

Grant Application Instructions

The following materials must be submitted electronically through [BidNet](#). Applications cannot be emailed. If any of the required components are not completed and included with the application by the submittal deadline so that it can be fully evaluated without negatively impacting the fairness of the competitive process, the application will be deemed ineligible.

Required Components

- Completed Grant Application
- Map(s) of Proposed Service Area(s)
- Project Scope of Work
- Project Budget
- Copy of Commission-issued Charter-Party Carrier permit for each entity that will provide the on-demand WAV services, including third-party contract providers

Recommended Components

- GIS shapefile (zipped file) of service area
- Resolution including all statements provided in the Sample Resolution

Project Scope of Work and Project Budget

The Project Scope of Work and Project Budget templates are available in [BidNet](#).

If a project is selected to receive funding, the Project Scope of Work and Project Budget will be added to the Grant Agreement with any adjustments required by SANDAG. The Applicant will be held responsible for implementing the project in accordance with the Project Scope of Work and Project Budget. Guidance for completing the Project Scope of Work and Project Budget templates has been provided below.

Project Scope of Work

The Project Scope of Work template has been developed to include the minimum tasks that all Applicants will be required to perform in **bold text**. The method each Applicant uses to complete each task (milestone) can vary. SANDAG has provided sample milestones that could be used to successfully achieve each task, as shown in the template. Applicants must update these sample milestones to demonstrate how they will actually complete the task.

Project Budget

The Project Budget template has been developed to match the Project Scope of Work template and to provide the format through which Applicants can illustrate their proposed project costs. Applicants that intend to apply indirect costs to their proposed project should ensure that the indirect costs are incorporated into the Project Budget.

Grant Application

Part I – Applicant and Project Background

Applicant Information

Applicant Name	
Applicant Address	
Contact Name	
Title	
Phone	
Email	

Project Information

Project Title	
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Project Manager

List the day-to-day Project Manager (PM) who will be responsible for the services.

Individual Name	
Title	
Phone	
Email	

Additional Contacts for Grant-Related Correspondence

Include the individual(s) who will prepare the monthly reports, submit invoices, or otherwise be involved in the project.

Role Description	
Individual Name	
Title	
Phone	
Email	

Role Description	
Individual Name	
Title	
Phone	
Email	

Role Description	
Individual Name	
Title	
Phone	
Email	

Role Description	
Individual Name	
Title	
Phone	
Email	

Project Budget

AFA Funding Request

Total AFA Grant Request Amount	
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Matching Funds (if applicable)

List the source(s) and associated dollar amounts of proposed matching funds. Matching funds can consist of in-kind services or cash match from local agencies, and/or funds from outside sources.

Source of Funding	
Amount of Funding	

Source of Funding	
Amount of Funding	

Source of Funding	
Amount of Funding	

Total Matching Funds Provided	
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Part II – Baseline Data*

This information in this section will not be scored. It will be used by SANDAG and the CPUC for future AFA Cycles.

WAV Information

1. How many WAVs does the Applicant currently have in operation? Please provide information by quarter and aggregated by hour of the day and day of the week. The template entitled “WAVs in Operation”, [available online from the CPUC website](#) should be used. A sample completed form [is available here](#).
2. Using the CPUC template entitled “WAV Trips”, [available online here](#), provide the number and percentage of WAV trips completed, not accepted, cancelled by passenger, cancelled due to passenger no-show, and cancelled by driver – by quarter and aggregated by hour of the day and day of the week. For WAV trips completed, Applicants have the option to

demonstrate an increase in the number of trips completed or an increase in the percent of trips completed. A sample completed form [is available here](#).

3. Provide completed WAV trip request response times in deciles by quarter for the proceeding four quarters, if available. This should also include a report of the 75th percentile response times, specifically, for that quarter. The template entitled “Response Times”, [available online from the CPUC website](#) should be used. A sample completed form [is available here](#).
4. Using the CPUC template entitled “Outreach”, [available online here](#), Evidence of outreach efforts to publicize and promote available WAV services to disability communities, which may include a list of partners from disability communities, how the partnership promoted WAV services, and marketing and promotional materials of those activities. A sample completed form [is available here](#).

Safety, training, and insurance information

1. Using the CPUC template entitled “Training and Inspections”, [available online here](#), provide the following information. A sample completed form [is available here](#).
 - Report of WAV driver training programs used and number of WAV drivers that completed the training in the prior year
 - Certification that all WAVs operating on Access Provider’s platform have been inspected and approved to conform with the ADA Accessibility Specifications for Transportation Vehicles within the past year.
2. Provide the number of complaints received related to WAV drivers or WAV services, categorized as follows: securement issue, driving training, vehicle safety and comfort, service animal issue, stranded passenger, and other. The template entitled “Complaints”, [available online from the CPUC website](#) should be used. A sample completed form [is available here](#).

Financial information

Using the CPUC templates entitled “Funds Expended”, [available online here](#), and “Contract Information”, [available online here](#), provide the following information. Sample completed forms are available at the following links –[Sample Funds Expended](#) form; [Sample Contract Information](#) form .

- Estimated income (categorized by passenger revenue; other revenue; and total grants, donations, and subsidy from other agency funds)
- Estimated expenses (categorized by wages, salaries, and benefits; maintenance and repair; fuels; casualty and liability insurance; administrative and general expense; other expenses; contract services)
- List and explain all sources of operating revenue, including revenue from grants, donations, and local fundraising projects that will be used to fund the Program, for the prior, current, and budget year.

*Note: If any of the above Baseline Data is unavailable or not applicable, please describe in the space provided on the next page.

Part III – Project Details

1. Project Readiness and Technical Capacity

- A. Provide the following information for all entities that will provide the on-demand WAV services, including Applicant and any third-party contract providers, as applicable.

Entity Name	
Charter-Party Carrier Status	☐ Holds a Commission-issued Charter-Party Carrier permit ☐ Non-permitted transportation carrier
Number of WAV vehicles in current fleet	
Date when on-demand WAV services will begin	

Entity Name	
Charter-Party Carrier Status	☐ Holds a Commission-issued Charter-Party Carrier permit ☐ Non-permitted transportation carrier
Number of WAV vehicles in current fleet	
Date when on-demand WAV services will begin	

Entity Name	
Charter-Party Carrier Status	☐ Holds a Commission-issued Charter-Party Carrier permit ☐ Non-permitted transportation carrier
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Entity Name	
Charter-Party Carrier Status	☐ Holds a Commission-issued Charter-Party Carrier permit ☐ Non-permitted transportation carrier
Number of WAV vehicles in current fleet	
Date when on-demand WAV services will begin	

- B. Describe what experience the Applicant has in managing a grant-funded project. Include examples such as prior grant-funded projects, or other instances when Applicant provided services on a reimbursement basis to another party and/or was subject to regulatory or other monitoring requirements. Describe how the Applicant will provide on-demand WAV service to a broad range of users, including those without smartphone or internet access.

2. Coordination and Program Outreach

- A. Describe how the Applicant will publicize and promote the available on-demand WAV services to disability communities. Provide an outline of the planned outreach activities either in the space below or as an attachment and include the proposed dates, any partners, marketing and promotional materials that will be used, and any other details.

- B. Describe how the Applicant will market and promote public awareness of its on-demand WAV services in both low income and minority areas as well as with populations with limited English proficiency. Provide the methods and strategies to be used and explain why Applicant's efforts will effectively reach these populations.

- C. Will the Applicant's on-demand WAV services be made available to individuals who do not have a smartphone, internet, or need additional assistance in requesting the service? What alternative means will the Applicant use to provide its services to these users?

3. Safety

Describe the Applicant's procedures for preventative and routine vehicle maintenance.

Background Checks

Does each entity that will provide the on-demand WAV services:

- Currently perform background checks on each of its potential drivers, based on the driver's social security number and not just the driver's name, and in the national criminal database and national sex offender database?

☐ Yes ☐ No*

- Ensure that any person who has been convicted within the past seven years of driving under the influence of drugs or alcohol, fraud, sexual offenses, use of a motor vehicle to commit a felony, a crime involving property damage and/or theft, acts of violence, or acts of terror not be permitted to provide AFA services?

☐ Yes ☐ No*

- Ensure that any potential drivers with convictions for reckless driving, driving under the influence, hit and run, or driving with a suspended or revoked license are not permitted to be an AFA driver?

☐ Yes ☐ No*

*If the answer to any of the above questions is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with each of these background check requirements at the time of grant agreement execution (approximately October 1, 2022).

Insurance

- Does each entity that will provide the on-demand WAV services have levels of insurance that are equivalent or higher than what is required for charter-party carriers under [General Order 115.2?](#)

☐ Yes ☐ No*

*If the answer to the above question is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with the insurance requirements at the time of grant agreement execution (approximately October 1, 2022).

Driver training

- Does each entity that will provide the on-demand WAV services have certification that its drivers have completed WAV driver training on transporting people with disabilities within the past three years including but not limited to sensitivity training, passenger assistance techniques, accessibility equipment use, door-to-door service, and safety procedures?

☐ Yes ☐ No*

*If the answer to the above question is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with the driver training requirements at the time of grant agreement execution (approximately October 1, 2022).

Controlled substance and alcohol testing

- Is each entity that will provide the on-demand WAV services enrolled in a controlled substance and alcohol testing program?

☐ Yes ☐ No*

*If the answer to the above question is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with the controlled substance and alcohol testing requirements at the time of grant agreement execution (approximately October 1, 2022).

Secretary of State registration

- Does each entity that will provide the on-demand WAV services have its articles of incorporation filed with the Secretary of State?

☐ Yes ☐ No*

*If the answer to the above question is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with the Secretary of State registration requirements at the time of grant agreement execution (approximately October 1, 2022).

Motor Carrier Profile with CHP

- Has each entity that will provide the on-demand WAV services completed the [California Highway Patrol \(CHP\) 362 Motor Carrier Profile](#) and obtained a CA Number from the CHP?

☐ Yes ☐ No*

*If the answer to the above question is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with the CHP Motor Carrier Profile requirements at the time of grant agreement execution (approximately October 1, 2022).

Inspection

- Does each entity that will provide the on-demand WAV services have certification that all WAVs have been inspected and approved to conform with the American with Disability Act Accessibility Specifications for Transportation Vehicles within the past year, including the “19-point” vehicle safety inspection as required by the CPUC under [General Order 157-E](#)?

☐ Yes ☐ No*

*If the answer to the above question is No, provide additional information in the space below that describes how each entity that will provide the on-demand WAV services will be able to comply with the CHP Motor Carrier Profile requirements at the time of grant agreement execution (approximately October 1, 2022).

4. Operational/Implementation Plan

- A. Describe how the Applicant will have sufficient WAV fleet size to be able to meet current demand for service. Explain how this can be Scalable to meet future potential demand for on-demand WAV service. Include an estimate of the hourly number of available WAVs resulting from the proposed service.

- B. Describe the project's operational plan, including details on the on-demand WAV service to be provided and a description of day-to-day project operations. Include how the on-demand WAV service will be provided on a consistent basis to ensure Applicant will be able to meet the demand in its service area.

- C. Describe the Applicant's strategy to ensure completed on-demand WAV trip Response Times are reasonable and comparable to what a non-WAV requestor would receive. Explain whether the Applicant will make progress toward improving Response Times and WAV presence and availability over the grant period including a proposed strategy and goals the Applicant expects to achieve. Provide an estimate of the improvement in response times over the Baseline Data provided in Part II.

- D. Describe the Applicant's proposed methodologies and procedures for ongoing monitoring and evaluation of the project's effectiveness in providing on-demand WAV service. What steps will be taken if the Applicant's original goals are not achieved?

5. Project Budget and Cost Efficiency

- A. Provide a proposed project budget using the Project Budget Template provided with the Call for Projects that aligns with the tasks included in the Project Scope of Work.
- B. Describe the Applicant's methodologies and procedures for ongoing monitoring and evaluation of the service's cost efficiency. What steps will be taken by the Applicant to ensure the services provided are cost-effective?

- C. Please describe efforts that have been or will be made to diversify and pursue funding from sources other than the AFA program, including developing the capacity to fund the project beyond the Grant Term.

6. Innovation

- A. Describe any creative solutions or innovations in your project that could be applied to other services in the region or for other AFA programs across the state.

- B. Does the project include any efforts at ensuring environmental sustainability, such as grouping trips and use of alternative fuels or clean air vehicles? Describe in the space below.

Required Forms for All Applicants

Applicant Statement Form

Please indicate application completeness by checking the following boxes and sign and date below.

As an authorized delegate, I certify that my agency:

- ☐ Has read the Grant Agreement Template and accepts and can meet the terms and conditions therein.
- ☐ Understands that SANDAG will not reimburse the applicant for expenses incurred prior to issuance of the Notice to Proceed or after the grant term expiration.

If this application is approved for funding, I certify that my agency:

- ☐ Understands the responses in this application will become requirements reflected in the Grant Agreement with SANDAG.
- ☐ Agrees to sign and return the Grant Agreement to SANDAG, without exceptions, within 45 days of receipt.
- ☐ Will submit progress reports, performance measures, and invoices documenting the use of both grant and matching funds to SANDAG no less frequently than quarterly using the method required by SANDAG.
- ☐ Will set-up a separate project account that will be in accordance with a quarterly reporting and invoicing schedule.

I certify that I agree with the above statements and that the information submitted in this application is complete, accurate, and in accordance with these guidelines.

I have the authorization to submit this Grant Application on behalf of my agency.

	
Signature	Date
Printed Name	Title

Public Contract Code Section 10162 Questionnaire

In accordance with Public Contract Code Section 10162, the Applicant shall complete, under penalty of perjury, the following questionnaire:

Has the Applicant, any officer of the Applicant, or any employee of the Applicant who has a proprietary interest in the Applicant, ever been disqualified, removed, or otherwise prevented from bidding or proposing on, or completing a federal, state, or local government project because of a violation of law or a safety regulation?

☐ Yes* ☐ No

*If the answer is yes, explain the circumstances in the space below.

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Signature	Date

Printed Name	Title

Public Contract Code Section 10232 Statement

In conformance with Public Contract Code Section 10232, the Applicant hereby states under penalty of perjury, that no more than one final unappealable finding of contempt of court by a federal court has been issued against the Applicant within the immediately preceding two--year period because of the Applicant's failure to comply with an order of a federal court which ordered the Applicant to comply with an order of the National Labor Relations Board.

	
Signature	Date

Printed Name	Title

Equal Employment Opportunity Certificate

Applicant hereby certifies that it will comply with the provisions of the SANDAG Equal Employment Opportunity Program ([SANDAG Board Policy No. 007](#)), and rules and regulations adopted pursuant thereto, Title VI of the Civil Rights Act of 1964, the California Fair Employment Practices Act, and any other applicable federal and state laws and regulations relating to equal employment opportunity, including laws and regulations hereinafter enacted.

Furthermore, Applicant hereby certifies that it:

☐ Has* ☐ Has Not

been found, adjudicated, or determined to have violated any laws of Executive Orders relating to employment discrimination or affirmative action including, but not limited to, Title VII of the Civil Rights Act of 1964, as amended, (42 U.S.C. 2000[e] et seq.); the Equal Pay Act (29 U.S.C. 206[d]); Executive Order (EO) 10925 (Kennedy, 1961), EO 11114 (Kennedy, 1963), or EO 11246 (Johnson, 1965); or the California Fair Employment and Housing Act (Government Code 12460 et seq.); by any federal or California court or agency, including but not limited to the Equal Employment Opportunity Commission, the Office of Federal Contract compliance Programs, and the California Fair Employment and Housing Commission.

*If Has is marked above, please explain the circumstance in the space below.

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 Signature	
Printed Name	Title

Safety Protocol Declaration Form

Carrier Name (Access Provider)	
PSG # (if applicable)	

Pursuant to [Decision 21-11-004](#) Ordering Paragraph 12, all eligible Access Providers must comply with the following Safety Protocols:

- Background checks: Access Providers must perform background checks that meet or exceed what is required for a TNC under the Instructions for TNC Application Form.¹
- Insurance: Access Providers must have levels of insurance that are equivalent or higher than what is required for charter-party carriers under General Order 115.²
- Driver training: Access Providers must have certification that their drivers have completed WAV driver training on transporting people with disabilities within the past three years including but not limited to the following:
 - Sensitivity training
 - Passenger assistance techniques
 - Accessibility equipment use
 - Door-to-door service
 - Safety procedures
- Controlled substance and alcohol testing: Access Providers must be enrolled in a controlled substance and alcohol testing program.
- Secretary of State registration: Access Providers must have their articles of incorporation filed with the Secretary of State.
- Motor Carrier Profile with CHP: Access Providers must complete the California Highway Patrol (CHP) 362 Motor Carrier Profile and obtain a CA Number from the CHP.
- Inspection: Access Providers must have certification that all WAVs have been inspected and approved to conform with the American with Disability Act Accessibility Specifications for Transportation Vehicles within the past year, including the “19-point” vehicle safety inspection as required in both the TCP³ and TNC⁴ permitting process.

In addition, pursuant to Decision 21-03-005 Ordering Paragraph 22, Access Providers offering wheelchair accessible vehicle services shall place the International Symbol of Accessibility on vehicles providing WAV service in the following locations: passenger side door (below door handle) and rear of vehicle (right side above bumper).

¹ Basic Information for Transportation Network Companies and Applicants at 4.

² General Orders are available online at <https://www.cpuc.ca.gov/generalorders/>

³ General Order 157-E at 9:

<https://docs.cpuc.ca.gov/PublishedDocs/Published/G000/M322/K150/322150628.pdf>

⁴ [Basic Information for Transportation Network Companies and Applicants](#) at 9 and 10.

Safety Protocol Declaration Form (Continued)

Access Providers shall be responsible for ensuring compliance with these requirements and shall maintain records of such compliance if applicable for the duration of the program, which is scheduled to sunset on January 1, 2026. The CPUC and/or the Local Access Fund Administrator may request supporting documentation at any time.

CERTIFICATION

I (we) certify (or declare), under penalty of perjury, that I (we) have read and understand the above requirement and must have completed the safety protocols above, and that I (we) am (are) to and will comply with it. I (we) certify (or declare), under penalty of perjury, that the foregoing is true and correct.

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Date

Print Name of Applicant/Officer



Signature of Applicant(s)



Signature of Corporate Officer

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Title of Corporate Officer

Required Forms for TNC Applicants Only

TNC As Access Provider Attestation Form

TNC Name	
PSG #	

Pursuant to [Decision 21-11-004](#) Ordering Paragraph 14, all Transportation Network Companies (TNCs) applying as an Access Provider must attest to the following:

- New Service Exception: For the purpose of Access Provider eligibility, a TNC is eligible to serve as an Access Provider in a geographic area so long as it has not provided wheelchair accessible vehicle (WAV) services in that geographic area since July 2019.⁵
- Exemption Exception: For a TNC that has operated WAV services since July 1, 2019 in a given geographic area, the TNC may continue to be eligible as an Access Provider in that geographic area if it qualifies under the exemption exception, which states the following:
 - A TNC may be eligible as an Access Provider in a geographic area where it currently offers WAV service if:
 - a) the TNC qualifies for an exemption in that geographic area, and
 - b) the TNC certifies that the TNC's collected fees during the Exemption Year were exhausted to provide WAV services.⁶

Please check one of the following:

I confirm the TNC stated above qualifies as an Access Provider under:

- ☐ New Service Exception
- ☐ Exemption Exception

⁵ Decision D.21-11-004 Ordering Paragraph 4: a TNC is deemed to "operate WAV service" in a given geographic area if the TNC completes at least one WAV trip that originates in that geographic area.

⁶ See D.21-03-005 OP11.

TNC As Access Provider Attestation Form (Continued)

CERTIFICATION

I (we) certify (or declare), under penalty of perjury, that I (we) have read and understand the above requirement, and that I (we) confirm the above requirement. I (we) certify (or declare), under penalty of perjury, that the foregoing is true and correct.

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Date

Print Name of Applicant/Officer

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Signature of Applicant(s)

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Signature of Corporate Officer

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Title of Corporate Officer