services.
- Performance monitoring is monitored daily. Consumer complaints are directly handled by the Program Coordinator or Assistant Coordinator to address issues.
- Service reports are submitted on a monthly basis Department of Veterans & Military Affairs, to report the number of Veterans served.
- Quality of service is determined by consumer feedback collected in annual surveys and day to day consumer feedback.

Please translate the above narrative into measurable objectives, strategies, and time frames.

OBJECTIVES

STRATEGIES

TIME FRAME

Monitoring of Program for effectiveness.

Monthly reporting is conducted to determine that the numbers of persons being served are met, and timely service is being provided.

7-1-2016 to 6-30-2017

Encourage consumer feedback

Encourage feedback through the Citizens Advisory Committee, annual consumer survey, personal interaction with consumers via telephone, and monitoring any complaints and feedback for the service being provided.

7-1-2016 to 6-30-2017

I, Thomas A. DeGise, as the Executive Director/CEO of Hudson County assures that the Transportation Service will meet the following program requirements:

I. LEVEL OF SERVICE

- A. The agency must submit, along with the Monthly Program Report, appropriate documentation which provides information relative to the services delivered. This information must include a detailed log report of the individuals served, scheduled trip dates, origin, destination, and trip calculation (number of one-way trips).
- B. Clients in need of transportation will be served on a first come, first serve basis.

II. PROGRAM GOALS

A. Program Goal #1

1. Method for Identifying Client – Clients shall be eligible for transportation service if all of the following criteria is met:
- a. Client must be a veteran, having served a minimum of 90 days of active military service other than for training in the armed forces of the United States, and having received a discharge other than dishonorable; or if the active military service was less than 90 days, client must have received a medical discharge;
 - b. Veteran's status is determined by review of the DD 214 form or by contacting a Veterans Service District Office.
 - c. Any individual serving as an aide to the veteran.

2. Ineligible Services

- a. In-county services for the elderly and handicapped population will not be supported through this program. It is the responsibility of the County's Special Transportation Program to serve the elderly and handicapped.

Exception: Counties that have VA Hospitals/Clinics located within their county, will be reimbursed for trips made to those facilities.

3. Transportation will be provided for the following services:

- a. VA facilities, i.e., hospitals, outpatient clinics, regional offices; to include State VSO Offices.
- b. Other medical services (e.g., hospital, clinics, private doctors);
- c. Exclusions: community services; employment/job training; pharmacies and all other facilities and services not listed in a & b above.

B. Program Goal #2

It is expected that most of the scheduled trips will be provided outside of the county, and in some instances, state lines (i.e. VA Hospital, Regional Offices).

C. Program Goal #3

This agency will conduct two consumer surveys to measure client satisfaction with the service, noting strengths and weaknesses. This survey shall be administered at six months and twelve months, following the start of the contract. A report detailing the results of these surveys will be sent to the Division of Veterans Services within one month of the conclusion of each survey.

III. MONITORING BY THE DIVISION OF VETERANS SERVICES

Transcend will make appropriate staff available when representatives from the Department of Military and Veterans Affairs conduct site visits to monitor contract compliance.

IV. REPORTING

- A. Program Evaluation – See Section II, C Program Goals #3.
- B. Monthly Expenditure Reports – shall be submitted by the 15th of each month for prior month activities. A State of New Jersey Payment Voucher (Vendor Invoice) shall also be submitted for approval by the Department of Military and Veterans Affairs.
- C. Monthly Program Reports – shall be submitted by the 15th of each month for the prior month's activities.

Payment Vouchers, Expenditure Reports, Contracts, Correspondence and questions related to the content or amount of the award should be addressed to:

**Patricia Richter
Department of Military and Veterans Affairs (DVP)
Eggert Crossing Road, PO Box 340
Trenton, NJ 08625-0340
(609) 530-6949/7052
Patty.Richter@njdmava.state.nj.us**

NEW JERSEY DEPARTMENT OF MILITARY AND VETERANS' AFFAIRS

PROVIDER AGREEMENT

Effective Date: July 1, 2016	Expiration Date: June 30, 2017	Contract Number: VL13T29
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Grant Amount: \$ 15,000.

The terms of this Contract have been read and understood by the persons whose signatures appear below. The parties agree to comply with the terms and conditions of the contract as set forth in the following agreement.

To be completed by Provider	
_____ (Signature)	_____ (Date)
Thomas A. DeGise	County Executive
_____ (Type/Print Name)	_____ (Title)
Hudson County	
_____ (Provider Agency)	

To be completed by State Agency	
_____ (Signature)	_____ (Date)
_____ (Type/Print Name)	_____ (Title)
_____ (State Agency)	

I attest that sufficient funds have been appropriated by State Legislature to cover the current state fiscal year portion of the contract.	
_____ State Agency Fiscal Officer	_____ (Date)

DMAVA/FD:AGRWL.doc (Revised 8/95)

CONTRACT effective as of the date recorded on the signature page between the signatory State Agency and the Provider Agency identified on the signature page.

WHEREAS the New Jersey Department of Military and Veterans' Affairs (the "State Agency") has been designated under the authority of N.J.S.A. 38A:3-2 et-seq., to administer or supervise the administration of veteran service programs and has, in turn, designated the State Agency to be directly responsible for the funding, implementation and administration of certain of such veteran service programs, including the program(s) covered by this Contract; and,

WHEREAS the State Agency desires that the Provider Agency provide services and the Provider Agency has agreed to provide services in accordance with the terms and conditions contained in this Contract;

THEREFORE the State Agency and the Provider Agency agree as follows:

1. DEFINITIONS

For the purposes of this document, the following terms, when capitalized, shall have meanings as stated:

Annex(es) means the attachment(s) to this document containing programmatic and financial information.

Contract means this document, the Annex(es), any additional appendices or attachments (including and approved assignments, subcontract or modifications) and all supporting documents. The Contract constitutes the entire agreement between the parties.

Notice means an official written communication between the State Agency and the Provider Agency. All Notices shall be delivered in person or by certified mail, return receipt requested, and shall be directed to the persons and addresses specified for such purpose in the Annex(es) or to such other persons as either party may designate in writing.

Termination means an official cessation of this Contract, resulting either from routine expiration or from action taken by the State Agency or the provider Agency, in accordance with the provisions contained in this Contract, to nullify the Contract prior to term.

2. BASIC OBLIGATIONS OF THE STATE AGENCY

2.01 Payment. As established in the Annex(es), payment for Contract services delivered shall be based on allowable expenditures or the specified rate per unit of service delivered. Such payment(s) shall be authorized by the State Agency in accordance with the time frames specified in the Annex(es). Total payments shall not exceed the maximum Contract amount, if any, specified in the Annex(es). All payments authorized by the State Agency under this Contract shall be subject to revision on the basis of an audit or audits conducted under Section 3.06 Audit or on the basis of any State Agency monitoring or evaluation of the Contract.

2.02 Referenced Materials. Upon written request of the Provider Agency, the State Agency shall make available to the Provider Agency copies of federal and State regulations and other material specifically referenced in this document.

3. BASIC OBLIGATIONS OF THE PROVIDER AGENCY

3.01 Contract Services. The Provider Agency shall provide services to eligible persons in accordance with all specifications contained in this Contract.

3.02 Reporting. The Provider Agency shall submit to the State Agency programmatic and financial reports on forms provided by the State Agency. The reporting frequency and due date(s) are specified and sample forms to be used are included in the Annex(es).

3.03 Compliance with Laws. The Provider Agency agrees in the performance of this Contract to comply with all applicable federal, state and local laws, rules and regulations (collectively "laws"), including but not limited to the following: state and local laws relating to licensure; federal and state laws relating to safeguarding of client information; the federal Civil Rights Act of 1964 (as amended); P.L. 1975, Chapter 127, of the state of New Jersey (N.J.S.A. 10:5-31 et seq.) and associated executive orders pertaining to affirmative action and nondiscrimination in public contracts; the federal Equal Employment Opportunity Act; Section 504 of the federal Rehabilitation Act of 1973 pertaining to nondiscrimination on the basis of handicap, and regulations thereunder. Failure to comply with the laws, rules and regulation referenced above shall be grounds to terminate this Contract.

If any provisions of this Contract shall conflict with any federal or state law(s) or shall have the effect of causing the State to be ineligible for federal financial participation in payment for Contract services, the specific Contract provision shall be considered amended or nullified to conform to such law(s). All other Contract provisions shall remain unchanged and shall continue in full force and effect.

3.04 State Agency Policies and Procedures. In the administration of this Contract, the Provider Agency shall comply with all applicable policies and procedures issued by the State Agency including, but not limited to the policies and procedures contained in the Department's Contract Reimbursement Manual (as from time to time amended) and the Department's Contract Policy and Information Manual (as from time to time amended). Failure to comply with these policies and procedures shall be grounds to terminate this contract.

3.04 A. Equipment Policies and Procedures. Title to all equipment purchased in whole or in part under a contract is held by the Provider Agency. The State, however, maintains an equitable interest in all such equipment. The Provider Agency shall maintain adequate insurance coverage to protect against losses and adequate maintenance procedures to keep the equipment in good condition. The Provider Agency shall be responsible for reimbursing the State for damage to equipment which exceeds normal wear and tear. When the equipment no longer becomes useful to the Provider Agency, and the State Agency has an interest in the equipment and has further need of the equipment, the Provider Agency will offer the equipment back to the State Agency. In cases where the State Agency has no further need of the equipment, selling procedures must be established which would provide for competition and result in the highest possible return. Ten percent of the total proceeds may be retained by the Provider Agency for selling and handling expenses. The Provider Agency shall comply with additional equipment policies under Section 3.04 State Agency Policies and Procedures.

3.05 Financial Management System. The Provider Agency's financial management system shall provide for the following:

- A) accurate, current and complete disclosure of the financial results of this Contract and any other contract, grant, program or other activity administered by the Provider Agency;

- B) Records adequately identifying the source and application of all Provider Agency funds and all funds administered by the Provider Agency. These records shall contain information pertaining to all contract and grant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays and income;
- C) Effective internal and accounting controls over all funds, property and other assets. The Provider Agency shall adequately safeguard all such assets and shall ensure that they are used solely for authorized purposes;
- D) comparison of actual outlays with budgeted amounts for this Contract and any other contract, grant, program or other activity administered by the Provider Agency;
- E) accounting records supported by source documentation;
- F) procedures to minimize elapsed time between any advance payment issued and the disbursement of such advance funds by the Provider Agency;
- G) procedures consistent with the provisions of any applicable State Agency policies and procedures for determining the reasonableness, allowability and allocability of the costs under this Contract.

3.06 Audit. At any time during the Contract term, the Provider Agency's overall operations, its compliance with specific Contract provisions, and the operations of any assignees or subcontractors engaged by the Provider Agency under Section 5.02 Assignment and Subcontracts may be subject to audit by the State Agency, by any other appropriate unit or agency of the State or federal government, and/or by a private firm or firms retained or approved by the State Agency for such purpose.

Whether or not such audits are conducted during the Contract term, a final financial and compliance audit of Contract operations, including the relevant operations of any assignees or subcontractors, may be conducted after contract termination. The Provider Agency is subject to audit up to four years after termination of the contract. If any audit has been begun but not completed or resolved before the end of the four year period, the Provider Agency continues to be subject to such audit until it is completed and resolved.

The State Agency may require submission of the Provider Agency's annual organization-wide audit.

Audits shall be conducted in accordance with generally accepted auditing standards as specified in the Statement on Auditing Standards issued by the American Institute of Certified Public Accountants and Standards for Audit of Governmental Organizations, Programs Activities and Functions issued by the Comptroller General of the United States.

4. Termination

4.01 Termination by Provider Agency. The Provider Agency may terminate this Contract upon 60 calendar days advance notice to the State Agency. If the contract is terminated under this section, the Provider Agency shall settle all accounts with the State Agency in the manner specified by the State Agency and shall be subject to a final audit under Section 3.06 Audit.

4.02 Termination for Cause. If the Provider Agency is not or has not been in compliance with the provision(s) of this contract, the State Agency may, by notice, place the Provider Agency in default of the contract and, in accordance with State Agency policies and procedures, may reduce contract funding or terminate the contract.

4.03 Reduction or Termination Due to Fiscal Constraints. Anything to the contrary in this contract notwithstanding, the parties recognize and agree that the State Agency's ability to honor the terms and conditions of this contract is contingent upon receipt of federal funds and/or appropriations of the state Legislature. If during the term of this contract, therefore, the federal and/or the state government reduces its allocation to the State Agency, the State Agency reserves the right, upon notice to the Provider Agency, to reduce or terminate the contract.

5. Miscellaneous

5.01 Application of New Jersey Law. This contract shall be governed, construed and interpreted in accordance with the laws of the State of New Jersey including the New Jersey Contractual Liability Act (N.J.S.A. 59:13-1 et seq.)

5.02 Assignment and Subcontracts. No rights or obligations of the Provider Agency under this contract may be assigned or subcontracted without the prior approval of the State Agency. All approved assignments and subcontracts shall become part of this contract, and the Provider Agency shall bear full responsibility, without recourse to the State (including the State Agency), for their performance. The Provider Agency shall forward copies of all assignment and subcontract documents to the State Agency and shall retain copies of them on file together with the contract.

5.03 Client Fees. Other than as provided for in the Annex(es), the Provider Agency shall impose no fees or charges of any kind upon recipients of contract services.

5.04 Insurance. The Provider Agency shall maintain adequate insurance coverage. The State shall be included as an additional named insured on any insurance policy applicable to this contract. Should the Provider Agency fail to pay any premium on any insurance policy when due, the State Agency may pay the premium and, upon notice to the Provider Agency, reduce payment to the Provider Agency by the amount of the premium payment.

5.05 Indemnification. The Provider Agency shall defend, indemnify and otherwise save harmless the state of New Jersey, its agencies, departments, bureaus, boards, officials and employees from any and all claims or actions at law, whether for personal injury, property damage or liabilities, including the costs of defense (a) which arise from acts or omissions, whether negligent or not, of the Provider Agency or its agents, employees, servants, subcontractors, material suppliers or others working for the Provider Agency, irrespective of whether such risks are within or beyond the control of the Provider Agency, or (b) which arise from any failure to perform the Provider Agency's obligations under this contract or any improper performance.

Notwithstanding the Provider Agency's responsibilities outlined above in this section, the State reserves the right to provide its own attorney(s) to assist in the defense of any legal actions which may arise as a result of this contract.

- 5.06 *Statement of Non-Influence.*** No person employed by the state of New Jersey has been or will be paid any fee, commission, or compensation of any kind or granted any gratuity by the Provider Agency or any representative thereof in order to influence the awarding or administration of this contract.
- 5.07 *Exercise of Rights.*** A failure or a delay on the part of the State Agency or the Provider Agency in exercising any right, power or privilege under this contract shall not waive that right, power or privilege. Moreover, a single or a partial exercise shall not prevent another or a further exercise of that or of any other right, power or privilege.

DMAVA (REV 03/00)

STATE OF NEW JERSEY DEPARTMENT OF MILITARY & VETERANS AFFAIRS
ANNEX B – 2: CONTRACT RATE INFORMATION SUMMARY

PROVIDER Hudson County – Hudson County Department of Health & Human Services DATE July 1, 2016

CONTRACT # VL13T29

THIS ANNEX B-2 SUPERSEDES THE ANNEX B-2

DATED: _____

FEDERAL I.D. # 226002443-45

SECTION I: RATES

PROGRAM/SERVICE	UNIT OF SERVICE	SERVICE UNIT*	TYPE OF RATE	RATE PER		EFFECTIVE PERIOD	
				FROM	TO	FROM	TO
Veterans Transportation	One-way trips	See Note*	Non-Cost related			7/1/16	6/30/17
			Installment Payment				

Note*

Level of service at 100% 1,000 one way passenger trips shall be provided during the contract term and at least a minimum of 900 (90%) one way trips. Provider will be paid in twelve monthly installments of \$ 1,250.00.

Reimbursement will be reduced if we project that at least 90% of the rides will not be provided. Counties will be notified after our Mid-Year review in February, if their contracts will be reduced.

THESE RATES ARE SUBJECT TO THE CONDITIONS IN SECTION II AND III

SECTION II: CONTRACT STIPULATIONS

- A. The service capacity of the Provider Agency is _____ for the term of this contract.
(Check here if not applicable: X.)
- B. The Provider Agency shall submit to the Department a () monthly, () quarterly, () semi-annual, () annual report certifying to the actual program expenditures consistent with the Provider's approved budget set forth in the Contract Budget. This report is due _____ days after the end of the reporting period. (Check here if periodic expenditure reporting is not applicable: (X).)
- C. The Provider Agency shall submit to the Department a (X) monthly, () quarterly, () semi-annual, () annual report certifying to the actual unit of service delivered during the reporting period. This report is due 15 days after the end of the reporting period.
(Check here if periodic level as service reporting is not applicable: ____.)
- D. Other:

STATE OF NEW JERSEY DEPARTMENT OF MILITARY & VETERANS AFFAIRS
ANNEX B – 2: CONTRACT RATE INFORMATION SUMMARY

PROVIDER Hudson County— Hudson County Department of Health & Human Services DATE: July 1, 2016

CONTRACT # VL13T29

SECTION III: GENERAL

- A. **Limitations:** Use of the rate(s) contained in this Annex is subject to any statutory or administrative limitations. Acceptance of the rate(s) agreed to herein is predicated on the condition that no information furnished by the Provider Agency and used in the establishment of the rate(s) is subsequently found to be materially incomplete or inaccurate. In addition, if the rate(s) agreed to herein was/were calculated based on costs contained in the Contract Budget (Annex B), acceptance of the rate(s) is predicated on the conditions that: 1) no costs other than the Provider Agency costs were included in the Annex B as finally accepted; 2) all costs reflected in the Contract's Reimbursable Ceiling are allowable under the governing cost principles; 3) similar types of costs were accorded consistent accounting treatment.
- B. **Types of Rates:**
1. **Provisional:** A provisional rate is a temporary or interim rate and is subject to adjustment on the basis of a final rate calculated when the actual costs are reported.
 2. **Fixed:** A fixed rate is a permanent rate, not subject to adjustment, which is agreed to for a specified future period, usually a year.
- C. **Notification of State Agencies:** Copies of this document may be furnished to other state agencies as a means of notifying them of the information it contains.
- D. **Contract Amount:** \$ 15,000

SECTION IV: SIGNATURES

BY THE PROVIDER AGENCY

BY THE DIVISION

Signature

Signature

Thomas A. DeGise
Name

Name

Hudson County Executive
Title

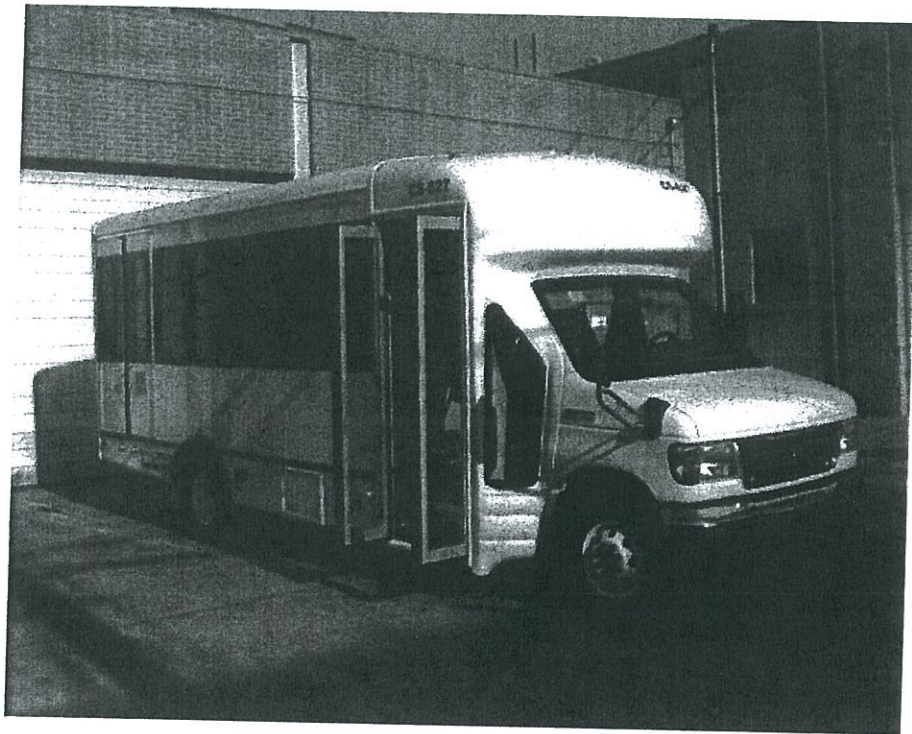
Title

Date

Date

Vehicle	License Plate	VIN	Mileage	Year Purchased	Funding Source	Make	Model	Vehicle Type	Vehicle Cost	Grant Year	Location	Condition	In Service Date	Projected Retirement Date	Fuel	Floor Plan	Accessable	Other	Month Reg. Due	Year
251	H193CG	1FDS35F2X2HA09393	161200	2002	SCRD TAP	FORD	E350	Minibus	unknown	unknown	Duncan Ave	Fair	2002	2014	Diesel	8	2		1	2017
253	N447CG	1FDS35P15H01215	96919	2006	SCRD TAP	FORD	E350	Minibus	unknown	unknown	Duncan Ave	Fair	2006	2016	Diesel	6	2		7	2017
255	N455CG	1FDS35P05H01223	106354	2006	SCRD TAP	FORD	E350	Minibus	unknown	unknown	Duncan Ave	Fair	2006	2016	Diesel	6	2		7	2017
261	N453CG	1FDS35P55H01221	129665	2006	SCRD TAP	FORD	E350	Minibus	unknown	unknown	Duncan Ave	Fair	2006	2016	Diesel	6	2		7	2017
262	U690CG	1FD3E35P28D0B57339	99966	2009	SCRD TAP	FORD	E350	Minibus	\$53,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	10	2		10	2014
263	U692CG	1FD3E35P78D0B57336	93183	2009	SCRD TAP	FORD	E350	Minibus	\$53,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	10	2		10	2014
264	U687CG	1FD3E35P98D0B57337	92593	2009	SCRD TAP	FORD	E350	Minibus	\$53,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	10	2		10	2014
265	U691CG	1FD3E35P08D0B57338	84045	2009	SCRD TAP	FORD	E350	Minibus	\$53,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	10	2		10	2014
266	U688CG	1FD3E35P98D0B57341	83740	2009	SCRD TAP	FORD	E350	Minibus	\$53,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	10	2		10	2014
267	U689CG	1FD3E35P98D0B57340	97999	2009	SCRD TAP	FORD	E350	Minibus	\$53,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	10	2		10	2014
268	U694CG	1FD3E35P18D0B57381	71388	2009	SCRD TAP	FORD	E350	Minibus	\$51,000.00	2009	Duncan Ave	Bad Engine	2009	2019	Diesel	10	2		10	2014
269	U689CG	1FD3E35P98D0B57340	90851	2009	SCRD TAP	FORD	E350	Minibus	\$51,000.00	2009	Duncan Ave	Bad Engine	2009	2019	Diesel	8	2		10	2014
270	U695CG	1FD3E35P38D0B57382	80854	2009	SCRD TAP	FORD	E350	Minibus	\$51,000.00	2009	Duncan Ave	Bad Engine	2009	2019	Diesel	8	2		10	2014
271	U696CG	1FD3E35P58D0B57383	84459	2009	SCRD TAP	FORD	E350	Minibus	\$51,000.00	2009	Duncan Ave	Bad Engine	2009	2019	Diesel	8	2		10	2014
272	U698CG	1FD3E35P78D0B57384	81710	2009	SCRD TAP	FORD	E350	Minibus	\$51,000.00	2009	Duncan Ave	Bad Engine	2009	2019	Diesel	8	2		10	2014
273	U697CG	1FD3E35P98D0B57385	94841	2009	SCRD TAP	FORD	E350	Minibus	\$51,000.00	2009	Duncan Ave	Fair	2009	2019	Diesel	8	2		10	2014
274	Y101CG	1FDEE3P2ADA21077	80245	2010	SCRD TAP	FORD	E-350	Minibus	\$53,000.00	2010	Duncan Ave	Fair	2010	2020	Diesel	8	2		10	2014
275	W847CG	1FDEE3FPADA21073	83346	2010	SCRD TAP	FORD	E-350	Minibus	\$53,000.00	2010	Duncan Ave	Fair	2010	2020	Diesel	8	2		10	2014
276	W848CG	1FDEE3FPADA21074	72440	2010	SCRD TAP	FORD	E-350	Minibus	\$53,000.00	2010	Duncan Ave	Fair	2010	2020	Diesel	8	2		10	2014
277	W849CG	1FDEE3FPADA21075	73574	2010	SCRD TAP	FORD	E-350	Minibus	\$53,000.00	2010	Duncan Ave	Bad Engine	2010	2020	Diesel	10	2		10	2014
278	Y100CG	1FDEE3FPADA21076	79195	2010	SCRD TAP	FORD	E-350	Minibus	\$53,000.00	2010	Duncan Ave	Good	2010	2020	Diesel	10	2		1	2016
279	Y107CG	1FDEE3P9ADA21075	73802	2009	SCRD TAP	FORD	E-350	Minibus	unknown	2009	Duncan Ave	Good	2010	2020	Diesel	10	2		1	2016
280	16-1394	1FDEE3P9ADA21076	64512	2011	5310	FORD	E-350	Minibus	\$53,000.00	2007	Duncan Ave	Good	2011	2021	Gas	12	2		2	2016
281	16-1393	1FDEE3P9ADA21077	58745	2011	5310	FORD	E-350	Minibus	\$53,000.00	2007	Duncan Ave	Good	2011	2021	Gas	12	2		2	2016
282	16-1421	1FDEE3P9ADA21078	41117	2011	5310	FORD	E-350	Minibus	\$53,000.00	2008	Duncan Ave	Good	2011	2021	Gas	12	2		9	2014
283	Z-659CG	1FDWE3P46DA68690	99922	2006	SCRD TAP	FORD	E-350	Minibus	unknown	unknown	Duncan Ave	Excellent	2011	2021	Gas	18	2		10	2014
284	Z354CG	1GB3G2BL3C1133740	56407	2012	SCRD TAP	CHEVY	DURAN	Minibus	\$53,000.00	2012	Duncan Ave	Excellent	2012	2022	Diesel	8	1		11	2014
285	CG8ABE	1GB3G2BL3C1133740	56407	2012	SCRD TAP	CHEVY	DURAN	Minibus	\$53,000.00	2012	Duncan Ave	Excellent	2012	2022	Diesel	10	2		2	2015
286	16-1322*	1FD4E45P48D0B03244	48628	2008	5310	FORD	E-450	Minibus	\$53,000.00	2006	Duncan Ave	Fair	2008	2018	Diesel	10	2		2	2015
287	16-1391	1FD4E45P48D0B03244	41441	2011	5310	FORD	E-450	Minibus	\$46,790.00	2008	Duncan Ave	Good	2011	2021	Gas	12	2		3	2016
288	16-1461	1FD4E45P48D0B03244	38817	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		3	2016
289	16-1580	1FD4E45P48D0B03244	36976	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		5	2016
290	16-1566	1FD4E45P48D0B03244	33024	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		8	2016
291	16-1579	1FD4E45P48D0B03244	34540	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		8	2016
292	16-1485	1FD4E45P48D0B03244	38451	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		8	2016
293	16-1486	1FD4E45P48D0B03244	32553	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		8	2016
294	16-1596	1FD4E45P48D0B03244	30053	2013	5310	FORD	E-450	Minibus	\$46,790.00	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		9	2016
295	16-1540	1FD4E45P48D0B03244	24173	2014	5310	FORD	E-450	Minibus	\$46,790.00	2010	Duncan Ave	Excellent	2013	2023	Gas	18	2		9	2016
296	16-1681	1FD4E45P48D0B03244	35693	2014	5310	FORD	E-450	Minibus	\$46,790.00	2010	Duncan Ave	Excellent	2013	2023	Gas	18	2		9	2016
297	16-1682	1FD4E45P48D0B03244	35623	1998	SCRD TAP	Chevrolet	Eldorado	Minibus	unknown	2007	Duncan Ave	Excellent	2013	2023	Gas	12	2		10	2016
311	16-1356	1GBJG31828188390	74898	2008	5310	FORD	E-450	Minibus	\$46,640.00	2012	Duncan Ave	Excellent	2014	2024	Gas	11	1		10	2016
312	CG19904	1BAGGB7A3XF086605	35523	1998	SCRD TAP	Blue Bird	Blue Bird	Minibus	\$46,640.00	2008	Duncan Ave	Excellent	2014	2024	Gas	11	1		6	2017
105	16-1707	1FD4E45P48D0B03244	109682	2008	SCRD TAP	FORD	E-350	Minibus	unknown	unknown	Duncan Ave	Good	1998	2018	Diesel	11	1		4	2016
106	16-1647	57WMD1A66EM101215	19469	2114	SCRD TAP	FORD	E-350	Minibus	unknown	unknown	Duncan Ave	Fair	2008	2018	Diesel	33	2		2	2017
Update 8-19-16	OP 6339	57WMD1A66EM100244	14101	2014	MV-1 SE	Van	SE	Van	\$47,000	2014	Duncan Ave	Excellent	2014	2021	Gas	3	1		1	2017
					MV-1 SE	Van	SE	Van	\$47,000	2015	Duncan Ave	Excellent	2015	2021	Gas	3	1		5	2018

Hudson County
Office of Senior Citizen & Disabled
Resident Transportation Assistance
Paratransit System
User's Guide



**A Service of the Hudson County Board of
Chosen Freeholders**

Thomas A. DeGise, County Executive

Riding in Hudson County with TRANSCEND!

Need a Ride? Going to the Doctor, Therapy, Shopping Employment? We can do it, we are TRANSCEND. We are Hudson County's reliable dependable transportation service that can take you to medical appointments, shopping, employment and more. We provide transportation to locations primarily within Hudson County.

TRANSCEND is administered by Hudson County Department of Health and Human Services. It was established in 1986 and has expanded to meet the growing needs of our communities. TRANSCEND is funded through the County of Hudson Board of Chosen Freeholders and grants from New Jersey Transit, Veterans Administration, Federal Transportation Administration and under Title III of the Older Americans Act. The Service is available to seniors (60 years of age and older), persons with disabilities (age 18 and over) and veterans. As a result of the strong support from the County Executive and the Board of Chosen Freeholders we have been able to expand services, obtain new vehicles, add more drivers and increase efficiencies with the implementation of a new scheduling and routing software program.

TRANSCEND System

TRANSCEND is a shared ride service and does not operate like a taxi service. You should expect to have other consumers transported in the vehicle with you. We provide curb to curb service, on a first come first serve basis. You must be able to get to the bus without the assistance of the driver. TRANSCEND is primarily designed to serve eligible Hudson County residents to ensure they have access to non emergency services they need for their personal well being.

We do not transport people with coverage through Medicaid for medical appointments. These trips must be scheduled through Logisticare. They can be contacted at 1-866-527-9933.

Non-emergency transportation is provided for:

- Medical Appointments
- Nutrition
- Shopping
- Employment
- Recreation
- Education
- Bus & Rail connections

Days and hours of Operation

- The system operates Monday through Friday between the hours of 8AM and 5PM with some limited service to 7PM.
- On Saturdays we have limited service for some dialysis patients only.
- There is no service on Sundays or Holidays.

Veterans Transportation

- Transportation is available on Tuesday, Wednesday and Thursday to the VA Hospital located at 385 Tremont Ave. in East Orange, NJ.
- Trips to the clinic at 115 Christopher Columbus Drive in Jersey City are available daily.
- Trips to VA Administrative Offices are available upon request.

Out of County Trips:

We provide set trips to the below listed destinations:

- University Hospital in Newark, arrive at 10 A.M. and return at 1 P.M. Monday thru Friday.
- St. Michael's Hospital in Newark, arrive at 10:10 A.M. and return at 1:10P.M. Monday thru Friday.
- Beth Israel Hospital in Newark, arrive at 10:20 A.M. return at 1:20P.M. Monday thru Friday.
- Clara Maass Hospital in Belleville, arrive at 10:30A.M. return at 1:30P.M.
- New York Locations. Up to 70th St., arriving approximately 10 A.M. and returning at 1 P.M. on Tuesdays only.
- VA Hospital in East Orange arriving at 10 A.M. and returning at 2 P.M. Tuesday, Wednesday and Thursday.
- Hackensack Hospital the 1st and 3rd Thursdays of the month. We arrive at 11AM and return at 1PM.

Shopping Trips

We provide group trips for shopping to locations within the boundaries of Hudson County upon request. The following is a schedule of the shopping trips we currently do each month:

- 2nd Tuesday of every month from 2555 Kennedy Blvd. to Shoprite 400 Marin Blvd. Pick up at 10AM and return at 12PM.
- 2nd Tuesday of every month from 91 Sip Ave. to Shoprite 400 Marin Blvd. Pick up at 9:30AM and return at 11:30AM.
- 3rd Thursday of every month from 60 Columbia Ave., Kearny, to 30 Mall Drive (Newport Mall). Pick up at 10AM and the return is 2PM.
- 2nd Friday of every month from 1065 Summit Ave. to 400 Park Plaza, Wal-Mart, in Secaucus. Pick up is at 9:30AM and the return is at 1:00PM.
- 2nd Friday of every month from 80 Cambridge Ave in Jersey City to 400 Park Plaza, Wal-Mart, in Secaucus. Pick up is at 10:30AM and the return is at 2:00PM.

You must make a reservation in order to get on the bus. If you have not made a reservation you may be refused access to the bus.

Special Requests & Group Trips

Service for groups can be provided through special arrangements with the Office of Senior Citizen and Disabled Resident Transportation Assistance Office by calling 201-369-4320.

How do I make a Reservation?

If you are calling for the first time, we will have to register you. One of our Reservation Agents will be happy to assist you. Reservations are accepted Monday through Friday 8 A.M. to 4 P.M. on a first come first serve basis by calling 201-369-4320 ext. 4107. We do not accept reservations for trips more than two weeks in advance. It is easier to schedule trips on Tuesdays and Thursdays as we are less busy on those days. We will need some basic information to confirm your eligibility and some information that is required by the government source that funds the program. **For all appointments, other than employment, dialysis, radiation and chemotherapy, you should not schedule for earlier than 10AM.** Be prepared to provide the following information when you call:

- First and Last Name
- Home address (mailing address if different)
- Email address
- Telephone number
- Cell phone number
- Emergency contact name and daytime telephone number.
- Date of Birth
- Sex
- Disability (ambulatory, non-ambulatory, mobility device, etc.)
- Medicaid # if applicable
- Ethnicity (Race)*

*Information required by the Federal Government.

If you need assistance or an accommodation with any of TRANSCEND'S services please state so when making your reservation.

Each time that you schedule a trip you will be required to provide the following information:

- The name of the person taking the trip.
- Day, date and time of the appointment.
- Address, City and telephone number of your destination. If it is a large complex advise of what entrance you will be using.
- If a Personal Care Attendant will be accompanying. Children may not accompany adults.
- Whether you will be using a wheelchair, walker, cane, service animal or other device.
- Doctor's name, clinic name, company name etc.
- The time to pick you up for your return trip.

When you make a reservation, you should try to give us a time for your return trip. We recognize that your appointments may run longer or shorter than expected and we will accommodate a change of your requested pick up. Only consumers with reservations will be allowed on vehicles.

My Appointment is Delayed or Ends Early!

If your appointment runs longer or ends earlier call the TRANSCEND Office at 201-369-4320 ext. 4104 or 4105 and we will make every effort to accommodate the change.

Cancelling a Trip

If for some reason your plans change please remember to call our office to cancel your trip. You can call to cancel a trip Monday through Friday between the hours of 7 A.M. to 6 P.M. After hours, call and leave your cancellation notice on the answering machine. **This answering service is only to cancel trips. Do not leave any other information as it will be disregarded.** If you must cancel a trip you should call at least two hours before your scheduled pickup time, if possible. By

you cancelling a trip it enables TRANSCEND to provide additional trips for that day.

No Shows

A trip that is not cancelled, at least one hour before your scheduled pick up time, will be considered a no show. Three or more no-shows within a thirty day period will result in a fourteen day suspension of your service.

Customer Responsibilities:

Operation of a safe and convenient transportation system requires that passengers abide by the following rules of the road:

- Call reservations after 1PM the day before your trip to obtain your pick up time.
- Be ready 15 minutes prior to your scheduled pickup time.
- Allow 15 minutes after your scheduled pickup time for the bus to arrive before calling the dispatch office.
- Seat belts must be worn.
- Wheelchairs must be able to be secured in order to travel.
- Smoking, drinking or eating is not allowed on the vehicle.
- Pets are not allowed on the vehicle except for service animals.
- Tipping of the driver is not allowed.
- The driver cannot be distracted while the vehicle is in motion.
- Inappropriate behavior can result in the loss of transportation service.

Driver Responsibilities

TRANSCEND is a shared ride service and does not operate like a taxi service. TRANSCEND will transport other passengers in the vehicle with you.

- Drivers may only go to the curb or a common area of an apartment or office building.
- The driver upon arriving to pick you up will blow the horn and wait five minutes before asking the dispatcher to call the customer's residence. If

there is no answer the driver will be instructed to move on and the customer will be charged with a no-show.

- Assistance on and off the vehicle at the curb will be provided by the driver if necessary.
- For your safety seat belts **must be worn** and drivers will assist with securing them if needed.
- Those consumers using mobility devices will have the mobility device secured as well as themselves with the appropriate securement system.
- Only passengers on the driver's schedule will be transported.
- Drivers cannot make any additional stops, without prior authorization from the office.

Helpful Reservation Tips

Try to be flexible. If you request a reservation on a day that we have already reached our capacity you may be asked to reschedule your appointment.

- If possible make your appointments for the middle of the day when the system is least busy.

Complaints, Compliments and Comments

If you have comments or concerns please contact the Coordinator Kevin Crimmins or Assistant Coordinator, Jim Ostaszewski at 201-369-4320 ext. 4101 Monday through Friday from 8 A.M. to 4 P.M., or email at kcrimmins@hcnj.us.

Updated; June 2016

Consumer Survey

1. How Often do you use our service?
2. How would you rate the service your driver provides?
3. When you call us for service or a question, how would you rate our telephone responses?
4. How would you rate the condition of the vehicles?
5. Generally, how would you rate our service?
6. How important is our service to you?
7. Do we get you to your appointment on time?
8. What is the one thing you like best about our service?
9. What is the one thing you dislike about our service?
10. If you have comments or suggestions please write them on the back of this form.

If you have trouble completing this survey, please call the Transcend office at 201-369-4320 for assistance. You can return the survey to driver when you take your next trip, email it to krimmins@hcnj.us or mail it to Hudson County Transcend, 830 Bergen Ave 8th Floor Bldg. A, Jersey City, NJ 07306

Name Optional:

Attachment J

K-101111

AFFIDAVIT

State of New Jersey
County of Middlesex

Robert J. Jans, being duly sworn, says that (s)he is connected with The Star Ledger, a newspaper circulating in Atlantic, Bergen, Burlington, Cape May, Essex, Hudson, Hunterdon, Mercer, Middlesex, Monmouth, Morris, Ocean, Passaic, Somerset, Sussex, Union, and Warren Counties, New Jersey, and that a notice of which the annexed is a true copy was published on the following dates in said newspaper:

7/21/14

Robert J. Jans

Sworn to before me this 28th
day of July, 20 14.

Margaret M. Kelly
NOTARY PUBLIC



PUBLIC HEARING NOTICE
COUNTY OF HUDSON
APPLICATION FOR A GRANT FROM
N.J. TRANSIT
UNDER THE SENIOR CITIZEN AND
DISABLED RESIDENT
TRANSPORTATION ASSISTANCE ACT
THE HUDSON COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES TRANSCEND COMPONENT IS APPLYING FOR A GRANT FROM N.J. TRANSIT IN THE AMOUNT OF \$826,332.00, FOR 2017 UNDER THE SENIOR CITIZEN AND DISABLED RESIDENT TRANSPORTATION ASSISTANCE ACT. THE FUNDING WILL BE USED TO PROVIDE TRANSPORTATION SERVICES FOR SENIOR CITIZENS AND PERSONS WITH DISABILITIES THAT ARE RESIDENTS OF HUDSON COUNTY. THERE WILL BE A PUBLIC HEARING HELD TO REVIEW THE APPLICATION AND WHERE COPIES WILL BE AVAILABLE TO THE PUBLIC ON:
FRIDAY, AUGUST 26TH, 2016
10:30 A.M. - 12:30 P.M.
HANK GALLO CENTER
LINCOLN PARK
1 NUNDA AVE.
JERSEY CITY, N.J. 07304
INTERESTED PERSONS OR AGENCIES NOT ABLE TO ATTEND THE PUBLIC HEARING ARE INVITED TO SEND WRITTEN COMMENTS TO: KEVIN GRIMMINS, DIRECTOR OF THE OFFICE OF SENIOR CITIZENS & DISABLED RESIDENTS TRANSPORTATION ASSISTANCE, 830 BERGEN AVE. 8A, JERSEY CITY, NJ 07306. OR EMAIL TO kgrimmms@hcnj.us
\$65.10

Account #

1148014

Ad #

4191304

State of New Jersey
Hudson County

April Caldwell, of full age and being
duly sworn according to law, on her
oath deposes and says that she is the
Accounting Clerk of:

THE JERSEY JOURNAL

A newspaper published in Jersey City,
County and State aforesaid and that a
notice, a true copy of which is annexed,
was published in the said newspaper
on the following date(s): 07/28/16


April Caldwell

Sworn to and subscribed before me
this 28 day of July, 2016


Notary Public of New Jersey

SHAWN MILLER
NOTARY PUBLIC OF NEW JERSEY
I.D. # 50015502
My Commission Expires 5/11/2020

PUBLIC HEARING NOTICE COUNTY OF HUDSON

APPLICATION FOR A GRANT FROM N.J.
TRANSIT UNDER THE SENIOR CITIZEN
AND DISABLED RESIDENT
TRANSPORTATION ASSISTANCE ACT.

THE HUDSON COUNTY DEPARTMENT OF
HEALTH & HUMAN SERVICES, TRAN-
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AMOUNT OF \$826,332.00, FOR 2017 UNDER
THE SENIOR CITIZEN AND DISABLED
RESIDENT TRANSPORTATION ASSIS-
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SERVICES FOR SENIOR CITIZENS AND
PERSONS WITH DISABILITIES THAT ARE
RESIDENTS OF HUDSON COUNTY.
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JERSEY CITY, N.J. 07304

INTERESTED PERSONS OR AGENCIES

NOT ABLE TO ATTEND THE PUBLIC
HEARING ARE INVITED TO SEND WRIT-
TEN COMMENTS TO: KEVIN CRIMMINS,
DIRECTOR OF THE OFFICE OF SENIOR
CITIZENS & DISABLED RESIDENTS
TRANSPORTATION ASSISTANCE, 830 BER-
GEN AVE. 8A, JERSEY CITY, NJ 07306, OR
EMAIL TO kcrimmings@hcni.us

07/28/16

\$61.93

COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
TRANSCEND
830 BERGEN AVE. 8A
JERSEY CITY, NEW JERSEY 07306

THOMAS A. DEGISE
County Executive

PHONE: 201-369-4320

DARICE TOON
Director

FAX: 201-369-4318

August 16, 2016

Kristine Allen, President
Alzheimer's Resource Center of NJ
830 Bergen Ave. 8A
Jersey City, N.J. 07306

This letter is to notify you there will be a Public Hearing on Friday, August 26th, 2016, 10:30AM, at the Gallo Center, Lincoln Park, 1 Nunda Ave. Jersey City, N.J. 07304. This Public Hearing is on an Application for funds that Hudson County is applying for under Senior Citizens and Disabled Residents Transportation Assistant Program the approval of this grant will enable transportation services to be available for the senior citizens and disabled residents of Hudson County.

Regards,



Kevin Crimmins
Transcend Program Coordinator
201-369-4320 x 4101

**County of Hudson
Providers Name and Addresses**

Kristine Allen, President
Alzheimer's Resource Center of NJ
830 Bergen Ave. 8A
Jersey City, N.J. 07306

Larry Eccleston, Executive Director
Senior Affairs
199 Summit Ave.
Jersey City, N.J. 07306

Charlie Nuzzo
Eastern Nursing
35 Journal Square, Suite 487
Jersey City, N.J. 07306

Joyce Person-Perking, CSW, BA
Bayonne Office on Aging
630 ave. C, Room 17
Bayonne, N.J. 07002

Luis Serrano, Administrator
2nd Home Union City Operation LLC
3610 Palisade Avenue
Union City, N.J. 07087

Samantha Howard, Executive Director
BEOF
555 Kennedy Blvd.
Bayonne, N.J. 07002

Mr. Frank R. Gioia, Director
HC Protective Services
6020 Hudson Avenue 1st Floor
P.O. Box 97
West New York, N.J. 07093

Urban League of Hudson County
253 Martin Luther King Drive
Jersey City, N.J. 07305

Armas Home Health Aide
400 60th Street
West New York, N.J. 07093

Kevin Crimmins
Hudson County Transcend
830 Bergen Ave. 8A
Jersey City, N.J. 07306

Ora Welch, Executive Director
HOPES CAP, Inc.
301 Garden St.
Hoboken, N.J. 07030

Dr. Bart Schneiderman
The Dental Group
895 Bergen Ave.
Jersey City, N.J. 07306

Mr. Robert B. Knapp
East Newark Senior Project
34 Sherman Avenue
East Newark, N.J. 07029

John H. Fitzgerald, Director
Northeast NJ Legal Services
574 Summit Avenue
Jersey City, N.J. 07306

Ms. Rite Silva, Manager
Harrison Senior Center
221-223 Harrison Avenue
Harrison, N.J. 07029

Reuben D. Rotman, Executive Director
Jewish Family of Metro West
256 Columbia Tpke. Suite 105
Florham, N.J. 07932

Ms. Joan Woods, Administrative Clerk
Town of Harrison
318 Harrison Avenue
Harrison, N.J. 07029

Rosemary Lavagnino, Executive Director
NHCAC
800 31st Street
Union City, N.J. 07087

Mr. Thomas Foley
City of Hoboken Senior Center
124 Grand Street
Hoboken, N.J. 07030

Project SHAPE
400 38th Street, Rm 213, 2nd Floor
Union City, N.J. 07087

Sister Alice McCoy, O.P.
Hudson Hospice Volunteers, Inc.
93 Clerk Street
Jersey City, N.J. 07305

Michele Mususmici, Project Director
Residential Maintenance
800 31st Street
Union City, N.J. 07087

PACO
Lilia Diaz
390-392 Manila Avenue
Jersey City, N.J. 07302

Bobby T. Yalong, Exe Director
PACCAL
380 Monmouth Street
Jersey City, N.J. 07302

Ken Pincus
Town of Kearny
402 Kearny Avenue
Kearny, N.J. 07032

Cambridge Church Group
Attn: Gloria
80 Cambridge
Jersey City, N.J. 07307

Nicholas J. Cicco, Exe Director
NH Regional council of Mayors
400-38th Street, Room 216
Union City, N.J. 07087

Bernice Lord (Walmart Group)
80 Cambridge Ave.
Jersey City, N.J. 07307

John Westervelt, Executive Director
Catholic Charities of the Archdiocese of Newark
590 N. 7th St.
Newark, N.J. 07087

N.C.C. Hudson Seniors
Attn: Sandie
21 - 27 Orchard St.
Jersey City, N.J. 07305

Hudson County Visually Impaired
Peer Support Group
Attn: Ivis Alvarez
101 Centre Ave.
Secaucus, N.J. 07094

Senior Affairs
Attn: Gladys
3715 Palisades Ave.
Union City, N.J. 07087

WindMill Program
141 Wet 5th St.
Bayonne, N.J. 07002

Mt. Carmel Guild
248 Virginia Ave.
Jersey City, N.J. 07304

Eastern Seals
121 Newark Ave.
Jersey City, N.J. 07306

H.I.P.
Attn: Marily Gonzalez, Director
35 Journal Square, Suite 703
Jersey City, N.J. 07306

City of Hoboken
Senior Center
Attn: Thomas Foley
124 Grand Street
Hoboken, N.J. 07030

Back Bay Services
Attn: Marie Bovae
535 Ave. A
Bayonne, N.J. 07002

Occupational Center
Attn: Maritza
780 Montgomery St.
Jersey City, N.J. 07306

Mullenberg Gardens
Attn: Doris Wessler
1065 Summit Ave.
Jersey City, N.J. 07307

Ms. Karen Giannaros, Director
Community Affairs
4233 Kennedy Blvd.
North Bergen, N.J. 07047

Widow & Widowers
16 W. 4th St.
Bayonne, N.J. 07002

Borough East Newark
Brigit/Mayor's Office
34 Sherman Ave.
East Newark, N.J. 07029

Paterson St. Senior Center
28 Paterson St.
Jersey City, N.J. 07307

Pathways to Independence
60 Kings Land Ave.
Kearny, N.J. 07032

Kearny Seniors
Attn: Nellie
60 Columbia Ave.
Kearny, N.J. 07032

Goodwill Harrison
400 Supor Blvd.
Harrison, N.J. 07029

Ms. Kathy Ghode, Director
Senior Affairs
201 Highwood Ave.
Weehawken, N.J. 07086

K-2

COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
TRANSCEND
830 BERGEN AVE. 8A
JERSEY CITY, NEW JERSEY 07306

THOMAS A. DEGISE
County Executive

PHONE: 201-369-4320

DARICE TOON
Director

FAX: 201-369-4318

August 16, 2016

Mr. Michael Marra
Town Clerk of Secaucus
1203 Paterson Plank Rd.
Secaucus, N.J. 07094

This letter is to notify you there will be a Public Hearing on Friday, August 26th, 2016, 10:30AM, at the Gallo Center, Lincoln Park, 1 Nunda Ave. Jersey City, N.J. 07304. This Public Hearing is on an Application for funds that Hudson County is applying for under Senior Citizens and Disabled Residents Transportation Assistant Program the approval of this grant will enable transportation services to be available for the senior citizens and disabled residents of Hudson County.

Regards,



Kevin Crimmins
Transcend Program Coordinator
201-369-4320 x 4101

HUDSON COUNTY MUNICIPAL CLERKS

Michael Marra
Secaucus Clerk's Office
1203 Paterson Plank Rd.
Secaucus, N.J. 07084

Carmela Riccio
Township Clerk's Office of West New York
428 – 60th St.
West New York, N.J. 07093

Rola Dahboul
Township Clerk's Office of Weehawken
400 Park Ave.
Weehawken, N.J. 07086

Robert Byrne
Jersey City Clerk's Office
280 Grove St.
Jersey City, N.J. 07302

Erin Barillas
Township Clerk's Office
4233 Kennedy Blvd.
North Bergen, N.J. 07047

Alberto Cabrera
Guttenberg Town Clerk
6808 Park ave.
Guttenberg, N.J. 07093

Robert Sloan
Bayonne City Clerk's Office
630 Avenue C
Bayonne, N.J. 07002

Dominick Cantatore
City Clerk's Office of Union City
Union City, N.J. 07087

James J. Farina
Hoboken Municipal City Clerk
94 Washington St.
Hoboken, N.J. 07030

Paul Zarbetski, City Clerk
Town of Harrison
318 Harrison Ave.
Harrison, N.J. 07029

Robert B. Knapp
Borough of East Newark
920 Broad St. #304
Newark, N.J. 07102

Pat Carpenter
Town of Kearny
402 Kearny Ave.
Kearny, N.J. 07032

K3

**PUBLIC HEARING NOTICE
COUNTY OF HUDSON
APPLICATION FOR A GRANT FROM N.J. TRANSIT
UNDER THE SENIOR CITIZEN AND DISABLED RESIDENT
TRANSPORTATION ASSISTANCE ACT.**

THE HUDSON COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES, TRANSCEND COMPONENT IS APPLYING FOR A GRANT FROM N.J. TRANSIT IN THE AMOUNT OF \$826,332.00, FOR 2017 UNDER THE SENIOR CITIZEN AND DISABLED RESIDENT TRANSPORTATION ASSISTANCE ACT. THE FUNDING WILL BE USED TO PROVIDE TRANSPORTATION SERVICES FOR SENIOR CITIZENS AND PERSONS WITH DISABILITIES THAT ARE RESIDENTS OF HUDSON COUNTY. THERE WILL BE A PUBLIC HEARING HELD TO REVIEW THE APPLICATION AND WHERE COPIES WILL BE AVAILABLE TO THE PUBLIC ON:

**FRIDAY, AUGUST 26TH, 2016
10:30 A.M. - 12:30 P.M.
HANK GALLO CENTER
LINCOLN PARK
1 NUNDA AVE.
JERSEY CITY, N.J. 07304**

INTERESTED PERSONS OR AGENCIES NOT ABLE TO ATTEND THE PUBLIC HEARING ARE INVITED TO SEND WRITTEN COMMENTS TO: KEVIN CRIMMINS, DIRECTOR OF THE OFFICE OF SENIOR CITIZENS & DISABLED RESIDENTS TRANSPORTATION ASSISTANCE, 830 BERGEN AVE. 8A. JERSEY CITY, NJ 07306. OR EMAIL TO kcrimmins@hcnj.us

COUNTY OF HUDSON
DEPARTMENT OF ROADS & PUBLIC PROPERTY
TRANSCEND
595 COUNTY AVE. BLDG.1
SECAUCUS, NJ. 07094

K-4

THOMAS A. DEGISE
County Executive

PHONE: 201-369-4320

DARICE TOON
Director

FAX: 201-369-4318

TO: Theresa Banks, Librarian
County Law Library
595 Newark Ave. 5th Fl.
Jersey City, N.J. 07306

FROM: Kevin Crimmins, Program Manager - Transcend

RE: 2017 Casino Application

DATE: August 30, 2016

Enclosed is a copy of the 2017 Casino Application for transportation funding for the Hudson County Transcend Program. Transcend provides transportation service for seniors 60 years and older and disabled persons to non-emergency medical appointments, dialysis, physical and mental therapies, competitive and non-competitive employment, food shopping and social and recreational activities.

Please have this application placed in a convenient location for the public to review.

Thank you for your cooperation in this matter.

K 5

HUDSON COUNTY

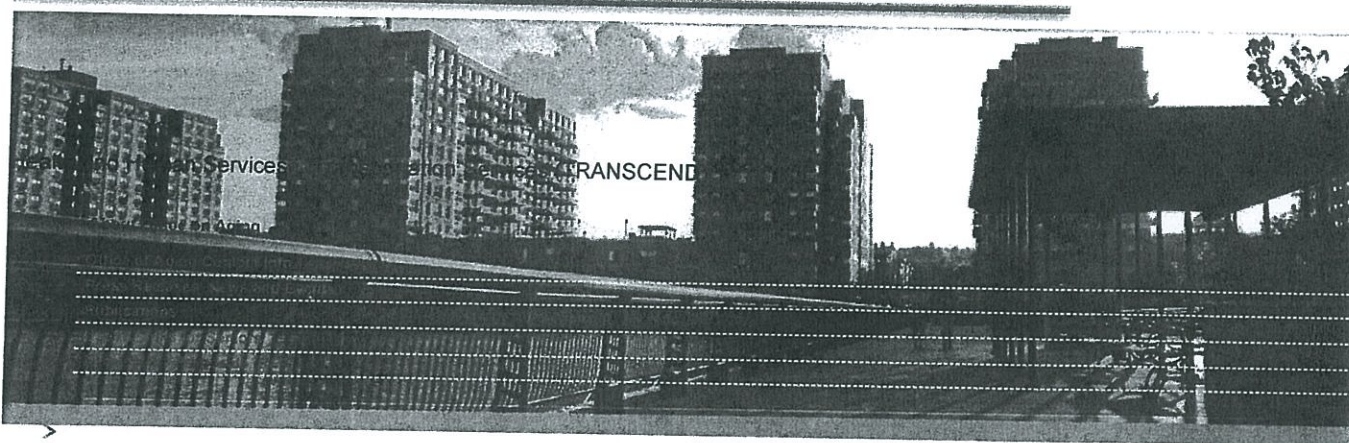
NEW JERSEY

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HUDSON COUNTY

NEW JERSEY



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- [Youth Incentive Program](#)
- [C.E.A.S.](#)
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> [Municipal Alliance](#)

> [Office of Disability Services](#)

- [ODS Contact Information](#)

> [Office of Homeless Services](#)

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Transportation Services (TRANSCEND)

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Transportation Services (TRANSCEND)
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About TRANSCEND



Our transportation service is designed to help eligible residents receive the mobility they need to work and live in the Hudson County community. Seniors over 60, persons with disabilities over 18, and veterans are all eligible to participate in Transcend's reliable, dependable transportation service for medical appointments, employment, education, nutrition, shopping and recreation. We provide transport to locations primarily within Hudson County, and with limited service to Essex and Bergen Counties.

Transcend is administered by the Hudson County Department of Health & Human Services. These services are made possible through the Hudson County Board of Chosen Freeholders, the Hudson County Executive's office, and grants from New Jersey Transit, the Veteran's Administration, the Federal Transportation Administration, and under Title III of the Older American's Act.

Since its inception in 1986, Transcend has expanded to meet the growing needs of its communities. Providing safe and reliable transportation services to Hudson County residents is the goal of the Transcend program.

Since May 2008, we have been able to improve and expand our services by adding new vehicles and more drivers, and increase efficiencies with the purchase of a new routing and scheduling software program. For additional information, click on TRANSCEND User Guide" below or call the TRANSCEND Office at 201-369-4320 ext. 4107

Effective October 30, 2015, the Department of Health and Human Services/ Transcend Division has adopted a Title VI Non-Discrimination Policy. County residents requiring information pertaining to Title VI guidelines and complaint procedures should click here for [English, Spanish, Hindi, Arabic] to obtain

Notice to the Public, Complaint Procedure and a Complaint Form. Hudson County residents requiring language assistance may contact the Transcend Division Offices at 201-369-4320 or email transcend.hcnj.us

File	Description	Date
TRANSPORTATION ASSISTANCE PROGRAM		
PDF	Public Hearing Notice, Application for Grant	08/22/2016
PDF	TRANSCEND User Guide	08/26/2016
PDF	Hudson County 2016 SCDRTAP Allocation Ltr	07/07/2015
PDF	2016 Combined SCDRTAP 5311 Application	07/07/2015
PDF	Attachment A to C	07/07/2015
PDF	Attachments F to H	07/07/2015
PDF	Attachments J to K-1	07/07/2015
PDF	Attachment K-2 to M	07/07/2015
Archive		
PDF	Ammendment B	12/01/2014
PDF	Amendmant A	12/01/2014
PDF	Hudson County Human-Services Coordinated Transportation Plan	12/01/2014
PDF	English Title VI Documents	09/02/2015
PDF	Spanish Title VI Documents	09/02/2015
PDF	Arabic Title VI Documents	09/02/2015
PDF	Hindi Title VI Documents	09/02/2015

Click on a row to download file.

K-5

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Attachment m

Kesin

BOARD OF CHOSEN FREEHOLDERS
COUNTY OF HUDSON

RESOLUTION

No. 445-8-2016

On Motion of Freeholder Rodriguez

Seconded by Freeholder Vainieri

AUTHORIZING
APPLICATION FOR AND ACCEPTANCE OF FUNDS,
IF AWARDED, FROM NEW JERSEY TRANSIT
FOR
SENIOR CITIZENS AND DISABLED RESIDENTS TRANSPORTATION ASSISTANCE
PROGRAM (SCDRTP) FOR CY 2017
JANUARY 1, 2017 TO DECEMBER 31, 2017
(\$826,332.00)

WHEREAS, The New Jersey Transit Corporation has notified the County of Hudson, through the Department of Health and Human Services, that the County of Hudson is eligible to receive funding for calendar year 2017 under the "Senior Citizen and Disabled Resident Assistance Act" in the amount of **EIGHT HUNDRED TWENTY SIX THOUSAND THREE HUNDRED THIRTYTWO 00/100 DOLLARS (\$826,332.00)**; and

WHEREAS, it is necessary to submit a formal application to the New Jersey Transit Corporation in order to obtain the grant funds, and the County will accept these funds, if awarded; and

WHEREAS, the funding will provide vital transportation services to eligible residents of Hudson County for travel to medical appointments, nutritional centers, shopping locations, recreational areas, educational centers and certain employment and transportation hubs.

NOW, THEREFORE, BE IT RESOLVED, by the Board of Chosen Freeholders of the County of Hudson, that:

1. The aforesaid recitals are incorporated herein as though fully set forth at length.
2. The Board hereby authorizes the County Executive Thomas A. DeGise, County Administrator Abraham Antun, Deputy County Administrator Laurie Cotter or their lawfully appointed designee to execute any and all documents and take any and all actions necessary to complete and realize the intent and purpose of this resolution.
3. An application for grant funds and acceptance of same is hereby authorized for the above referenced program based upon the following information:

Vendor/Provider	New Jersey Transit Local Programs and Minibus Support One Penn Plaza, 4 th Floor Newark, New Jersey 07105-2246
Term:	January 1, 2017 to December 31, 2017
State Grant Portion:	\$826,332.00

**BOARD OF CHOSEN FREEHOLDERS
COUNTY OF HUDSON**

RESOLUTION

No. Page 2


On Motion of Freeholder _____

Seconded by Freeholder _____

4. This Resolution shall take immediately.

Freeholder	Aye	Nay	Abst	N.P.	Freeholder	Aye	Nay	Abst.	N.P.
Balmir	✓				Rodriguez	✓			
Cifelli				✓	Romano	✓			
Kopacz				✓	Vainieri	✓			
Maldonado	✓				Chairperson Rivas	✓			
O'Dea	✓								

It is hereby certified that at a regular meeting of the Board of Freeholders of the County of Hudson held on the 4 day of August A.D. 2016, the foregoing resolution was adopted with 7 members voting in the affirmative and 0 in the negative.

 _____, Clerk

APPROVED AS TO LEGAL FORM

BY:  _____
DONATO J. BATTISTA
HUDSON COUNTY COUNSEL

Source: Department of Health and Human Services
 AV/cam

K6

COUNTY OF HUDSON
DEPARTMENT OF HEALTH AND HUMAN SERVICES
TRANSCEND
830 BERGEN AVE. 8A
JERSEY CITY, NEW JERSEY 07306

THOMAS A. DEGISE
County Executive

PHONE: 201-369-4320

DARICE TOON
Director

FAX: 201-369-4318

TO: Transcend Advisory Committee Members

FROM: Kevin Crimmins, Transcend Program Coordinator

RE: Public Hearing Notice

DATE: July 25, 2016

Please be advised that a Public Hearing on transportation funding for Senior Citizens and Disabled Persons has been scheduled as follows:

DATE: Friday, August 26, 2016

TIME: 10:30A.M. – 12:30PM

PLACE: Lincoln Park
Frank Gallo Center
1 Nunda Avenue
Jersey City, N.J. 07304

cc: N.J. Transit



TRANSCEND CAC MEETING AUGUST 16, 2016

On August 16th Jim Ostaszewski conducted the CAC Meeting. Attached is a copy of the sign in sheet of the attendees. The meeting was to review the 2017 Senior Citizen and Disabled Resident Transportation Assistance Grant Application. Jim reviewed with the attendees the 2015 year end ridership report, the 2015 actual expenses as well as the proposed 2017 budget. Those budget sheets are attached. In addition he reviewed the goals for 2017;

2017 Short-Term Program Goals

1. In 2017 we expect to have delivery of ten new minibuses that will accommodate ten passengers and two wheelchairs. The funding for these vehicles will be a combination of funds from SCRDTAP and Hudson County.
2. We have requested, in our 2015 5310 application, mobility management funds to purchase an Interactive Voice Response Telephone System (IVR). This IVR system will simplify the trip scheduling process by eliminating the need for clients to call the day before their scheduled trip to find out their pick up time. This system will automatically call all clients scheduled for a trip, notify them of their pick up time and enable them to confirm or cancel the trip. This will reduce the number of calls to our office by approximately 200 to 250 per day, give us early notification of cancellations and should reduce the number of no shows. With the reduction of phone calls and early notification of cancellations it will allow us to schedule trips for those clients that were denied a trip because of capacity and some same day service. In 2015 we had 5,425 no shows.
3. We would like to update our routing and scheduling software with Routematch's real time optimization module. This would assist with the anticipated increase in demand for next day and same day service as a result of the implementation of the IVR in 2017. With this optimization module we will be able to provide more same day service to maximize occupancy on our vehicles.

At the conclusion of the meeting the group present concurred that the goals for 2017 would improve the service of Transcend. They especially were pleased with the IVR System as they all have encountered some difficulty at times with calling for pick up times. They also expressed some disappointment with the reduction in the amount of money the grant provides but pleased that the county has supplemented that amount necessary to maintain the program.

AUG. 16, 2016

K-6

CAC MEETING

- 1) Jim Ostaszewski TRANSCEND
- 2) Sam Cintrón TRANSCEND
- 3) Joe Miller Muttenberg
- 4) Alvin Cox Pathways to Independence
- 5) Sam Conaturo KEA RML
- 6) Bernice Lach Jersey City
- 7)
- 8)
- 9)
- 10)
- 11)
- 12)

1	County	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y
2	Actual 2015 Expenditures																									
3	FUNDING SOURCE																									
4	Operating																									
5	Salaries/Fringe	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount
6	Salaries/Fringe	\$488,730.00	69%	\$1,471,932.00	100%	\$0.00	0%	ADVO	\$246,000.00	100%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
7	Third Party Contract Fees	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
8	Maintenance & Repairs	\$114,010.46	17%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
9	Travel	\$172,537.74	25%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
10	Training/Travel	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
11	Miscellaneous	\$7,044.80	1%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
12	Funding Source Subtotal	\$797,122.99	100%	\$1,471,932.00	100%	\$0.00	0%	ADVO	\$246,000.00	100%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
13	% Funding Source Total		92%		69%																					
14	FUNDING SOURCE																									
15	Administration																									
16	Shared Fringe	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount
17	Standard Overhead/Indirect Costs	\$0.00	0%	\$688,932.00	100%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
18	Standard Overhead/Indirect Costs	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
19	Third Party Contract Fees	\$40,000.00	60%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
20	Office Supplies	\$4,600.32	7%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
21	Travel/Training	\$881.92	1%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
22	Marketing/Advertising (non-contracted)	\$486.05	1%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
23	Insurance premium or payment to a self	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
24	Miscellaneous	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
25	Funding Source Subtotal	\$46,168.31	100%	\$688,932.00	100%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
26	% Funding Source Total		6%		31%																					
27	FUNDING SOURCE																									
28	Capital																									
29	Rolling Stock	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount
30	Rolling Stock	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
31	Roads & Communication Equipment	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
32	Utility & Communication Equipment	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
33	Vehicle Rehabilitation	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
34	Computer Hardware/Software	\$14,133.49	100%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
35	Construction or Rehab of Transit	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
36	Facility	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
37	Miscellaneous	\$0.00	0%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
38	Funding Source Subtotal	\$14,133.49	100%	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
39	% Funding Source Total		2%		0%																					
40	Funding Source Total	\$797,122.99	100%	\$1,471,932.00	100%	\$0.00	0%	ADVO	\$246,000.00	100%	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00	0%	ADVO	\$0.00
41	% of Program Budget (as) of \$		24%		6%																					
42	*Program match (as) of \$																									

County:

Projected 2017 Budget

FUNDING SOURCE		COUNTY		FTA 5311		SS311 Innovation		FTA SS310		Title XX		JARC		Veterans		Title III		Logisticare		Other		Ops Budget Totals	
Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%
FUNDING SOURCE																							
Operating																							
Salaries/Fringe	\$682,332.00	100%	\$1,350,996.00	83%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$246,000.00	100%	\$0.00	#DIV/0!	\$2,461,696.00	90%	
Licenses, Registration, Ins	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	0%	
Third Party Contract Svcs	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	0%	
Maintenance & Repairs	\$0.00	0%	\$175,000.00	8%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$175,000.00	5%	
Materials Consumed	\$0.00	0%	\$150,000.00	9%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$150,000.00	5%	
Travel/Travel	\$0.00	0%	\$10,000.00	1%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$10,000.00	0%	
Miscellaneous	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	0%	
Funding Source Subtotal	\$628,332.00	100%	\$1,635,996.00	100%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$15,000.00	100%	\$246,000.00	100%	\$0.00	#DIV/0!	\$2,772,696.00	100%	
% Funding Source Total																							
SCDRTAP																							
FUNDING SOURCE																							
Administration																							
Salaries/Fringe	\$0.00	#DIV/0!	\$677,532.00	82%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Standard Overhead/Indirect Costs	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	
Facilities or Equipment Rental	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	
Third Party Contract Svcs	\$0.00	#DIV/0!	\$48,000.00	6%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$48,000.00	6%	
Office Supplies	\$0.00	#DIV/0!	\$5,000.00	1%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$5,000.00	1%	
Travel/Travel	\$0.00	#DIV/0!	\$2,500.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$2,500.00	0%	
Marketing/Advertising (non-contracted)	\$0.00	#DIV/0!	\$3,000.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$3,000.00	0%	
Insurance premium or payment to a self-insurance reserve	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	
Miscellaneous	\$0.00	#DIV/0!	\$0.00	0%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	0%	
Funding Source Subtotal	\$0.00	#DIV/0!	\$799,332.00	100%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$799,332.00	100%	
% Funding Source Total																							
COUNTY																							
FUNDING SOURCE																							
Rolling Stock																							
Roads & Communication Equipment	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Trucks, Buses, Trailers, Sheds, Signs	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Light or Streetlight Displays	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Vehicle Rehabilitation	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Computer Hardware/Software	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Construction or Renovation of Transit Facility	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Facilities or Equipment Rental	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Miscellaneous	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
Funding Source Subtotal	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	
% Funding Source Total																							
BUDGET Totals																							
Amount	\$628,332.00	24%	\$2,374,668.00	69%	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$0.00	#DIV/0!	\$15,000.00	0%	\$246,000.00	7%	\$0.00	#DIV/0!	\$3,512,630.00	100%	
% of Program Budget Total																							
provided by County																							

*Program match (es) of \$

provided by County