

RESOLUTION NO. 2015116

RE: AUTHORIZING EXECUTION OF APPLICATIONS AND GRANT AGREEMENTS FOR FUNDING PURSUANT TO U.S.C TITLE 49 SECTION 5311

Legislator HUTCHINGS, BOLNER, BORCHERT, HORTON, MICCIO, SAGLIANO, WEISS, and FARLEY offer the following and move its adoption:

WHEREAS, the County is submitting a request for a consolidated grant of funds to the New York State Department of Transportation, pursuant to Section 5311, Title 49 United States Code, for a Public Transportation Project, which is the continuance of public mass transportation service in rural and small urban areas on a continuing basis in Dutchess County, and

WHEREAS, the grant requests for fiscal year 2015 are \$87,000.00 and for fiscal year 2016 is \$96,000.00 in connection with this Public Transportation Project, and

WHEREAS, the County and the State of New York entered into a Federal Transit Operating Assistance Agreement which has a term of January 1, 2013 through December 31, 2018, identified as State Contract # C005591, which authorizes the continuance of the Public Transportation Project and the payment of the federal share therefore, be it

RESOLVED, that the County Executive or his designee be and hereby is authorized to sign the application (s) and grant agreements in connection with the Public Transportation Project which is the continuance of public mass transportation service in rural and small urban areas in Dutchess County, and be it further

RESOLVED, that the County Executive or his designee be and hereby is authorized to sign any contracts between the County and any third party subcontractor necessary to provide the Public Transportation Project.

CA-077-15
CAB/kvh/G-0930-B
03/12/15

Fiscal Impact: See attached statement

STATE OF NEW YORK

ss:

COUNTY OF DUTCHESS

This is to certify that I, the undersigned Clerk of the Legislature of the County of Dutchess have compared the foregoing resolution with the original resolution now on file in the office of said clerk, and which was adopted by said Legislature on the 13th day of April 2015, and that the same is a true and correct transcript of said original resolution and of the whole thereof.

IN WITNESS WHEREOF, I have hereunto set my hand and seal of said Legislature this 13th day of April 2015.

CAROLYN MORRIS, CLERK OF THE LEGISLATURE

FISCAL IMPACT STATEMENT

NO FISCAL IMPACT PROJECTED

APPROPRIATION RESOLUTIONS

(To be completed by requesting department)

Total Current Year Cost \$ 174,000

Total Current Year Revenue \$ 87,000

and Source

\$87,000 federal 5311 funds 2015

87,000 county matching funds 2015

\$96,000 federal 5311 funds 2016

96,000 county matching funds 2016

Source of County Funds *(check one)*: Existing Appropriations, Contingency,
 Transfer of Existing Appropriations, Additional Appropriations, Other *(explain)*.

Identify Line Items(s):

ET5680.45890.01

Related Expenses: Amount \$ _____

Nature/Reason:

Anticipated Savings to County: \$87,000

Net County Cost (this year): \$87,000

Over Five Years: _____

Additional Comments/Explanation:

This resolution will authorize the County Executive or his designee to apply for, accept, and sign applications and/or agreements related to federal 5311 Rural Operating Assistance funds for 2015 and 2016.

This funding is available through the Federal Transit Operating Assistance Agreement identified as State Contract #C005591 which has a term of January 1, 2013 - December 31, 2018. The funding will provide \$87,000 for 2015 and \$96,000 for 2016. Operating Assistance requires a 50/50 match, therefore we must have \$174,000 in expenses to receive \$87,000 in reimbursement for 2015, and have \$192,000 in expenses to receive \$96,000 in 2016.

Prepared by: Cynthia Ruiz, Transit Administrator

Prepared On: 2/25/2015

NEW YORK STATE DEPARTMENT OF TRANSPORTATION
5311 CONSOLIDATED GRANT APPLICATION FOR FEDERAL ASSISTANCE
NON-URBANIZED AREA PUBLIC TRANSPORTATION PROGRAM (2015-2016)

PART 1 - GENERAL INFORMATION **For NYSDOT Office Use Only**

Name and Address of Applicant: (County, City, Indian Reservation, Intercity Bus Operator, or Regional Transportation Authority)				Approved By	
Name: Dutchess County Public Transit				Operating P.N.I.s	
Address: 14 Commerce Street				Capital P.N.I.s	
Payee Address: (if different than above)				Date	
ONS Number: 198718827	Fed ID: 14-6002566	NYS Vendor ID:			

Applicant Contact (Contact person responsible for application)		Title:	Assistant General Manager
Name:	Joseph P. Mangi	Phone:	845-473-8645
Address:	14 Commerce Street	Fax:	845-473-8662
	Poughkeepsie, NY 12603	Email:	jmangi@dutchessny.gov

Operator 1: System Name & Manager (Applicants who also provide service to enter information)		Operator 2: System Name & Manager (Add additional Operator #2 here)	
System Name:	Transit Management of Dutchess County Inc.	System Name:	Not Applicable
Contact/Title:	Larry J. Morris	Contact/Title:	
Address:	34 Brattleboro Drive	Address:	
	Greensburg, PA 15601		
Phone:	724-689-6041	Phone:	
Fax:		Fax:	
Email:	larry.morris@firstgroup.com	Email:	

Operator 3: System Name & Manager (Add additional Operator #3 here)		Operator 4: System Name & Manager (Add additional Operator #4 here)	
System Name:	Not Applicable	System Name:	Not Applicable
Contact/Title:		Contact/Title:	
Address:		Address:	
Phone:		Phone:	
Fax:		Fax:	
Email:		Email:	

PART 2 - PROJECT DESCRIPTION

Area Served: List the specific Municipalities in the service area to the right:	Dulchees County			
Funding Type	Fiscal Year From & To (Mo/Day/Yr)	Insert "X" in box if Applying	Estimated Project Cost	Federal Assistance
Operating Assistance 2015	From 01/01/15 To 12/31/15	X	\$5,798,806	\$87,000
Operating Assistance 2016	From 01/01/16 To 12/31/16	X	\$5,798,230	\$96,000
Capital Assistance 2015-16			\$0	\$0

PART 3 - PROJECT CERTIFICATION

I certify that the accompanying data in this application are true and correct to the best of my knowledge and belief and are supported by our records.

<p align="right">Marcus J. Molinaro, County Executive</p>	<p align="center">Title</p>	<p align="center">Date</p>
<p><i>Signature of Chief Elected or Designated Official</i></p>		

Payment for invoices submitted by Municipalities shall be rendered electronically unless payment by check is authorized by the Commissioner. Payments shall be made in accordance with state process. Authorization forms are available at <http://osc.state.ny.us/epay/about.htm>, by e-mail at epayments@osc.state.ny.us, by telephone at 518-474-4032.

EXHIBIT 2

FEDERAL FISCAL YEAR 2015 CERTIFICATIONS AND ASSURANCES FOR TRANSIT ASSISTANCE PROGRAMS

Dutchess County Public Transit

Applicant

PLEASE READ

FEDERAL FISCAL YEAR 2014 CERTIFICATIONS AND ASSURANCES LINK BELOW By signing below you are certifying you have read these Certifications and Assurances.
<http://fteamweb.flh.dot.gov/slat/certsAndAssurance/2015-Certs-TEAM.pdf>

The Applicant agrees to comply with applicable provisions of Categories 1 - 24 below (if so, check to the right).

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

Description
1. Required Certifications and Assurances for Each Applicant
2. Lobbying
3. Procurement and Procurement Systems
4. Private Sector Protections
5. Rolling Stock Reviews and Bus Testing
6. Demand Responsive Service
7. Intelligent Transportation Systems
8. Interest and Financing Costs and Acquisition of Capital Assets by Lease
9. Transit Asset Management Plan and Public Transportation Agency Safety Plan
10. Alcohol and Controlled Substances Testing
11. Fixed Guideway Capital Investment Grants Program (New Starts, Small Starts, and Core Capacity) and Capital Investment Program in Effect before MAP-21 Became Effective
12. State of Good Repair Program

Description
13. Fixed Guideway Modernization Grant Program
14. Bus and Bus Facilities Formula Grants Program and Bus and Bus Related Equipment and Facilities Grant Program (Discretionary)
15. Urbanized Area Formula Grants Programs, Passenger Ferry Grants Program, and Job Access and Reverse Commute (JARC) Program
16. Seniors/Elderly/Individuals with Disabilities Programs/New Freedom Program
17. Rural/Other Than Urbanized Areas/Appalachian Development/Over-the-Road Bus Accessibility Programs
18. Tribal Transit Programs (Public Transportation on Indian Reservations Programs)
19. Low or No Emission/Clean Fuels Grant Programs
20. Paul S. Sarbanes Transit in Parks Program
21. State Safety Oversight Program
22. Public Transportation Emergency Relief Program
23. Expedited Project delivery Pilot Program
24. Infrastructure Finance Programs

AFFIRMATION OF APPLICANT

Dutchess County Public Transit

Applicant

Cynthia Ruiz, Transit Administrator

Name and Relationship of Authorized Representative

BY SIGNING BELOW, on behalf of the Applicant, I declare that the Applicant has duly authorized me to make these Certifications and Assurances and bind the Applicant's compliance. Thus, the Applicant agrees to comply with all Federal statutes and regulations, and follow applicable Federal directives, and comply with the certifications and assurances as indicated at the link above, as applicable to each application it makes to the Federal Transit Administration (FTA) in Federal Fiscal Year 2015, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent the Applicant.

FTA intends that the certifications and assurances the Applicant selects, as representative of the certifications and assurances in this document, should apply, as provided, to each project for which the Applicant seeks now, or may later, seek FTA assistance during Federal Fiscal Year 2015

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

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

Signature: _____

Date: _____

AFFIRMATION OF APPLICANT'S ATTORNEY

(Each Applicant for financial assistance and an active project must provide an Affirmation of Applicant's Attorney pertaining to legal capacity.)

Dutchess County Public Transit

Applicant

Carol Bogle

Name of Attorney for Applicant

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

I further affirm to the Applicant that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these certifications and assurances, or of the performance of the project.

Signature: _____

Date: _____

Print: _____

Attorney for Applicant

Each Applicant for FTA funding and each FTA Grantee with an active Capital or Formula Project must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its signature in lieu of the Attorney's signature, provided the Applicant has on file this Affirmation, signed by the attorney and dated this Federal fiscal year.

THIRD PARTY SIGNATURE (IF APPLICABLE)

Operator 1	Transit Management of Dutchess County Inc.
Operator 2	Not Applicable
Operator 3	Not Applicable
Operator 4	Not Applicable
Mobility Mgr	

Operator 1	Lary J. Morris, Region Vice President
Operator 2	
Operator 3	
Operator 4	
Mobility Mgr	

Third Party Applicant(s)

Name and Relationship of Authorized Representative(s)

BY SIGNING BELOW, on behalf of the Applicant, I declare that the Applicant has duly authorized me to make these certifications and assurances and bind the Applicant's compliance. Thus, the Applicant agrees to comply with all Federal statutes and regulations, and follow applicable Federal directives, and comply with the certifications and assurances as indicated at the link above, applicable to each application it makes to the Federal Transit Administration (FTA) in Federal Fiscal Year 2015

FTA intends that the certifications and assurances the Applicant selects, as representative of the certifications and assurances in this document, should apply, as provided, in each project for which the Applicant seeks now, or may later, seek FTA assistance during Federal Fiscal Year 2015.

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

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

Operator 1:	_____	Date	/ /	Operator 2:	_____	Date	/ /
Operator 3:	_____	Date	/ /	Operator 4:	_____	Date	/ /
Mobility Mgr:	_____	Date	/ /				