PAPCO
Paratransit
Program Plan
Review
Subcommittee

MEASURE B/BB

SPECIAL TRANSPORTATION

FOR

SENIORS AND PEOPLE

WITH DISABILITIES



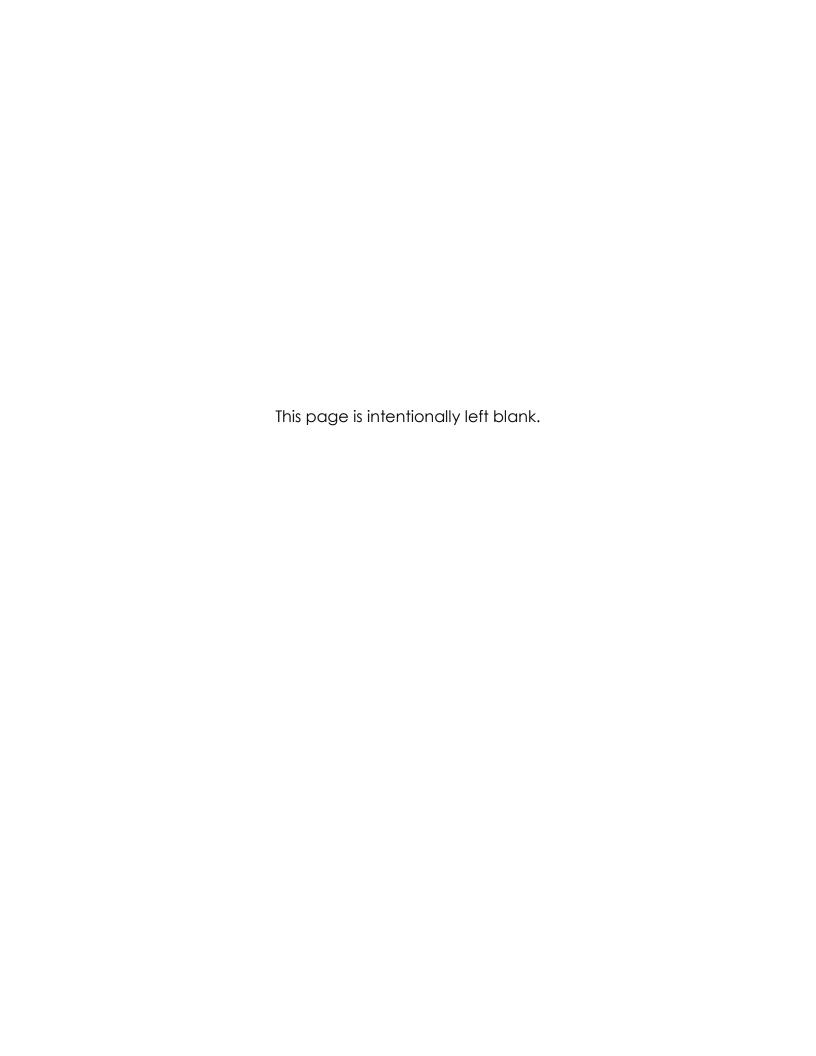




FY 2016 – 2017 Submitted Program Plans



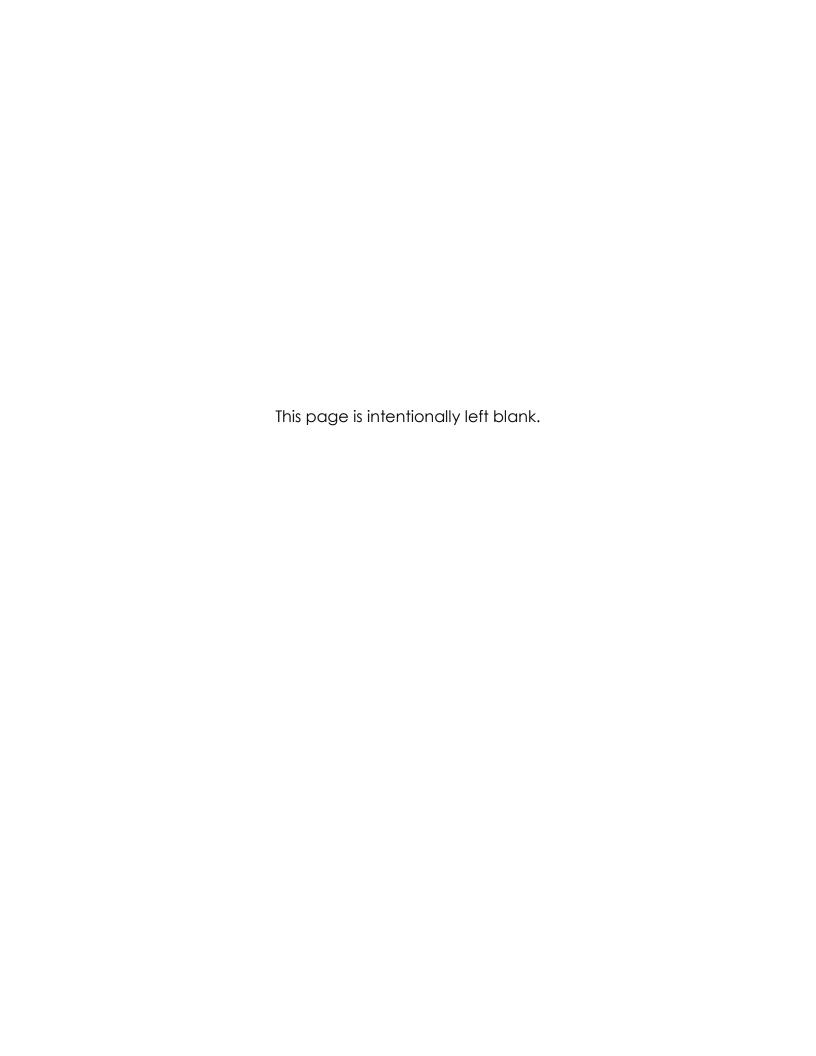




Paratransit Program Plan Staff Presentation Fiscal Year 16/17

Subcommittee: Central County Paratransit Program: Hayward

- Taxi, City-based Specialized Van(ASEB), Group Trips, Travel Training(CRIL), Volunteer Driver(LIFE Eldercare), Scholarship/Subsidized Fare, Meal Delivery
- City-based Specialized Accessible Car-sharing program (In review)
- Widest variety of city-funded programs
- 92% Measure B/BB; fare revenue
- 31% Reserves will be used for capital purchases
- Cost per trip changes in service mix make it difficult to track trends at present time
- Trends in trip provision increase in taxi trips and requests for program information
- Has been working collaboratively with other programs on taxi card feasibility study
- Considering a driver incentive program to reward taxi drivers who provide consistently excellent service with gas cards
- Planning for a needs assessment
- Planning capital purchases consumer database software program, id/debit card system for taxi program, purchase of two wheelchair accessible vehicles for use in proposed city car share program, needs assessment, and curb-side signage at high traffic paratransit stop locations





Annual Paratransit Program Plan Application for Measure B and Measure BB Funding

Fiscal Year 2016-2017 (July 1, 2016 - June 30, 2017)

Requirements and Instructions

The Alameda County Transportation Commission (Alameda CTC) requires recipients of paratransit funding to participate in an Annual Paratransit Program Plan Review. Recipients are required to complete and submit a program plan application to Alameda CTC that outlines their prior expenditures and anticipated revenues and expenditures related to delivering paratransit services to seniors and people with disabilities.

Paratransit Program Plan Application Deadline: March 25, 2016

The Annual Paratransit Program Plan Application includes the following documents:

- 1. Paratransit Program Plan Application (this MS Word document)
- 2. Paratransit Program Plan Attachments A-D (Tables A, B, C and D of the provided MS Excel workbook) NOTE: The FY2016-17 Program Plan Excel workbook contains a new tab to report on FY 2014-15 performance (Attachment A Table). The FY 2014-15 program information entered into Table A will be used to monitor program performance and, where applicable, is to align with program information included in the FY 2014-15 compliance report.

3. References:

- FY 2016-17 MB & MBB Paratransit DLD Revenue Projections, (distributed to ParaTAC, January 2016)
- Alameda CTC Special Transportation for Seniors and People with Disabilities (Paratransit) Implementation Guidelines and Performance Measures, revised 2/25/16
- Alameda CTC Timely Use of Funds Policy, adopted 12/3/15

Submit the Word and Excel files listed above electronically via email by March 25, 2016 to Naomi Armenta: narmenta@alamedactc.org.

Be sure to include your agency name and FY 16-17 in the file name of both the Word document and the Excel workbook (e.g., Albany_FY1617_Paratransit_Program_Application.doc).

If you have questions, please contact Naomi Armenta via email or at (510) 208-7469.

FY 2016-17 Paratransit Program Plan Application

Due by March 25, 2016

CONTACT INFORMATION	
Agency:	CITY OF HAYWARD
Contact Name:	Dana Bailey
Title:	Paratransit Coordinator
Phone Number:	510-583-4252
E-mail Address:	Dana.Bailey@hayward-ca.gov

Date Submitted: March 24, 2016

TYPES OF SERVICES PROVIDED

1. What type of paratransit projects and programs will be funded, fully or partially, with Measures B and BB Direct Local Distribution (pass-through) and Gap Grant funds? To answer this question, complete Attachment B (Table B tab of the Microsoft Excel workbook).

Below is a list of the types of services/programs that are eligible for Alameda CTC funding. For detailed information about these eligible services, including minimum service requirements and performance measures, refer to the Alameda CTC's Special Transportation for Seniors and People with Disabilities (Paratransit) Implementation Guidelines, revised 2/25/16 (provided with the application materials).

- Management/Overhead: Program oversight, planning, budgeting, participation in regional/countywide meetings. Include admin/labor even if it is paid by the City/transit agency for accurate reporting of full program expenses.
- **Customer Service/Outreach**: Activities associated with educating consumers about services that are available to them, answering questions from consumers and taking, tracking and responding to complaints and commendations. Include costs even if paid by the City/transit agency for accurate reporting of full program expenses.
- **ADA-mandated Paratransit**: Paratransit services provided by fixed-route transit operators to fulfill requirements under the American's with Disabilities Act.
- **City-based Door-to-Door**: Pre-scheduled, accessible, door-to-door service provided by city. Provides a similar level of service to mandated ADA services; designed to fill gaps not met by ADA-mandated providers and/or relieve ADA-mandated providers of some trips.

- **Taxi Program**: Provides a same day, curb-to-curb service intended for situations when consumers cannot make their trip on a pre-scheduled basis; allows eligible consumers to use taxis at a reduced fare.
- City-based Specialized Accessible Van Service: Specialized van service provides accessible, door-to-door trips on a pre-scheduled or same-day basis. These services are generally implemented as a supplement to a taxi program that does not meet critical needs for particular trips in accessible vehicles in certain communities.
- Accessible Fixed-Route Shuttle: Generally accessible vehicles that operate on a fixed route and schedule to serve common trip origins and destinations, e.g. senior centers, medical facilities, grocery stores, BART stations, other transit stations, community centers, commercial districts, and post offices.
- **Group Trips Program**: Round-trip accessible van rides for pre-planned outings or to attend specific events or go to specific destinations for fixed amounts of time, e.g. shopping trips or religious services. Trips usually originate from a senior center or housing facility.
- **Volunteer Driver Program**: Pre-scheduled, door-through-door services that are generally not accessible; rely on volunteers to drive eligible consumers for critical trip needs, such as medical trips. May also have an escort component.
- **Mobility Management/Travel Training**: Covers a wide range of activities, such as travel training, trip planning, and brokerage. Does not include provision of trips. (This is considered "non-trip provision").
- **Scholarship/Subsidized Fare Program**: Program to subsidize any service for customers who are low-income and can demonstrate financial need.
- **Meal Delivery:** Program to fund meal delivery to the homes of individuals who are transportation disadvantaged. Currently, only existing operating programs can continue to use Measure B funds for these service costs. No new meal delivery services can be established.
- Capital Expenditure: Capital purchase or other capital expenditure.
- **Note on volunteer driver programs and mobility management/training**: If your program is using DLD funds, but not Gap funds, you will be required to submit further information.

1A. Provide a short narrative description of your agency's FY 2016-17 program:

Taxi Service: curb-to-curb, same day service available 24 hours a day/7days a week via contracted taxi providers for spontaneous travel. Mobility device accessible vehicles are available upon request.

Group Trip transportation: pre-scheduled, accessible trips for a minimum group of four are offered to enrolled Hayward paratransit riders. Group trips are available primarily to senior housing complexes, skilled nursing facilities, and various community organizations serving seniors and disabled adults.

Travel Training: Mobility management workshops and classes available to groups or individuals and conducted by a Travel Training Coordinator from Community Resources for Independent Living (CRIL).

Alzheimer's Services of the East Bay: Alzheimer's Services of the Bay Area provides door-to-door transportation through specially trained drivers in lift equipped vans to individuals with dementia attending their local day program.

SOS Meals on Wheels Meal Delivery: Meals on Wheels program provides nutritionally balanced meals to homebound seniors and persons with disabilities residing in the Hayward service area through a network of trained volunteer drivers.

LIFE Eldercare /VIP Rides Volunteer Driver Program: Volunteer driver-based mobility program for seniors and people with disabilities who would benefit from a door-through-door service experience. Pilot program is scheduled for implementation in FY 15-16.

City-based Specialized Accessible Car-sharing program (In Review): Pilot program to offer disabled consumers access to a membership based car-sharing service with wheelchair/mobility device accessible vehicles available for short term reservation. Serves as a supplement to taxi service.

Scholarship Program: subsidized taxi fare program for enrolled HOP clients with demonstrated financial need. To qualify, clients must meet the HUD/federal standard for extremely low-income and submit income documentation.

1B. Explain how the suite of services offered is targeted towards the seniors and people with disabilities in your community. Why have these services been selected to meet the trip needs of your consumers over other eligible service types? How do these services enhance their quality of life and help them meet basic life needs?

The suite of services offered by the HOP is intended to help seniors and people with disabilities to remain independent, age in place and continue to be active participants in the Hayward community. The HOP taxi and group trip programs are offered as a supplemental service to the ADA mandated county-wide paratransit program, East Bay Paratransit. The HOP serves seniors and people with disabilities who a) do not live within ¾ mile of standard public transportation b) live in an area inaccessible to EBP c) are unable to certify with EBP, or d) have conditions which make utilizing regular transit physically demanding. Taxi service use in the Hayward – San Leandro service area has grown as program eligible riders have opted for the service more frequently over D2D. Riders cite reliability, availability and flexibility of travel as the greatest asset of the taxi program. Most report their quality of life is enhanced as they are able to schedule travel independently and spontaneously and rely less on family and friends for travel needs.

1C. List the most common trip destinations for seniors and people with disabilities in your community that your services are designed to serve, e.g. dialysis centers, hospitals, major shopping complexes, senior centers.

Surveys of rider travel reveal enrolled clients access the service primarily to medical and pharmacy appointments, benefits offices and banking, classes, other social services programs and shopping. Review of taxi and group trip service reveals enrolled clients increasingly access the service for errands like grocery shopping and postal service. Travel for recurring medical appointments continued to trend upward, increasing 6% over FY15.

2. Will your agency's program for FY 2016-17 conform to the Paratransit Program

Implementation Guidelines, as required? (FY 2016-17 Programs are <i>required</i> to conform the Implementation Guidelines, revised February 2016)									
[X] Yes	[] No								
2A. If "No", 2016)	explain below and contact Alameda CTC staff to discuss (prior to March 25,								

3. If proposing service changes in FY 2016-17 from the current year, FY 2015-16, describe the changes and explain why they are proposed. Describe how these changes will impact the ability of seniors and people with disabilities in your community to meet their basic life needs.

No new services are proposed for FY 16-17. However, the HOP continues to investigate the implementation of the following programs;

Taxi ID/Debit Card: The Cities of Hayward, Fremont, Berkeley and Oakland are collaboratively exploring electronic id/debit card options for taxi provision. Nelson/Nygaard was commissioned to complete a phased study to explore the feasibility of a regional pilot and the results of their research should be available soon.

Needs Assessment: An RFQ is in development to commission a Hayward-area needs assessment to ensure the planning and delivery of services over the next five years is closely aligned with the needs of seniors (age 60+) and people with disabilities. Alameda County has experienced a 54% increase in seniors age 60+ since 1980.

City-based specialized accessible car-sharing program: Pilot program planned in partnership with CRIL to offer disabled consumers access to a membership based car-sharing service with wheelchair/mobility device accessible vehicles available for short term reservation. Serves as a supplement to taxi service.

PROGRAM ELEMENTS REQUIRING ALAMEDA CTC STAFF REVIEW

- 4. The 2016 Paratransit Program Implementation Guidelines require Alameda CTC staff review of several program elements prior to implementation. The program elements requiring staff review are listed as items 4A 4F below and for each item, further explanation is requested. If your FY 2016-17 program plan includes any of the elements listed, in the box provided below, list the elements and the requested explanation for each. Applicants must address any applicable paratransit projects and programs listed in Attachment B.
 - A. **Planned capital expenditure** (describe planned capital expenditures, such as purchase of vehicles or durable equipment, below)
 - B. City-based Door-to-Door Service that includes trip limitations based on trip purpose (describe the proposed trip limitations that are proposed below)
 - C. Taxi Subsidy Program that includes incentives to drivers and/or transportation providers (describe the proposed incentives below)
 - D. **Accessible Shuttle Service** (describe service plan and how city is coordinating with the local fixed route transit provider)
 - E. **New mobility management and/or travel training programs** (describe the well-defined set of activities below)
 - F. Low-income requirements for any scholarship and fare subsidy programs (describe the proposed subsidy and the means that will be used to determine and verify eligibility below)

All services are pre-existing and have received prior review by ACTC. The program is considering a driver incentive program to reward taxi drivers who provide consistently excellent service. Recommendations will be solicited from taxi riders who will submit nominations anonymously. The taxi vendor will also be encouraged to recommend drivers. Recognized drivers will receive gas cards in various denominations (determined by frequency and consistency of commendations) on a quarterly basis.

DEVELOPMENT OF PROGRAM PLAN

5. How was consumer input sought in development of the program and selection of the services offered? Describe all general outreach activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees. If possible provide dates for these activities. Note below if this plan was reviewed by a local paratransit advisory committee, including the name of the committee, and the date of the meeting.

Seven presentations seeking public input were conducted to solicit comments and input from agencies serving eligible consumers such as the Hayward, Castro Valley and San Leandro Senior Centers, Spectrum, CRIL and from residents of the five senior-only mobile home parks in Hayward. The Hayward Paratransit Advisory Committee (PAC) has been on hiatus in FY 15-16 as a number of members have withdrawn for personal reasons. In preparation for the upcoming needs assessment, The HOP is refining the function of the advisory body to assist in developing and implementing targeted policies and strategies.

6. Describe any outreach, surveys and/or analysis conducted to develop this plan and to determine the types of services the program offers.

The FY 16-17 Program Plan was developed and approved in consultation with the community organizations listed above, and following authorization from the Library and Community Services Director. In addition the program will move forward in FY 16-17 with a service area wide needs assessment to gather data about issues that impact the lives of Hayward seniors and people with disabilities.

7. Describe how results from the community outreach, surveys and/or analysis described in Questions 5 and 6 were used to guide the development of the program plan.

Comparative analysis of taxi, door-to-door, group trip and travel training program data and the input received from the PAC and other sources were used to guide plan development.

8.	Was this program plan approved by a governing body (or is it scheduled for action)? This
	is not required by the Alameda CTC. Jurisdictions should follow their established internal
	process.
	[V] Voc

[X] Yes

If yes, provide the name of the governing body and planned or actual approval date.

Program plan review by City Council April 2016.

OUTREACH

9. How do community members and potential users learn about the Alameda CTC-funded services provided in your community? Specify for each of the paratransit projects and programs listed in Attachment B.

Potential users primarily access information about The HOP through direct contact with the paratransit program. Vehicle wraps and direct marketing advertising publicizing the program have also been added. Ongoing outreach is conducted by the Paratransit Coordinator and the Travel Trainer. Services are also advertised through the following:

City website;

Community Access Channel 15;

Mobile home park newsletters;

The Hayward Public Library;

The Hayward Senior Center;

The Castro Valley Senior Center;

The Matt Jimenez Community Center;

CRIL

Various dialysis and medical treatment centers;

Kaiser Hospital

St. Rose Hospital

ELIGIBILITY AND ENROLLMENT

10. What are your requirements for eligibility? (E.g., age, residency, income, ADA-certification status, or other verification of disability).

Hayward service area residents who are senior (70+) or disabled adults (18+) who are unable to use public transportation because of infirmity or disability or for whom East Bay Paratransit is not an option are eligible to enroll. An application must be submitted and approved in order to enroll, and all applicants are encouraged to enroll concurrently with EBP. Applicants under the age of 70 must submit a medical certification form signed by a physician or social worker. To qualify for scholarship, applicants must qualify by income (50% of AMI) and provide supporting documentation (proof of SSI/SDI, bank statements, most recent tax return, etc. All applicants must also apply concurrently with EBP in order to enroll with The HOP.

11. How do consumers enroll in your program? Include how long the enrollment process takes, and how soon newly enrolled applicants can use the services offered.

Applications are accepted year-round and reviewed within 24 hours of receipt. Applicants determined eligible are mailed an enrollment packet and travel vouchers within 3 business days of processing. Enrollment packets can be expedited within a few hours of receipt for those with urgent travel needs.

CUSTOMER SATISFACTION

12. Describe your complaint and commendation process. Describe your process from beginning to end, including instructions you provide to customers for filing program suggestions, complaints or commendations, your documentation procedures and your follow up. (See questions 12A and 12B that follow)

The HOP program Rider's Guide is being updated with the new brand and additional information is included detailing the service communication process. Enrolled riders, their attendants-caregivers, and others serving seniors and the disabled can provide feedback to City staff in writing, via telephone, email or through the city website at any time. Complaints and commendations are documented by City staff and shared with the appropriate vendor. All complaints are investigated by the paratransit staff and a response is typically provided with 48 hours of receipt.

12A. Describe any common or recurring service complaints, commendations and/or suggestions your program has received. Specify for each of the paratransit projects and programs listed in Attachment B. (Complaints are defined as phone calls, letters, or emails received for the specific purpose of making a complaint.)

The most common complaints involve the following;

- 1) Scheduling difficulty for taxi service after business hours or weekends;
- 2) Inability to travel outside the designated service area utilizing taxi;

The most common commendations involve the following;

- 1) Kudos to specific drivers (D2D and taxi) for excellent customer service;
- 2) Reliable and efficient scheduling of taxi rides.
- 12B. Describe any changes you have made to your program as a result of these customer complaints, commendations and suggestions.
 - 1) Driver incentive program: implemented following client feedback requesting a means to reward drivers who make their lives easier.

EXPECTED DEMAND/USE OF SERVICES

13. How many people are/have been/will be registered in the program during the following time periods? Fill in the boxes below.

Registrants at beginning of FY 2014-15
385

Registrants at end of FY 2014-15
453

Current Registrants for FY 2015-16	
501	

Estimated Registrants for FY 2016-17	
525	

13A. Based on the registration projection provided, explain why you expect your program registration to increase, decrease or stay the same compared to the current year.

Enrollment is expected to increase at a steady rate. Year to date ridership is up 15% from FY 14-15, primarily due to the elimination of the D2D option in favor of taxi service. The HOP program marketing campaign is expected to conduct targeted mailers to low-income census tracts and anticipates additional inquiries and enrollment.

14. Do you expect the total number of one-way trips provided by your program to increase, decrease or stay the same compared to the current year, FY 2015-16? Why?

Overall one way trips are increasing in FY 15-16 due primarily to taxi service. The program expects to see this trend continue in FY 16-17. The program is fielding more inquiries from family members and other caregivers about transportation options for eligible clients and a targeted direct mail campaign is scheduled to reach this market. Mailers and advertising in low-income census tracts in Hayward and a general mailing to Castro Valley is planned to increase awareness about the HOP and associated services.

If you and if known what parcent of total ridership are companions (attendants) (If	Do the ridership numbers reported in Attachments A and B include companions and/or attendants? [] Yes [X] No									
If yes, and if known, what percent of total ridership are companions/attendants? (If providing an estimate, please clearly indicate it as such.)										
The program does not currently track attendant ridership.										

16. Please provide data on lift/ramp trips provided, if available. If lift/ramp trips were provided in more than one service, please specify for each.

Lift/ramp trips provided in FY 2014-15
1581

Lift/ramp trips to be provided in FY 2015-16)
1330	

Lift/ramp trips to be provided in FY 2016-17
1500

VEHICLE FLEET

17. Provide details regarding your vehicle fleet. To answer this question, complete Attachment D (Table D tab of the Excel workbook).

SAFETY INCIDENTS

18. Describe any safety incidents recorded by your program in FY 2014-15, or to date in FY 2015-16. Specify for each of the paratransit projects and programs listed in Attachment B. (Report incidents resulting in any of the following: a fatality other than a suicide; injuries requiring immediate medical attention away from the scene for two or more persons; property damage equal to or exceeding \$7,500; an evacuation due to life safety reasons; or a collision at a grade crossing.)

On March 5, 2015 an MV Transportation vehicle was involved in a hit and run accident in Castro Valley. Vehicle 1198 was rear ended by a vehicle that fled the scene. There were three passengers on the vehicle at the time of the accident including the driver. The driver and one passenger were seen for minor injuries. The bus sustained damage to the rear left bumper. An accident report and claim was managed by MV Transportation.

FINANCES: PROGRAM REVENUE AND COST

- 19. Detail your FY 2016-17 program's total estimated revenue (all fund sources) and total cost by completing Attachment C (Table C tab of the Excel workbook). For program components funded with a Measure B Gap Grant, segregate the Gap Grant funding by entering it in the "Other Measure B" column.
- 20. Describe below the "Management/Overhead" and "Customer Service and Outreach" costs included in Attachment C and how these cost allocations were determined? (These two categories are defined under Question 1). The amount spent on Customer Service/Outreach and Management/Overhead is to be included as part of the total program cost, even if it is not funded with Alameda CTC funding. This includes city/agency staff time paid for by a city's general fund.

20A. Management/Overhead Costs

Funds;

- 1) Direct staff costs (salaries/benefits) based on program oversight, planning, budgeting, customer service and outreach (Measure B/BB and City of Hayward CDBG (10%) shared costs);
- 2) Insurance costs (Measure B- 100%);

Direct program costs including printing, supplies, computer/IT support, travel, etc. (Measure B and Hayward CDBG (10%) shared costs).

20B. Customer Service and Outreach Costs

Customer outreach includes daily operational activities such as fielding customer inquiries, application distribution and processing, database maintenance, group trip scheduling and monitoring, PAC administration, etc.

Other related activities include community presentations, and identification of potential partnerships.

Marketing materials, vehicle signage and potentially street signage.

In FY 16-17 the HOP will commission Measure BB funded Hayward-area needs assessment to ensure the planning and delivery of services over the next five years is aligned with the needs of seniors (age 60+) and people with disabilities.

PROGRAM FUNDING RESERVES

21. If your paratransit program is anticipated to have a remaining balance of Measure B/BB DLD funding at the end of FY 2016-17, as shown in Attachment C, please explain. How do you plan to expend these funds and when?

Fund reserves are expected to be reduced by the following capital purchases;

- 1) New consumer database software program;
- 2) New id/debit card system for taxi program;
- 3) Purchase of two wheelchair accessible vehicles for use in proposed city car share program;
- 4) New city car-share program including accessible vehicles;
- 5) Service area wide needs assessment of seniors and people with disabilities;
- 6) New curb-side signage at high traffic paratransit stop locations;

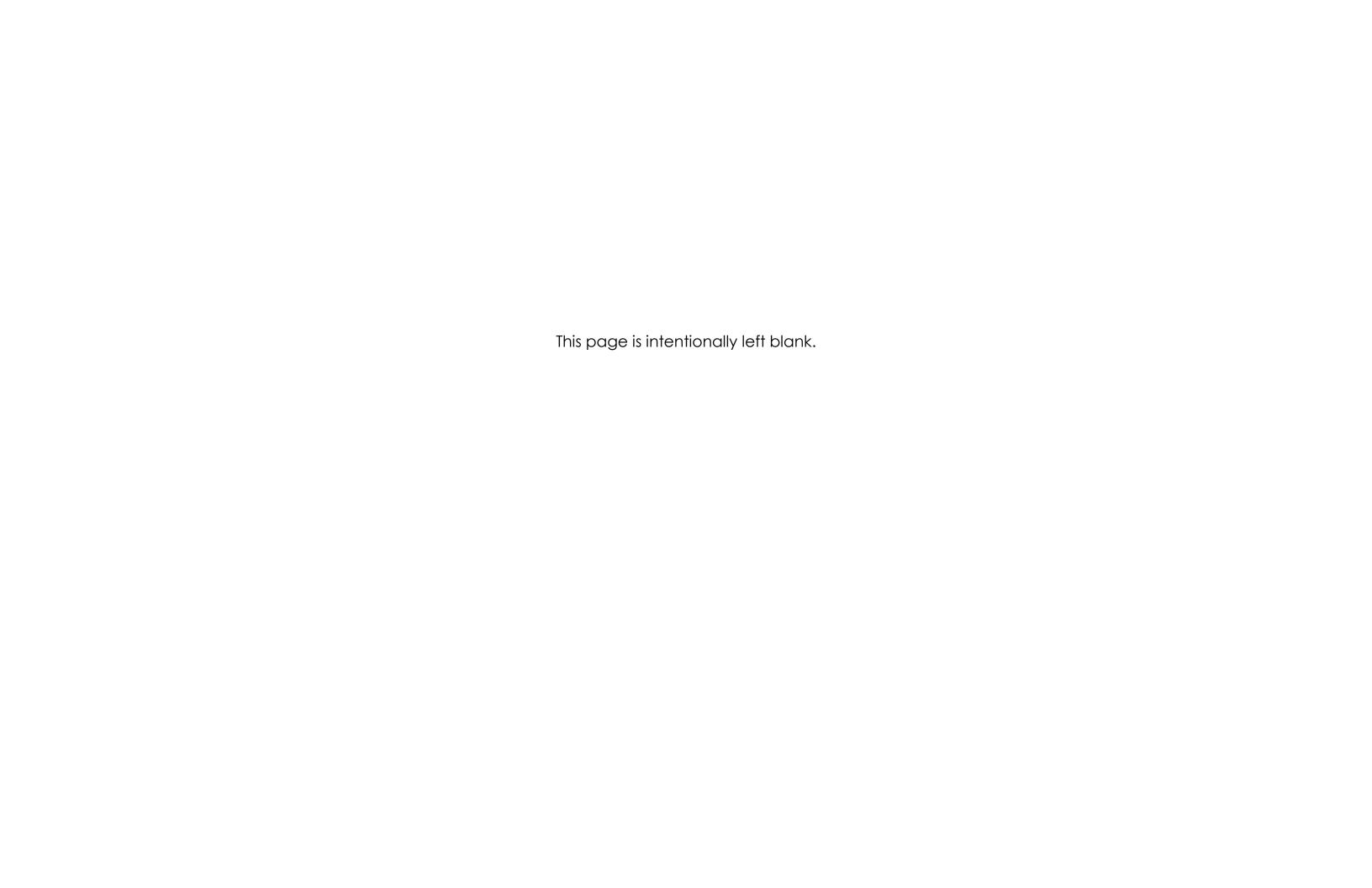
MISCELLANEOUS

22. Use this space to provide any additional notes or clarifications about your program plan.

The HOP is deeply appreciative to the voters of Alameda County for Measure B/BB funds. As a measure of responsible stewardship the program will continue to seek innovative ways to proactively plan and implement programming with effective outcomes. The City of Hayward is committed to inclusiveness and will continue to prioritize programs in service to its most vulnerable residents.

Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment A: Summary of Past Program Service, Performance and Costs (FY 2014-15)

Service/Program	n Type and Name	Performa	ance FY 14-15	Total FY 2014-15 Program Costs Expended by Fund Source (Measure B, Measure BB and all other funds expended during FY 2014-15)								Notes		
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J	Column K	Column L	Column M	Column N	Column O
Eligible Service/Program Type Drop-down Menu	Service/Program/Project Name	Quantity Provided	On-Time Performance FY 14-15 Percent of passenger trips arrived within designated window (indicate if data is unavailable or non- applicable)		Amount of FY 2014-15 Measure B Paratransit DLD funds	Amount of FY 2014-15 Measure BB Paratransit DLD funds	Amount of OTHER Measure B/BB funds	What was the source of these OTHER Measure B/BB funds? (e.g. MB Gap Grant, MB LSR, etc.)	Fare Revenue received from service	Fare Revenue expended on service	Amount of all non-Alameda CTC funds (not including fares)	What was the source of these non-Alameda	Total Funds expended (all sources) Automatically calculated	Miscellaneous Notes (If necessary, provide any notes/clarification about trip/program)
Customer Service and Outreach	The HOP (Hayward Operated Paratransit) Marketing		N/A	\$ -	\$ 11,396	\$ -	\$ -	0	\$ -	\$ -	\$ -	0	\$ 11,396	
Management/Overhead	Program Administration		N/A		\$ 220,967								\$ 220,967	
City-based Door-to-Door	Hayward Door-to-Door	1,882	95%		\$ 133,969								\$ 133,969	
Group Trips	Hayward Group Trip Program	220	97%		\$ 72,404								\$ 72,404	
City-based Door-to-Door	ASEB - Day Program	2,253	n/a		\$ 74,998								\$ 74,998	
Meal Delivery (existing program)	SOS Meals on Wheels	35,444	n/a		\$ 24,500								\$ 24,500	
Taxi Program	CCSDTP	10,380	unavailable		\$ 195,025								\$ 195,025	
Mobility Mgmt./Travel Training	CRIL	70	n/a		\$ 48,586								\$ 48,586	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
				\$ -	\$ 781,845	\$ -	\$ -		\$ -	\$ -	\$ -		\$ 781,845	



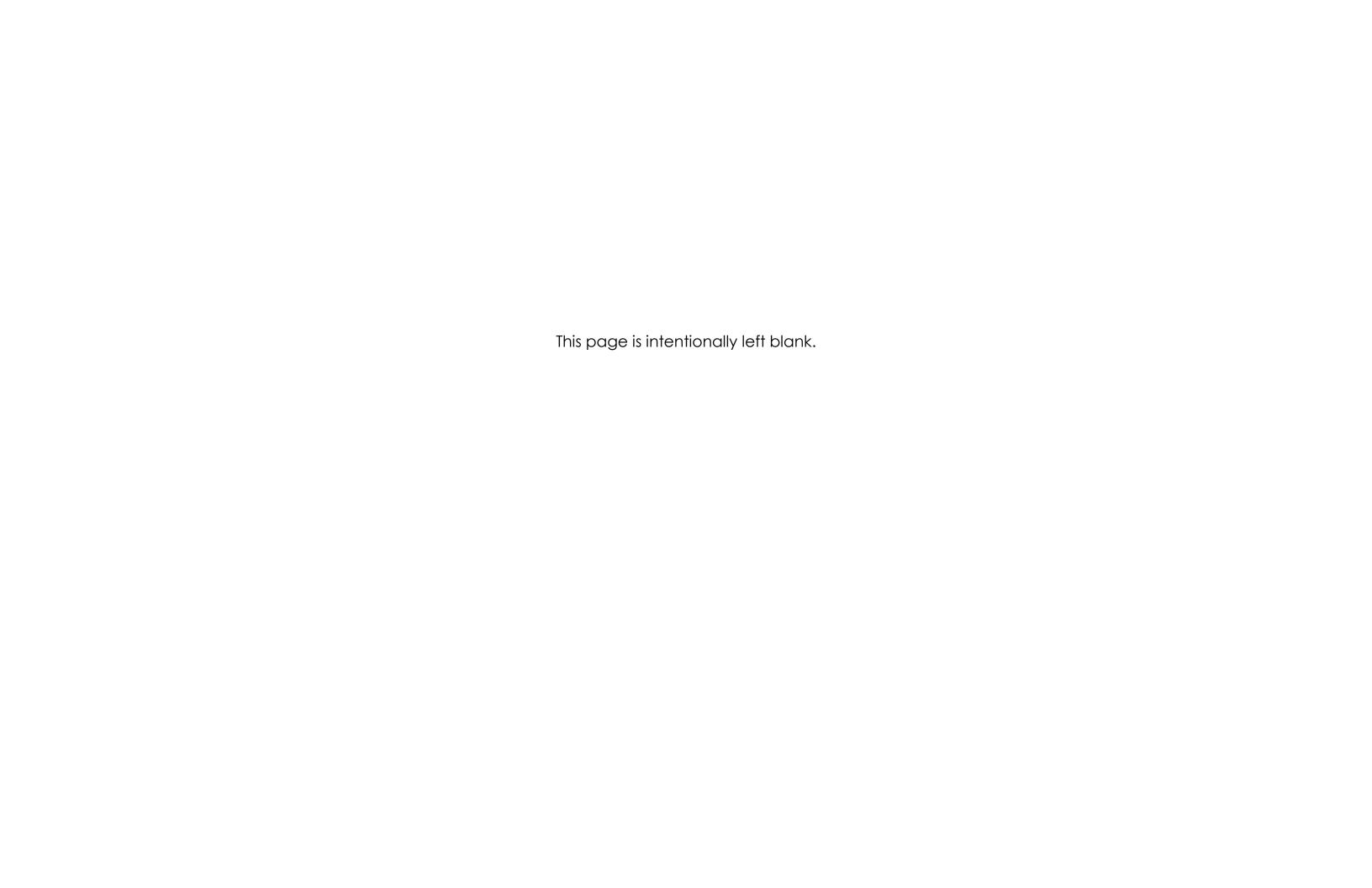
Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment B: Description of Planned Program

Note: Definitions for each drop-down menu are in the Implementation Guidelines

Service/Prograr	m Type and Name	Contractor	Need(s) Met	Cost to C	Consumer	For Trip Provision Services				
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J	
Eligible Service/Program Type Drop-down Menu	Service/Program/Project Name	If service is contracted, provide name of contractor/service provider	Need(s) this Service Meets (E.g. medical, grocery, recreation, regional trips, etc.)	Fare/Cost to Consumer	Fare Medium (E.g. cash, voucher, reimbursement, annual fee, etc.)	Vehicle Accessibility Drop-down Menu	Is this a same day or pre- scheduled service? Drop-down Menu	Is this a fixed route or origin-to-destination service (e.g. door-to-door)? Drop-down Menu	Service Area	
Taxi Program	Central County Same Day Taxi Program /Accessible	St. Mini Cab	activities of daily living (appointments, shopping, etc.)	\$3.50 per voucher	Voucher	Accessible	Pre-scheduled	curb-to-curb	Hayward, San Leandro, county unincorportated	
Taxi Program	Central County Same Day Taxi Program /Non Accessible	St. Mini Cab	activities of daily living (appointments, shopping, etc.)	\$3.50 per voucher	Voucher	Not Accessible	Same day	curb-to-curb	Hayward, San Leandro, county unincorportated	
Group Trips	Group Trip Program	MV Transportation	activities of daily living (appointments, shopping, etc.)	n/a	n/a	Accessible	Pre-scheduled	door-to-door	Hayward, county unincorportated	
City-based Specialized Van	Alzheimer's Services of the East Bay /Adult Day	Alzheimer's Services of the East Bay	Adult Day Care Program	n/a	n/a	Accessible	Pre-scheduled	door-to-door	Hayward, county unincorportated	
Mobility Mgmt./Travel Training	Community Resources for Independent Living (CRIL) Travel Training	Hayward Up and Go	activities of daily living (appointments, shopping, etc.)	n/a	n/a	Accessible	Pre-scheduled	door-to-door	Hayward, county unincorportated	
Volunteer Driver	LIFE Eldercare /Volunteer Driver	VIP Rides	activities of daily living (appointments, shopping, etc.)	n/a	n/a	Accessible	Pre-scheduled	door-through-door	Hayward, county unincorportated	
Meal Delivery (existing program)	Service Opportunties for Seniors /Meals	Meals on Wheels	meal delivery for homebound, low- income seniors	voluntary donation	cash, check, charge	Not Accessible	Pre-scheduled	Fixed Route w/Deviations	Hayward, county unincorportated	
Scholarship/Subsidized Fare	Central County Same Day Taxi Program /Scholarship	City of Hayward	subsidized fares for income eligible seniors	n/a	n/a	Accessible	Same day	curb-to-curb	Hayward, county unincorportated	
City-based Specialized Van	Community Resources for Independent Living (CRIL) / Car Share	car share program	activities of daily living (appointments, shopping, etc.)	TBD	TBD	Accessible	Same day	door-to-door	Hayward, county unincorportated	
Management/Overhead	Hayward Operated Paratransit (The HOP)/ Mgmt Overhead	n/a	activities of daily living (appointments, shopping, etc.)	n/a	n/a				Hayward, San Leandro, county unincorportated	
Customer Service and Outreach	Hayward Operated Paratransit (The HOP) Communuty Promotions	n/a	activities of daily living (appointments, shopping, etc.)	n/a	n/a				Hayward, San Leandro, county unincorportated	
Capital Purchase		n/a	activities of daily living (appointments, shopping, etc.)	n/a	n/a	Accessible	Pre-scheduled	door-to-door	Hayward, county unincorportated	

Note: Definitions for each drop-down menu are in the Implementation Guidelines

Service/Program	n Type and Name	Limits		Schedule		Eligibility	Status	Deliverables	Notes
Column A (repeated)	Column B (repeated)	Column K	Column L	Column M	Column N	Column O	Column P	Column Q	Column R
Service/Program Type Will automatically populate from rows above	Service/Program/Project Name Will automatically populate from rows above	Limits on number of trips/ use of service? (e.g. trip limits per month/quarter/year or a maximum expenditure per consumer)	If pre-scheduled, what days/hours are reservations accepted for trip, training, etc?	I advance can/must a	Days/Hours of Operation	Eligibility Requirements	Project Status Drop-down Menu	Quantity Planned Provide total number of units (one-way passenger trips, consumers trained, meals delivered, etc.)	Miscellaneous Notes (If necessary, provide any notes/clarification about trip/program)
Taxi Program	Central County Same Day Taxi Program /Accessible	40 vouchers per month	24/7	Must call 24 hours in advance to ensure availability	24/7	Adheres to ACTC Implementation Guidelines	Continuing/Ongoing	1,800	accessible taxi service
Taxi Program	Central County Same Day Taxi Program /Non Accessible	40 vouchers per month	24/7	n/a	24/7	Adheres to ACTC Implementation Guidelines	Continuing/Ongoing	10,000	non-accessible taxi service
Group Trips	Group Trip Program	two trips per month per organization	Reservations accepted by the 3rd calendar week for upcoming month. Trips accepted Mon -Sat 9am - 4pm.	Reservations calendared monthly; other trips calendared by availability	Mon - Sat One trip per morning / One trip per afternoon	Adheres to ACTC Implementation Guidelines	Continuing/Ongoing	3,200	one way trips include attendants
City-based Specialized Van	Alzheimer's Services of the East Bay /Adult Day	Daily per enrolled client			Mon - Fri 8:00am to 4:00pm	Adheres to ACTC Implementation Guidelines	Continuing/Ongoing	2,250	one way trips
Mobility Mgmt./Travel Training	Community Resources for Independent Living (CRIL) Travel Training	Must enroll in travel training course.	Mon - Fri 8:00am - 4:00pm	By appointment only	Mon - Fri 8:00am to 4:00pm	Adheres to ACTC Implementation Guidelines	Continuing/Ongoing	70	clients trained
Volunteer Driver	LIFE Eldercare /Volunteer Driver							200	one way trips
Meal Delivery (existing program)	Service Opportunties for Seniors /Meals	1 meal each weekday	Meals begin one day following enrollment	Once enrolled, meals delivered daily	Mon-Fri 8:00am to 4:00pm	60 years of age, homebound		42,000	meals delivered
Scholarship/Subsidized Fare	Central County Same Day Taxi Program /Scholarship	Case by case basis	24/7	Must call 24 hours in advance to ensure availability	24/7	Adheres to ACTC Implementation Guidelines	Continuing/Ongoing	15	number of unduplicated scholarship riders
City-based Specialized Van	Community Resources for Independent Living (CRIL) / Car Share	TBD	TBD	TBD	TBD	Adheres to ACTC Implementation Guidelines	To be initiated in FY 16/17	50	one way trips
Management/Overhead	Hayward Operated Paratransit (The HOP)/ Mgmt Overhead	n/a	n/a	n/a	n/a	n/a	Continuing/Ongoing	3	staff
Customer Service and Outreach	Hayward Operated Paratransit (The HOP) Communuty Promotions	n/a	n/a	n/a	n/a	n/a	Continuing/Ongoing	1	contract for consultant services
Capital Purchase	Hayward Operated Paratransit (The HOP) Vehicle Purchase	n/a	n/a	n/a	n/a	n/a	Continuing/Ongoing	3	number of vehicles



Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment C: Program Revenue, Cost and Fund Sources

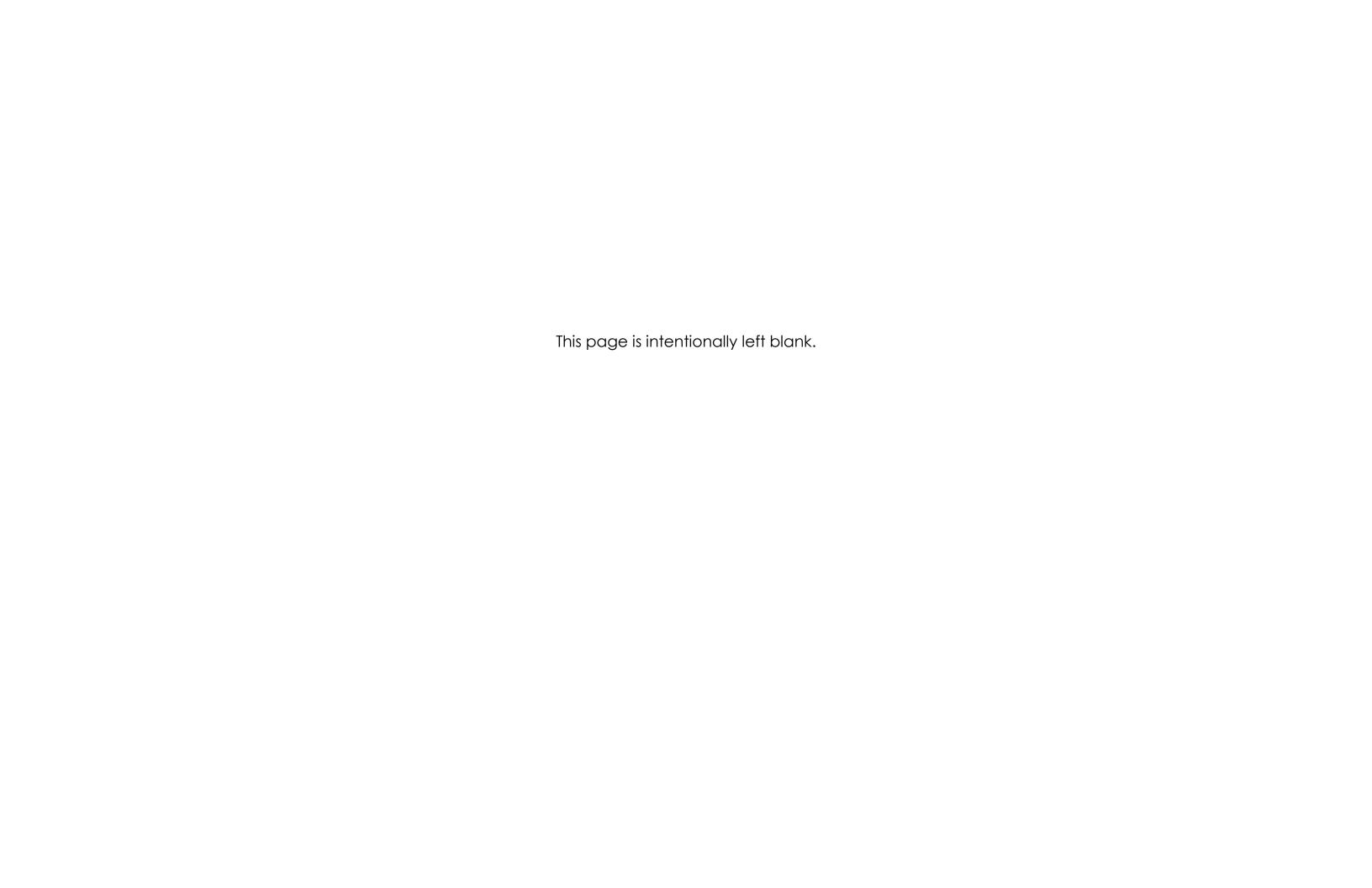
Total FY 2016-17 Program Revenue (Measure B, Measure BB and all other funds available for FY 2016-17)									
Estimated Measure B Paratransit DLD ending balance at the end of THIS fiscal year, FY 2015-16 (June 30, 2016)	\$163,918								
Projected FY 2016-17 Measure B DLD Paratransit revenue (Use projections distributed by the Alameda CTC)	\$845,183								
Estimated Measure BB Paratransit DLD ending balance at the end of THIS fiscal year, FY 2015-16 (as of June 30, 2016)	\$460,000								
Projected FY 2016-17 Measure BB DLD Paratransit revenue (Use projections distributed by the Alameda CTC)	\$526,082								
Total FY 2016-17 Measure B and BB Paratransit DLD Revenue (Automatically calculated)	\$1,995,183								
Total FY 2016-17 Other Revenue (All other revenue sources, non-DLD, including Gap grant)	\$41,300								
Total FY 2016-17 Program Revenue (Measure B, Measure BB and all other sources available for FY 2016-17) (Automatically calculated)	\$2,036,483								

		Total FY 2016-17 Program Costs by Fund Source																	
Service/Program N	ame		(Measure B, Measure BB and all other funds planned to be expended during FY 2016-17)										1	Total Cost		4			
Column A	Column B		Column C	(Column D	Col	umn E	Col	umn F	Column G	Column H	C	olumn I	Column J	Column K	Column L	C	Column M	
Service/Program/Project Name Automatically populated from prior sheet (column B)	Quantity Planned for FY 16-17 Automatically populated from prior sheet (column Q)	N P	Amount of RESERVE Measure B Paratransit DLD funds	N Pa	nount of FY 2016-17 Measure B aratransit DLD funds	RES Meas Para	ount of SERVE sure BB stransit funds	20 Mea Para	unt of FY 16-17 sure BB atransit) funds	Amount of OTHER Measure B/BB funds	What is the source of these OTHER Measure B/BB funds? (e.g. MB Gap Grant, LSR, MB LSR, etc.)	ехре	e Revenue ected from service	Fare Revenue to be expended on service	Non-Alameda CTC funds	What is the source of these non-Alameda CTC funds? (e.g. city funds, federal, state, etc.)	(al	otal Cost Il sources) tomatically alculated	
Central County Same Day Taxi	1,800					\$	30,000	\$	35,000			\$	6,300				\$	65,000	
Program /Accessible		_				,						ļ.,							4
Central County Same Day Taxi Program /Non Accessible	10,000					\$	30,000	\$	200,000			\$	35,000				\$	230,000	
Group Trip Program	3,200	\$	30,000	\$	50,000												\$	80,000	
Alzheimer's Services of the East Bay 'Adult Day	2,250	\$	25,000	\$	50,000												\$	75,000	
Community Resources for Independent Living (CRIL) Travel	70	\$	-	\$	75,000												\$	75,000	
LIFE Eldercare /Volunteer Driver	200	\$	25,000	\$	50,000												\$	75,000	
Service Opportunties for Seniors /Meals	42,000	\$	25,000	\$	50,000												\$	75,000	
Central County Same Day Taxi Program /Scholarship	15													\$ 41,300			\$	41,300	
Community Resources for ndependent Living (CRIL) / Car	50	\$	25,000														\$	25,000	car shai
Hayward Operated Paratransit (The HOP)/ Mgmt Overhead	5	\$	100,000	\$	520,183	\$	-										\$	620,183	
Hayward Operated Paratransit (The HOP) Communuty Promotions	1			\$	50,000			\$	75,000								\$	125,000	comm
layward Operated Paratransit (The IOP) Vehicle Purchase	3	\$	150,000			\$	400,000										\$	550,000	capital
)	0																\$	-	
0	0																\$	-	
Totals	59,594	\$	380,000	\$	845,183	\$ 4	460,000	\$	310,000	\$ -		\$	41,300	\$ 41,300	\$ -		\$	2,036,483	

PARATRANSIT DLD RESERVE BALANCES	Measure B	Measure BB
Estimated Reserve Balance, June 30, 2017:	-\$216,082	\$216,082
Reserve balance as percent of FY 16/17 Revenue	-26%	41%

Budget check (total revenue less total cost):

ŚO



Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment D: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

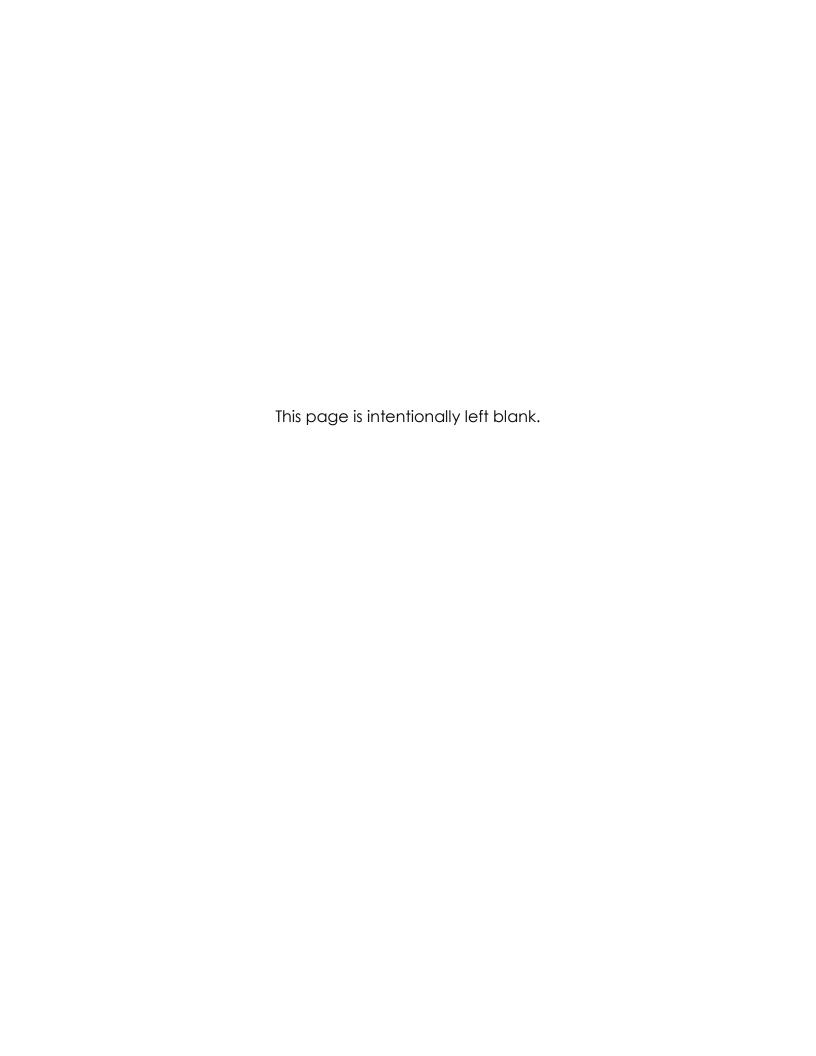
	Vehicle Fleet											
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J			
						Capacity						
Make	Type of Vehicle(s) (specify bus, large van, minivan, sedan)	Year of Vehicle	Fuel Type	Lift/Ramp Equipment (specify lift, ramp, or none)	Ambulatory	Wheelchair	Number of Vehicles	Owner (specify if contractor)	City that vehicle(s) are garaged			
TOYT	Mini Van	2014	Unleaded	Lift/Ramp	4	1	1	St. Mini Cab	San Leandro			
TOYT	Mini Van	2013	Unleaded	Lift/Ramp	4	1	1	St. Mini Cab	San Leandro			
FORD	sedan	2007	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2000	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2002	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2009	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2007	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2013	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2002	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2008	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2002	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2003	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	1996	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2002	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2009	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2002	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2007	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2001	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	1996	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			
FORD	sedan	2008	Unleaded	N	4	0	1	St. Mini Cab	San Leandro			

FORD	sedan	2003	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	2009	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	1995	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	2006	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	1997	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	2003	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	1997	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	1996	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	1999	Unleaded	N	4	0	1	St. Mini Cab	San Leandro
FORD	sedan	1996	Unleaded	N	4	0	1	St. Mini Cab	San Leandro

Paratransit Program Plan Staff Presentation Fiscal Year 16/17

Subcommittee: Central County Paratransit Program: San Leandro

- Accessible Fixed-Route Shuttle, participates in Central County Taxi with Hayward
- Proposing two additional shuttles which would run in the reverse direction of the current FLEX shuttles, and adding limited weekend service – possibly 9:00am-2:00pm or 10:00am-3:00pm. on Saturday and Sunday; needs support from City and MV
- 99% Measure B/BB; fare revenue
- 19% Reserves
- Cost per trip drop in Shuttle from \$31.99 to \$19.85
- Trends in trip provision big increase planned as a result of expanded shuttle service and increased community outreach/marketing
- Reported CS&O for first time in FY15-16





Annual Paratransit Program Plan Application for Measure B and Measure BB Funding

Fiscal Year 2016-2017 (July 1, 2016 - June 30, 2017)

Requirements and Instructions

The Alameda County Transportation Commission (Alameda CTC) requires recipients of paratransit funding to participate in an Annual Paratransit Program Plan Review. Recipients are required to complete and submit a program plan application to Alameda CTC that outlines their prior expenditures and anticipated revenues and expenditures related to delivering paratransit services to seniors and people with disabilities.

Paratransit Program Plan Application Deadline: March 25, 2016

The Annual Paratransit Program Plan Application includes the following documents:

- 1. Paratransit Program Plan Application (this MS Word document)
- 2. Paratransit Program Plan Attachments A-D (Tables A, B, C and D of the provided MS Excel workbook) NOTE: The FY2016-17 Program Plan Excel workbook contains a new tab to report on FY 2014-15 performance (Attachment A Table). The FY 2014-15 program information entered into Table A will be used to monitor program performance and, where applicable, is to align with program information included in the FY 2014-15 compliance report.

3. References:

- FY 2016-17 MB & MBB Paratransit DLD Revenue Projections, (distributed to ParaTAC, January 2016)
- Alameda CTC Special Transportation for Seniors and People with Disabilities (Paratransit) Implementation Guidelines and Performance Measures, revised 2/25/16
- Alameda CTC Timely Use of Funds Policy, adopted 12/3/15

Submit the Word and Excel files listed above electronically via email by March 25, 2016 to Naomi Armenta: narmenta@alamedactc.org.

Be sure to include your agency name and FY 16-17 in the file name of both the Word document and the Excel workbook (e.g., Albany_FY1617_Paratransit_Program_Application.doc).

If you have questions, please contact Naomi Armenta via email or at (510) 208-7469.

FY 2016-17 Paratransit Program Plan Application

Due by March 25, 2016

CONTACT INFORMATION				
Agency:	City of San Leandro			
Contact Name:	Diane Atienza			
Title:	Recreation Supervisor			
Phone Number:	(510) 577-6079			
E-mail Address:	DAtienza@sanleandro.org			

Date Submitted: March 25, 2016

TYPES OF SERVICES PROVIDED

1. What type of paratransit projects and programs will be funded, fully or partially, with Measures B and BB Direct Local Distribution (pass-through) and Gap Grant funds? To answer this question, complete Attachment B (Table B tab of the Microsoft Excel workbook).

Below is a list of the types of services/programs that are eligible for Alameda CTC funding. For detailed information about these eligible services, including minimum service requirements and performance measures, refer to the Alameda CTC's Special Transportation for Seniors and People with Disabilities (Paratransit) Implementation Guidelines, revised 2/25/16 (provided with the application materials).

- **Management/Overhead**: Program oversight, planning, budgeting, participation in regional/countywide meetings. Include admin/labor even if it is paid by the City/transit agency for accurate reporting of full program expenses.
- **Customer Service/Outreach**: Activities associated with educating consumers about services that are available to them, answering questions from consumers and taking, tracking and responding to complaints and commendations. Include costs even if paid by the City/transit agency for accurate reporting of full program expenses.
- **ADA-mandated Paratransit**: Paratransit services provided by fixed-route transit operators to fulfill requirements under the American's with Disabilities Act.
- **City-based Door-to-Door**: Pre-scheduled, accessible, door-to-door service provided by city. Provides a similar level of service to mandated ADA services; designed to fill gaps not met by ADA-mandated providers and/or relieve ADA-mandated providers of some trips.
- **Taxi Program**: Provides a same day, curb-to-curb service intended for situations when consumers cannot make their trip on a pre-scheduled basis; allows eligible consumers to use taxis at a reduced fare.

- City-based Specialized Accessible Van Service: Specialized van service provides accessible, door-to-door trips on a pre-scheduled or same-day basis. These services are generally implemented as a supplement to a taxi program that does not meet critical needs for particular trips in accessible vehicles in certain communities.
- Accessible Fixed-Route Shuttle: Generally accessible vehicles that operate on a fixed route
 and schedule to serve common trip origins and destinations, e.g. senior centers, medical
 facilities, grocery stores, BART stations, other transit stations, community centers,
 commercial districts, and post offices.
- **Group Trips Program**: Round-trip accessible van rides for pre-planned outings or to attend specific events or go to specific destinations for fixed amounts of time, e.g. shopping trips or religious services. Trips usually originate from a senior center or housing facility.
- **Volunteer Driver Program**: Pre-scheduled, door-through-door services that are generally not accessible; rely on volunteers to drive eligible consumers for critical trip needs, such as medical trips. May also have an escort component.
- **Mobility Management/Travel Training**: Covers a wide range of activities, such as travel training, trip planning, and brokerage. Does not include provision of trips. (This is considered "non-trip provision").
- **Scholarship/Subsidized Fare Program**: Program to subsidize any service for customers who are low-income and can demonstrate financial need.
- **Meal Delivery:** Program to fund meal delivery to the homes of individuals who are transportation disadvantaged. Currently, only existing operating programs can continue to use Measure B funds for these service costs. No new meal delivery services can be established.
- Capital Expenditure: Capital purchase or other capital expenditure.
- **Note on volunteer driver programs and mobility management/training**: If your program is using DLD funds, but not Gap funds, you will be required to submit further information.

1A. Provide a short narrative description of your agency's FY 2016-17 program:

Effective July 1, 2016 the City of San Leandro Paratransit Program services will continue to have a fixed-route shuttle (FLEX Shuttle) and a central county taxi voucher program offered in partnership with the City of Hayward (see City of Hayward Paratransit Program Plan Application for additional information regarding the taxi voucher program).

San Leandro's FLEX shuttle has continuously proven to be the most widely used, cost-effective and successful paratransit service. The FLEX shuttle service consists of two interconnecting loops that travel on a fixed route to locations where riders can take care of basic life needs, such as: grocery shopping, banking, restaurants, community centers, libraries, post office, BART, salons, department stores, health and fitness centers and medical offices.

Each shuttle (North Route and South Route) makes a loop every hour and meets at the San Leandro Senior Community Center, which serves as a transfer point. The shuttle's hours are Monday – Friday, 9:00 a.m. – 5:00 p.m. Based on feedback from current riders, the City of San

Leandro will look to expand services for 2016-2017, including increasing service days to the weekend, and adding two additional shuttles to the routes.

The program is overseen by the Senior Services Supervisor and Paratransit Coordinator to coordinate daily operations, budget, and overall planning. Additionally, City staff coordinate customer service and outreach on a regular basis to answer questions, respond to complaints, produce marketing, and provide general consumer education. The City of San Leandro contracts with MV Transportation, Inc. to provide transportation and drivers for the program.

1B. Explain how the suite of services offered is targeted towards the seniors and people with disabilities in your community. Why have these services been selected to meet the trip needs of your consumers over other eligible service types? How do these services enhance their quality of life and help them meet basic life needs?

The FLEX Shuttle is available for senior residents and people with disabilities in the City of San Leandro who meet the age requirements. Seniors are required to be 60+ years old, and adults must be 18+ years old with a disability and a qualified participant with East Bay Paratransit. Not only does the FLEX Shuttle Program provide the much needed transportation for our seniors, but it provides additional benefits such as: increases independence and socialization; a sense of self-determination; and contributes to more opportunities for health and wellness. The Flex Shuttle provides a comfortable and secure way of traveling and allows the recipient to have peace of mind as they are able to manage their basic needs independently.

The Taxi Voucher Program allows seniors to travel to locations that are not on the FLEX Shuttle North and South Routes, and allows the door-to-door option which many, including those that are unable to travel to a FLEX shuttle stop, prefer.

1C. List the most common trip destinations for seniors and people with disabilities in your community that your services are designed to serve, e.g. dialysis centers, hospitals, major shopping complexes, senior centers.

The most common trip destinations for San Leandro FLEX Shuttle members are listed below, with the top two points of destination listed first:

Medical Facilities and Appointments – 80% of passengers

- o Davis Healthcare Center
- Kaiser Permanente Medical Center
- San Leandro Hospital

Major Shopping Complexes – 80% of passengers

- Bay Fair Shopping Center (Target)
- Greenhouse Shopping Center (Safeway)
- Marina Faire
- o Marina Square
- San Leandro's Downtown Plaza (Safeway)
- Walmart

Senior Housing Facilities

- o Broadmoor Plaza Apartments
- Estabrook Place/Eden Housing
- Fargo Senior Center Apartments
- Mission Bay Mobile Home Community

Community Resources

- San Leandro Main Library
- o Marina Community Center
- o San Leandro Senior Community Center

Places of Worship

o Bethel Presbyterian Church

Transportation

San Leandro BART Station

The Flex Shuttle routes (North and South) travels in areas where other major stores are vital for the senior riders (e.g., CVS Pharmacy, US Post Office).

2.	Implem	Will your agency's program for FY 2016-17 conform to the Paratransit Program Implementation Guidelines, as required? (FY 2016-17 Programs are <i>required</i> to conform to the Implementation Guidelines, revised February 2016)									
	[X]	Yes	[]	No							
	2A. If " I 2016)	No", exp	lain bel	w and contact A	Alameda CTC sta	ff to discuss (prio	r to March 25,				

3. If proposing service changes in FY 2016-17 from the current year, FY 2015-16, describe the changes and explain why they are proposed. Describe how these changes will impact the ability of seniors and people with disabilities in your community to meet their basic life needs.

Based on feedback, the City of San Leandro is proposing the following changes:

- Provide two additional shuttles to the routes one shuttle for the North Route and one shuttle for the South Route. These additional shuttles will run in the reverse direction of the current FLEX shuttles. Providing shuttles in the reverse direction will allow for better use of time for individuals. Riders can reach their destination, and return to their original pick-up location in a timelier manner than having to circle the entire route back home. This will allow for seniors and people with disabilities to feel more confident with scheduling their daily activities and appointments.
- Provide a limited weekend service. Providing a limited weekend service will allow for seniors and people with disabilities to continue with their daily activities throughout the weekend, including grocery shopping, meeting with family and friends, visiting places of worship, and participating in recreational activities. Proposed times could include 9:00am-2:00pm or 10:00am-3:00pm. on Saturday and Sunday.

PROGRAM ELEMENTS REQUIRING ALAMEDA CTC STAFF REVIEW

4. The 2016 Paratransit Program Implementation Guidelines require Alameda CTC staff review of several program elements prior to implementation. The program elements

requiring staff review are listed as items 4A – 4F below and for each item, further explanation is requested. If your FY 2016-17 program plan includes any of the elements listed, in the box provided below, list the elements and the requested explanation for each. Applicants must address any applicable paratransit projects and programs listed in Attachment B.

- A. **Planned capital expenditure** (describe planned capital expenditures, such as purchase of vehicles or durable equipment, below)
- B. City-based Door-to-Door Service that includes trip limitations based on trip purpose (describe the proposed trip limitations that are proposed below)
- C. Taxi Subsidy Program that includes incentives to drivers and/or transportation providers (describe the proposed incentives below)
- D. **Accessible Shuttle Service** (describe service plan and how city is coordinating with the local fixed route transit provider)
- E. **New mobility management and/or travel training programs** (describe the well-defined set of activities below)
- F. Low-income requirements for any scholarship and fare subsidy programs (describe the proposed subsidy and the means that will be used to determine and verify eligibility below)

Accessible Shuttle Service – The City of San Leandro's accessible shuttle service is the FLEX Shuttle. The FLEX Shuttle currently runs Monday-Friday from 9:00am-5:00pm. It is open to seniors 60+ and people with disabilities 18+. San Leandro coordinates with MV Transportation, Inc. to provide the shuttles and drivers for the fixed route service. The shuttle stops allow individuals to be dropped off and picked up at popular destinations of interest. City staff have ongoing communication with MV transportation, and meet in-person throughout the year to ensure proper operations. Complaints are worked through jointly with MV Transportation when appropriate. MV Transportation provides the City of San Leandro with monthly invoices, and monthly data, including number of one-way trips, number of hours driven, and number of passengers riding the shuttles throughout the month.

DEVELOPMENT OF PROGRAM PLAN

5. How was consumer input sought in development of the program and selection of the services offered? Describe all general outreach activities undertaken in connection with this plan, including consumer or public meetings; meetings with other agencies; presentations to boards, commissions, or committees. If possible provide dates for these activities. Note below if this plan was reviewed by a local paratransit advisory committee, including the name of the committee, and the date of the meeting.

Public input for the Annual Paratransit Plan was collected through the annual survey of riders and the following public meetings:

- Tuesday, December 8, 2015 FLEX Focus Group Meeting in English-Language
- Wednesday, January 3, 2016 FLEX Focus Group Meeting in English-Language
- Thursday, February 25, 2016 FLEX Focus Group Meeting in Chinese-Language
- Wednesday, February 17, 2016 FLEX Focus Group Meeting with Disability Service Providers

- December 2015-March 2016 Annual Surveys of FLEX Shuttle Registered Riders in both English-Language and Chinese-Language
- Tuesday, March 15, 2016 FLEX Shuttle North and South Route Ride-A-Longs (Senior Services Supervisor)
- 6. Describe any outreach, surveys and/or analysis conducted to develop this plan and to determine the types of services the program offers.

The City's annual paratransit survey was sent to all registered Flex Shuttle riders at the end of December 2015. The staff received a 20% response rate. 40 surveys were received back from English-Language riders and 16 from Chinese-Language riders, totaling 56 returned surveys. We held our annual Focus Group workshops in December 2015, January 2016, and February 2016. We take comments and suggestions on a continual basis, verbal, written, and by contacting the Paratransit Coordinator.

Through the survey, critical information is gathered such as frequency of use, trip purpose, service quality and future needs. Survey respondents also provided helpful individual comments and suggestions.

7. Describe how results from the community outreach, surveys and/or analysis described in Questions 5 and 6 were used to guide the development of the program plan.

Our community outreach provides a platform for seniors to express their needs and make suggestions on how to improve the program. We use survey answers, focus group responses, and on-going feedback to look for trends to make effective modifications. Feedback is written into an analysis, which provides both an overview and detailed report on where modifications can be made.

8.	Was this program plan approved by a governing body (or is it scheduled for action)? This
	is not required by the Alameda CTC. Jurisdictions should follow their established internal
	process.

[X] Yes

[] No

If yes, provide the name of the governing body and planned or actual approval date.

The approval of the 2016-2017 Paratransit Program Application is scheduled for the San Leandro City Council meeting as part of the budget approval process for May 16, 2016.

OUTREACH

9. How do community members and potential users learn about the Alameda CTC-funded services provided in your community? Specify for each of the paratransit projects and programs listed in Attachment B.

Community members and potential users learn about the FLEX Shuttle service in the following ways:

City Website

- Local Access Channel
- Recreation Activity Guide (delivered to San Leandro households three time per year)
- Activity Display Screen (PowerPoint presentation that plays throughout the day at the Senior Community Center).
- Signage on Flex Shuttles and at Flex Shuttle stops
- Flex Shuttle flyers, applications and routes/map (always on display at the Senior Community Center, Marina Community Center, Libraries, and City Hall)
- Annual Flex Focus Group Meetings
- Paratransit Educational Workshops
- Mobility & Transit Workshop and Fair
- Direct Outreach at Community Events, Senior Living Facilities, Farmers Markets, etc.

ELIGIBILITY AND ENROLLMENT

10. What are your requirements for eligibility? (E.g., age, residency, income, ADA-certification status, or other verification of disability).

Consumers must annually submit a program application with proof of San Leandro residency, date of birth, and \$20 annual registration fee to enroll in the program.

Eligibility Requirements for the FLEX Shuttle include: Seniors 60+ or Disabled Adults 18+, San Leandro resident (incorporated).

Consumers can mail in their applications, or bring it to one of our two customer service locations: Marina Community Center or Senior Community Center. Beginning April 2016, consumers can purchase their FLEX Shuttle memberships online.

Staff also assists applicants in completing their applications when needed.

11. How do consumers enroll in your program? Include how long the enrollment process takes, and how soon newly enrolled applicants can use the services offered.

The maximum amount of time enrollment would take is 14 days. However, the average enrollment time is 7 days.

Interim Service is provided for individuals applying for or awaiting East Bay Paratransit Service.

Our participants submit a completed FLEX Shuttle application (in person, via mail, or online) along with a valid ID and a \$20 registration fee. Once the application has been reviewed, approved and processed by our Customer Service staff, a FLEX Shuttle membership card will be created and issue to the individual. The timeframe generally takes less than one hour. If the application is processed via mail or online then the timeframe usually takes 3-5 business days.

CUSTOMER SATISFACTION

12. Describe your complaint and commendation process. Describe your process from beginning to end, including instructions you provide to customers for filing program

suggestions, complaints or commendations, your documentation procedures and your follow up. (See questions 12A and 12B that follow)

Complaints are handled on an individual basis, with responses back to them within 24 hours or the next business day. Riders typically make complaints by calling the Paratransit Coordinator or talking to the Paratransit Coordinator in-person. We maintain an up-to-date complaint log. We obtain complete incident information from the riders directly, and contact our service provider immediately, if deemed appropriate. Our contract with the transportation provider requires a 24 hour response to all complaints. Our transportation provider keeps us apprised of their findings, and Senior Services typically communicates directly to the rider with that information. If requested, complaints will remain anonymous.

We also meet with our service provider in person when needed, but at a minimum we meet semi-annually to discuss the program and any service related issues.

We take recommendations in the same manner. Usually paratransit riders will call the Paratransit Coordinator directly with positive feedback. They also give positive feedback to staff in person.

Beginning March 2016, the City of San Leandro will be utilizing an email address specific to Paratransit, SLParatransit@sanleandro.org. Complaints can be emailed to this email address as well and individuals will receive a response within 24 hours or the next business day.

12A. Describe any common or recurring service complaints, commendations and/or suggestions your program has received. Specify for each of the paratransit projects and programs listed in Attachment B. (Complaints are defined as phone calls, letters, or emails received for the specific purpose of making a complaint.)

Flex Shuttle Program: The most recurring service complaints are as follows:

- Riders cannot reach anyone when calling the dispatch number for the transportation company (i.e. when trying to call when a shuttle is late).
- The substitute drivers do not know the routes
- The shuttle is late and/or off schedule

The suggestions and commendations submitted are:

- o Increase the size of signage on the shuttles and at stops for those who have vision issues
- Add an additional shuttle to go the reverse direction on shuttle routes
- Expand services to the weekend
- o The regular drivers are very compassionate and go out of their way to help the riders

<u>Taxi Voucher Program:</u> The most recurring services complaints are as follows:

- Our riders are frustrated with the program that will not allow them to travel outside Central Alameda County. Although them have been advised of the risk of travel outside the borders they tend to forget and have complication getting back to the San Leandro area. Most of them find it to daunting to get on Bart and/or AC Transit; they prefer doorto-door services.
- Taxi service pick-up takes a long time
- The yearly taxi voucher limit of 72 is too low

12B. Describe any changes you have made to your program as a result of these customer complaints, commendations and suggestions.

We have scheduled a Get-to-Know Your Paratransit Workshop in June, 2016, for riders to learn more about how the FLEX routes work, chain of communication to receive answers on questions or concerns, and general information on how the program works. We have also created a specific email address linked to Paratransit as an additional source to reach staff. For 2016-2017, we are planning to increase service days, increase the size of signage on shuttles, place benches and more signage at shuttle stops, and to work with our transportation provider to develop a plan for improved customer to dispatch communication. Additionally, we have implemented and plan to improve the communication and outreach to riders and potential riders by providing information in Chinese-Language and Spanish-Language.

EXPECTED DEMAND/USE OF SERVICES

13. How many people are/have been/will be registered in the program during the following time periods? Fill in the boxes below.

Registrants at beginning of FY 2014-15
325

Registrants at end of FY 2014-15	
357	

Current Registrants for FY 2015-16
305

Estimated Registrants for FY 2016-17
360

13A. Based on the registration projection provided, explain why you expect your program registration to increase, decrease or stay the same compared to the current year.

The current registrations are approximately 50 less than 2014-2015. We hope to increase the amount of individuals who sign-up for the FLEX Shuttle for 2016-2017 by increasing marketing and outreach. Additionally, we hope to expand service days to the weekend, which may increase program registration.

14. Do you expect the total number of one-way trips provided by your program to increase, decrease or stay the same compared to the current year, FY 2015-16? Why?

The total number of one-way trips is expected to increase once modifications have been made to a few routes and by increasing the community outreach/marketing.

Alameda CTC Paratransit Program Plan Application Application Period: July 1, 2016 - June 30, 2017

15. Do the ridership numbers reported in Attachments A and B include companions and/or attendants? [] Yes [X]No
If yes, and if known, what percent of total ridership are companions/attendants? (If providing an estimate, please clearly indicate it as such.)
16. Please provide data on lift/ramp trips provided, if available. If lift/ramp trips were provided in more than one service, please specify for each.
Lift/ramp trips provided in FY 2014-15 Unknown
Lift/ramp trips to be provided in FY 2015-16 Unknown
Lift/ramp trips to be provided in FY 2016-17 Unknown
VEHICLE FLEET
17. Provide details regarding your vehicle fleet. To answer this question, complete Attachment D (Table D tab of the Excel workbook).
SAFETY INCIDENTS
18. Describe any safety incidents recorded by your program in FY 2014-15, or to date in FY 2015-16. Specify for each of the paratransit projects and programs listed in Attachment B. (Report incidents resulting in any of the following: a fatality other than a suicide; injuries requiring immediate medical attention away from the scene for two or more persons; property damage equal to or exceeding \$7,500; an evacuation due to life safety reasons; or a collision at a grade crossing.)
N/A

FINANCES: PROGRAM REVENUE AND COST

- **19. Detail your FY 2016-17 program's total estimated revenue (all fund sources) and total cost by completing Attachment C (Table C tab of the Excel workbook).** For program components funded with a Measure B Gap Grant, segregate the Gap Grant funding by entering it in the "Other Measure B" column.
- 20. Describe below the "Management/Overhead" and "Customer Service and Outreach" costs included in Attachment C and how these cost allocations were determined? (These two categories are defined under Question 1). The amount spent on Customer Service/Outreach and Management/Overhead is to be included as part of the total program cost, even if it is not funded with Alameda CTC funding. This includes city/agency staff time paid for by a city's general fund.

20A. Management/Overhead Costs

18% from Measure B:

 Management includes program oversight, which specifically includes planning, budgeting, contract oversight and participation in regional meetings. Management also includes the direct supervision of the Paratransit Coordinator, any and all report writing and public presentations. The allocation is based on 35% of the Senior Services Supervisor's time.

20B. Customer Service and Outreach Costs

5% from Measure B, 24% from Measure BB (Approximately 30%):

 Customer Service/Outreach includes daily operational activities such as processing applications, maintaining the database and statistical information, answering consumer questions, following up on customer complaints, maintaining regular communication with our service provider, outreach and education. These activities are all conducted by a part-time Paratransit Coordinator, who is budgeted to work 850 hours per fiscal year on paratransit related activities.

PROGRAM FUNDING RESERVES

21. If your paratransit program is anticipated to have a remaining balance of Measure B/BB DLD funding at the end of FY 2016-17, as shown in Attachment C, please explain. How do you plan to expend these funds and when?

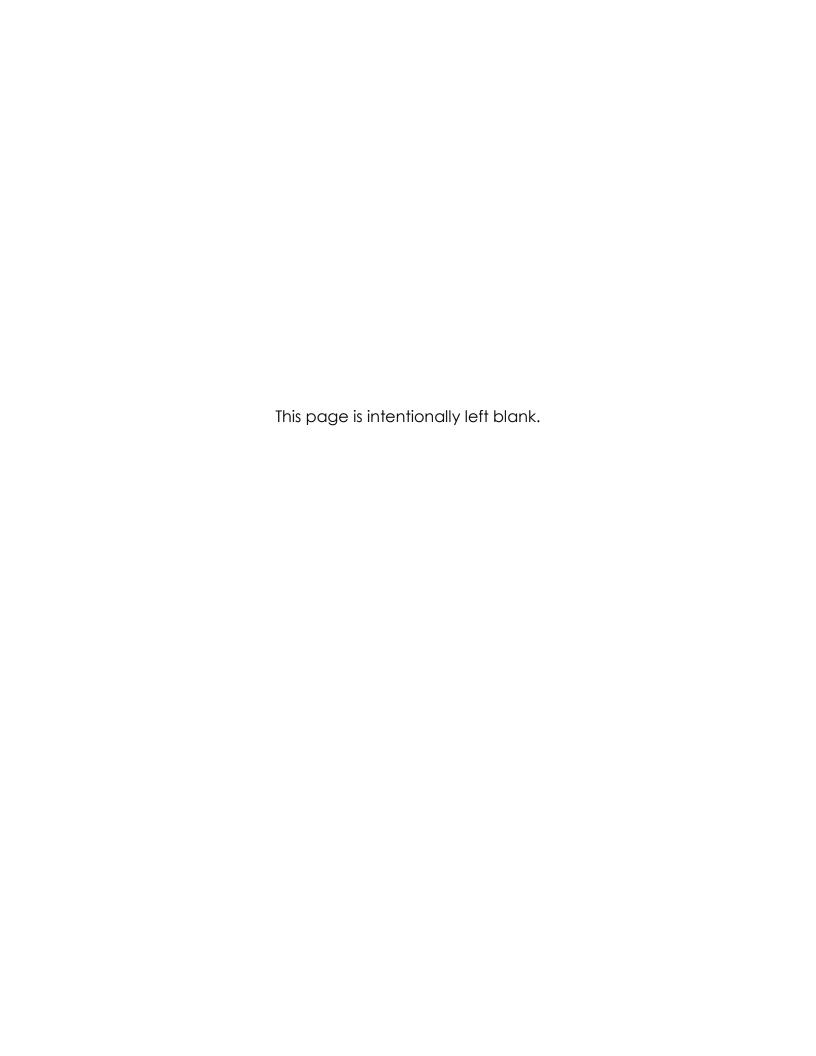
We plan on keeping these funds in the operational reserves	. This amount is far less than the
allowed amount.	

Alameda CTC Paratransit Program Plan Application Application Period: July 1, 2016 - June 30, 2017

MISCELLANEOUS

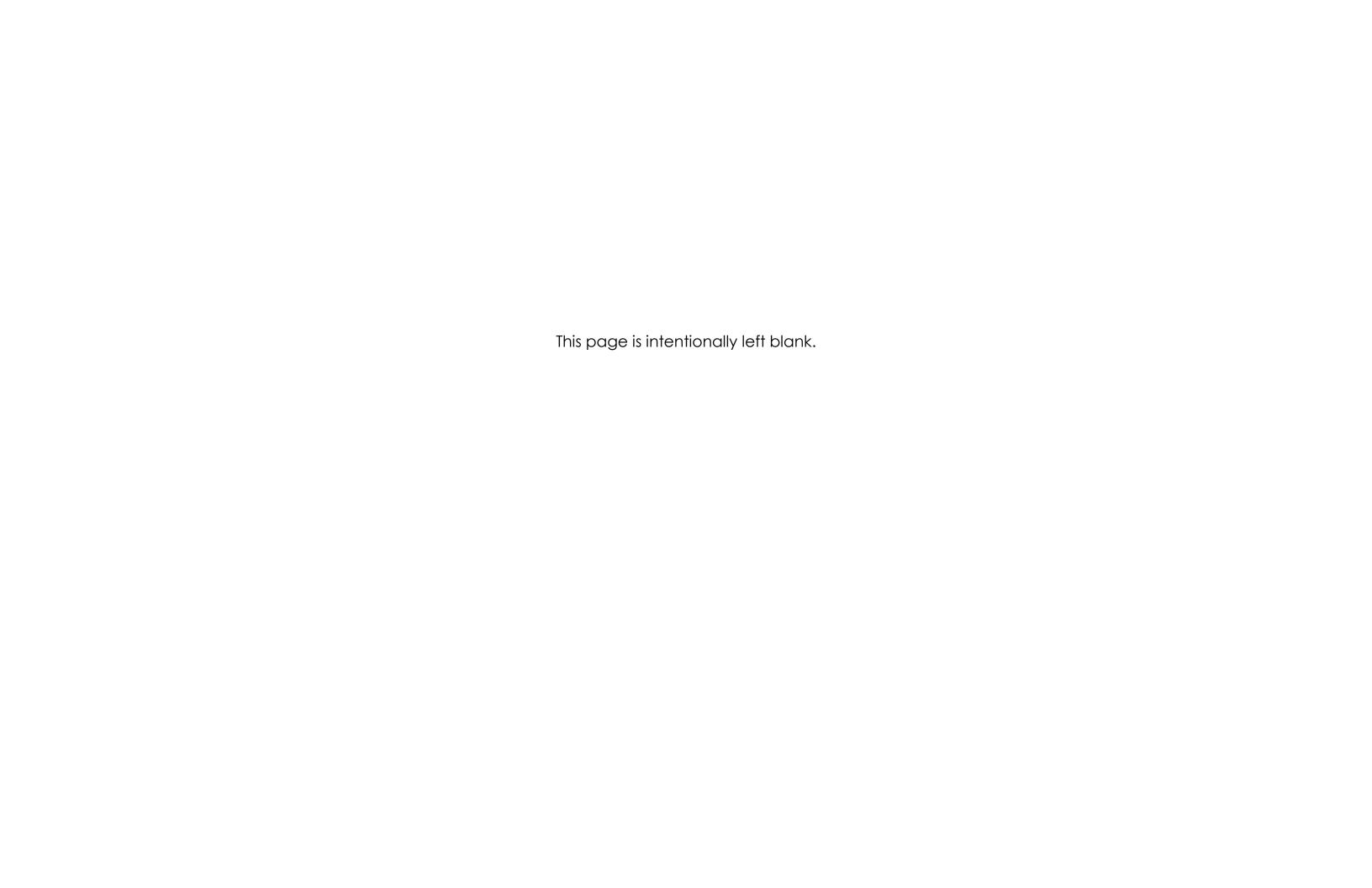
22. Use this space to provide any additional notes or clarifications about your program plan.

The feedback from the focus group meetings and surveys indicate that riders would like to see additional service days expanded to the weekend, as well as additional shuttles be driven in the reverse direction to increase timeliness. These modifications are dependent upon our transportation service provider, MV Transportation, and a City of San Leandro staff management plan. We hope that both MV Transportation and the City of San Leandro will be able to provide the staff and resources to accommodate these potential changes.



Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment A: Summary of Past Program Service, Performance and Costs (FY 2014-15)

Service/Program Type and Name Performance FY 14-15				Total FY 2014-15 Program Costs Expended by Fund Source (Measure B, Measure BB and all other funds expended during FY 2014-15)								Notes		
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J	Column K	Column L	Column M	Column N	Column O
Eligible Service/Program Type Drop-down Menu	Service/Program/Project Name	Quantity Provided FY 2014-15 Provide total number of one- way trips or units	On-Time Performance FY 14-15 Percent of passenger trips arrived within designated window (indicate if data is unavailable or non- applicable)	Amount of RESERVE Measure B Paratransit DLD funds	Amount of FY 2014-15 Measure B Paratransit DLD funds	Amount of FY 2014-15 Measure BB Paratransit DLD funds	Amount of OTHER Measure B/BB funds	What was the source of these OTHER Measure B/BB funds? (e.g. MB Gap Grant, MB LSR, etc.)	Fare Revenue received from service	Fare Revenue expended on service	Amount of all non-Alameda CTC funds (not including fares)	What was the source of these non-Alameda CTC funds? (e.g. City general fund, federal, state, etc.)	Total Funds expended (all sources) Automatically calculated	Miscellaneous Notes (If necessary, provide any notes/clarification about trip/program)
Accessible Fixed-Route Shuttle	City of San Leandro FLEX Shuttle	13,104	Unavailable	\$ 53,008	\$ 304,150	\$ 54,931			\$ 7,140	\$ 7,140			\$ 419,229	
													ė .	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
													\$ -	
				\$ 53,008	\$ 304,150	\$ 54,931	\$ -		\$ 7,140	\$ 7,140	\$ -		\$ 419,229	



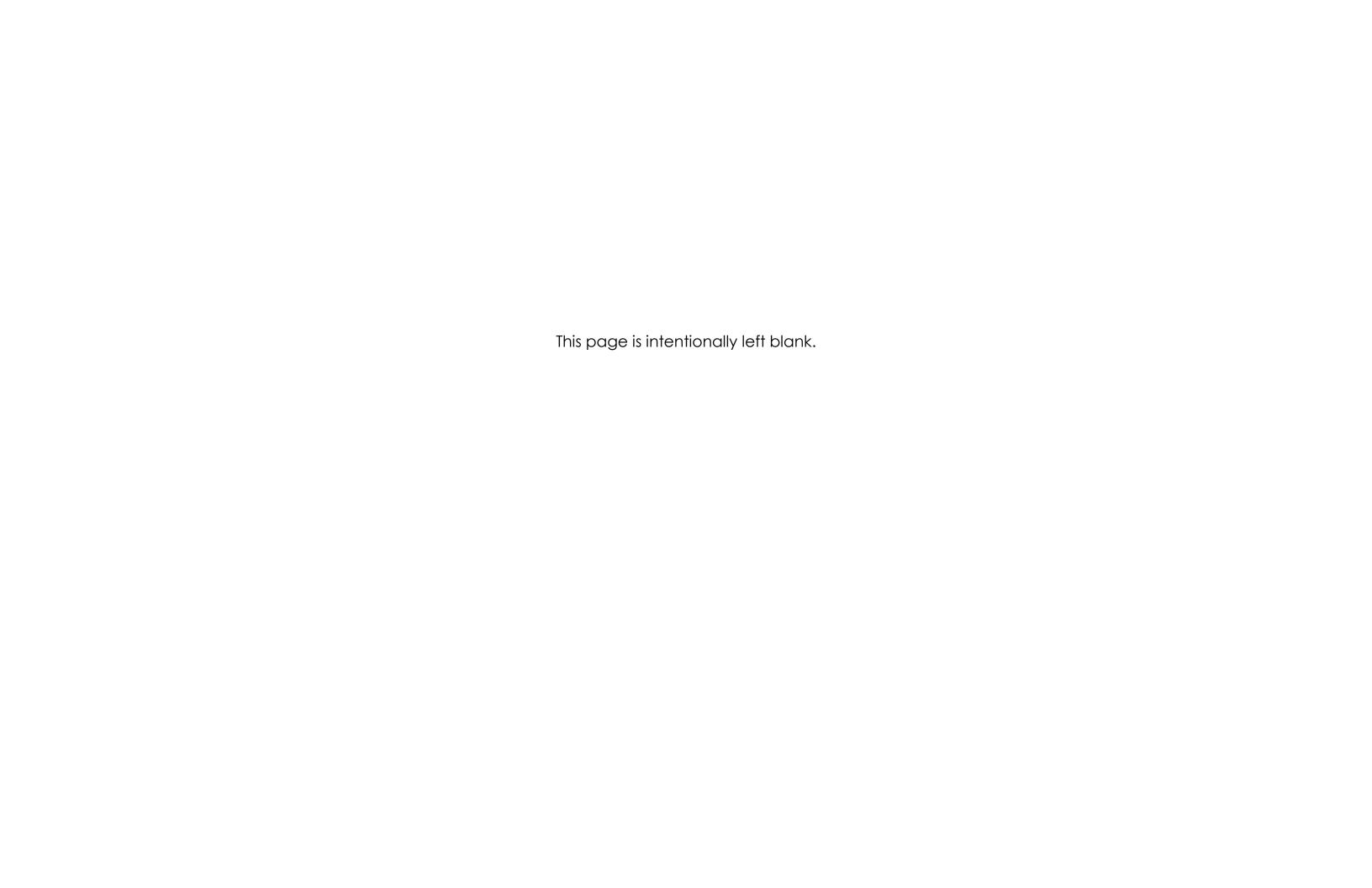
Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment B: Description of Planned Program

Note: Definitions for each drop-down menu are in the Implementation Guidelines

Service/Prograi	m Type and Name	Contractor	Need(s) Met	Cost to C	onsumer		For Trip Provis	sion Services	
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J
Eligible Service/Program Type Drop-down Menu	Service/Program/Project Name	If service is contracted, provide name of contractor/service provider	Need(s) this Service Meets (E.g. medical, grocery, recreation, regional trips, etc.)	Fare/Cost to Consumer	Fare Medium (E.g. cash, voucher, reimbursement, annual fee, etc.)	Vehicle Accessibility Drop-down Menu	Is this a same day or pre- scheduled service? Drop-down Menu	Is this a fixed route or origin-to-destination service (e.g. door-to-door)? Drop-down Menu	Service Area
Accessible Fixed-Route Shuttle	City of San Leandro FLEX Shuttle		Accessible transportation to meet daily basic life needs, such as: Grocery shopping, banking, restaurants, community centers, libraries, post office, BART, salons, department stores, health and fitness centers, and medical offices.	\$20.00	Annual Fee	Accessible	Same day	Fixed Route	Incorporated San Leandro; Tw Routes: North Bound and Sout Bound
Management/Overhead	City of San Leandro FLEX Shuttle - Management/Overhead		Flex Shuttle transportation budget, report preparation, program oversight, planning and participation in regional meetings.	N/A	N/A	N/A	N/A	N/A	N/A
Customer Service and Outreach	City of San Leandro FLEX Shuttle - Customer Service and Outreach	N/A		N/A	N/A	N/A	N/A	N/A	N/A

Note: Definitions for each drop-down menu are in the Implementation Guidelines

Service/Program Type and Name		Limits		Schedule		Eligibility	Status	Deliverables	Notes
Column A (repeated)	Column B (repeated)	Column K	Column L	Column M	Column N	Column O	Column P	Column Q	Column R
Service/Program Type Will automatically populate from rows above	Service/Program/Project Name Will automatically populate from rows above	Limits on number of trips/ use of service? (e.g. trip limits per month/quarter/year or a maximum expenditure per consumer)	If pre-scheduled, what days/hours are reservations accepted for trip, training, etc?	If pre-scheduled, how far in advance can/must a consumer schedule a trip, training, etc?	Days/Hours of Operation	Eligibility Requirements	Project Status Drop-down Menu	Quantity Planned Provide total number of units (one-way passenger trips, consumers trained, meals delivered, etc.)	Miscellaneous Notes (If necessary, provide any notes/clarification about trip/program)
Accessible Fixed-Route Shuttle	City of San Leandro FLEX Shuttle	N/A	N/A	N/A		San Leandro Resident, 60 years of age or older or 18 years+ and East Bay Paratransit certified.	Continuing/Ongoing	21,000	N/A
Management/Overhead	City of San Leandro FLEX Shuttle - Management/Overhead	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Customer Service and Outreach	City of San Leandro FLEX Shuttle - Customer Service and Outreach	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
0	0								
0	0								
0	0								
0	0								
0	0								
0	0								
0	0								
0	0								
0	0								
0	0								



Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment C: Program Revenue, Cost and Fund Sources

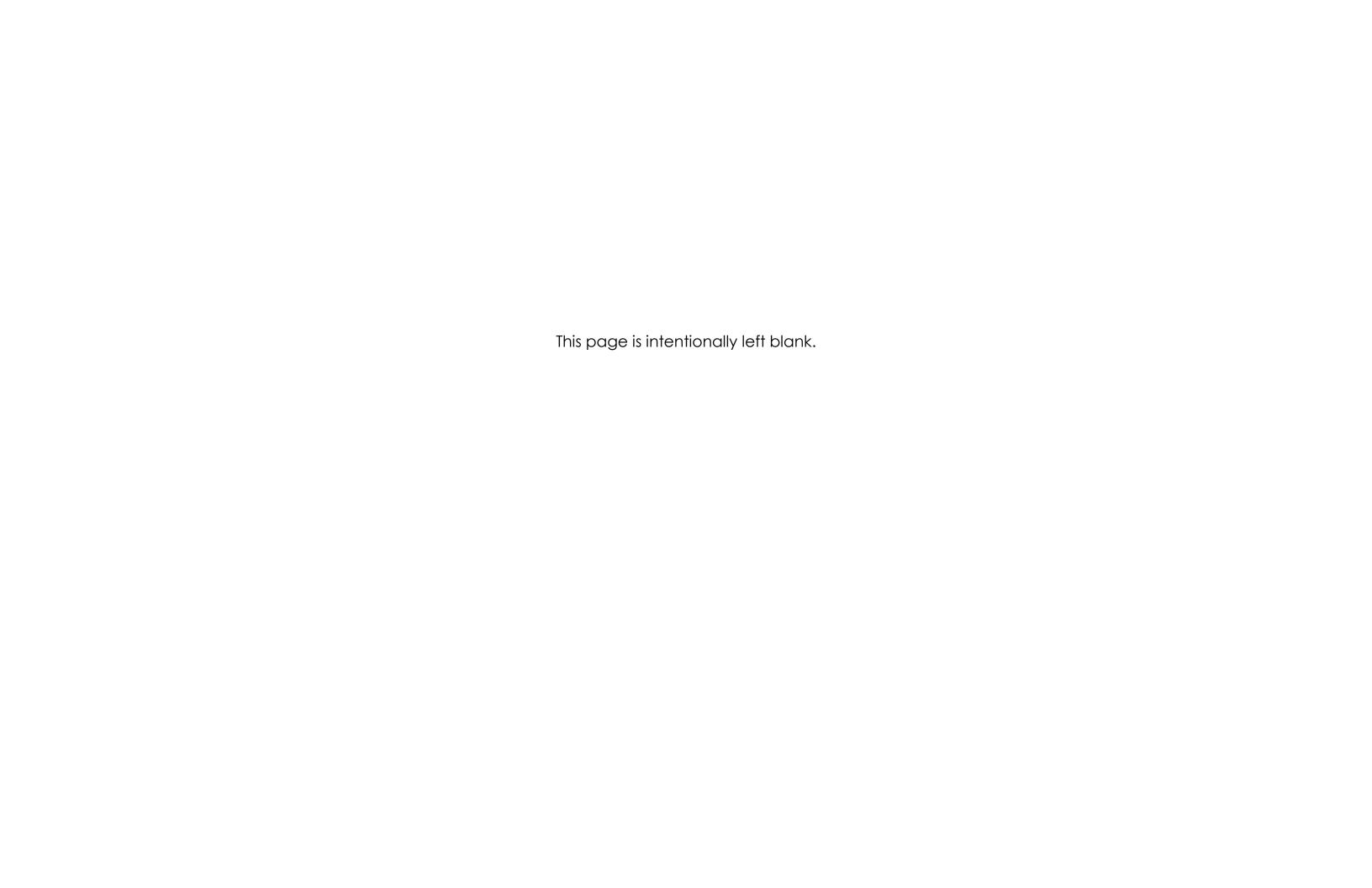
Total FY 2016-17 Program Revenue (Measure B, Measure BB and all other funds available for FY 2016-17)							
Estimated Measure B Paratransit DLD ending balance at the end of THIS fiscal year, FY 2015-16 (June 30, 2016)	\$50,000						
Projected FY 2016-17 Measure B DLD Paratransit revenue (Use projections distributed by the Alameda CTC)	\$283,117						
Estimated Measure BB Paratransit DLD ending balance at the end of THIS fiscal year, FY 2015-16 (as of June 30, 2016)	\$75,000						
Projected FY 2016-17 Measure BB DLD Paratransit revenue (Use projections distributed by the Alameda CTC)	\$254,888						
Total FY 2016-17 Measure B and BB Paratransit DLD Revenue (Automatically calculated)	\$663,005						
Total FY 2016-17 Other Revenue (All other revenue sources, non-DLD, including Gap grant)							
Total FY 2016-17 Program Revenue (Measure B, Measure BB and all other sources available for FY 2016-17) (Automatically calculated)	\$663,005						

		Total FY 2016-17 Program Costs by Fund Source											
Service/Program N	lame			(Measure	B, Measure BB a	nd all other fund	s planned to be e	xpended during F	Y 2016-17)			Tota	al Cost
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J	Column K	Column L	Colı	umn M
Service/Program/Project Name Automatically populated from prior sheet (column B)	Quantity Planned for FY 16-17 Automatically populated from prior sheet (column Q)	Amount of RESERVE Measure B Paratransit DLD funds	Amount of FY 2016-17 Measure B Paratransit DLD funds	Amount of RESERVE Measure BB Paratransit DLD funds	Amount of FY 2016-17 Measure BB Paratransit DLD funds	Amount of OTHER Measure B/BB funds	What is the source of these OTHER Measure B/BB funds? (e.g. MB Gap Grant, LSR, MB LSR, etc.)	Fare Revenue expected from service	Fare Revenue to be expended on service	Amount of all Non-Alameda CTC funds (not including fares)	What is the source of these non-Alameda CTC funds? (e.g. city funds, federal, state, etc.)	(all so	cal Cost sources) matically culated
City of San Leandro FLEX Shuttle	21,000		\$ 218,000		\$ 191,702			\$ 7,200	\$ 7,200			\$	416,902
City of San Leandro FLEX Shuttle - Management/Overhead	N/A		\$ 50,960									\$	50,960
City of San Leandro FLEX Shuttle - Customer Service and Outreach	N/A		\$ 14,156		\$ 60,801							\$	74,957
0	0											\$	-
0	0											\$	-
0	0											\$	-
0	0											\$	-
0	0											\$	-
0	0											\$	-
0	0											\$	-
0	0											\$	-
0	0											\$	_
0	0											\$	-
Totals	21, 000	\$ -	\$ 283,116	\$ -	\$ 252,503	\$ -		\$ 7,200	\$ 7,200	\$ -		\$ \$!	542,819

PARATRANSIT DLD RESERVE BALANCES	Measure B	Measure BB
Estimated Reserve Balance, June 30, 2017:	\$50,001	\$77,385
Reserve balance as percent of FY 16/17 Revenue	18%	30%

Budget check (total revenue less total cost):

\$120,186



Alameda CTC Paratransit Program Application - FY 2016-17 (July 1, 2016 - June 30, 2017) Attachment D: Vehicle Fleet

Instructions: Please complete table below. If necessary, please contact your contractors to obtain the information.

	Vehicle Fleet										
Column A	Column B	Column C	Column D	Column E	Column F	Column G	Column H	Column I	Column J		
					Vehicle (Capacity					
Make	Type of Vehicle(s) (specify bus, large van, minivan, sedan)	Year of Vehicle	Fuel Type	Lift/Ramp Equipment (specify lift, ramp, or none)	Ambulatory	Wheelchair	Number of Vehicles	Owner (specify if contractor)	City that vehicle(s) are garaged		
FORD E350	SMALL BUS	2008	GAS	W/C Lift	8	2	1229	MV SAN LEANDRO DIV #8	MV SAN LEANDRO DIV #8		
CHEV G5500	LARGE BUS	2008	GAS	W/C Lift	22	2	1253	MV SAN LEANDRO DIV #8	MV SAN LEANDRO DIV #8		

