### **VEHICLE REGISTRATION FEE**

### **Annual Program Compliance Report**

### Reporting Fiscal Year 2016-2017

AGENCY CONTACT INFORMATION				
Agency Name:	City of San Leandro			
Date:	12/6/2017			
Primary Point of Contact				
Name:	Austine Osakwe			
Title:	tle: Senior Engineer			
Phone:	510-577-3486			
Email:	aosakwe@sanleandro.org			

### Agency's Certification of True and Accurate Reporting by Submission

By submitting this Compliance Report to the Alameda County Transportation Commission, the submitting agency certifies the compliance information reported is true and complete to the best of their knowledge, and the dollar figures in the agency's Audited Financial Statement matches exactly to the revenues and expenditures reported herein.

### Program Compliance Report Structure

This Reporting Form is broken into the following sections for the Vehicle Registration Fee Direct Local Distribution Programs applicable to the recipient agency.

- \* Cover Agency Contact
- \* General Compliance Reporting for all programs
- \* Table 1 Summary of Revenue, Expenditures, and Changes in Fund Balance
- \* Table 2 Detailed Summary of Expenditures and Accomplishments

#### VEHICLE REGISTRATION FEE

### Annual Program Compliance Report Fiscal Year 2016-2017

### TABLE 1: SUMMARY OF REVENUE, EXPENDITURES, AND CHANGES IN FUND BALANCE

DIRECTIONS: Complete the sections below based on the VRF Audited Financial Statements. Values must match financial statements and total reported expenditures.

### A. VEHICLE REGISTRATION FEE Direct Local Distribution Program

	Local Streets and Roads	Notes
Beginning of Year Fund Balance	<mark>\$ 636,938</mark>	
Revenue Interest	\$ 428,403   \$ 2,343	
Expenditures Expenditures Matches Table 27	\$ 495,834 TRUE	
End of Year Fund Balance	\$ 571,850	

### Local Streets and Roads (LSR) Direct Local Distribution Program Reporting Period - Fiscal Year 2016-17

### GENERAL COMPLIANCE REPORTING

1. What is agency's current Pavement Condition Index (PCI	)? PCI =	56
Use PCI from the most recent MTC's VitalSigns linked here:	http://www.vitalsigns.mtc.ca.gov/street-pavemen	t-condition

## If your PCI falls below a score of 60 (fair condition), specify what actions are being implemented to increase the PCI.

Indicate N/A, if not applicable.

NA

In 2015 City residents approved a local sales tax measure that increases our sales tax add-on from 1/4% to 1/2%. A portion of this money is being directed to street rehabilitation. In addition, the grant funds provided the City is also being used to aggressively improve City's PCI.

2. Were any DLD LSR funded improvements this year provided exemptions from the locally adopted complete street's policy? If so, which projects and why?

3. Specify any large planned uses of fund balances within this program and their status i.e. planned or underway.

Project Title	Brief Project Description	Anticipated DLD Expenditure	Project Status

4. Confirm the completion of the publicity requirements in the table below (Yes/No).

	VRF (yes/no)	Copy of Article, website, signage Attached?	If applicable, briefly explain why the publicity requirement wasn't completed.
Article	Yes	Yes	See attached evidence of article submittal
Website	Yes	Yes	https://www.sanleandro.org/depts/transit/project/defaul t.asp
Signage	Yes	Yes	See attached

# Local Streets and Roads Direct Local Distribution Program Reporting Period - Fiscal Year 2016-17

Provide a detailed summary of VRF Expenditures for the reporting fiscal year. - Expenditure total must correspond to your Audited Financial Statements and Table 1 values Project **Primarily Capital** Project Project Quant Category or Administrative Phase Туре Complet (Drop-down (Drop-down Menu) Expenditure? (Drop-down Menu) Project Name Project Description/Benefits FY 16-No. Menu) 1 Streets/Rds Construction Annual Street Sealing 2015-16 Street Resurfacing/Mair Capital Maintain existing roadway 12.2 2 Streets/Rds Project Completion/Cl Street Resurfacing/Mair Capital Marina Blvd/I-880 HOV Project Improve circulation 1 3 100% Percentage of Capital vs Administrative Costs 495,834 a. Total Capital \$ \$ b. Total Administrative

If your agency did not expend greater than 50% of total costs on Capital Investments, explain how capital investments will increase in the future over Program Administration (outreach, staffing, administrative support). *Indicate N/A if not applicable.* 

N/A.

ntity eted in 6-17	Units for Quantity (Drop-down Menu)	Additional description on units or expanded detail on expenditures, performance, accomplishments		Expenditures	Governing Board Approved?
• =/	menay	P		-	
.25	Lane Miles	F	\$	435,145	Yes
	,		_	435,145 60,689	Yes Yes
	Lane Miles		\$		
	Lane Miles	TOTAL	\$ \$		