



**STATE OF NEW JERSEY**

**SENIOR CITIZENS and DISABLED RESIDENTS  
TRANSPORTATION ASSISTANCE PROGRAM  
JANUARY 1, 2025 – DECEMBER 31, 2025**

and

**FTA NON-URBANIZED AREA FORMULA PROGRAM  
(SECTION 5311)  
JANUARY 1, 2025 – DECEMBER 31, 2025**

County	Hudson
Name of Transportation System	Hudson County – Transcend Office
Applicants Legal Name	Hudson County
Address	830 Bergen Avenue, Bldg. A-8 <sup>th</sup> Floor
	Jersey City, NJ 07306
Name and Title of Person Completing the Application	James Ostaszewski
	Program Coordinator
Phone Number	201-369-4320 ext.: 4102
Agency Website	<a href="http://www.hcnj.us">www.hcnj.us</a>
E-Mail Address	<a href="mailto:jostaszewski@hcnj.us">jostaszewski@hcnj.us</a>

NJ TRANSIT  
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## TECHNICAL CAPACITY

All applicants must demonstrate the technical capacity to carry out the services proposed. At a minimum, the applicant must be able to demonstrate:

- The financial ability to perform and deliver the service applying for and awarded.
- An adequate level of staffing and grant experience and knowledge to comply with all FTA grant requirements.
- An adequate level of staffing and operational experience needed in delivering the service as per grant award.
- An adequate level of staffing and maintenance experience for performing required maintenance on vehicles used or purchased for this service.
- An adequate level of vehicles including back-up vehicles to perform the service under this program.
- An established driver training program to ensure safe and reliable service to all passengers.
- The service provided is not duplicating other services funded under FTA or other funding sources. *All FTA subrecipients must be part of the local Coordinated Human Services Transportation Plan (CHSTP).*
- Written procedures and policies for operations, grant administration, and FTA reporting requirements.
- The proposed service meets the funding requirement. (*i.e.*: if requesting funds under Section 5311 services must be provided in the rural area for the general public.) *This must be demonstrated through sample map of service and screen shot of website and marketing materials.*

**While completing this application ensure that you are clearly documenting the technical capacity required to deliver this State and/or Federal funded project.**

If applicant is providing route deviation service with published timetable/schedule, please include copies of timetables.

### **Additional Requirements for all timetable/marketing materials:**

- Systems must provide a measure of distance of route deviation (*i.e.*: ¼ mile, ½ mile, *etc.*).
- Systems must provide information to the public on how to request route deviation.
- A phone number for requesting deviation in advance.
- A statement that deviation service is open to the general public.
- Title VI "Notice to Beneficiaries."
- ADA Reasonable Modification language.
- Instructions on how to obtain information in alternate format or languages.
- The universal symbol of accessibility.
- Systems must ensure all marketing material provide clear language that trips are not prioritized and are open for any trip purpose.

## **PROPOSED SCHEDULE FOR CASINO REVENUE APPLICATION FOR YEAR 2025**

The following timetable is for guidance purposes only and should be used to assist you in planning the completion of your SCDRTAP application in a timely manner. NJ TRANSIT understands that dates and local procedures may vary.

### **No less than 30 days before your hearing.**

By this date you should have:

- Published your public hearing notice in two different local newspapers, notice must be published at least 30 calendar days prior to the hearing date.
- Sent a copy of the public hearing notice to all municipal clerks in the county.
- Sent copy of public hearing to all interested agencies including but not limited to senior centers, nutrition sites, adult workshops, senior and disabled non-profit agencies.
- Posted large print on-board public hearing notices in your vehicles.

### **At your Public Hearing**

By this date you should have:

- Read into the public hearing record summary of 2024 (to date) grant activities and the proposed 2025 SCDRTAP budget.
- Provide copies of the summary of 2024 grant activities (to date) and copies of the proposed 2025 budget. (Should be available in alternative format upon request.)

### **Fourteen (14) days After Public Hearing:**

A copy of the summary of 2025 grant activities/goals and copies of proposed 2025 grant activities/goals and budget should be placed in the main branch of the county library and/or the County Website for public review at least 14 days after the public hearing date. The County should make every effort to have a full application in the library and/or the website available. If the entire application is not available 14 days after the hearing, the county should place a copy of the proposed description of service and proposed line-item budget in the library and/or website for public review.

### **Friday, September 13, 2024**

**Application due to NJ TRANSIT.** If the full transcript of the public hearing, notarized public hearing notices and/or original Commissioner Resolution is not available by this date please note it on your cover letter and submit it as soon as available.

**Please note:** The County must meet with their local CAC to review the proposed service activities, goals, and budget for 2025. Their input and feedback should be considered in the planning process for this application.

**SECTION I – COUNTY INFORMATION**

**Project Contacts/Personnel**

1. Subrecipient key contacts. **This section must be completed.**

Table 1

Name	Title	Address	Phone Number	E-mail
Anthony Romano	Commissioner/ Director	567 Pavonia Ave. Jersey City, NJ 07306	201-795-6001	<a href="mailto:aromano@hcnj.us">aromano@hcnj.us</a>
Christine Moro	Procurement Contact	567 Pavonia Ave. Jersey City, NJ 07306	201-795-9280 Ext.: 6172	<a href="mailto:cmoro@hcnj.us">cmoro@hcnj.us</a>
Cheryl Fuller	Audit Contact	567 Pavonia Ave. Jersey City, NJ 07306	201-795-6077 Ext.: 6131	<a href="mailto:cfuller@hcnj.us">cfuller@hcnj.us</a>
Elinor Gibney	EEO Contact*	567 Pavonia Ave. Jersey City, NJ 07306	201-795-6255	<a href="mailto:egibney@hcnj.us">egibney@hcnj.us</a>
Elinor Gibney	ADA Representative*	567 Pavonia Ave. Jersey City, NJ 07306	201-795-6255	<a href="mailto:egibney@hcnj.us">egibney@hcnj.us</a>
James Ostaszewski	Title VI Representative*	830 Bergen Ave. Jersey City NJ 07306	201-369-4320	<a href="mailto:jostaszewski@hcnj.us">jostaszewski@hcnj.us</a>
James Ostaszewski & Abraham Deida	Safety Officer*	830 Bergen Ave. Jersey City NJ 07306	201-369-4320	<a href="mailto:jostaszewski@hcnj.us">jostaszewski@hcnj.us</a> <a href="mailto:adeida@hcnj.us">adeida@hcnj.us</a>
James Ostaszewski	NVRA Site Coordinator	830 Bergen Ave. Jersey City NJ 07306	201-369-4320	<a href="mailto:jostaszewski@hcnj.us">jostaszewski@hcnj.us</a>

\*Required for Section 5311, recommended for SCDRTAP.

2. Provide the name, title, phone number, e-mail address, and estimated percentage of their salary that will be charged to the grants. Table 2 **For example:** Administrator, Operations Manager, Safety Officer

Table 2

Staff Member		Phone Number	E-mail	SCDRTAP		5311	
Name	Title			Admin %	Operating %	Admin %	Operating %
James Ostaszewski	Program Coordinator & Safety Director	201-369-4320	<a href="mailto:jostaszewski@hcnj.us">jostaszewski@hcnj.us</a>	0%	0%	0%	0%
Abraham Deida	Motor Pool Supervisor	201-369-4375	<a href="mailto:adeida@hcnj.us">adeida@hcnj.us</a>	0%	0%	0%	0%
Candice Poomchonghko	Asst. Program Coordinator	201-369-4320	<a href="mailto:cpoomchonghko@hcnj.us">cpoomchonghko@hcnj.us</a>	0%	0%	0%	0%
Gary Gilchrist	Asst. Program Coordinator	201-369-4320	<a href="mailto:ggilchrist@hcnj.us">ggilchrist@hcnj.us</a>	0%	0%	0%	0%

**2025 SCDRTAP and 5311 Application**

Michael Kwok	Analyst Trainee	201-369-4320	<a href="mailto:mkwok@hcnj.us">mkwok@hcnj.us</a>	0%	0%	0%	0%
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**Table 2b For example:** Operator, Dispatcher, or Reservationist, list the number of these positions and percentage charged per grant.

Table 2b

Staff Role		SCDRTAP		5311	
Title	Number of employees	Admin %	Operating %	Admin %	Operating %
1	Dispatcher	0%	0%	0%	0%
1	Scheduler	0%	0%	0%	0%
4	Reservationist	0%	0%	0%	0%
40	Vehicle Operators	0%	90%	0%	0%
2	Mechanics	0%	90%	0%	0%

- By grant, for positions that will only be partially charged to either grant, describe how the estimated percentage of the salary to be charged to the grant was derived.

Describe what mechanism(s) are used to verify the actual time that an individual spends on grant related activities.

The salaries and fringe benefits for the drivers and mechanics are totaled. This amount is divided into the total amount of allocated grant funds and unit costs is determined. All the trips being funded by SCDRTAP are assigned to that funding source in our routing and software program. We can produce reports reflecting the trips assigned to each funding source that support the Transcend program.

- Describe the methodology that is used to determine how trips are charged to each funding source or grant.

The methodology used to charge trips to a funding source is based on the confirmed eligibility of the client and the funding available. When making the client's reservation we assign the trip to a specific funding source.

- Attach an official organizational chart for those involved in your transportation program. If you contract out your service to a third-party vendor, include an organization chart for the vendor's operations. **(Attach as NJT Attachments A and B)**

6. List SCDRTAP Citizens Advisory Committee 2025 meeting dates, locations (if held online, please note which web-based application ex. ZOOM, MS Teams, etc.), and times.

Table 3

Date	Location/ Web-based Application
January 28, 2025 Re-Organization (11 a.m.–1 p.m.)	175 Lincoln Pk, Jersey City, NJ 07304
March 25, 2025 (11 a.m.–1 p.m.)	175 Lincoln Pk, Jersey City, NJ 07304
May 20, 2025 (11 a.m.–1 p.m.)	175 Lincoln Pk, Jersey City, NJ 07304
July 22, 2025 (11 a.m.–1 p.m.)	175 Lincoln Pk, Jersey City, NJ 07304
September 23, 2025 (11 a.m.–1 p.m.)	175 Lincoln Pk, Jersey City, NJ 07304
November 18, 2025 (11 a.m.–1 p.m.)	175 Lincoln Pk, Jersey City, NJ 07304

7. Provide us with the names of SCDRTAP Citizen Advisory Committee Members. Indicate if the members are senior citizens, people with disabilities, or consumer advocates, and demographics of the board. Indicate Chairperson, and if applicable, Vice-Chairperson of Committee.

Table 4

Member Name	Characteristic	Demographics
Patrick Jordan	Senior/Disabled	North Bergen
Pauline Black	Senior/Consumer	North Bergen
Maritess Ramirez	Senior/Consumer	Jersey City
Carmen Rios	Senior/Consumer	Jersey City
John Himmelman	Senior/Veteran	Bayonne
Basma Guirguis	Senior/Disabled	Hoboken

## Documents and Recordkeeping

Refer to program documents listed below that are maintained relating to program activities. Indicate which staff member(s) performs the administration and oversight of the following:

Table 5

Documents	Name and Title of Responsible Person
Grant Application/Administration	Candice Poomchonghko
	Assistant Program Coordinator
Contract (w/NJ TRANSIT)	James Ostaszewski
	Program Coordinator
Operations/Manifest	James Ostaszewski
	Program Coordinator
Financial Records	John Inagaki
	Deputy Director, Dept. of Finance & Administrations
Procurement/Bid Documents Including RFP's	Christine More
	Purchasing Agent
Daily Pre-Trip form	Stephen Martinez
	Scheduler
Maintenance Records	Abraham Deida
	Motor Pool Supervisor
Driver Training	Abraham Deida, Motor Pool Supervisor
Monthly/Quarterly Ridership Reports	James Ostaszewski
	Program Coordinator
Drug and Alcohol Data	Edmund Shea
	Risk Manager
Monitoring 3 <sup>rd</sup> Party Contractors	N/A
Complaints (ADA, Title VI, Service, etc.)	Elinor Gibney
	Deputy Director
Others	

## Procedures for Grant Administration Reporting

Complete Table 6 and **only attach any policies and procedures that have been revised since the 2024 SCDRTAP/5311 application.** Please label any attachment(s) as **NJT Attachment C.**

Table 6

PROCEDURES/POLICIES	Date Revised
Driver Manual/Operations Manual	
Reservation/In-take Policy (RSD procedures/policies)	User Guide January 2024
No Show/Denial Policy	User Guide January 2024
Fares/Donation Policy	User Guide January 2024
Vehicle Maintenance Policy	
Vehicle Accident Policy	
Capital Replacement Policy	
Third Party Monitoring Policy	
Route Deviation Policy	
Complaint Policy	User Guide January 2024
Indirect Cost Allocation Plan	
ADA Procedures/Policy (Should Include all ADA related policies including Reasonable Modification, ADA complaint, wheelchair securement etc.)	
Title VI Program Non-Discrimination Policy (update every 3 years since previous Resolution date)	
CAC By-Laws (SCDRTAP)	
Procurement Policy (County's)*	
Drug and Alcohol Plan*	
EEO Plan	
Other	
Other	
Other	

\*Required for Section 5311

## SECTION II – DESCRIPTION OF SERVICE

### Service Description

1. Describe any changes that were made (days, hours of operations) in 2023 to date.

SCDRTAP:

There have been no changes to Transcend hours of operations in 2023

Section 5311:

2. Describe in detail, by funding source, the proposed project for 2025. Include the type of service provided by grant type (*i.e.*, deviated fixed route, demand response), days and hours of operation, and trip purpose.

SCDRTAP:

In this application, the Hudson County Transcend Program proposes to provide continued Demand Response Service, Monday through Friday from 7 a.m. to 8 p.m. We presently pick up our first clients' at 7 a.m. and transport to competitive employment locations. This time frame of 7 a.m. – 9:30 a.m., is dedicated to subscription trip services. The clients are being transported to dialysis centers, competitive and non-competitive employment locations.

Non-emergency transportation is provided for eligible residents from Monday – Friday. (Services are not provided on Saturday, Sunday and major holidays). Examples of transportation are as follows:

Bus & Rail Connections  
Education, employment, and job training  
General medical appointments and treatments  
Nutrition sites  
Recreation sites  
Supermarket and shopping

Section 5311(In and out of rural area):

### Service Operations

Describe how the following functions are performed by your system. Explain any differences

between your SCDRTAP and 5311 programs.

- Demand response reservation process:
  - a. Provide the phone number for reservations and provide the hours and days reservations are accepted. If there is more than one provider, list name, telephone number and the hours and days that they accept reservations.
- Hudson County – Transcend Office reservations phone number is (201) 369-4320, Option # 2; Monday through Friday (8 a.m. – 4 p.m.).
- Clients are also referred to the Hudson County website: <https://www.hcnj.us> to find Transcend Public User Guide or documents is mailed to home address.
  
- b. What is the minimum and maximum amount of time needed to reserve a trip?
  - The minimum time needed to reserve a trip is 5 business days and the maximum is 2-week time frame advance notice.
  
- c. Will you accept a same-day reservation? (If no, please explain)
  - Yes, depending on availability.
  
- d. What is your agency's available hours for open appointments? What is your agency's available hours for subscription trips? (For example, limited capacity from 7-10am and 3-5pm due to nutrition and/or non-competitive employment).
  - Hudson County has a limited capacity from 7 a.m. – 9:30 a.m. This time frame of 7 a.m. – 9:30 a.m., is dedicated to subscription trip services. The clients are being transported to dialysis centers, competitive and non-competitive employment locations.
  
- e. Do you maintain a customer profile? If yes, what information is contained in this profile? Insert a blank client profile screenshot here.
  - Yes, Transcend maintain, customer profile and we note: full name, address telephone number/mobile number, date of birth, mobility type, language, emergency contact and ethnicity.
  
- f. Do you ensure that staff understand their responsibilities and duties as employees of a voter registration agency under the National Voter Registration Act (NVRA)?
  - Yes

- g. Did you submit your quarterly reports to the Department of Elections in 2023?  
Please provide a sample report submitted in 2023.
- Yes this was submitted. Attached is the 4<sup>th</sup> quarter of 2023 report submitted to the Department of Elections.
- h. Do you verbally afford the opportunity to register to vote to customers during the initial intake call, recertification or change of address?
- Yes
- i. How is customer eligibility verified for SCDRTAP?
- Customer's date of birth is verified verbally during the initial registration. Customer provides a doctor's note in regard to their disability, when applicable
- j. How is a trip identified as Section 5311 eligible?
- N/A
- k. Name the computer routing and scheduling software product currently used for operations. Include yearly license fee/cost for this product.
- Transcend contracts with TripSpark (known as Routematch) to maintain a fixed route software that provides trip planning, vehicle tracking and global positioning system (GPS).
  - Routematch – Annual Technical Support & Maintenance for Core System → \$51,148.45
  - Routematch – Annual Technical Support & Maintenance for Additional Licenses → \$8,137.50
  - Routematch – Notification Module → \$15,324.00
  - Routematch – Interactive Voice Response Fees → \$2,700.00
- l. How is the above computer routing and scheduling product used? Please check all that apply.
- Customer database.
  - Computer assisted routing and scheduling.
  - Generate ridership reports.
- m. Describe any other computer technology used for operations. Example: mobile data terminal, global positions systems, AVL, tablets, IVR, cameras, etc.
- Tablets – GPS & tracking for vehicle operators use

An Interactive Voice Response system notifies clients one day prior of their scheduled trip which limits no shows and cancellations.

- n. How does your telephone reservationist greet your customers when they call your agency? Provide word by word example of first interface customers have with your agency. *i.e.*, “Good Morning, thank you for calling NJ TRANSIT, how can I help you?”

“Good Morning/Afternoon, Hudson County Transcend Office, (Name of rep. speaking)”. How can I help you today?

- a. Do you provide subscription Service? If yes, what is the percentage of subscription trips you provided in 2023? Yes, the percentage of subscription trips is 48%
- b. If subscription percentages are over 60%, please explain how your agency will work towards lowering your subscription rate to meet,

### Americans with Disabilities Act (ADA) Service Provisions and Requirements

1. Does your program have a way for customers with visual impairments waiting at a stop to know what bus has arrived? Vehicle Identification Mechanisms are required on routes where multiple vehicles always serve the same stop. Please note, it is suggested that it be done as a common passenger courtesy.
- Yes      No      XN/A

2. Does your program permit individuals with disabilities to travel with their service animals?
- XYes      No

Does your agency have a current Service Animal Policy?

- Yes      No

3. Lift and Securements

- a. Do you have securements for mobility devices on your vehicles?
- XYes      No

- b. Do you service passengers whose mobility devices cannot be secured to your satisfaction on your vehicles?
- XYes      No

If yes, do you allow a passenger to remain in their mobility device without requiring them to transfer to another seat? (If no, explain)

- XYes      No

- c. Does your staff provide assistance with the use of lifts, ramps, and securement systems?

XYes      No

d. Do you permit individuals with disabilities who do not use a mobility device to use the lift or ramp, including standees?

XYes      No

e. Do you allow passengers using a wheelchair to refuse a lap belt if all other customers are not required to use one?

Yes       No

4. Do you provide service to persons using respirators or portable oxygen?

XYes      No

5. Do you ensure adequate time for individuals with disabilities to board or disembark a vehicle?

XYes      No

6. Do you provide training to operators of deviated fixed routes and demand responsive service including training for the safe operation of the vehicles and accessibility equipment and the proper treatment of people with disabilities? Drivers and support staff should have regular sensitivity training in addition to other required driver training.

XYes      No      Provided by Third-party

7. Do you make reasonable accommodations in policies, practices, or procedures when such accommodations are necessary to avoid discrimination on the basis of disability?

XYes      No

8. Do you make information about how to contact the agency to make requests for reasonable modifications readily available to the public through the same means it uses to inform the public about its policies and practices?

XYes      No

9. Did the applicant make reasonable accommodations for employees and/or passengers with disabilities during the past year in accordance with Title III of the ADA? (Please make sure your Reasonable Accommodation policy is attached as part of **NJT Attachment C**).

Yes      XNo      If yes, explain.

## Service Area Details and Feeder Service

Please note rural areas are defined by US Census data.

Complete the following by Grant:

1. List area you propose to serve in this application by grant.

**SCDRTAP:**

Transcend is proposing to provide transportation services throughout the twelve municipalities of Hudson County and bordering counties. We provide daily trips to St. Michael's, Beth Israel and UMDNJ hospitals in Newark, NJ. We also provide daily trips to Clara Maass Hospital in Belleville, NJ. We provide service to the Veterans Hospital in East Orange, NJ on Tuesday, Wednesday and Thursday. We also provide service to Hackensack Hospital in Bergen County, the first and third Thursday of each month. Transportation to New York City is provided every Tuesday to locations below 70<sup>th</sup> St. in Manhattan for medical purposes

Section 5311: (Include the specific municipalities served. Please ensure all rural area are included as these funds derived from a formula grant using population in the rural area of your county. Allocations may be altered if areas are not served.)

2. Provide a list of relevant common sites and key trip generators, including central business districts, major employment centers, shopping centers, hospitals, social service centers and colleges/universities, apartment complexes, senior living communities. Indicate those that are in your 5311-service area. In addition, provide a map of your Section 5311 service area as **~~NJT Attachment D~~**.

**(Section 5311 subrecipients are required to submit a map of your 5311 service area, if you are operating a deviated fixed route service, please indicate the route on the map.)**

3. Indicate if the proposed service feeds other services. (Check all that apply):

Private bus service SCDRTAP 5311 XNot Applicable

List bus routes \_\_\_\_\_

Municipal bus service SCDRTAP 5311 XNot Applicable

List municipalities \_\_\_\_\_

County bus service SCDRTAP 5311 XNot Applicable

List bus routes \_\_\_\_\_

County paratransit SCDRTAP 5311 XNot Applicable

List counties \_\_\_\_\_

NJ TRANSIT train service SCDRTAP 5311

List train line and stations Light rails in Hudson County, Newark Penn Station and Hoboken Station

NJ TRANSIT local fixed route bus SCDRTAP 5311 XNot Applicable

List route numbers \_\_\_\_\_

NJ TRANSIT Light Rail SCDRTAP 5311

List train line and stations All of Hudson County – Light Rail Station and train line

ACCESS LINK paratransit SCDRTAP 5311 XNot Applicable

*As per N.J.A.C. 16:78-3.2 **Eligible Service Area:** Recipients are required to provide service at least five miles beyond county boundaries under this program and are strongly encouraged to go beyond five miles if significant trip generators have been identified.*

4. Does your agency provide transportation services at least five miles beyond the county boundaries?

XYes No

a. What significant trip generators have been identified outside the county borders?

- Veteran’s Hospital, 385 Tremont Ave., East Orange, NJ
- University Hospital, 90 Bergen St., Newark, NJ
- Beth Israel Hospital, 150 Lyons Ave., Newark, NJ
- St. Michael’s Hospital, 111 Central Ave., Newark, NJ
- Clara Maass Med. Center, Belleville, NJ

b. Do you provide non-medical out-of-county trips? If no, please explain.

Yes

c. Does your agency place any restrictions on out of county trips? If yes, please explain

Yes, depends on availability.

d. Does your service extend beyond the required 5 miles outside the county borders? If yes, please explain.

Yes, we transport customers to their requested locations that are 5 miles out of the county borders, specifically Bergen and Essex County.

## Service Coordination

All service providers must have in place a Coordinated Human Service Transportation Plan (CHSTP) that has been locally developed. The CHSTP may include the intercity bus needs of seniors, people with disabilities, and low-income populations. The FTA encourages the inclusion of intercity transportation in the CHSTP.

Provide the following:

1. Name and Title of Designated Lead: Lisa Prusko, Director of Department of Aging and

Veteran Affairs for County of Hudson

- 2. Who is responsible for updating and submitting the plan? James Ostaszewski
- 3. Date last updated CHSTP: 2018 (Plans should be updated every 5 years.)

Attach all addendums and/or updates to your CHSTP from 2023 to date. Attach as **NJT Attachment E**.

- 4. Since your last CHSTP update, please list any unmet gaps/needs that have now been met.
  - Transportation in the evening has been added.
- 5. Please list tentative CHSTP stakeholder 2025 meetings dates, locations, and times (meeting can be virtual if necessary) Meetings should be scheduled at a minimum of two times a year. Meeting must be scheduled prior to submission of this application. Please remember to include the Senior Coordination Administrator on the meeting invitation.
  - February 11, 2025
  - June 17, 2025
- 6. Did your Agency hold any CHSTP meetings in 2023 to Date?

Yes       No

If yes, please list the dates of when meetings occurred. If none, please explain.

- No, because we have contracted with Rutger University to update our CHSTP. Our first meeting is scheduled for September 26, 2024.

Meeting Date\_\_\_\_\_

Meeting Date\_\_\_\_\_

Meeting Date\_\_\_\_\_

Meeting Date\_\_\_\_\_

- 7. List all formal and informal coordination efforts with other agencies, organizations, municipalities and/or counties where **no money** is involved in Table 7. The description of the service provided should include trip purposes, customer characteristics, days, and span of hours. Submit copies of all written agreements as **NJT Attachment E**.

Table 7

Name of Agency	Description of Service Provided
West Hudson location (Social Security Office, Welfare)	Demand response transportation to vital service offices. Mon-Fri, 10am-4pm.
East Newark	Group trips to quality -of-life locations. Mon-Fri, 10am-4pm.
Heightened Independence and Progress (HIP)	Group trips for the visually impaired. Mon-Fri, 10am-4pm.

8. List all contracts in which you receive **funds from an agency** to provide service. Complete Table 8. The description of the service provided should include trip purposes, customer characteristics, days, and span of hours. Submit copies of all written agreements as **NJT Attachment F**.

Table 8

Name of Agency	Contract Term	Unit Cost	Annual Revenue	Description of Service Provided
New Jersey Department of Military and Veterans Affairs	7/1/2024-6/30/2025		\$15,000.00	Transportation for Veterans
Office of Aging – Title III	1/1/2024 - 12/31/2024		\$260,228.00	Transportation for Seniors
Office of Aging – American Rescue Plan	1/1/2023 – 9/30/2024		\$252,378.00	Transportation for Seniors

**Route Deviation**

1. If you operate a route deviation service, explain how the trips are documented and how deviation requests are tracked.  
 Not Applicable, Transcend does not have fixed route services.

List routes and provide data in Table 9.

Table 9

Route by Name	Is This Route Funded by SCDRTAP?	Is This Route Funded by 5311?	Annual One-Way Trips	Annual Total Number of Times Vehicle Deviates from Route
Not Applicable				

2. Is it your policy to announce stops at transfer points, major intersections, and destination points, at adequate intervals along a route and an individual stop upon request? This requirement must be noted in the driver manual.

Yes      XNo

3. Do your vehicles have signage showing route and destination?

Yes      XNo

4. Do you allow deviation for general public passengers?

Yes      XNo

5. Do your vehicles have the universal accessibility symbol?

XYes      No

6. What is the allowable distance identified in your route deviation policy?  
Not Applicable

## School Bus/Charter/Incidental Use

Does your agency operate any school bus service?

Yes      XNo

Does your agency operate any service that is defined as charter?

Yes      XNo

*Charter service is defined as:*

*Transportation provided at the request of a third party for the exclusive use of a bus or van for a negotiated price; or*

*Transportation provided to the public for events or functions that occur on an irregular basis or for a limited duration and:*

- *A premium fare is charged that is greater than the usual or customary fixed route fare; or,*
- *The service is paid for in whole or in part by a third party.*

**Please complete NJT Attachment G; Charter Service Certification Form.**

Does your agency provide meal delivery or other incidental services?

Yes      XNo

If yes, at what times of the day?

Do the services interfere with the provision of transit service?

Yes      XNo

## Training

1. List all Trainings provided throughout 2023 to date. If third party service is contracted, please include their operational trainings, including safety and security trainings.
  - Diversity in the workplace and Defense Driving Practice.

2. Have any new trainings been implemented since your last application? Include all third party service contracted new trainings.

Yes      No

If yes, please list.

3. Do you, or your third party, provide training for your Administration /Operations staff?

Yes      No

If yes, list trainings and recertification requirements.

- ADA Training for the American Disabilities Act.

4. Do you, or your third-party, provide training for your drivers?

Yes      No

If yes, list trainings and recertification requirements.

- \* Diversity in the workplace and Defense Driving Practice.

5. Does your agency have a certified driver trainer on staff, or do you outsource your trainings?

- Yes

## 2024 Short-Term Program Goals Review

Please provide in detail the status of your agency's 2024 goals and completed deliverables.

### **2024 Goal 1. Increase group trips to various quality of life locations.**

Milestones 1 - Coordinate with various senior centers to deliver increased group trips.

Milestones 2 - Coordinate with non-profits and county offices to increase group trips.

**Group Trips to these locations have increased this year by 25%.**

**2024 Goal 2. Increase out-of-county trip services to customers.**

Milestones 1 - This service will be communicated to customers via office contact, senior centers, flyers and Hudson County website.

Milestones 2 - Transcend will track month ridership of out of county trips/destinations

**Yes, we have expanded of location outside of our county and have provided over 120 trips to these locations this year.**

**2024 Goal 3. To provide same day reservations, when available.**

Milestones 1 - Fill driver vacancies to increase capacity to customers.

Milestones 2 - Follow up with clients that have requested same day reservations and provide rides when available. Communicate other means of local transportation to clients.

**Yes, we have slowly started to implement this program based on openings available to service same day reservations.**

Have any of the milestones in 2024 goals not been met? If not, please explain.

The have all been met, but not to the percentage of increase that we have content with.

**2025 Short-Term Program Goals**

List at least three goals to improve your system in grant year 2025. Include Milestones on how you will obtain these goals.

**Goal 1. Purchase of Four (4) New Cutaway Vehicles**

Milestones 1: Acceptance of Bids for these vehicles

Milestones 2: Delivery of these Vehicles

**Goal 2. Obtaining additional funding by pursuing Grants or entering into agreements with agencies**

Milestones 1: Using a Grant Writer hired by the County

Milestones 2: Obtaining & assessing a list of what Grants are available to us.

**Goal 3. Increase Ridership by 5%**

Milestones 1: Supplying our updated brochure to a list of Doctors & Physical Therapy Sites.

Milestones 2: Tracking new registrations from these sites.

**SECTION III – BUDGET**

**Program Budgets**

Complete the attached Excel spreadsheets for your grant year 2023 Expenditure and grant year 2025 projected budgets. Please make sure to include **ALL** funding sources. You can edit the heading to include funding sources that are not listed.

**Close-out funds**

Does your agency have carry-over funds that will be added into the 2025 SCDRTAP budget? Please note close-out funds should be added to your 2025 allocation and **shown in the attached budget spreadsheet 2025 proposed budget by funding source**. Be sure that the funds were not previously requested by way of a budget modification. Also, keep in mind that if you don't indicate close-out funds in this application but later request it there is a possibility the availability of funds will be delayed.

Yes      No

What Calendar year(s) carryover funds will be added to the 2025 budget? \_\_\_\_\_

Provide the amount of funds that will be added. None

To what budget will you be adding your carryover funds to?

Operating    Administration    Capital    Not applicable

Describe in detail what your carryover funds will be allocated for.

**Alternative Revenue Total Collected for Calendar Year 2023**

1. Is a fare charged to use your 5311 service?

Yes      No    Not applicable

2. Is a fare charged to use your SCDRTAP service?

Yes      No

3. Is there a donation policy used with your 5311 service?

- Yes      No    Not applicable

4. Is there a donation policy used with your SCDRTAP service?

- Yes      XNo

5. Are funds from donations and fares placed in an account for transportation only?

- Yes      XNo

If no, explain.

Hudson County – Transcend Office does not collect any fares or donations.

6. Explain how donations/fares are collected.

Not applicable.

7. Complete Table 10 with all dollar amounts earned through alternative revenue sources.

Table 10

Alternative Revenue	Revenue Collected in 2023	Revenue Projected for 2025
Fares/SCDRTAP	\$0	\$0
Fares/5311	N/A	N/A
Donations/SCDRTAP	\$0	\$0
Donations/5311	N/A	N/A
Advertising on vehicles	\$0	\$0
Medicaid (Modivcare)	N/A	N/A
Revenue Contracts	\$0	\$0
Other: Hackensack Hospital	\$11, 205.00	\$0
Other		
Total	\$11,205.00	\$0

### Indirect Administrative Costs

1. Do you charge indirect cost to either SCDRTAP or 5311?

If yes, attach your approved Indirect Cost Plan as ~~NJT Attachment H.~~

SCDRTAP

Yes  No

5311

Yes  No  Not applicable

What federal agency has approved your indirect cost plan for 5311?

Not applicable

2. Has the applicant made a change in its accounting system and/or cost rate proposed methodology, thereby affecting the previously approved cost allocation plan/indirect cost rate and its basis of application?

Yes  No

### Third-Party Purchases

1. Current Third Party Contracting

Please list all transit-related third-party purchases and contracts that were funded to a third party. (*i.e.*, transportation services, computer routing/scheduling or services, dispatching, auditing, drug and alcohol testing, legal, and marketing, vehicles, maintenance)

Table 11 – SCDRTAP 2023

Name of Agency	Contract Term	Unit Cost	Annual Cost	Description of Purchased
N/A				

Table 12 – 5311 2023

Name of Agency	Contract Term	Unit Cost	Annual Cost	Description of Service Purchased
N/A				

2. Proposed Third Party Service Contracting

Please list all transit-related third party proposed service contracts that will be funded to a third party. (*i.e.*, transportation services, , dispatching, auditing, drug and alcohol testing, legal, marketing, maintenance, *etc.*)

Table 13– SCDRTAP 2025 Service Contracts

Name of Agency	Contract Term	Unit Cost	Annual Cost	Description of Service Purchased
N/A				

Table 14 – Section 5311\* 2025

Name of Agency	Contract Term	Unit Cost	Annual Cost	Description of Service Purchased
N/A				

3. Proposed SCDRTAP Capital Purchases

Please list all proposed Capital Purchases that will be funded to a third party.

Table 15 – Capital\* 2025

Name of Item	Description of Service Purchased	Estimated Unit Cost	Quantity
Rolling Stock	N/A	N/A	N/A
Communication Equipment	N/A	N/A	N/A
Passenger Bus Stop Signs	N/A	N/A	N/A
Lift/ Securement Devices	N/A	N/A	N/A
Computer Hardware/ Software	N/A	N/A	N/A
Misc.	N/A	N/A	N/A

\*All procurements for SCDRTAP and S5311 over \$1,000 require prior approval of NJ TRANSIT, this includes service and capital procurements. Section 5311 third party contracts must include applicable federal clauses and be reviewed and approved by

NJ TRANSIT prior to advertising. All vendors with multiyear contracts under FTA programs must sign annual certifications in order to remain compliant.

## SECTION IV – PROJECT EQUIPMENT

### Vehicle Inventory

Attach a current inventory list of all vehicles in fleet using excel spreadsheet that was provided. If possible, inventory should be sorted by oldest model year listed first. Attach as **NJT Attachment I**. (Use the provided Excel spreadsheet.)

The inventory includes:

- A. License plate number.
- B. NJ TRANSIT Vehicle number.
- C. VIN.
- D. Mileage.
- E. Funding Source.
- F. Vehicle Manufactured Year.
- G. Vehicle Manufacturer – (engine manufacturer) - Ford, International, Chevy, *etc.*
- H. Vehicle Body – when a chassis or body is altered by another manufacturer (such as Blue Bird, Champion), the company completing the alteration is considered the body manufacturer.
- I. Vehicle Model – the manufacturer’s model name and/or number.
- J. Vehicle Type.
- K. Vehicle Length:
  - Bus 40 ft. – large transit bus.
  - Bus 35 ft. – medium transit bus.
  - Bus < 30 ft. – small transit bus, 18-24 passengers.
  - Bus < 30 ft. – minibus (158” WB).
  - Bus < 30 ft. – extended minibus (176” WB).
  - Automobile/Sedans – Sedan/wagons.
  - Accessible minivan.
  - Van.
  - Sports Utility Vehicle-SUV.
- L. Acquisition Cost.
- M. Federal Participation Percentage (if applicable).
- N. Location.
- O. Condition.
- P. In-service Date/Acquisition Date.
- Q. Projected Retirement Date – *All counties should have a vehicle replacement plan.*
- R. Proposed Disposition Action (Auctioned; Active; Competitive Sale Process, Transferred, Returned to NJ TRANSIT).
- S. Fuel – DF (Diesel); GA (Gas); AF (Alternative Fuel).

- T. Floor Plan – Please include number of seats; number of foldaways; foldaway type; number of securements. For example: If you have a vehicle that can seat 14 and has a floor plan that seats 12 ambulatory, has one double foldaway seat that seats an additional two and one securement position up you would provide information as follows:
- Number of seats: 12.
  - Number of Foldaway: 1.
  - Foldaway: (seats one or two) 2.
  - Number of securements: 1.
- U. Number of Accessible Locations.
- V. Title Holder.
- W. Federal Award Information Number (FAIN) (If applicable).
- X. Useful Life.
- Y. Disposal Date.
- Z. Sale Price.
- AA. Method used to Determine Fair Market Value (if applicable).

### Non-Vehicle Inventory

SCDRTAP funded non-vehicle inventory, for those subrecipients who have used SCDRTAP funds to purchase non-vehicle items. Attach as **NJT Attachment J**. (Use provided Excel spreadsheet.)

Inventory/Asset Name	Serial Number	Funding Source	Grant Year	Date of Purchase	Original Purchase Price	Maintenance Plan Required for Items over \$5,000.00*	Date Useful Life will be met
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*All items purchased with SCDRTAP funding must be tagged with grant year, funding source and date of purchase.*

### Capital Disposal 2023

1. Did the applicant dispose of any vehicles and/or equipment purchased with SCDRTAP funds in calendar year 2023 to date?

Yes       XNo

If yes, were any vehicles and/or equipment removed from service before the end of useful life?

Yes\*       XNo

\*If yes, complete the Table 16 below.

2. Did the applicant dispose of any vehicles and/or equipment purchased with Section 5311 funds in 2023?

Yes       No       Not Applicable

If yes, were any vehicles and/or equipment removed from service before the end of useful life?

Yes\*       No     Not Applicable

\*If yes, complete the Table 16 below.

Table 16

Description of Disposed Equipment	Grant Used to Purchase Equipment			Was NJ TRANSIT notified?		Notification Date	Amount Received if Auction or Sold	Was Supporting Documentation Submitted?		Appraised Value if Vehicle was removed prior to useful life	Name of Appraiser
	SCDRTAP	5311	Other explain	Yes	No			Yes	No		
N/A											

## SECTION V – PUBLIC OUTREACH

### Public Outreach Activities

1. Describe special events, presentations, conferences, articles, news coverage, reports or any other forms of media that the county participated in 2023 to date. In addition, if applicable, describe any activities that may be planned for 2025.

Outreach activities that are being planned for 2024 include in person presentations to senior centers, congregate nutrition sites and resource fairs.

2. Provide a list of locations of where transportation marketing materials are distributed in the service area. How often are they distributed to these locations?
  - a. Hudson County – Website
  - b. Hudson County – Office of Cultural Affairs
  - c. Transportation vehicles
  - d. Congregate nutrition sites
  - e. Resource Fairs
  - f. Senior recreation sites
  - g. Non-profit organizations
  
3. In planning public transportation services, private sector providers must be given an opportunity to express their views. How does the subrecipient allow for input on services from private operators in the service area?

Yes, we invite public and private sector providers to our Coordinated Human Services Transportation Plan (CHSTP).

## Marketing Materials

1. Attach SCDRTAP and Section 5311 marketing materials. (*i.e.*, system brochure, timetables, cable TV ads, advertising, mailings, newspaper articles and of website). Attach as **NJT Attachment K**.

2. Do you prioritize any of your trip requests? If yes, please explain.

- No, we do not.

Attach a screen shot of your website's transportation system profile which includes the following information: eligibility, trip purpose and service area, *etc.* **NJT Attachment L**.

3. Do you make service information available in accessible format upon request?

Yes       No

## Public Hearing and Notification (only required for SCDRTAP funding)

Attach all documents as **NJT Attachments M1-M7**.

1. The notice should include the location, when and where the application will be available for public review. The notice must be advertised in two different newspapers at least 30 days prior to the public hearing dates. Submit notarized copies of both public notices with application as **NJT Attachment M1**.
2. The Public Hearing Notice must be sent to all Municipal Clerks. The Public Hearing Notice must also be sent to county organizations, agencies, and associations that serve senior citizens and people with disabilities. Submit a list of organizations that the letter was sent to as **NJT Attachment M2**.
3. A large print of the Public Hearing Notice must be posted on all system vehicles. Notice must be posted on all vehicles at least 30 days prior to the public hearing and left on the vehicles until the date of the hearing. Submit a sample of the vehicle notice as **NJT Attachment M3**.

## Prior and After Public Hearing Date:

1. Prior to the Public Hearing a copy of the 2025 budget and goals must be available for public review on the County Website and in the Public Library, (at least 14 days after the public hearing date). Include in the exhibit the screen shot of website and copies of correspondence requesting the posting, and/or name of the Branch, address and date copy was placed in Library as **NJT Attachment M4**.

## **2025 SCDRTAP and 5311 Application**

2. Once your application is completed an electronic copy of the 2025 application must be placed on the county website for public review. Attach a screen shot of the county website with the link to the electronic application as **NJT Attachment M5**.
3. The County must meet with their local CAC to review the proposed service activities, goals, and budget for 2025. Their input and feedback should be considered in the planning process for this application. Please indicate the date of this CAC meeting and include copy of meeting minute notes showing application was reviewed with CAC members as **NJT Attachment M6**.
4. Copies of the 2025 application (if available) or a summary of proposed activities, goals and proposed budget should be available at the public hearing.
5. Complete public hearing transcripts must be submitted. If not available by application due date, the transcripts can be submitted after the application's filing deadline as **NJT Attachment M7**. *Pending on hearing date on 9/26/24*

**SECTION VI – ADDENDUMS**

**SCDRTAP Maintenance of Effort (MOE) Certification**

Excerpt from Guidelines, Description, and Certification of Maintenance of Effort (MOE):

- a. The purpose of the Senior Citizen and Disabled Resident Transportation Assistance Program to provide for additional or expanded transportation services to senior citizens and disabled residents. Therefore, designated recipients must maintain the same level of funding for senior citizen and transportation services as prior years.
- b. In order to comply with this Maintenance of Effort (MOE) requirement, the application must contain senior citizen and disabled resident transportation non-capital expense data from the past two years prior to the implementation of the Senior Citizen and Disabled Resident Transportation Assistance Program. This data should include non-capital expenditures of the designated recipient and/or applicant and any other agency, group, or groups, which will participate in the coordinated transportation program. Data from groups joining the coordinated system since the implementation of the Senior Citizen and Disabled Resident Transportation Assistance Program must be added to the original year period immediately preceding their joining the coordinated system.

Actual Maintenance of Effort for 2023            \$4,153,734.82

Proposed Maintenance of Effort for 2025    \$ 4,326,807.10

If the MOE for 2025 has increased/decreased, please explain below:

The maintenance effort for 2025 has increased due to a 4% union contracted increase in salaries and increase in the fridge benefit rate.

## Sample of Required SCDRTAP Application Cover Letter

Attach as **NJT Attachment N**.

Date

Janelle Rivera, Director  
NJ TRANSIT  
Local Programs and Community Mobility  
One Penn Plaza East, 4<sup>th</sup> floor  
Newark, New Jersey 07105-2246

Dear Ms. Rivera:

The (Name of County) is hereby applying for funds under Senior Citizens and Disabled Residents Transportation Assistance Program (SCDRTAP). The approval of this grant will enable transportation services to be available to the senior citizens and disabled residents in our County. (Name of County) is requesting \$\_\_\_\_\_ for 2025. The scheduled public hearing date is \_\_\_\_\_. The application will be available at the following locations \_\_\_\_\_ as of the following date \_\_\_\_\_.

To my knowledge, all information provided in support of this application is true and correct. If you have questions or require additional information, please contact (Name and Title of Principal Organization Contact) at (Phone Number).

As the Applicant, the (Name of County) agrees to comply with all regulations and administrative guidance required for application to the Senior Citizens and Disabled Resident Transportation Assistance Program for the program year 2025. The Applicant affirms the truthfulness and accuracy of the information it has made in the statements submitted herein and any other submission made to NJ TRANSIT. In signing this document, I declare the foregoing information and any other statement made on behalf of the Applicant are true and correct.

Sincerely,

(Signature of Authorized Representative of Applicant)

Print Name  
Title of Authorized Representative of Applicant

## SCDRTAP Applicant Authorizing and Supporting Resolution

Sample Text for Authorizing Resolution. Attach as ***NJT Attachment O***.

Resolution authorizing the filing of an application to NJ TRANSIT on behalf of (Subrecipient) for a grant under the Senior Citizen and Disabled Resident Transportation Assistance Act, as amended.

WHEREAS, in 1984 the governor of New Jersey signed into law legislation creating the "Senior Citizen and Disabled Resident Transportation Assistance Act;" and,

WHEREAS, under this law Casino Tax Revenues may be utilized for the provision of elderly (60+) and disabled transportation; and,

WHEREAS, the county of (Name of County) must submit an application to NJ TRANSIT Corporation to obtain funding in amount of \$\_\_\_\_\_ for period covering January 1, 2025 to December 31, 2025;

NOW, THEREFORE, BE IT RESOLVED BY (Name of Governing Body)

1. (Title of Subrecipient's Designated Official) shall forward one (1) original application together with one (1) certified copy of this resolution to:

NJ TRANSIT  
Local Programs and Minibus Support  
One Penn Plaza East- 4<sup>th</sup> Floor  
Newark, NJ 07105-2246; and,

2. BE IT FURTHER RESOLVED, that the (Name of Subrecipient's Designated Official) is hereby authorized to execute the necessary contractual agreements on behalf of the county of (Name of County).

**SECTION VII – 5311 ADDITIONAL ITEMS**

The following are only required by Section 5311 Applicants

**Opinion of Counsel Letter- 5311**

Sample Opinion of Counsel-Attach as **NJT Attachment P**.

(Date)

(Name of Applicant)  
(Address of Applicant)

To Whom It May Concern:

This communication will serve as the requisite opinion of counsel to be filed with NJ TRANSIT in connection with the application of Name of Applicant for financial assistance pursuant to the provisions of Section 5311 of the Federal Transit Act, as amended for administration, capital, and operating assistance project(s). The legal authority for (Name of Applicant's) ability to carry out administration, capital and/or operating assistance projects directly, by lease, contract, or otherwise is set forth below:

(Name of Applicant) is authorized to provide and assist public transportation by acquisition, construction and operation of existing or additional transit facilities. This assistance may be provided directly or by agreements with other parties.

The authority of (Name of Applicant) to provide funds for the local share of the project is set forth in (cite source and provide a copy of, for example, of the local ordinance passed by the County Board of Commissioners or other governing body authorizing funding for the local share, if applicable).

I have reviewed the pertinent Federal State and local laws, and I am of the opinion that there is no legal impediment to making an application for Section 5311 assistance. Furthermore, as a result of my examination, I find that there is no pending or threatened litigation or other action, which might in any way adversely affect the proposed project in the program or the ability of Name of Applicant to carry out such projects in the program.

Sincerely,

Legal Counsel

## ADA Certification of Equivalent Service

### NJT Attachment Q.

The **(name of agency)** certifies that its demand responsive/ Route Deviation service offered to individuals with disabilities, including individuals who use wheelchairs, is equivalent to the level and quality of service offered to individuals without disabilities. Such service, when viewed in its entirety, is provided in the most integrated setting feasible and is equivalent with respect to:

- Response time.
- Fares.
- Geographic service area.
- Hours and days of service.
- Restrictions on trip purpose.
- Availability of information and reservation capability, and,
- Constraints on capacity or service availability.

In accordance with 49 CFR 37.77, public entities operating demand responsive/ Route Deviation systems for the general public which receive financial assistance under 49 U.S.C. 5311 or 5307 must file this certification with the appropriate state program office before procuring any inaccessible vehicle. Such public entities not receiving FTA funds shall also file the certification with the appropriate state program office. Such public entities receiving FTA funds under any other section of the FT Act must file the certification with the appropriate FTA regional office. This certification is valid for no longer than one year from its date of filing.

\_\_\_\_\_  
(Name of authorized official)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Signature)

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

## Civil Rights

### Equal Employment Opportunity (EEO)

An EEO program is required if an applicant in previous Federal fiscal year (only FTA funds) - received in excess of \$1 million or planning assistance in excess of \$250,000 and has 100 or more mass transit related employees.

For the period January 1, 2023 through December 31, 2023, answer the following:

1. How many transit related employees does your agency have?  
50
2. Is the applicant required to have an EEO Program?  
 Yes       No
  - a. If yes, does the applicant have an approved program in place?  
 Yes       No
  - b. If no required program is in place, provide the estimated date of completion.  
Date:
3. Were any complaints received between the period January 1, 2023 and December 31, 2023?  
 Yes       No

If yes, summarize complaints, any informal or formal EEO complaints (only from transit related employees) received, and describe how these complaints were addressed or resolved.

## Title VI

Does your agency have a current approved Title VI program submitted to NJ TRANSIT?

Yes       No

Date of Current Resolution: \_\_\_\_\_

Has your agency received any complaints, investigations, or lawsuits alleging discrimination in the delivery of transportation service within the last three years?

Yes       No

If yes, provide a description of the allegation and the current status and/or outcome.

Has any federal entity conducted a Title VI compliance review of your agency within the last three years?

Yes      No

If yes, provide the following:

- Purpose/Reason for Review.
- Name of the Agency that Performed the Review.
- Summary of Findings/Recommendations.
- Status and/or Disposition.

Do you have any pending grant applications to other federal agencies (besides FTA)?

Yes      No

If yes, provide a brief description of pending applications to other federal agencies.

Has your agency had a finding of noncompliance by any other federal agency?

Yes      No

## Financial Management Systems

1. Does the applicant have fiscal control and accounting procedures sufficient to do the following:
  - a. Permit the preparation of reports necessary to comply with program and statutory requirements.  
XYes      No
  - b. Permit the tracking of funds to ensure that funds have not been used in violations of restrictions and prohibitions applicable to program.  
XYes      No
2. Please describe the accounting system used – include the name of the system.  
MSI – County of Hudson – Internal Accounting System
3. Do you keep separate accounting records for this project?  
XYes      No

## Suspension and Debarment

It is the Section 5311 subrecipient's responsibility to ensure that none of their third-party contractors are debarred, suspended, ineligible, or voluntarily excluded from participation in FTA funded projects.

**2025 SCDRTAP and 5311 Application**

Has the required suspension/debarment clause been included in bid specs (services or capital) and the final contract for all third-party contracts over \$25,000 utilizing FTA Section 5311 funds? (For bid specs and contracts covering 2023-2024 contract year.)

Yes      No    Not applicable

Prior to entering into third-party contracts over \$25,000 (services or capital) agency must review the website System for Awards Management (SAM) at [www.sam.gov](http://www.sam.gov). The new website [sam.gov](http://sam.gov) provides a more detailed profile of the vendor including disbarment, a UEI (Unique Entity Identifier) number, and federal debt then previous excluded party listing system website. (Subrecipient should print screen which would show date website was checked and verify whether vendor was NOT debarred or suspended from participating in federally funded contracts.)

Did subrecipient check SAM prior to entering into a contract with vendor during 2023-2024?

Yes      No

If applicable, who is your Third-Party Vendor?

What is your Third-Party Vendor's Unique Entity Identification number? (*UEI number can be obtained via SAM.gov*)

Is your Third-Party Vendor an active entity?

Yes      No    Not applicable

Please include a copy of their SAM.gov profile as **NJT Attachment R**. (*Agencies are required to confirm Third-Party active registration status on an annual basis.*)

**Local In-Kind Match and Match Source – 5311**

Do you plan on using an in-kind match for 2025 5311?

Yes\*       No     Not applicable

What is the total amount and source(s) of the match?

Total Amount \$ \_\_\_\_\_ Source(s): \_\_\_\_\_

\*Documentation must be submitted by applicants who indicated they would be providing an in-kind match in the period **January 1, 2025, to December 31, 2025.**

Provide a breakdown of proposed match dollars in Table 17.

Table 17

Funding Match Source	Match Amount 5311
Local Funds: (list)	
State Funds: (list) ( <i>i.e.</i> , Human Service funding)	
Revenue Contracts (list) ( <i>i.e.</i> , vehicle advertising contracts list indicate revenue source/contracts used as match)	
Federal (Non-FTA)	
SCDRTAP funding	
In-Kind (list)	
Other specify	
Total	

**5311 Budget Request**  
**FTA Non-Urbanized Area Formula Program (Section 5311)**  
**January 1, 2025 - Dec 31, 2025**  
**Project Budget Request (include Match)**

Table 18

<b>Operating</b>	Budget Request
Total Operating (should include total budget for this program)	
(-Fares)	
(-Donation)	
Total Operating	
<b>Administrative (up to 10%)</b>	Budget Request
Total Administrative	
<b>GRAND TOTAL</b>	

### **Special Section 5333(b)**

The attached Special Warranty and the procedures incorporated therein represent the understandings of the Department of Labor and the Department of Transportation with respect to the formula Grant Program for Areas Other Than Urbanized Areas (C.F.R. U.S.C. Section 5311).

The Department of Transportation will make this Special Warranty a part of the contract of assistance between the U. S. Department of Transportation and each state agency designated to receive and administer funds under Section 5311 of the Urban Mass Transportation Act of 1964, as amended.

The Secretary of Labor has found that the terms and conditions of the Special Warranty meet the requirements of Section 5333(b) of the Urban Mass Transportation Act of 1964, as amended. Accordingly, the Secretary of Labor hereby makes the certification that inclusion of these terms and conditions in formula grant contract for small urban and rural program grants meets the requirements of Section 5311 of the Urban Mass Transportation Act of 1964, as amended.

#### **A. General Application**

The Public Body (A) agrees that, in the absence of waiver by the Department of Labor, the terms and conditions of this warranty, as set forth below, shall apply for the protection of the transportation related employees of any employer providing transportation services assisted by the Project (Recipient), and the transportation related employees of any other surface public transportation providers in the transportation service area of the project.

The Public Body shall provide to the Department of Labor and maintain at all times during the Project an accurate, up-to-date listing of all existing transportation providers which are eligible Recipients of transportation assistance funded by the Project, in the transportation service area of the Project, and any labor organizations representing the employees of such providers.

Certification by the Public Body to the Department of Labor that the designated Recipients have indicated in writing acceptance of the terms and conditions of the warranty arrangement will be sufficient to permit the flow of Section 5311 funding in the absence of a finding of non-compliance by the Department of Labor.

#### **B. Standard Terms and Conditions**

The Project shall be carried out in such a manner and upon such terms and conditions as will not adversely affect employees of the Recipient and of any other surface public transportation provider in the transportation service area of the Project. It shall be an obligation of the Recipient and any other legally responsible party designated by the Public Body to assure that any and all transportation services assisted by the Project are contracted for and operated in such a manner that they do not impair the rights and interest of affected employees. The term a Project, as used herein, shall not be limited to the particular facility, service, or operation assisted by Federal funds, but shall include any changes, whether organizational, operational, technological, or otherwise, which are a result of the assistance provided. The phrase "as a result of the Project," shall when used in this arrangement, include events related to the Project occurring in anticipation of, during, and subsequent to the Project and any program of efficiencies or economies related thereto; provided, however, that volume rises and falls of

business, or changes in volume and character of employment brought about by causes other than the Project (including any economies or efficiencies unrelated to the Project) are not within the purview of this arrangement.

An employee covered by this arrangement, who is not dismissed, displaced or otherwise worsened in his position with regard to his employment as a result of the Project, but who is dismissed, displaced or otherwise worsened solely because of the total or partial termination of the Project, discontinuance of Project services, or exhaustion of Project funding shall not be deemed eligible for a dismissal or displacement allowance within the meaning of paragraphs (6) and (7) of the Model agreement or applicable provisions of substitute comparable arrangements.

- a. Where employees of a Recipient are represented for collective bargaining purposes, all Project services provided by that Recipient shall be provided under an in accordance with any collective bargaining agreement applicable to such employees which is then in effect.
- b. The Recipient or legally responsible party shall provide to all affected employees sixty (60) days notice of intended actions which may result in displacements or dismissal or rearrangements of the working forces. In the case of employees represent by a union, such notice shall be provided by certified mail through their representatives. The notice shall contain a full and adequate statement of the proposed changes, and an estimate of the number of employees affected by the intended changes, and the number and classifications of any jobs in the Recipient=s employment available to be filled by such affected employees
- c. The procedures of this subparagraph shall apply to cases where notices involve employees represented by a union for collective bargaining purposes. At the request of either the Recipient or the representatives of such employees' negotiations for the purposes of reaching agreement with respect to the application of the terms and conditions of this arrangement shall commence immediately. If no agreement is reached within twenty (20) days from the commencement of negotiations, any party to the dispute may submit the paragraph (4) of this warranty. The foregoing procedures shall be complied with and carried out prior to the institution of the intended action.

For the purpose of providing the statutory required protections including those specifically mandated by Section 5333(b) of the Act, the Public Body will assure as a condition of the release of funds that the Recipient agrees to be bound by the terms and conditions of the National (Model) Section 5333(b) Agreement executed July 23, 1975, identified below<sup>2</sup>, provided that other comparable agreements may be substituted therefore, if approved by the Secretary of Labor and certified for inclusion in these conditions.

Any dispute or controversy arising regarding the application, interpretation, or enforcement of any of the provisions of this arrangement which cannot be settled by and between the parties at interest within thirty (3) days after the dispute or controversy first arises, may be referred by any such party to any final and binding disputes settlement procedure acceptable to the parties, or in the event they cannot agree upon such procedure, to the Department of Labor or an impartial third party designated by the Department of Labor for final and binding determination. The compensation and expenses of the impartial third party, and any other jointly incurred expenses shall be borne equally by the parties to the proceeding and all other expenses shall be paid by the party incurring them.

In the event of any dispute as to whether or not a particular employee was affected by the Project, it shall be his obligation to identify the Project and specify the pertinent facts of the Project relied upon. It shall then be the burden of either the Recipient or other party legally responsible for the application of these conditions to prove that factors other than the Project affected the employees. The claiming employee shall prevail if it is established that the Project had an effect upon the employee even if other factors may also have affected the employee.

The Recipient or other legally responsible party designated by the Public Body will be financially responsible for the application of these conditions and will make the necessary arrangements so that any employee covered by these arrangements, or the union representative of such employee, may file claim of violation of these arrangements with the Recipient within sixty (60) days of the date he is terminated or laid off as a result of the Project, or within eighteen (5311) months of the date his position with respect to his employment is otherwise worsened as a result of the Project. In the latter case, if the events giving rise to the claim have occurred over an extended period, the 18-month limitation shall be measured from the last such event. No benefits shall be payable for any period prior to six (6) months from the date of the filing of any claim.

Nothing in this arrangement shall be construed as depriving any employee of any rights or benefits which such employee may have under existing employment or collective bargaining agreements, nor shall this arrangement be deemed a waiver of any rights of any union or of any represented employee derived from any other agreement or provision of federal, state or local law.

In the event any employee covered by these arrangements is terminated or laid off as a result of the Project, he shall be granted priority of employment or reemployment to fill any vacant position within the control of the Recipient for which he is, or by training or retraining within a reasonable period can become qualified. In the event training or retraining is required by such employment or

reemployment, the Recipient or other legally responsible party designated by the Public Body shall provide, or provide for, such training or retraining at no cost to the employee.

The Recipient will post, in a prominent and accessible place, a notice stating that the Recipient has received federal assistance under the Urban Mass Transportation Act and has agreed to comply with the provisions of Section 5333(b) of the Act. This notice shall also specify the terms and conditions set forth herein for the protection of employees. The Recipient shall maintain and keep on file all relevant books and records in sufficient details as to provide the basic information necessary to the proper application, administration, and enforcement of these arrangements and to the proper determination of any claims arising thereunder.

Any labor organization which is the collective bargaining representative of employees covered by these arrangements, may become a party to these arrangements by serving written notice of its desire to do so upon the Recipient and the Department of Labor. In the event of any disagreement that such labor organization represents covered employees, or is otherwise eligible to become a party to these arrangements, as applied to the Project, the dispute as to whether such organization shall participate shall be determined by the Secretary of Labor.

In the event the Project is approved for assistance under the Act, the foregoing terms and conditions shall be made part of the contract of assistance between the federal government and the Public Body or Recipient of federal funds; provided, however, that this arrangement shall not merge into the contract of assistance, but shall be independently binding and enforceable by and upon the parties thereto, and by any covered employee or his representative, in accordance with its terms, nor shall any other employee protective agreement merge into this arrangement, but each shall be independently binding and enforceable by and upon the parties thereto, in accordance with its terms.

C. Waiver

As a part of the grant approval process, either the recipient or other legally responsible party designated by the Public Body may in writing seek from the Secretary of Labor a waiver of the statutory required protections. The Secretary will waive these protections in cases, where at the time of the requested waivers, the Secretary determines that there are no employees of the Recipient or of any other surface public transportation providers in the transportation services area who could be potentially affected by the Project. A 30-day notice of proposed waiver will be given by the Department of Labor and in the absence of timely objection; the waiver will become final at the end of the 30-day notice period. In the event of timely objection, the Department of Labor will review the matter and determine whether a waiver shall be granted. In the absence of waiver, these protections shall apply to the Project.

**5333(b) Certification Letter**

Attach as **NJT Attachment S**.

Date:

Janelle Rivera, Director  
NJ TRANSIT  
Local Programs and Community Mobility  
One Penn Plaza East, 4<sup>th</sup> floor  
Newark, New Jersey 07105-2246

Dear Ms. Rivera:

The (Name of Applicant) has made an application to NJ TRANSIT and the Federal Transit Administration pursuant to Section 5311 of the Federal Transit Act, as amended for a mass transportation grant to assist in the reimbursement of operating and/or non-operating expenses for the period January 1, 2025, to December 31, 2025.

The (Name of Applicant) agrees that in the absence of a waiver by the Department of Labor, the terms and conditions of the Special Section 5333(b) Warranty shall apply for the protection of the employees of any employer providing transportation service assisted by the Project, and the employees of any other surface public transportation providers which are eligible recipients, in the transportation service area of the Project. The Warranty arrangement shall be made part of the contract of assistance and shall be binding and enforceable by and upon the parties thereto, by any covered employee or his representative.

Additionally, pursuant to Section (A) of the Special Section 5333(b) Warranty, included with this submission is a listing of all transportation providers in the geographic area of our project and any labor organizations representing the employees of such providers.

Sincerely,

Signature of Authorized Representative  
Title

## Listing of Operators and Union Representatives

As part of the 5333(b) warranty process applicants must submit an accurate and up-to-date listing of all existing transportation providers in the Section 5311 service area of the project. Applicants must also include any labor organizations representing such providers. A complete statewide list (**Exhibit C**) is submitted by NJ TRANSIT to the US Department of Labor. Do not include NJ TRANSIT as a transportation provider in your area.

Check **Exhibit C** carefully and submit **all** changes on Table 19 below (include any additions, deletions, or changes to the transportation providers listed in Exhibit C – do not retype information from or on Exhibit C). Note if a (D)eleletion, (A)ddition or (C)hange to the Exhibit by adding a (D), (A), or (C) after the name of the provider in the first column. If “no changes,” indicate that below.

To assist you we also included a list of major private for-profit transportation providers in the state on Exhibit A. Take note that other organizations including taxi and private non-profit organizations may provide transportation and have union representation as well and should be listed.

Note to applicant – include your county and indicate if there is a driver union.

Table 19

Other Transportation Providers in Section 5311 Service Area	(A)add (C)change (D)delete	Name of Union	Union Address	Union Phone Number	E-Mail Address of Union

## Sample of Required S5311 Application Cover Letter

Attach as **NJT Attachment T**.

Date

Janelle Rivera, Director  
NJ TRANSIT  
Local Programs and Community Mobility  
One Penn Plaza East, 4<sup>th</sup> floor  
Newark, New Jersey 07105-2246

Dear Ms. Rivera:

The (Name of Applicant) is hereby applying for a grant under FTA Section 5311 of the Federal Transit Act, as amended. The approval of this grant will enable public transportation services to be available to the small urban and rural residents of our service area.

(Name of Applicant) is requesting Non-Operating and/or Operating Assistance for the period **January 2025–December 2025**. The total amount of federal and state funds requested is as follows:

### January 2025–December 2025

	OPERATING:	NON-OPERATING:
FTA Section 5311 Funds:		
State match funds:		
Local match funds:		
Total:		

To my knowledge, all information provided in support of this application is true and correct. If you have questions or require additional information, contact Name and Title of Principal Organization Contact and Phone Number.

Sincerely,

(Signature of Authorized Representative of Applicant)

Print Name

Title of Authorized Representative of Applicant

## S5311 Applicant Authorizing and Supporting Resolution

The applicant must also attach a supporting resolution in the application if any portion of the Applicant's local match comes from another organization, municipality, government entity or other funding source. Below is Sample Text for Authorizing Resolution. **Attach as NJT Attachment U.**

Resolution authorizing the filing of an application to NJ TRANSIT and the Department of Transportation, United States of America, on behalf of (Subrecipient) for a grant under the Federal Transit Act, as amended.

WHEREAS, the Secretary of Transportation is authorized to make grants for a general public transportation program of projects in other than urbanized areas under Section 5311 of the Federal Transit Act, as amended;

WHEREAS, the grant for financial assistance will impose certain obligations upon the Subrecipient (Legal Name of Applicant), including the provision of the local share of the project costs in the program;

WHEREAS, it is required by the U.S. Department of Transportation in accordance with the provisions of Title VI of the Civil Rights Act of 1965, that in connection with the filing of an application for assistance under the Federal Transit Act, as amended, the Subrecipient gives an assurance that it will comply with Title VI and EEO requirements of the Civil Rights Act of 1964 and U.S. Department of Transportation requirements; and

WHEREAS, the Subrecipient is required to adhere to the requirements as specified in the U.S. Department of Transportation's Minority Business Enterprise (MBE) regulation set forth in 49 C.F.R. Part 23, Subpart D.

NOW, THEREFORE, BE IT RESOLVED BY (Name of Governing Body)

1. That (Title of Applicant's Designated Official) is authorized to execute and file an application on behalf of Subrecipient (Legal Name of Applicant) with NJ TRANSIT who as the Designated Recipient will apply to the U.S. Department of Transportation requesting aid in the financing of administration, and/or operating assistance projects pursuant to Section 5311 of the Federal Transit Act, as amended.
2. That (Title of Applicant's Designated Official) is authorized to execute and file with such applications and assurance, or any other document required by the U.S. Department of Transportation effectuating the purposes of Title VI and EEO requirements of the Civil Rights Act of 1964.
3. That (Title of Applicant's Designated Official) is authorized to set forth and execute affirmative minority business policies pursuant to 47 C.F.R. Part 23, Subpart D.
4. That (Title of Authorized Representative) is authorized to furnish such additional information as the U.S. Department of Transportation may require in connection with the application.
5. That (Title of Applicant's Designated Official) is authorized to execute grant agreements on behalf of Legal Name of Applicant for aid in the financing of the administration, and/or operating assistance.
6. That (Governing Body of Applicant) hereby authorizes the amount of (\$ amount) be obligated as the local share required under the provisions of the grant application.

**NJT Attachment T - CHARTER SERVICE COMPLIANCE CERTIFICATION**

This certification must be submitted annually to NJ TRANSIT’s Department of Local Programs by each subrecipient who operates vehicles and/or receives federal funds under any Federal Transit Administration (FTA) Program administered by NJ TRANSIT. This form confirms your Charter activity for the prior calendar year.

<https://www.transit.dot.gov/regulations-and-guidance/access/charter-bus-service/charter-bus-service-regulations-0>

N/A – My agency does not engage in any charter activities as defined in 49 CFR part 604

\*Agency Name: County of Hudson – Transcend Office

\* Must type Agency Name (whether you check N/A above)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name of Authorized Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Subrecipients and their contractors, are prohibited from using federally funded equipment or facilities to provide charter service, except on an incidental basis; and then, only when one or more of the six exceptions set forth in the charter service regulation in 49 CFR Section 604.9 (b) apply. Other conditions include recovering the fully allocated cost of the service and putting the revenues earned back into your transportation Program.

**The following are the limited exceptions when a subrecipient may provide charter service:**

- **Official government business;**
- **Qualified Human Service Organizations (elderly, persons with disabilities, and low-income individuals);**
- **When no registered charter provider responds to a notice sent by a subrecipient;**
- **Leasing (must exhaust all available vehicles first);**
- **By agreement with all registered charter providers;**
- **Petitions to the Administrator: Events of regional or national significance, or hardship.**

If charter service is provided under one of these exceptions, please complete below:

**Charter Service Certification:**

As required by FTA regulations, (name of county) hereby certifies that it is in compliance with 49 CFR part 604 which states that subrecipients of FTA assistance that provided charter services must comply with the FTA Charter Regulations. This includes posting charter service requests on the FTA’s Register Charter Provider Website. This further certifies that the subrecipient has documented each and every use of the equipment awarded by NJ TRANSIT for charter service including the customer, dates, times, equipment identification, trip origin, and destination.

**Location of Charter Service Records:**

The records for charter service operated by the above-named subrecipient during the calendar year mentioned above are currently maintained at the following address:

**I hereby make the above certifications and state that I am an authorized official of the county.**

Print name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Exhibit A – A List of Private Bus Operators Serving New Jersey

<p>Atlantic Express Coachways, Inc. 7 North Street Staten Island, NY 10302 718-556-8078 FAX: 718-556-8042 Ms. Laura Cagnetta Safety Director: Mr. Ron Caruso</p>	<p>Bestway Coach Express, Inc. 2 Mott Street Suite 705 New York, NY 10013 212-608-8988 FAX: 212-608-9169 E-MAIL: <a href="mailto:info@bestwaycoach.com">info@bestwaycoach.com</a> WEBSITE: <a href="http://www.bestwaycoach.com">www.bestwaycoach.com</a> Mr. Wilson Cheng Mr. Kelvin Chan</p>	<p>Classic Tours/Classic Cruisers, Inc. 1533 Prospect Street Lakewood, NJ 08701 732-657-1144 FAX: 732-367-8233 By request only Mr. Mark R. Waterhouse</p>
<p>Express Tours, Inc/Golden Express 15 Division Street 3<sup>rd</sup> Floor New York, NY 10002 212-966-8433 FAX: 212-343-7207 Mr. Richard Chow Ms. May Chow</p>	<p>Greyhound Lines, Inc. 3104 Pacific Avenue Atlantic City, NJ 08401 609-345-5921 FAX: 609-345-5927 Mr. Nate Karp E-MAIL: <a href="mailto:nkarp@greyhound.com">nkarp@greyhound.com</a></p>	<p>Infinity Tours, Inc. 6013 Al Ventura Road Wallington, NJ 07057 201-507-5055 FAX: 201-507-5001 Ms. Mary Ann Kamrowski Safety Director: Mr. Tom Boyle</p>
<p>Jay/Nay Travel PMB 106-621 Beverly Rancocas Road Willingboro, NJ 08046 609-877-7127 FAX: 609-877-7546 E-MAIL: <a href="mailto:sales@jayandnaytravel.com">sales@jayandnaytravel.com</a> WEBSITE: <a href="http://www.jayandnaytravel.com">www.jayandnaytravel.com</a> Mr. John Mills Ms. Renee Mills</p>	<p>Lakeland Bus Lines, Inc. PO Box 898 425 E. Blackwell Street Dover, NJ 07802-0898 973-366-0600 Ext. 632 FAX: 973-366-8012 E-MAIL: <a href="mailto:ttaylor@lakelandbus.com">ttaylor@lakelandbus.com</a> WEBSITE: <a href="http://www.lakelandbus.com">www.lakelandbus.com</a> Mr. Tom Taylor Ext. 632 Mr. Tom Graves</p>	<p>Leprechaun Lines, Inc 100 Leprechaun Lane New Windsor, NY 12550 845-565-7900 FAX: 845-565-1220 E-MAIL: <a href="mailto:fgallagher@leprechaunlines.com">fgallagher@leprechaunlines.com</a> Mr. Frank Gallagher</p>
<p>Martz Lines 239 Old River Road Wilkes-Barre, PA 18702 570-821-3838 FAX: 570-821-3813 E-MAIL: <a href="mailto:shenry@martzgroup.com">shenry@martzgroup.com</a> WEBSITE: <a href="http://www.martzgroup.com">www.martzgroup.com</a> Mr. Scott E. Henry</p>	<p>Passaic Valley Coach Lines 71 River Road Chatham, NJ 07928-1930 973-635-2374 FAX: 973-635-0199 E-MAIL: <a href="mailto:www.wayne@passaicvalleycoach.com">www.wayne@passaicvalleycoach.com</a> WEBSITE: <a href="http://passaicvalleycoach.com">passaicvalleycoach.com</a> Mr. Wayne Braunwarth</p>	<p>Rockland Coaches 180 Old Hook Road Westwood, NJ 07675 201-263-1254 ext. 418 FAX: 201-664-8036 E-MAIL: <a href="mailto:david.gee@coachusa.com">david.gee@coachusa.com</a> Mr. David Gee</p>
<p>Peter Pan Bus Lines 25 County Avenue Secaucus, NJ 07094 201-866-6001 FAX: 201-866-6234 E-MAIL: <a href="mailto:frank@peterpanbus.com">frank@peterpanbus.com</a> WEBSITE: <a href="http://www.peterpanbus.com">www.peterpanbus.com</a> Mr. Frank Farrow</p>	<p>Raritan Valley Bus Service PO Box 312 Metuchen, NJ 08840-0312 732-549-1212 FAX: 732-549-1168 E-MAIL: <a href="mailto:www.raritanvalleybus.com">www.raritanvalleybus.com</a> Mr. Steve Yelencsics Mr. Steve Yelencsics, Jr.</p>	<p>Safety Bus 7200 Park Avenue Pennsauken, NJ 08109 856-665-2662 FAX: 856-665-0658 Mr. Thomas Dugan, Jr.</p>
<p>Sheppard Bus Service 35 Rockville Road Bridgeton, NJ 08302 856-451-4004 FAX: 856-453-1620 E-MAIL: <a href="mailto:john@sheppardbus.com">john@sheppardbus.com</a> Mr. John Sheppard Mr. Ken Sheppard</p>	<p>Starr Tours 2531 E. State Street Trenton, NJ 08619 609-587-0626 FAX: 609-587-3052 E-MAIL: <a href="mailto:msussman@starrtours.com">msussman@starrtours.com</a> Mr. Mitchell Sussman</p>	<p>Stout's Charter Service, Inc. 20 Irven Street Trenton, NJ 08638 609-883-8891 FAX: 609-883-6682 E-MAIL: <a href="mailto:vivian@stoutsbu.com">vivian@stoutsbu.com</a> WEBSITE: <a href="http://www.stoutsbu.com">www.stoutsbu.com</a> Mr. Harry Stout Mr. Shawn Stout</p>
<p>Trans-Bridge Lines 2012 Industrial Drive Bethlehem, PA 18017 610-868-6001 Ext. 122 FAX: 610-868-9057 WEBSITE: <a href="http://www.transbridgebus.com">www.transbridgebus.com</a> Mr. Tom JeBran Mr. Len Marzen</p>	<p>Travelynk, INC 52 Bailly Drive Burlington, NJ 08016 201-232-0563 FAX: 201-232-0563 Michael Rodriguez</p>	<p>Triple D Travel PO Box 3208 Hamilton, NJ 08619 609-631-0200 FAX: 609-631-0047 Mr. David A. Tenney</p>

**2025 SCDRTAP and 5311 Application**

<p>Vanderhoof Transportation 18 Wilfred Street West Orange, NJ 07052 973-325-0700 FAX: 973-669-9639 WEBSITE: <a href="http://www.evanderhoof.com">www.evanderhoof.com</a> Mr. Edward Vanderhoof</p>	<p>Via Bus 19 Tilton Street Hammonton, NJ 08037 609-567-7705 800-890-4756 FAX: 609-567-2328 Mr. Glenn Davis</p>	<p>Short Line/Hudson Transit/Coach USA 4 Leisure Lane Mahwah, NJ 07430 201-529-3666 ext. 1036 FAX: 201-529-0221 <a href="mailto:Christine.Falzone@coachusa.com">mailto:Christine.Falzone@coachusa.com</a> George Grieve <a href="mailto:george.grieve@coachusa.com">george.grieve@coachusa.com</a> Mr. George Grieve</p>
<p>Villani Bus Company 811 East Linden Avenue Linden, NJ 07036 908-862-3333 FAX: 908-474-8058</p>	<p>Coach USA Northeast Region 349 First Street Elizabeth, NJ 07206 908-354-3330 FAX: 908-994-9338 E-MAIL: <a href="mailto:john.emberson@coachusa.com">john.emberson@coachusa.com</a> Mr. John Emberson</p>	<p>Community Coach 160 South Route 17 North Paramus, NJ 07652 201-225-7515 FAX: 201-225-7590 E-MAIL: <a href="mailto:jon.nguyen@coachusa.com">jon.nguyen@coachusa.com</a> Jon Nguyen</p>
<p>Suburban Transit 750 Somerset Street New Brunswick, NJ 08901 732-249-1100 ext. 201 FAX: 732-545-7015 WEBSITE: <a href="mailto:ronald.kohn@coachusa.com">ronald.kohn@coachusa.com</a> Mr. Ronald Kohn</p>	<p>MPC Bus corp 320 Nassau Blvd, Garden City, NY 11530 718-647-2988-3600 FAX: 718-235-8075 E-MAIL: <a href="mailto:avona@totalbuscompany.com">avona@totalbuscompany.com</a> Mr. Augustino Vona</p>	<p>Salem County Local Bus Service 88B Industrial Road Pennsville, NJ 08070 856-678-877 Mr. Steven Schalick</p>
<p>Independent Bus, Olympia Trails, O.N.E. Bus, all Coach USA companies 349 First Street Elizabeth, NJ 07206 Jim Rutherford  <a href="mailto:Jim.Rutherford@coachusa.com">Jim.Rutherford@coachusa.com</a> 908-372-6132</p>	<p>Broadway Bus 1329 Kennedy Blvd Bayonne, NJ 07002 Emil Massa <a href="mailto:Emass1@msn.com">Emass1@msn.com</a> 201-339-4848</p>	<p>Atlantic City Jitney Association 6821 Deliah Road Egg Harbor, NJ 08234 Emmanuel Mathioudakis <a href="mailto:president@jitneyac.com">president@jitneyac.com</a> 609-646-8642</p>

**Exhibit B – Designated Leads for Human Services Transportation Coordination Plan**

<b>County</b>	<b>Lead</b>	<b>E-mail</b>	<b>Phone Number</b>
Atlantic	Ms. Maribel Pabon	<a href="mailto:pabon_maribel@aclink.org">pabon_maribel@aclink.org</a>	609-645-7700 x4058
Bergen	Mr. Rodyn Sanchez	<a href="mailto:rsanchez@co.bergen.nj.us">rsanchez@co.bergen.nj.us</a>	201-336-3380
Burlington	Mr. Jerry Kilkenny	<a href="mailto:jkilkenny@co.burlington.nj.us">jkilkenny@co.burlington.nj.us</a>	609-265-5597
Camden	Ms. Dominic D’Amico	<a href="mailto:ddamico@sja.com">ddamico@sja.com</a>	856-427-0988
Cape May	Mr. Thomas Conrad	<a href="mailto:Thomas.Conrad@CO.CAPE-MAY.NJ.US">Thomas.Conrad@CO.CAPE-MAY.NJ.US</a>	609-889-3700 x107
Cumberland	Ms. Barbara Nedohon	<a href="mailto:barbarane@co.cumberland.nj.us">barbarane@co.cumberland.nj.us</a>	856-453-2220
Essex	Mr. Michael Viera	<a href="mailto:michaelmvsr@aol.com">michaelmvsr@aol.com</a>	973-395-8418
Gloucester	Ms. Lisa Cerny	<a href="mailto:lcerny@co.gloucester.nj.us">lcerny@co.gloucester.nj.us</a>	856-686-8362
Hudson	Mr. James Ostaszewski	<a href="mailto:jostaszewski@hcnj.us">jostaszewski@hcnj.us</a>	201-369-5280 x4231
Hunterdon	Ms. Tara Shepherd	<a href="mailto:Tshepherd@gohunterdon.org">Tshepherd@gohunterdon.org</a>	908-788-5553
Mercer	Ms. Taraun McKnight	<a href="mailto:tmcknight@mercercounty.org">tmcknight@mercercounty.org</a>	609-530-1970 x17
Middlesex	Mr. Stanley Subjinski	<a href="mailto:Stanley.Subjinski@co.middlesex.nj.us">Stanley.Subjinski@co.middlesex.nj.us</a>	732- 745-4029
Monmouth	Mr. Matthew Spadaccini	<a href="mailto:Matthew.Spadaccini@co.monmouth.nj.us">Matthew.Spadaccini@co.monmouth.nj.us</a>	732-431-6480
Morris	Ms. Christine Hellyer	<a href="mailto:chellyer@co.morris.nj.us">chellyer@co.morris.nj.us</a>	973-285-6858
Ocean	Mr. David Fitzgerald	<a href="mailto:dfitzgerald@co.ocean.nj.us">dfitzgerald@co.ocean.nj.us</a>	732-736-8989 x235
Passaic	Mr. Ahmet Akdag	<a href="mailto:ahmeta@passaiccountynj.org">ahmeta@passaiccountynj.org</a>	973-305-5763
Salem	Ms. Mathew Goff	<a href="mailto:mathew.goff@salemcountynj.gov">mathew.goff@salemcountynj.gov</a>	856-339-8644
Somerset	Mr. John Adair	<a href="mailto:Jadair@co.somerset.nj.us">Jadair@co.somerset.nj.us</a>	908-231-7116
Sussex	Mr. Nick Kapetanakis	<a href="mailto:nkapetanakis@sussex.nj.us">nkapetanakis@sussex.nj.us</a>	973-940-5200x1287
Union	Ms. Nicole Schichnes	<a href="mailto:nschichnes@ucnj.org">nschichnes@ucnj.org</a>	908-659-5001
Warren	Ms. Laura Richter	<a href="mailto:lrichter@co.warren.nj.us">lrichter@co.warren.nj.us</a>	908-475-6331

**SECTION VIII – COMPLETE APPLICATION CHECKLIST OF DOCUMENTS**

The following documents are to be attached to this application.

- NJT Attachment A Organizational Chart
- ~~NJT Attachment B Vendor Organization Chart (if applicable)~~
- NJT Attachment C Policies and Procedures
- ~~NJT Attachment D Section 5311 Service Map (5311 only if applicable)~~
- ~~NJT Attachment E CHSTP Addendums/Updates~~
- ~~NJT Attachment E CHSTP Written Agreements (if applicable)~~
- NJT Attachment F Contracts Program receives funds from (if applicable)
- ~~NJT Attachment G Charter Service Compliance Certification~~
- ~~NJT Attachment H Indirect Cost Plan (if applicable)~~
- NJT Attachment I Vehicle Inventory (use spreadsheet provided)
- ~~NJT Attachment J Non Vehicle Inventory (5311 only)~~
- NJT Attachment K Marketing Materials
- NJT Attachment L Website Screenshot
- NJT Attachment M1 Notarized Copies of Public Notice
- NJT Attachment M2 List of Organizations for Public Hearing Notice
- NJT Attachment M3 Large Print Vehicle Notice
- NJT Attachment M4 Library Public Notice Information
- NJT Attachment M5 Website Screen Shot Public Notice
- NJT Attachment M6 CAC Meeting Public Notice
- NJT Attachment M7 Public Hearing Transcript – meeting @ 9/26/24
- NJT Attachment N SCDRTAP Application Cover Letter
- NJT Attachment O SCDRTAP Resolution BOC Meeting on 9/10/24 wait res.
- ~~NJT Attachment P Opinion of Counsel Letter (5311 only)~~
- NJT Attachment Q ADA Certification of Equivalent Service
- NJT Attachment R SAM. gov Screenshot
- ~~NJT Attachment S 5333(b) Certification Letter (5311 only)~~
- ~~NJT Attachment T 5311 Application Cover Letter~~

~~NJT Attachment U~~ ~~5311 Resolution~~

2023 Actual Expenditures/2025 Proposed Budget

**Excel Spreadsheet Attachments:**

- 2023 Actual Expenditures by funding source/2025 Proposed budget by funding source.
- NJT Attachment I Vehicle Inventory.
- NJT Attachment J Non-Vehicle Assets.

**Exhibits:**

- **Exhibit A**: List of Private Bus Operators Serving New Jersey.
- **Exhibit B**: Designated Leads for Human Services Transportation Coordination Plan.
- **Exhibit C**: Transportation Providers and Labor Representatives Spreadsheet 2023.