



## Sunset Empire Transportation District BOARD OF COMMISSIONERS

### Item 10e ODOT Gap Funding Response

**Date:** Feb. 26, 2026

**Summary:** ODOT's Public Transportation Division (PTD) is shifting federal subgrant agreement periods from the state fiscal year to the federal fiscal year to better align with funding availability. As a result of this transition, there will be a funding continuity gap between the current biennium and the next.

SETD must complete a form to secure funding to cover a temporary gap created by the transition. We received the required form on Feb. 19, 2026.

It's due by the close of business on Feb. 26, 2026.

SETD staff are working on completing the form and anticipate distributing it for review ahead of the board meeting on Feb. 26, 2026.

**Additional background:** To ensure uninterrupted operations during the gap period, we must apply for approximately one-eighth (1/8), or one financial quarter, of our current allocations under the following programs:

- Section 5310 STBG
- Section 5310 Small Urban
- Section 5311

PTD has developed a specific form for 2025–27 formula subrecipients to identify the activities that will require funding during this transition period.

Completion and submission of this form is required to access gap funding and maintain operational continuity.

**Attachments:**

- Completed form



## PTD July-September 2027 Gap Funding Application

This form is for current Public Transportation Division formula subrecipients to identify which activities they require funding to bridge their operations during the transition to the new schedule described in the GovDelivery sent on December 8, 2025.

Responses will be used to amend existing 25-27 Formula subgrants. These amendments will add an additional project with the allocation amount programmed to the activities identified in this form, along with extending the expiration date from the end of the state fiscal year (6/30/2027) to the end of the federal fiscal year (9/30/2027).

**For alternative formats / accessibility questions please reach out to:**

**The Regional Transit Coordinator in your region or Brian Roth: [brian.roth@odot.oregon.gov](mailto:brian.roth@odot.oregon.gov)**

### Applicant Information

**Agency Legal Name \***

Sunset Empire Transportation District

**Agency Legal Address \***

900 Marine Dr, Astoria, OR 97103

**Application Contact Position Title \***

Executive Director

**Application Contact Name \***

David Carr

**Application Contact Email Address \***

david@ridethebus.org

**Application Contact Phone \***

(503) 861-5399

**Person Signing Grant Agreement Name \***

Kathy Kleczek

**Person Signing Grant Agreement Title \***

Board of Commissioners - Chair

*Official who has authority to indebt agency or company*

**FEIN (Federal Employer Identification Number) \***

93-1146160

**UEID (Unique Entity Identification) \***

Z9KTKMW3YRE5

## Authorized Representative

**First and Last Name \***

Kathy Kleczek

**Title \***

Board of Commissioners - Chair

**Email Address \***

kathy@ridethebus.org

**Phone Number \***

(503) 440-3232

**Which funding programs do you have active subgrant agreements for the 2025-27 biennium? \***

- 5310 STBG
- 5310 Small Urban
- 5311

## 5310 STBG Project Information

**Agency Name**

Sunset Empire Transportation I ▾

**Grant Agreement Number**

35777

**Gap Allocation Amount \***

\$41,243.00

## Projects

Project Type	Total Project Cost *	Grant Share	Match Amount
⊗ Mobility Management	\$38,206.00	\$34,282.00	\$3,924.00
⊗ Preventive Maintenance	\$4,734.00	\$4,248.00	\$486.00
⊗ Preventive Maintenance	\$3,024.00	\$2,713.00	\$311.00
	\$45,964.00	\$41,243.00	\$4,721.00

+ Add Item

## Project Match

	Match Source *	Match Amount *	Match Percentage *	Match Status *
⊗	State	\$3,924.00	100.00%	Planned
⊗	State	\$486.00	100.00%	Planned
⊗	State	\$311.00	100.00%	Planned

+ Add Match Source

If you selected "Other" for match source, please describe in detail.

N/A

Is your agency including in-kind match in the application? \*

Yes  No

If your subgrant agreement for the 25-27 biennium has a different activity (not available for selection above) and you would like more funding in that activity, please contact PTD.

Additional Comments

N/A

## 5311 Project Information

Agency Name	Grant Agreement Number	Gap Allocation Amount *
Sunset Empire Transportation I <input type="checkbox"/>	35820	\$216,409.00

## Projects

	<b>Project Type</b>	<b>Total Project Cost *</b>	<b>Grant Share</b>	<b>Match Amount</b>
<input checked="" type="checkbox"/>	Project Administration	\$81,399.00	\$73,039.32	\$8,359.68
<input checked="" type="checkbox"/>	Operations	\$244,907.00	\$137,343.85	\$107,563.15
<input checked="" type="checkbox"/>	Preventive Maintenance	\$6,715.00	\$6,025.37	\$689.63
		\$333,021.00	\$216,408.54	\$116,612.46

+ Add Item

## Project Match

	<b>Match Source *</b>	<b>Match Amount *</b>	<b>Match Percentage *</b>	<b>Match Status *</b>
<input checked="" type="checkbox"/>	State	\$8,360.00	100.00%	Planned
<input checked="" type="checkbox"/>	State	\$107,563.00	100.00%	Planned
<input checked="" type="checkbox"/>	State	\$690.00	100.00%	Planned

+ Add Match Source

**If you selected "Other" for match source, please describe in detail.**

N/A

**Is your agency including in-kind match in the application? \***

Yes  No

If your subgrant agreement for the 25-27 biennium has a different activity (not available for selection above) and you would like more funding in that activity, please contact PTD.

**Additional Comments**

N/A

# Supporting Documents

Examples of additional required supporting documents include but are not limited to:

- if your coordinated plan has been updated in the time since you submitted your 25-27 formula application, please attach it
- if you do not currently have Preventive Maintenance on your subgrant and are requesting it now, please attach a Preventive Maintenance Plan
- if you have changed vendors for your contracted service and are selecting that activity again, please attach your new sub-contract

**Please provide any additional supporting documents:**

Upload

 or drag files here.

## Submitting Your Application

- Click the "Save" button to save your work. A link to the application will appear that you can copy for future reference. Or, you can enter your email address to have the link emailed to you.
- Attach any supporting documents using the "Upload" button or by dragging documents from your computer to the "drag files here" area.
- Electronically sign your application by using the pen icon. Type your name in the "Printed Name" section.
- Submit your application by using the "Submit Application" button.
- IF YOU DO NOT RECEIVE AN EMAIL RESPONSE, PLEASE CONTACT US IMMEDIATELY AT 503-986-3300 OR [ODOTPTDREPORTING@ODOT.OREGON.GOV](mailto:ODOTPTDREPORTING@ODOT.OREGON.GOV).

The person signing this form must have the legal authority to submit the application on behalf of the applicant.

By electronically signing and submitting this form, the agency representative certifies that the information on the application is true and accurate to the best of their knowledge.

**Signature \***

**Printed Name \***

x

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I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729–3730 and 3801–3812

**Submission Date**

2/25/2026

Submit Application

Save