



# Sunset Empire Transportation District TRANSPORTATION ADVISORY COMMITTEE MEETING April 24, 2026 | 12 p.m.

**Meeting location:** Astoria Transit Center, 900 Marine Drive, Astoria, OR 97103

**Meeting link:** <https://bit.ly/4sQQ8Rt> | **Meeting ID:** 293 547 943 793 522 | **Passcode:** jw2Dh63a

**Dial in by phone:** 1-872-333-9477 | **Phone conference ID:** 316 499 193#

## Agenda

		Action	Responsible
Item 1 12 p.m.	Call to Order		Chair Niebuhr
Item 2 12:01 p.m.	Pledge of Allegiance		Chair Niebuhr
Item 3 12:03 p.m.	Roll Call		Chair Niebuhr
Item 4 12:05 p.m.	Changes to Agenda		Chair Niebuhr
Item 5 12:10 p.m.	Public Comment (3-minute limit per person)		Public
Item 6 12:15 p.m.	Approval of Minutes   <b>pg. 2-7</b> a. TAC meeting on March 19, 2026	Review/Approval	Chair Niebuhr
Item 7 12:20 p.m.	New Business   <b>pg. 8-99</b> a. 5310/5311 Grant Applications	Review/Approval	Executive Director Carr
Item 8 12:40 p.m.	Committee Member Comments	Information/ Discussion	Chair Niebuhr
Item 9	Adjournment		Chair Niebuhr

Times are approximate guidelines and may change.

*This meeting location is accessible to people with disabilities. Upon request, SETD will make reasonable accommodation, including assistive listening devices, sign language interpreters, large print materials, or other auxiliary aids. Please contact Sara Schilling at (503) 861-5370 or [sara@ridethebus.org](mailto:sara@ridethebus.org) at least 48 hours before the meeting to request accommodation.*



## Sunset Empire Transportation District TRANSPORTATION ADVISORY COMMITTEE

### Item 6 Approval of Minutes

**Date:** April 24, 2026

**Summary:** Draft minutes from the TAC meeting on March 19, 2026, are ready for the committee to review.

**Attachments:**

- Draft minutes from the TAC meeting on March 19, 2026



**SUNSET EMPIRE TRANSPORTATION DISTRICT**  
**Transportation Advisory Committee**  
**March 19, 2026 | 1:30 p.m.**  
**Meeting Minutes**  
**Draft**

Link to meeting video: <https://bit.ly/4ttviks>

**1. Call to Order**

Commissioner Pamela Alegria called the meeting to order at 1:30 p.m.

**2. Pledge of Allegiance (00:00:22)**

**3. Roll Call (00:00:41)**

TAC members present in person: Leah Griffith, Melvin Jasmin, Johnathan Niebuhr, Mitra Vazeen and Board of Commissioners TAC liaison Pamela Alegria.

TAC members present remotely: Brian Vitulli.

Staff/visitors present in person: David Carr, Jason Jones, Sara Schilling.

Staff/visitors present virtually: Matthew Stolberg.

**4. Changes to Agenda/Selection of Chair and Vice Chair (00:01:25)**

Executive Director David Carr suggested moving discussion of the bylaws to a future meeting to give more time for the discussion. Commissioner Alegria noted that the TAC is a nine-member committee under its bylaws, and it has five members now. Votes must be unanimous to pass anything, she said. Commissioner Alegria paused discussion of changes to agenda to do the selection of chair and vice chair.

Commissioner Alegria called for nominations for chair of the TAC.

TAC Member Jasmin nominated TAC Member Niebuhr to be chair.

TAC Member Vazeen seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

TAC Member Niebuhr nominated TAC Member Griffith for vice chair of the TAC.

TAC Member Vazeen seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

**5. Changes to Agenda (00:03:55)**

Executive Director Carr proposed postponing discussion of the bylaws to a future meeting. Vice Chair Griffith moved to remove the discussion of the bylaws from the agenda and place the item on the next TAC meeting agenda. TAC Member Vazeen seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

Executive Director Carr asked to add an agenda item: recommendation of projects for inclusion in grant applications. He provided a grant and project list to TAC members. Vice Chair Griffith moved to add the item to the agenda. TAC Member Vazeen seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

**6. Public Comment (00:07:58)**

None

**7. Committee Member Introductions (00:08:34)**

TAC members introduced themselves, sharing their backgrounds.

**8. Presentation on 2028-29 STIF Plan (00:10:54)**

Executive Director Carr discussed the STIF plan development process, touching on challenges such as the departure of the district’s financial officer, changes in ODOT’s grant funding timelines, funding uncertainty and rising fuel prices, among others.

He discussed the FY28 STIF amendment and the ODOT gap funding application that have been submitted, plus grant applications the district would like to make, including Competitive Transit Grant Phase 1 and Phase 2, due in April.

At about 2:30 p.m., TAC Member Vitulli left the meeting due to a technical issue. Chair Niebuhr paused the meeting for five minutes to give Mr. Vitulli time to log back on.

The meeting resumed at approximately 2:12 p.m.

Mr. Carr presented a list of projects, requesting that the TAC consider recommending them for approval in grant applications. He provided cost estimates, plus match information where applicable. The grants included Competitive Transit Grant Phase 1 and 2, among others. The projects included:

- Cyber security
- Transit Plan
- Replacement buses
- Non-revenue vehicles
- IT/computers
- Passenger infrastructure (amenities)
- Facilities
- Radio
- Mobility
- Microtransit
- Shop equipment

TAC members and staff discussed the projects and priorities. Mr. Carr asked whether TAC members had any projects they'd like to see added to the list.

TAC Member Vazeen asked about alignment with the strategic planning discussion during the strategic planning workshop on Feb. 16, 2026. Chair Niebuhr asked about Mr. Carr's priorities, and Mr. Carr listed the transit plan, replacement buses and cybersecurity.

Chair Niebuhr asked for input from the TAC on projects and priorities.

Vice Chair Griffith said she'd prefer to recommend approval of all the projects for inclusion in grant applications so the district can grab any grant money that's available.

TAC members asked about how often the buses are full, the number of commercial driver's licenses in the district, and the age of the vehicle fleet, and discussion followed.

Vice Chair Griffith moved to recommend approval of the projects presented for inclusion in grant applications.

TAC Member Vazeen seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

**9. Set the Next Meeting (01:24:33)**

TAC members discussed how often the committee should meet and whether to set the next meeting date now or hold off. Chair Niebuhr and TAC Members Jasmin and Vazeen favored quarterly meetings. Vice Chair Griffith and TAC Member Vitulli favored not scheduling quarterly meetings and instead agreeing to gather as needed.

Vice Chair Griffith moved to meet a minimum of twice a year, with other meetings called as needed.

TAC Member Vitulli seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

Chair Niebuhr raised the idea of setting the next meeting date for Aug. 27 and discussion followed about the best path forward.

Vice Chair Griffith moved that the next meeting will be determined by the executive director and it will be called with sufficient time for public notice.

TAC Member Vitulli seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

**10. Adjournment (01:35:40)**

TAC Member Jasmin moved to adjourn the meeting.

Vice Chair Griffith seconded the motion.

	<b>Griffith</b>	<b>Jasmin</b>	<b>Vazeen</b>	<b>Vitulli</b>	<b>Niebuhr</b>
Aye	X	X	X	X	X
Nay					
Excused					

Motion passed unanimously.

The meeting was adjourned at 3:06 p.m.

Minutes prepared by Sara Schilling, executive assistant

Minutes approved by:

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Johnathan Niebuhr, Chair

**Action items from the meeting:**

- TAC members recommend approval of the projects presented for inclusion in grant applications.

DRAFT



## Sunset Empire Transportation District TRANSPORTATION ADVISORY COMMITTEE

### Item 7a 5310 and 5311 Grant Applications

**Date:** April 24, 2026

**Summary:** The Section 5310 and 5311 grant applications are submitted for the biennium beginning Oct. 1, 2027. The purpose of these grant programs is to enhance mobility for seniors and individuals with disabilities by supporting transportation services and projects that address their unique needs. The first drafts are due to ODOT on May 14, 2026.

SETD utilizes Section 5310 and 5311 funding to support mobility management, preventive maintenance and other eligible projects that improve the accessibility, reliability, and overall effectiveness of transit services for priority populations. These activities are designed to maintain a safe and dependable transit system while addressing gaps in service and improving coordination with community partners.

The district utilizes State Transportation Improvement Fund (STIF) revenues as the required local match for this program. Through this funding partnership, SETD can leverage federal resources to sustain and enhance transportation services that promote independence, access to essential services, and quality of life for seniors and individuals with disabilities throughout Clatsop County.

**Staff Recommendation:** Approve recommendation of the 5310 and 5311 grant applications to fund mobility management, preventative maintenance and stated projects.

**Attachments:**

- 5310 Allocation Estimates | **pg. 10-11**

- 5310 Grant Application - Draft | **pg. 12-30**
- 5310 Rural Apportionment - Draft | **pg. 31-77**
- 5311 Allocation Estimates | **pg. 78**
- 5311 Grant Application - Draft | **pg. 79-96**
- 5310 and 5311 Grant Application Summary | **pg. 97-99**

<b>Section 5310: Enhanced Mobility of Seniors and People with Disabilities Program</b>				
<b>Agency</b>	<b>5310 STBG Allocation Estimate</b>	<b>5310 Rural Allocation Estimate</b>	<b>5310 Small Urban Allocation Estimate</b>	<b>Total Allocation Estimate</b>
Baker County	\$224,228	\$75,359	-	\$299,587
Basin Transit Service Transportation District	\$505,579	\$211,831	-	\$717,409
Benton County	\$499,157	\$96,571	\$278,916	\$874,643
The Burns Paiute Tribe	\$114,737	\$22,535	-	\$137,272
Columbia County	\$373,697	\$139,913	\$81,326	\$594,936
Confederated Tribes of the Grand Ronde	\$118,583	\$24,431	-	\$143,014
The Confederated Tribes of Siletz Indians	\$117,237	\$23,762	-	\$140,999
The Confederated Tribes of the Umatilla Indian Reservation	\$129,424	\$29,700	-	\$159,123
The Confederated Tribes of Warm Springs Reservation of Oregon	\$128,147	\$29,173	-	\$157,320
Coos County Area Transit District	\$541,691	\$228,627	-	\$770,318
The Confederated Tribes of Coos, Lower Umpqua, and Siuslaw Indians	\$114,671	\$22,510	-	\$137,181
The Coquille Indian Tribe	\$119,002	\$24,624	-	\$143,626
The Cow Creek Band of Umpqua Tribe of Indians	\$114,810	\$22,572	-	\$137,382
Crook County	\$268,450	\$96,693	-	\$365,143
Curry County	\$292,132	\$107,535	-	\$399,667
Deschutes County	\$993,727	\$240,680	\$440,113	\$1,674,520
Gilliam County	\$127,122	\$28,455	-	\$155,577
Grant County Transportation District	\$166,940	\$47,679	-	\$214,619
Harney County	\$157,753	\$43,220	-	\$200,972
Hood River County Transportation District	\$206,851	\$66,760	-	\$273,611
Jefferson County	\$237,622	\$82,008	-	\$319,630
Josephine County	\$653,437	\$113,003	\$365,984	\$1,132,425
The Klamath Tribes	\$114,723	\$22,518	-	\$137,241

Lake County	\$156,737	\$42,633	-	\$199,370
Lane Transit District	\$2,019,995	\$249,636	-	\$2,269,630
Lincoln County	\$478,661	\$197,765	-	\$676,426
Linn County	\$762,090	\$180,685	\$324,157	\$1,266,932
Malheur County	\$245,426	\$85,697	-	\$331,122
Morrow County	\$169,378	\$49,112	-	\$218,490
Rogue Valley Transportation District	\$1,264,185	\$112,076	\$844,723	\$2,220,985
Salem Area Mass Transit District	\$2,020,404	\$346,161	-	\$2,366,565
Sherman County	\$126,428	\$28,247	-	\$154,675
Sunset Empire Transit District	\$356,081	\$138,996	-	\$495,076
Tillamook County Transportation District	\$286,568	\$105,258	-	\$391,826
TriMet	\$7,056,667	\$255,546	-	\$7,312,213
Umatilla County	\$479,851	\$200,158	\$105,720	\$785,729
Umpqua Public Transportation District	\$824,711	\$365,630	-	\$1,190,341
Union County	\$251,020	\$88,478	-	\$339,497
Wallowa County	\$163,049	\$45,767	-	\$208,815
Wasco County	\$248,233	\$86,992	-	\$335,225
Wheeler County	\$128,046	\$28,965	-	\$157,012
Yamhill County	\$604,670	\$259,300	-	\$863,970
<b>Grand Total</b>	<b>\$ 23,961,917</b>	<b>\$ 4,667,259</b>	<b>\$ 2,440,938</b>	<b>\$ 31,070,114</b>



# 2027-2029 Section 5310 Formula Grant Application

- 1 Agency and Project Information    2 Application Totals and Signature

**This form is for Lead Agencies to apply for Section 5310 funding. If your agency is NOT a Lead Agency, please do not use this form. Instead, use the [5310 subrecipient application form](#).**

**Additional information on how to apply can be found in the 5310 application instructions which are available from the Funding Opportunities webpage.**

## Lead Agency Details

**Select the 5310 funding source applying for this application. \***

- Small urban apportionment
- Rural apportionment
- Surface Transportation Block Grant funding (STBG)

*Submit one application for each applicable funding source for each subrecipient.*

**Do you intend to use your entire allocation estimate for this funding source? \***

- Yes
- No

**Allocation Amount**

\$356,081.00

## Lead Agency Information

**Lead agency legal name \***

Sunset Empire Transportation District



**Only agencies who appear in this list are eligible.**

**Lead agency DBA (Doing Business As) name**

Sunset Empire Transportation Dist

**Lead agency provider type \***

Special district

**Agency legal address \***

900 Marine Drive

**City, state, zip code \***

Astoria, OR, 97103

**Application contact name \***

David Carr

**Application contact title \***

Executive Director

**Application contact email address \***

David@ridethebus.org

**Application contact phone**

(503) 861-5399

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

[REDACTED]

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

[REDACTED]

## Coordinated Public Transit-Human Services Transportation Plan

Attach current Coordinated Public Transit-Human Services Transportation Plan.

Upload

or drag files here.



[SETD Coordinated Plan 2020.pdf](#)

4.3 MB



**Coordinated Public Transit-Human Services Transportation Plan Website**

<https://nwconnector.org/wp-content/uploads/2020/11/Sunset-Empire-Coordinated-Plan-2020.pdf>

**Date Coordinated Plan adopted. \***

10/22/2020



## Risk Assessment Information

**Will administration of the grant be delegated to a separate agency? \***

- Yes
- No

## Financial and Audit Information

**Is the agency subject to Single Audit requirements? \***

- Yes
- No

*If an agency expends \$1M or more federal assistance funds annually they are required to have a Single Audit.*

**Attach a copy of the most recent Single Audit. \***

Upload

or drag files here.



FINAL Audit FY24.pdf

0.9 MB



**Does your agency have established financial management policies and procedures? \***

- Yes
- No

**Does your agency have an established accounting system for federal grants? \***

- Yes
- No

**What type of accounting system does your agency use? \***

- Manual
- Automated
- Combined

*An example of an Automated accounting system is a program tool such as QuickBooks. A Manual accounting system is a book-keeping system for recording business activity transactions where financial records are kept without using a computer system with specialized accounting software. A Combined system uses a combination of the two systems.*

**What is the financial software utilized? \***

Accufund

**Can your system separately identify the federal awards and programs that are recieved? \***

- Yes
- No

**Can your system identify the source and application of awarded funds and support documentation? \***

- Yes
- No

**Does the system account for 100 percent of each employee's time? \***

- Yes
- No

**Does the agency compare expenditure with budget amounts throughout the life of the grant? \***

- Yes
- No

**Does the agency know the guidance on allowable costs associated with this award? \***

- Yes
- No

*2 CFR 200, FTA C 9040.1H*

**Was your agency audited by the State and/or Federal government in the past two years? \***

- Yes
- No

**Lead Agency Staffing and resources (Lead Agency only)**

**Does the agency have adequate staff and resources to deliver the project? \***

- We have adequate staff to comply with the terms of this agreement.
- Need to hire new staff for this work.
- Will have to contract a vendor to carry out the program activities.
- We have experienced significant turnover - limited resources.

**Did your agency have any turnover of management staff in the last two years? \***

- Yes
- No

**List the position(s) that experienced turnover. \***

Executive Director, Human Resources, Finance Officer

**Did your agency have turnover or vacancies in program related key positions in the last two years? \***

- Yes
- No

**List the position(s) that experienced turnover. \***

Yes. SETD experienced vacancies in Executive Director and Finance Manager, within the last two years. The agency took proactive steps to minimize disruption to operations and service delivery, including cross-training staff, utilizing interim coverage, and prioritizing timely recruitment. These efforts ensured continuity in program management, compliance, and service provision. Both vacant positions have since been filled, and staffing levels have stabilized.

**Does the agency provide ongoing training for program and finance personnel? \***

- Yes
- No

**Lead Agency procurement (Lead agency only)**

Does the agency have established procurement policies? \*

- Yes
- No
- Will adopt 2 CFR 200 during this grant cycle.

## Project Information

### ⊗ Project 1

Is this project for the Lead agency applying on behalf of a subgrantee? \*

- Yes
- No

Lead Agency legal name \*

Sunset Empire Transportation District

Lead Agency DBA (Doing Business As) name

Lead Agency mailing address

900 Marine Drive

Lead Agency city, state, zip code

Astoria, OR, 97103

Lead Agency Unique Entity Identifier (UEI) \*

Lead Agency Federal Employer Identification Number (FEIN) \*

### Lead Agency Authorized Representative

The person authorized to sign the subgrant agreement. If the applicant is applying for the subgrantee, this information would be for the subgrantee. To have the subgrantee sign you can save the application and then send the link to subgrantee prior to submitting it to ODOT.

**Authorized representative first and last name \***

Kathy Kleczek

**authorized representative title \***

Board Commissioner Chair

*Official who has authority to indebted agency or company*

**Authorized representative email \***

kathy@ridethebus.org

**Authorized representative phone**

## Project Details

**Project name \***

5310 STBG Mobility Management and Vehicle Preventative Maintenance

**Describe project service area and where does the majority of service happen. \***

The project service area spans the northern Oregon coast, extending from Astoria to Cannon Beach, and includes the communities of Warrenton, Hammond and Gearhart. The majority of service occurs between Astoria and Seaside, which serve as the primary population and employment centers in the district. These areas generate the highest ridership due to access to essential services, employment hubs, medical facilities, schools, VA clinic and regional transit connections, service to Cannon Beach supports seasonal employment, commuter, tourism, and seasonal travel demand and transit connections with Northwest Oregon Transit Alliance.

The service plays a critical role in supporting low-income families, students, older adults, and individuals with disabilities by providing access to essential services. This includes transportation for students attending local schools, Clatsop Community College, and Tongue Point Job Corps Center, as well as access to healthcare, employment, education, and daily needs throughout the service area.

**Select the type(s) of service that will be supported by this award. Select all that apply. \***

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Open to the general public at all times     | <input checked="" type="checkbox"/> Deviated Fixed Route                                      |
| <input type="checkbox"/> Open to the general public on a space-available basis  | <input checked="" type="checkbox"/> Fixed Route (excluding commuter and inter-city routes)    |
| <input type="checkbox"/> Open only to seniors and individuals with disabilities | <input checked="" type="checkbox"/> Demand Response (Excluding ADA complementary Paratransit) |
| <input type="checkbox"/> Limited to defined clientele (e.g. residential home)   | <input checked="" type="checkbox"/> ADA Complementary Paratransit                             |

**Indicate the type of service area for the proposed project (Rural, Small Urban or Large Urban) to determine funding eligibility. \***

Rural ▼

*Large Urban (Over 200,000 population), Small Urban (50,000-200,000 population) and Rural (Under 50,000 population)*

*If the proposed project spans more than one geographic type, use the most appropriate or majority of the project location.*

**Does the majority of the operations occur within one of these areas? \***

Not Applicable ▼

*Select "Not Applicable" if operations are not in these areas. This helps PTD determine if additional STIP keys are needed.*

**Select the counties served by this project. \***

- |   |                                     |                                    |                                     |
|---|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> BAKER              | <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LAKE      | <input type="checkbox"/> SHERMAN    |
| <input type="checkbox"/> BENTON             | <input type="checkbox"/> GILLIAM    | <input type="checkbox"/> LANE      | <input type="checkbox"/> TILLAMOOK  |
| <input type="checkbox"/> CLACKAMAS          | <input type="checkbox"/> GRANT      | <input type="checkbox"/> LINCOLN   | <input type="checkbox"/> UMATILLA   |
| <input checked="" type="checkbox"/> CLATSOP | <input type="checkbox"/> HARNEY     | <input type="checkbox"/> LINN      | <input type="checkbox"/> UNION      |
| <input type="checkbox"/> COLUMBIA           | <input type="checkbox"/> HOOD RIVER | <input type="checkbox"/> MALHEUR   | <input type="checkbox"/> WALLOWA    |
| <input type="checkbox"/> COOS               | <input type="checkbox"/> JACKSON    | <input type="checkbox"/> MARION    | <input type="checkbox"/> WASCO      |
| <input type="checkbox"/> CROOK              | <input type="checkbox"/> JEFFERSON  | <input type="checkbox"/> MORROW    | <input type="checkbox"/> WASHINGTON |
| <input type="checkbox"/> CURRY              | <input type="checkbox"/> JOSEPHINE  | <input type="checkbox"/> MULTNOMAH | <input type="checkbox"/> WHEELER    |
| <input type="checkbox"/> DESCHUTES          | <input type="checkbox"/> KLAMATH    | <input type="checkbox"/> POLK      | <input type="checkbox"/> YAMHILL    |

*Select all that apply.*

**Select the activity type(s) for this project. \***

- A. Vehicle Acquisition
- B. Equipment, Signs and Amenities, Shelters
- C. Facilities: Bus Barns and Other Buildings
- D. Preventive Maintenance
- E. Mobility Management
- F. Purchased Service (competitively procured via RFP)

Select all that apply. All deliverables and tasks within a single project must be interrelated or dependent on one another. Unrelated activities cannot be grouped together and submitted as one project. The application will open up additional fields depending on the project that was chosen. Make sure that all required fields for each project type are fully completed.

**D. Preventive Maintenance**

**⊗ Preventive maintenance 1**

**Task title \***

Preventive Maintenance

**Please describe the activity in detail and identify how it benefits seniors and individuals with disabilities. \***

Preventive maintenance of revenue transit buses includes all scheduled and routine activities necessary to ensure vehicles remain safe, reliable, and in a state of good repair. This work is performed in alignment with the agency's preventive maintenance plan and manufacturer recommendations. It includes regular inspections, oil and fluid changes, engine and transmission servicing, brake system checks, tire replacement and maintenance, lift and ramp maintenance, HVAC servicing, and the repair or replacement of worn or defective parts. These activities also include the labor, materials, and supplies required to proactively address mechanical issues before they result in service disruptions or safety concerns.

This activity directly benefits seniors and individuals with disabilities by ensuring that transit vehicles are consistently safe, accessible, and dependable. Proper maintenance of wheelchair lifts, ramps, securement systems, handrails, and suspension systems is critical to providing safe boarding, riding, and alighting. Reliable vehicles reduce missed trips, delays, and breakdowns that can disproportionately impact riders who depend on transit for medical appointments, essential services, and daily living needs. By maintaining a consistent and accessible fleet, the agency supports mobility, independence, and quality of life for these populations.

**On what page is activity or project listed in the adopted Coordinated Plan? \***

Preventive maintenance activities are

**Coordinate Plan page(s) upload \***

Upload

or drag files here.



SETD Coordinated...

4.3 MB



**Is this activity part of a group of activities or projects that are dependent on each other? \***

Yes

No

**How will you deliver the proposed project activity? \***

In-house

Contractor or consultant

*Check all that apply*

**What will be maintained? Check all that apply. \***

A. Revenue service vehicles

B. Shelters or facilities

C. Other assets

### **A. Maintaining revenue service vehicles**

**Describe vehicle preventive maintenance that will be performed. \***

Preventive maintenance activities will include the supplies, materials, labor, services, and associated costs necessary to preserve and extend the functionality and serviceability of transit vehicles in a cost-effective manner. These activities include, but are not limited to, routine oil changes, engine tune-ups, tire purchases and maintenance, annual vehicle inspections, and the replacement of parts as needed. All required labor and maintenance supplies are included to ensure vehicles remain safe, reliable, and in a state of good repair. All maintenance activities will be performed in alignment with the agency's preventive maintenance plan.

**Number of vehicles purchased with 5310 funding that will be included in this preventive maintenance project \***

0

**Number of vehicles NOT purchased with 5310 funding that will be included in this preventive maintenance project. \***

13

**Cost of preventive maintenance for vehicles purchased with 5310 funding? \***

\$0.00

**Cost of preventive maintenance for revenue service NOT purchased with 5310 funding? \***

\$55,435.00

**Will any of these funds be used to maintain electric vehicles, or their charging infrastructure? \***

Yes

No

*This may require the applicant to successfully get FTA NEPA concurrence before incurring any costs.*

**Attach the current Vehicle Preventive Maintenance Plan \***

or drag files here.



[Vehicle Maintenance Plan.pdf](#)

6.6 MB



*A current plan reflecting current fleet policies, fleet procedures, and vehicle and lift equipment manufacturer's recommended maintenance schedules is required.*

**Total cost of preventive maintenance for revenue service vehicles \***

\$55,435.00

**Were the assets being maintained purchased with 5310 funds? \***

Yes  No

**If the assets were not purchased with 5310 funds, what funding source(s) were the assets purchased with? \***

5311 and 5339

*Please note that maintenance on assets not purchased through the Section 5310 program are generally ineligible.*

**Preventive maintenance budget**

Enter the identification number from OPTIS for each asset, which start with the one of the following letters:

- V: Vehicle
- F: Facility
- E: Equipment
- S: Signs/Shelters

[OPTIS Link](#)

	<b>OPTIS asset identification number *</b>	<b>Preventive maintenance amount *</b>
⊗	V002201	\$3,879.00
⊗	V000874	\$3,879.00
⊗	V001479	\$3,879.00
⊗	V001857	\$3,879.00
⊗	V001858	\$3,879.00
⊗	V001936	\$3,879.00
⊗	V001937	\$3,879.00
⊗	V002875	\$3,879.00
⊗	V002874	\$3,879.00
⊗	V002876	\$3,881.00
⊗	V002568	\$3,881.00
⊗	V003060	\$3,881.00
⊗	V003061	\$3,881.00
		<b>\$50,435.00</b>

+ Add Asset

### Activity deliverables

	<b>Deliverable description *</b>	<b>Units *</b>	<b>Deliverable date *</b>
<input type="checkbox"/>	Assets Maintained	13	9/30/2029

+ Add Deliverable

### Project match

	<b>Match source *</b>	<b>Match amount *</b>	<b>Match percentage *</b>	<b>Match status *</b>
<input type="checkbox"/>	State	\$5,693.17	100.00%	Planned
		\$5,693.17		

+ Add Item

If "other" selected as match source, please explain source.

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

- Yes
- No

### Task cost and match information

<b>Total project cost</b>	<b>Match amount</b>	<b>Grant amount</b>
\$55,435.00	\$5,693.17	\$49,741.83

+ Add preventive maintenance

## E. Mobility Management

### ⊗ Mobility management 1

#### Task title \*

Mobility Management

#### Task type \*

- One Stop Referral Operating transportation brokerages to coordinate service providers, funding resources, and customer needs
- Coordinating transportation services for older adults, individuals with disabilities, and individuals with low incomes
- Supporting local partnerships that coordinate transportation services
- Staffing for the development and implementation of coordination plans
- Providing travel training and trip planning activities for customers
- Developing and operating traveler call centers to coordinate travel information, manage eligibility requirements, and arrange customer travel
- Planning and implementing the acquisition and purchase of intelligent transportation technologies to operate a coordinated system (Only purchases under \$5,000)
- Travel Mobility Planning
- Internet Based Information
- Informational Materials/Marketing

#### On what page is activity or project listed in the adopted Coordinated Plan? \*

Pages 42-44 and cross-referenced or

#### Coordinate Plan page(s) upload \*

Upload

or drag files here.



[SETD Coordinated...](#)

4.3 MB



**Describe how this activity benefits seniors and individuals with disabilities. \***

This activity provides travel orientation and training to seniors and individuals with disabilities residing in supported care facilities. The goal is to improve access to transportation by providing supportive education in a safe environment, thereby increasing the reach, efficiency, and affordability of fixed-route and paratransit services.

*i.e. We will host five events at locations in our community to explain the transit services available to seniors.*

**How will you deliver the proposed project activity? \***

- In-house
- Contractor or consultant

*Check all that apply*

Identify the estimated number of customer contacts, customers trained, or mobility products/services produced. Describe the method you will use to measure output from the project:

**Description of unit \***

**Number of units \***

Unduplicated Transit Travel Mobility T

305

**Describe the method you will use to measure output from the project. \***

SETD will track and report the Unduplicated Passenger or Client Count.

**Cost of mobility management activity \***

\$341,400.00

## Activity deliverables

	<b>Deliverable description *</b>	<b>Units *</b>	<b>Deliverable date *</b>
⊗	Customers Trained	125	9/30/2028
⊗	Customers Trained	180	9/30/2029

+ Add Deliverable

## Project match

	<b>Match source *</b>	<b>Match amount *</b>	<b>Match percentage *</b>	<b>Match status *</b>
⊗	State	\$35,061.78	100.00%	Planned
		\$35,061.78		

+ Add Item

If "other" selected as match source, please explain source.

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

Yes

No

### Task cost and match information:

<b>Total project cost</b>	<b>Match amount</b>	<b>Grant amount</b>
\$341,400.00	\$35,061.78	\$306,338.22

+ Add mobility management

## Environmental Review

### Federal funding/NEPA Applicability

The requirements of the National Environmental Policy Act (NEPA) apply to all projects that receive federal funding. The FTA conducts environmental review for all projects that have identified or planned/programmed FTA funding. Answer the following question to help determine if NEPA requirements apply to the proposed project.

**Will the proposed project involve identified FTA funding? (Not including a grant from the 2027-29 5310 grant program) \***

- Yes  
 No

### Project Scope

According to federal regulation, projects evaluated under NEPA must demonstrate "independent utility," meaning the project must be usable and be a reasonable expenditure even if no additional improvements are made in the area. This does not prohibit the construction of a project in phases.

Answer the following questions to help determine if the proposed project demonstrates independent utility:

**Would the project described above require additional improvements to be usable or to be considered a reasonable expenditure? This includes improvements considered part of another project or improvements funded by another grant or state/local funds. \***

- Yes  
 No

**Does the proposed project involve development of property or installation of equipment purchased through a separate project, including property or equipment purchased with state or local funds? \***

- Yes  
 No

**Does the proposed project involve acquisition of property, equipment, or vehicles that will be developed, constructed, or installed as part of a separate project? \***

- Yes  
 No

### Documentation Requirements

Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet. Would the project described include any of the following?

**Would the project described above include any of the following?**

- Final design activities – any design beyond 30%
- Property acquisition – includes, but is not limited to, purchase discussions with property owners that imply or are explicitly binding
- Purchase of construction materials – includes, but is not limited to, purchase of any materials used for the activities listed under the definition of project construction below
- Purchase of rolling stock
- Project construction – FTA definition includes construction, alteration, or repair (including dredging, excavating, and painting) of buildings, structures, or other real property; excludes the assembly, alteration, or repair of vessels or other kinds of personal property.

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

**NEPA Concurrence**

**Has the FTA already provided NEPA concurrence for this project or components of this project? \***

- Yes
- No
- Not Applicable

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

**Indirect Costs**

**Does the agency intend to charge any indirect cost to this project? \***

- Yes
- No

**Total Project Costs**

**Project Title**

5310 STBG Mobility Management and Vehicle Preventative Maintenance

**Total Vehicle Acquisition Cost**

\$0.00

**Total Equipment, Signs and Amenities, Shelter Cost**

\$0.00

**Total Facilities, Bus Barns, and Other Buildings Cost**

\$0.00

**Total Preventive Maintenance Cost**

\$55,435.00

**Total Mobility Management Cost**

\$341,400.00

**Total Purchased Service Project Cost**

\$0.00

**Total Indirect Costs**

**Total Project Cost**

\$396,835.00

**Total Match Amount**

\$40,754.95

**Total Grant Amount**

\$356,080.05

+ Add Project

Next >

Save



# 2027-2029 Section 5310 Formula Grant Application

1 Agency and Project Information    2 Application Totals and Signature

## Total Application Costs

### Total Project Cost

\$396,835.00

### Total Match Amount

\$40,755.00

### Total Grant Amount

\$356,080.00

### Allocation Amount

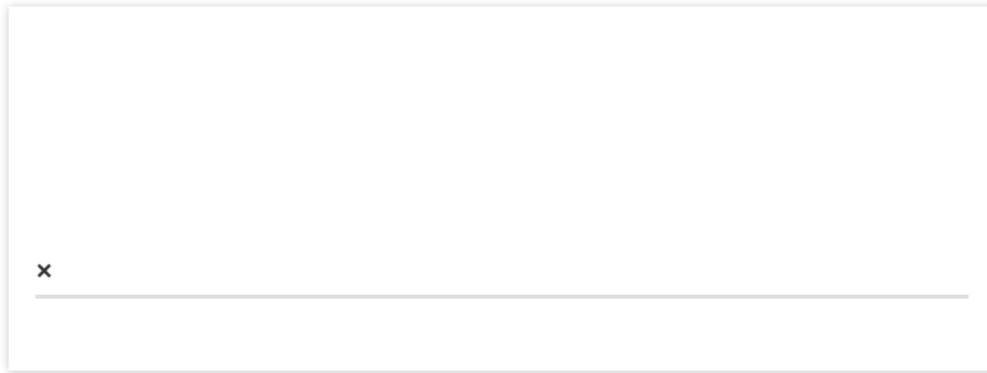
\$356,081.00

## 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 "File Upload" fields.
- Electronically sign your application by using the pen icon. Type your name in the "Printed Name" section.
- Check the box for the certification statement.
- 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)

## Certification

**Signature \***

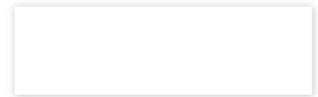


x

---

draw

**Printed Name \***



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**

4/22/2026

[< Back](#)

[Submit Application](#)

[Save](#)



# 2027-2029 Section 5310 Formula Grant Application

- 1 Agency and Project Information    2 Application Totals and Signature

**This form is for Lead Agencies to apply for Section 5310 funding. If your agency is NOT a Lead Agency, please do not use this form. Instead, use the [5310 subrecipient application form](#).**

**Additional information on how to apply can be found in the 5310 application instructions which are available from the Funding Opportunities webpage.**

## Lead Agency Details

**Select the 5310 funding source applying for this application. \***

- Small urban apportionment
- Rural apportionment
- Surface Transportation Block Grant funding (STBG)

*Submit one application for each applicable funding source for each subrecipient.*

**Do you intend to use your entire allocation estimate for this funding source? \***

- Yes
- No

### Allocation Amount

\$138,996.00

## Lead Agency Information

**Lead agency legal name \***

Sunset Empire Transportation District



**Only agencies who appear in this list are eligible.**

**Lead agency DBA (Doing Business As) name**

**Lead agency provider type \***

Special district ▼

**Agency legal address \***

900 Marine Drive

**City, state, zip code \***

Astoria OR 97103

**Application contact name \***

David Carr

**Application contact title \***

Executive Director

**Application contact email address \***

David@ridethebus.org

**Application contact phone**

(503) 861-5399

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

██████████


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

██████████

## Coordinated Public Transit-Human Services Transportation Plan

Attach current Coordinated Public Transit-Human Services Transportation Plan.

or drag files here.

 [SETD Coordinated Plan 2020.pdf](#) 4.3 MB ↓ ⊗

**Coordinated Public Transit-Human Services Transportation Plan Website**

<https://nwconnector.org/wp-content/uploads/2020/11/Sunset-Empire-Coordinated-Plan-2020.pdf>

**Date Coordinated Plan adopted. \***

10/22/2020



## Risk Assessment Information

**Will administration of the grant be delegated to a separate agency? \***

- Yes
- No

## Financial and Audit Information

**Is the agency subject to Single Audit requirements? \***

- Yes
- No

*If an agency expends \$1M or more federal assistance funds annually they are required to have a Single Audit.*

**Attach a copy of the most recent Single Audit. \***

Upload

or drag files here.



FINAL Audit FY24.pdf

0.9 MB



**Does your agency have established financial management policies and procedures? \***

- Yes
- No

**Does your agency have an established accounting system for federal grants? \***

- Yes
- No

**What type of accounting system does your agency use? \***

- Manual
- Automated
- Combined

*An example of an Automated accounting system is a program tool such as QuickBooks. A Manual accounting system is a book-keeping system for recording business activity transactions where financial records are kept without using a computer system with specialized accounting software. A Combined system uses a combination of the two systems.*

**What is the financial software utilized? \***

Accufund

**Can your system separately identify the federal awards and programs that are recieved? \***

- Yes
- No

**Can your system identify the source and application of awarded funds and support documentation? \***

- Yes
- No

**Does the system account for 100 percent of each employee's time? \***

- Yes
- No

**Does the agency compare expenditure with budget amounts throughout the life of the grant? \***

- Yes
- No

**Does the agency know the guidance on allowable costs associated with this award? \***

- Yes
- No

*2 CFR 200, FTA C 9040.1H*

**Was your agency audited by the State and/or Federal government in the past two years? \***

- Yes
- No

**Lead Agency Staffing and resources (Lead Agency only)**

**Does the agency have adequate staff and resources to deliver the project? \***

- We have adequate staff to comply with the terms of this agreement.
- Need to hire new staff for this work.
- Will have to contract a vendor to carry out the program activities.
- We have experienced significant turnover - limited resources.

**Did your agency have any turnover of management staff in the last two years? \***

- Yes
- No

**List the position(s) that experienced turnover. \***

Executive Director, Human Resources, Finance Officer

**Did your agency have turnover or vacancies in program related key positions in the last two years? \***

- Yes
- No

**List the position(s) that experienced turnover. \***

Yes. SETD experienced vacancies in Executive Director, Human Resources and Finance Manager, within the last two years. The agency took proactive steps to minimize disruption to operations and service delivery, including cross-training staff, utilizing interim coverage, and prioritizing timely recruitment. These efforts ensured continuity in program management, compliance, and service provision. The vacant positions have since been filled, and staffing levels have stabilized.

**Does the agency provide ongoing training for program and finance personnel? \***

- Yes
- No

**Lead Agency procurement (Lead agency only)**

**Does the agency have established procurement policies? \***

- Yes
- No
- Will adopt 2 CFR 200 during this grant cycle.

## Project Information

### ⊗ Project 1

**Is this project for the Lead agency applying on behalf of a subgrantee? \***

- Yes
- No

**Lead Agency legal name \***

Sunset Empire Transportation District

**Lead Agency DBA (Doing Business As) name**

**Lead Agency mailing address**

900 Marine Drive

**Lead Agency city, state, zip code**

Astoria OR 97103

**Lead Agency Unique Entity Identifier (UEI) \***

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

### Lead Agency Authorized Representative

The person authorized to sign the subgrant agreement. If the applicant is applying for the subgrantee, this information would be for the subgrantee. To have the subgrantee sign you can save the application and then send the link to subgrantee prior to submitting it to ODOT.

**Authorized representative first and last name \***

Kathy Kleczek

**authorized representative title \***

Board Commissioner Chair

*Official who has authority to indebt agency or company*

**Authorized representative email \***

kathy@ridethebus.org

**Authorized representative phone**

## Project Details

**Project name \***

Preventive Maintenance

**Describe project service area and where does the majority of service happen. \***

The project service area encompasses the Sunset Empire Transportation District's established service region, including the communities of Astoria, Warrenton, Hammond, Seaside, Gearhart, Cannon Beach, and surrounding areas in Clatsop County, Oregon. Services operate seven days per week, 362 days per year, and are designed to connect residential neighborhoods with essential destinations such as medical facilities, employment centers, schools, shopping areas, social service providers, the local VA clinic, senior centers, the regional food bank, food pantries, shelters, life-sustaining treatment centers, and addiction recovery services.

The majority of service occurs along high-demand corridors between Astoria, Warrenton, and Seaside, where population density, employment opportunities, and essential services are concentrated. These routes experience the highest ridership and provide critical connectivity for daily commuters, seniors, and individuals with disabilities.

On-demand services extend into rural and outlying areas to ensure equitable access for underserved populations. These services include demand-response and deviated fixed-route options designed to address mobility gaps for individuals who are unable to access traditional fixed-route transit, including seniors and individuals with disabilities.

Overall, the service area supports regional mobility by linking urban and rural communities while prioritizing access to essential services, economic opportunities, and community resources. The system is designed to provide reliable, accessible transportation that supports independence and ensures that seniors and individuals with disabilities can access critical services throughout the region.

**Select the type(s) of service that will be supported by this award. Select all that apply. \***

- |   |   |
|---|---|
| <input type="checkbox"/> Open to the general public at all times                | <input checked="" type="checkbox"/> Deviated Fixed Route                                      |
| <input type="checkbox"/> Open to the general public on a space-available basis  | <input checked="" type="checkbox"/> Fixed Route (excluding commuter and inter-city routes)    |
| <input type="checkbox"/> Open only to seniors and individuals with disabilities | <input checked="" type="checkbox"/> Demand Response (Excluding ADA complementary Paratransit) |
| <input type="checkbox"/> Limited to defined clientele (e.g. residential home)   | <input checked="" type="checkbox"/> ADA Complementary Paratransit                             |

**Indicate the type of service area for the proposed project (Rural, Small Urban or Large Urban) to determine funding eligibility. \***

Rural ▼

*Large Urban (Over 200,000 population), Small Urban (50,000-200,000 population) and Rural (Under 50,000 population)*

*If the proposed project spans more than one geographic type, use the most appropriate or majority of the project location.*

**Does the majority of the operations occur within one of these areas? \***

Not Applicable ▼

*Select "Not Applicable" if operations are not in these areas. This helps PTD determine if additional STIP keys are needed.*

**Select the counties served by this project. \***

- |   |                                     |                                    |                                     |
|---|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> BAKER              | <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LAKE      | <input type="checkbox"/> SHERMAN    |
| <input type="checkbox"/> BENTON             | <input type="checkbox"/> GILLIAM    | <input type="checkbox"/> LANE      | <input type="checkbox"/> TILLAMOOK  |
| <input type="checkbox"/> CLACKAMAS          | <input type="checkbox"/> GRANT      | <input type="checkbox"/> LINCOLN   | <input type="checkbox"/> UMATILLA   |
| <input checked="" type="checkbox"/> CLATSOP | <input type="checkbox"/> HARNEY     | <input type="checkbox"/> LINN      | <input type="checkbox"/> UNION      |
| <input type="checkbox"/> COLUMBIA           | <input type="checkbox"/> HOOD RIVER | <input type="checkbox"/> MALHEUR   | <input type="checkbox"/> WALLOWA    |
| <input type="checkbox"/> COOS               | <input type="checkbox"/> JACKSON    | <input type="checkbox"/> MARION    | <input type="checkbox"/> WASCO      |
| <input type="checkbox"/> CROOK              | <input type="checkbox"/> JEFFERSON  | <input type="checkbox"/> MORROW    | <input type="checkbox"/> WASHINGTON |
| <input type="checkbox"/> CURRY              | <input type="checkbox"/> JOSEPHINE  | <input type="checkbox"/> MULTNOMAH | <input type="checkbox"/> WHEELER    |
| <input type="checkbox"/> DESCHUTES          | <input type="checkbox"/> KLAMATH    | <input type="checkbox"/> POLK      | <input type="checkbox"/> YAMHILL    |

*Select all that apply.*

**Select the activity type(s) for this project. \***

- A. Vehicle Acquisition
- B. Equipment, Signs and Amenities, Shelters
- C. Facilities: Bus Barns and Other Buildings
- D. Preventive Maintenance
- E. Mobility Management
- F. Purchased Service (competitively procured via RFP)

*Select all that apply. All deliverables and tasks within a single project must be interrelated or dependent on one another. Unrelated activities cannot be grouped together and submitted as one project. The application will open up additional fields depending on the project that was chosen. Make sure that all required fields for each project type are fully completed.*

**D. Preventive Maintenance**

**⊗ Preventive maintenance 1**

**Task title \***

Preventive Maintenance of Revenue Vehicles

**Please describe the activity in detail and identify how it benefits seniors and individuals with disabilities. \***

This activity consists of performing scheduled preventive maintenance on revenue vehicles in accordance with the agency's adopted preventive maintenance plan. Maintenance includes, but is not limited to, routine inspections, oil and fluid changes, brake inspections and replacements, tire maintenance, lift and ramp servicing, HVAC system checks, electrical system diagnostics, and replacement of worn or defective components. All work is completed using qualified staff, appropriate materials, and industry-standard practices to ensure vehicles remain in a state of good repair.

Preventive maintenance directly benefits seniors and individuals with disabilities by ensuring that vehicles are safe, reliable, and fully accessible. Regular servicing of wheelchair lifts, ramps, securement systems, suspension, and kneeling features ensures consistent accessibility for passengers with mobility challenges. Maintaining heating, cooling, and ventilation systems enhances comfort and safety, particularly for vulnerable populations sensitive to extreme weather conditions.

By reducing the likelihood of mechanical failures and service disruptions, this activity supports on-time performance and dependable transportation to essential destinations such as medical appointments, grocery stores, and community services. Reliable transit service is crucial for seniors and individuals with disabilities, who often have limited transportation options. Overall, this project enhances rider safety, preserves vehicle lifespan, creates accessibility and ensures equitable access to transportation services.

**On what page is activity or project listed in the adopted Coordinated Plan? \***

Preventive maintenance activities are

**Coordinate Plan page(s) upload \***

[Upload](#) or drag files here.

 [SETD Coordinated...](#) 4.3 MB  

**Is this activity part of a group of activities or projects that are dependent on each other? \***

- Yes
- No

**How will you deliver the proposed project activity? \***

- In-house
- Contractor or consultant

*Check all that apply*

**What will be maintained? Check all that apply. \***

- A. Revenue service vehicles
- B. Shelters or facilities
- C. Other assets

**A. Maintaining revenue service vehicles**

**Describe vehicle preventive maintenance that will be performed. \***

Preventive maintenance will be performed in accordance with the agency's established preventive maintenance plan and manufacturer recommendations to ensure all vehicles remain in a safe and reliable operating condition. This preventive maintenance program is specific to ADA paratransit vehicles designated to support the RideAssist services.

Activities include routine inspections and servicing such as oil and filter changes, fluid checks and replacements, brake inspections and repairs, tire inspections and rotations, and battery testing. Additional maintenance includes inspection and servicing of critical systems such as engines, transmissions, steering, suspension, electrical components, and HVAC systems.

Accessibility equipment, including wheelchair lifts, ramps, and securement systems, will be routinely inspected, tested, and repaired as needed to ensure full functionality and compliance with ADA requirements. Preventive maintenance also includes diagnostic testing, replacement of worn or defective parts, and addressing minor issues before they develop into major mechanical failures. All work will be performed by qualified personnel using appropriate tools, materials, and industry-standard practices.

These activities help extend vehicle life, improve safety and reliability, reduce service interruptions, and ensure consistent, accessible transportation for all riders, particularly individuals who rely on ADA Paratransit services.

**Number of vehicles purchased with 5310 funding that will be included in this preventive maintenance project \***

0

**Number of vehicles NOT purchased with 5310 funding that will be included in this preventive maintenance project. \***

8

**Cost of preventive maintenance for vehicles purchased with 5310 funding? \***

\$0.00

**Cost of preventive maintenance for revenue service NOT purchased with 5310 funding? \***

\$41,088.00

**Will any of these funds be used to maintain electric vehicles, or their charging infrastructure? \***

Yes

No

*This may require the applicant to successfully get FTA NEPA concurrence before incurring any costs.*

**Attach the current Vehicle Preventive Maintenance Plan \***

Upload or drag files here.



[Vehicle Maintenance Plan.pdf](#)

6.6 MB



*A current plan reflecting current fleet policies, fleet procedures, and vehicle and lift equipment manufacturer's recommended maintenance schedules is required.*

**Total cost of preventive maintenance for revenue service vehicles \***

\$41,088.00

**Were the assets being maintained purchased with 5310 funds? \***

Yes  No

**If the assets were not purchased with 5310 funds, what funding source(s) were the assets purchased with? \***

5311 and 5339

*Please note that maintenance on assets not purchased through the Section 5310 program are generally ineligible.*

**Preventive maintenance budget**

Enter the identification number from OPTIS for each asset, which start with the one of the following letters:

- V: Vehicle
- F: Facility
- E: Equipment
- S: Signs/Shelters

[OPTIS Link](#)

	<b>OPTIS asset identification number *</b>	<b>Preventive maintenance amount *</b>
<input checked="" type="checkbox"/>	F248735	\$5,136.00
<input checked="" type="checkbox"/>	V001195	\$5,136.00
<input checked="" type="checkbox"/>	V001854	\$5,136.00
<input checked="" type="checkbox"/>	V001853	\$5,136.00
<input checked="" type="checkbox"/>	V003803	\$5,136.00
<input checked="" type="checkbox"/>	V003829	\$5,136.00
<input checked="" type="checkbox"/>	V003828	\$5,136.00
<input checked="" type="checkbox"/>	V003802	\$5,136.00
		<b>\$41,088.00</b>

+ Add Asset

## Activity deliverables

	<b>Deliverable description *</b>	<b>Units *</b>	<b>Deliverable date *</b>
⊗	Assets Maintained	8	9/30/2029

+ Add Deliverable

## Project match

	<b>Match source *</b>	<b>Match amount *</b>	<b>Match percentage *</b>	<b>Match status *</b>
⊗	State	\$8,217.60	100.00%	Planned

\$8,217.60

+ Add Item

If "other" selected as match source, please explain source.

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

Yes

No

## Task cost and match information

<b>Total project cost</b>	<b>Match amount</b>	<b>Grant amount</b>
\$41,088.00	\$8,217.60	\$32,870.40

+ Add preventive maintenance

## Environmental Review

### Federal funding/NEPA Applicability

The requirements of the National Environmental Policy Act (NEPA) apply to all projects that receive federal funding. The FTA conducts environmental review for all projects that have identified or planned/programmed FTA funding. Answer the following question to help determine if NEPA requirements apply to the proposed project.

**Will the proposed project involve identified FTA funding? (Not including a grant from the 2027-29 5310 grant program) \***

- Yes  
 No

### Project Scope

According to federal regulation, projects evaluated under NEPA must demonstrate "independent utility," meaning the project must be usable and be a reasonable expenditure even if no additional improvements are made in the area. This does not prohibit the construction of a project in phases.

Answer the following questions to help determine if the proposed project demonstrates independent utility:

**Would the project described above require additional improvements to be usable or to be considered a reasonable expenditure? This includes improvements considered part of another project or improvements funded by another grant or state/local funds. \***

- Yes  
 No

**Does the proposed project involve development of property or installation of equipment purchased through a separate project, including property or equipment purchased with state or local funds? \***

- Yes  
 No

**Does the proposed project involve acquisition of property, equipment, or vehicles that will be developed, constructed, or installed as part of a separate project? \***

- Yes  
 No

### Documentation Requirements

Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet. Would the project described include any of the following?

**Would the project described above include any of the following?**

- Final design activities – any design beyond 30%
- Property acquisition – includes, but is not limited to, purchase discussions with property owners that imply or are explicitly binding
- Purchase of construction materials – includes, but is not limited to, purchase of any materials used for the activities listed under the definition of project construction below
- Purchase of rolling stock
- Project construction – FTA definition includes construction, alteration, or repair (including dredging, excavating, and painting) of buildings, structures, or other real property; excludes the assembly, alteration, or repair of vessels or other kinds of personal property.

*Answer the following questions to help determine if the proposed project would require completion of FTAs CE Worksheet.*

## NEPA Concurrence

**Has the FTA already provided NEPA concurrence for this project or components of this project? \***

- Yes
- No
- Not Applicable

*Answer the following questions to help determine if the proposed project would require completion of FTAs CE Worksheet.*

## Indirect Costs

**Does the agency intend to charge any indirect cost to this project? \***

- Yes
- No

## Total Project Costs

**Project Title**

Preventive Maintenance

**Total Vehicle Acquisition Cost**

\$0.00

**Total Equipment, Signs and Amenities, Shelter Cost**

\$0.00

**Total Facilities, Bus Barns, and Other Buildings Cost**

\$0.00

**Total Preventive Maintenance Cost**

\$41,088.00

**Total Mobility Management Cost**

\$0.00

**Total Purchased Service Project Cost**

\$0.00

**Total Indirect Costs**

**Total Project Cost**

\$41,088.00

**Total Match Amount**

\$8,217.60

**Total Grant Amount**

\$32,870.40

⊗ **Project 2**

**Is this project for the Lead agency applying on behalf of a subgrantee? \***

Yes  No

**Lead Agency legal name \***

Sunset Empire Transportation District

**Lead Agency DBA (Doing Business As) name**

**Lead Agency mailing address**

900 Marine Drive

**Lead Agency city, state, zip code**

Astoria OR 97103

**Lead Agency Unique Entity Identifier (UEI) \***

██████████

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

**Lead Agency Authorized Representative**

The person authorized to sign the subgrant agreement. If the applicant is applying for the subgrantee, this information would be for the subgrantee. To have the subgrantee sign you can save the application and then send the link to subgrantee prior to submitting it to ODOT.

**Authorized representative first and last name \***

*Official who has authority to indebt agency or company*

**authorized representative title \***

**Authorized representative email \***

**Authorized representative phone**

**Project Details**

**Project name \***

**Describe project service area and where does the majority of service happen. \***

The transit service area encompasses the Sunset Empire Transportation District's established service region, including the communities of Astoria, Warrenton, Hammond, Seaside, Gearhart, Cannon Beach, and surrounding areas in Clatsop County, Oregon. Services operate seven days per week, 362 days per year, and are designed to connect the communities with essential destinations such as medical facilities, employment centers, schools, local VA Clinic, shopping areas, food banks, shelters, life-sustaining treatment centers, addiction recovery services, and other social service providers.

The majority of service occurs along high-demand corridors between Astoria, Warrenton, and Seaside, where population density, employment opportunities, and critical services are concentrated. These corridors experience the highest ridership and provide vital connectivity for daily commuters, seniors, and individuals with disabilities. Service is also extended to rural and outlying areas to ensure equitable access for underserved populations, including demand-response and deviated fixed-route services that address mobility gaps for individuals unable to access traditional fixed-route transit.

**Select the type(s) of service that will be supported by this award. Select all that apply. \***

- |   |   |
|---|---|
| <input type="checkbox"/> Open to the general public at all times                | <input checked="" type="checkbox"/> Deviated Fixed Route                                      |
| <input type="checkbox"/> Open to the general public on a space-available basis  | <input checked="" type="checkbox"/> Fixed Route (excluding commuter and inter-city routes)    |
| <input type="checkbox"/> Open only to seniors and individuals with disabilities | <input checked="" type="checkbox"/> Demand Response (Excluding ADA complementary Paratransit) |
| <input type="checkbox"/> Limited to defined clientele (e.g. residential home)   | <input checked="" type="checkbox"/> ADA Complementary Paratransit                             |

**Indicate the type of service area for the proposed project (Rural, Small Urban or Large Urban) to determine funding eligibility. \***

Rural ▼

*Large Urban (Over 200,000 population), Small Urban (50,000-200,000 population) and Rural (Under 50,000 population)*

*If the proposed project spans more than one geographic type, use the most appropriate or majority of the project location.*

**Does the majority of the operations occur within one of these areas? \***

Not Applicable ▼

Select "Not Applicable" if operations are not in these areas. This helps PTD determine if additional STIP keys are needed.

**Select the counties served by this project. \***

- |   |                                     |                                    |                                     |
|---|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> BAKER              | <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LAKE      | <input type="checkbox"/> SHERMAN    |
| <input type="checkbox"/> BENTON             | <input type="checkbox"/> GILLIAM    | <input type="checkbox"/> LANE      | <input type="checkbox"/> TILLAMOOK  |
| <input type="checkbox"/> CLACKAMAS          | <input type="checkbox"/> GRANT      | <input type="checkbox"/> LINCOLN   | <input type="checkbox"/> UMATILLA   |
| <input checked="" type="checkbox"/> CLATSOP | <input type="checkbox"/> HARNEY     | <input type="checkbox"/> LINN      | <input type="checkbox"/> UNION      |
| <input type="checkbox"/> COLUMBIA           | <input type="checkbox"/> HOOD RIVER | <input type="checkbox"/> MALHEUR   | <input type="checkbox"/> WALLOWA    |
| <input type="checkbox"/> COOS               | <input type="checkbox"/> JACKSON    | <input type="checkbox"/> MARION    | <input type="checkbox"/> WASCO      |
| <input type="checkbox"/> CROOK              | <input type="checkbox"/> JEFFERSON  | <input type="checkbox"/> MORROW    | <input type="checkbox"/> WASHINGTON |
| <input type="checkbox"/> CURRY              | <input type="checkbox"/> JOSEPHINE  | <input type="checkbox"/> MULTNOMAH | <input type="checkbox"/> WHEELER    |
| <input type="checkbox"/> DESCHUTES          | <input type="checkbox"/> KLAMATH    | <input type="checkbox"/> POLK      | <input type="checkbox"/> YAMHILL    |

Select all that apply.

**Select the activity type(s) for this project. \***

- |   |  |
|---|--|
| <input type="checkbox"/> A. Vehicle Acquisition                       | <input type="checkbox"/> D. Preventive Maintenance                             |
| <input type="checkbox"/> B. Equipment, Signs and Amenities, Shelters  | <input checked="" type="checkbox"/> E. Mobility Management                     |
| <input type="checkbox"/> C. Facilities: Bus Barns and Other Buildings | <input type="checkbox"/> F. Purchased Service (competitively procured via RFP) |

Select all that apply. All deliverables and tasks within a single project must be interrelated or dependent on one another. Unrelated activities cannot be grouped together and submitted as one project. The application will open up additional fields depending on the project that was chosen. Make sure that all required fields for each project type are fully completed.

**E. Mobility Management**

⊗ **Mobility management 1**

**Task title \***

Update Coordinated Human Services Transportation Plan


**Task type \***




- One Stop Referral Operating transportation brokerages to coordinate service providers, funding resources, and customer needs
- Coordinating transportation services for older adults, individuals with disabilities, and individuals with low incomes
- Supporting local partnerships that coordinate transportation services
- Staffing for the development and implementation of coordination plans
- Providing travel training and trip planning activities for customers
- Developing and operating traveler call centers to coordinate travel information, manage eligibility requirements, and arrange customer travel
- Planning and implementing the acquisition and purchase of intelligent transportation technologies to operate a coordinated system (Only purchases under \$5,000)
- Travel Mobility Planning
- Internet Based Information
- Informational Materials/Marketing

**On what page is activity or project listed in the adopted Coordinated Plan? \***

Update the Coordinated Plan

**Coordinate Plan page(s) upload \***

 or drag files here.

 [SETD Coordinated...](#) 4.3 MB  

**Describe how this activity benefits seniors and individuals with disabilities. \***

Updating the Coordinated Human Services Transportation Plan will benefit seniors and individuals with disabilities by ensuring their mobility needs are prioritized in the development of future transit services and strategies. The SETD Coordinated Human Services Transportation Plan update will include targeted outreach and engagement with seniors, individuals with disabilities, caregivers, and human service organizations to identify existing transportation barriers, unmet needs, and service gaps.

The planning process will evaluate the effectiveness of current services, including ADA Paratransit and identify opportunities to improve accessibility, reliability, and coordination. This includes assessing first/last mile connections, service availability, accessibility and trip purpose needs (such as medical appointments and essential services), and geographic coverage for underserved populations.

The updated plan will result in specific, data-driven recommendations to enhance accessible transportation options, improve coordination, and prioritize investments that directly support seniors and individuals with disabilities. By incorporating these needs into long-range planning, the project ensures that future transit services are more equitable, responsive, and aligned with the requirements of individuals who rely on transit the most.

Ultimately, this activity supports increased independence, access to essential services, and improved quality of life for seniors and individuals with disabilities by shaping a transit system that is safe, reliable, and fully accessible.

*i.e. We will host five events at locations in our community to explain the transit services available to seniors.*

**How will you deliver the proposed project activity? \***

In-house

Contractor or consultant

*Check all that apply*

Identify the estimated number of customer contacts, customers trained, or mobility products/services produced. Describe the method you will use to measure output from the project:

**Description of unit \***

**Number of units \***

Update Coordinated Human Services

1

**Describe the method you will use to measure output from the project. \***

Project output will be measured through the successful completion of the updated Coordinated Human Services Transportation Plan and the level of stakeholder engagement achieved throughout the planning process. Key performance measures will include the completion and adoption of the updated plan, documentation of outreach activities, and participation from seniors, individuals with disabilities, human service providers, and community stakeholders.

Specific outputs will include the number of public outreach events conducted, surveys distributed and completed, stakeholder meetings held, and coordination efforts with partner agencies. The project will also track the identification of transportation gaps, unmet needs, and recommended strategies to improve mobility for seniors and individuals with disabilities.

Additional measures will include the development of prioritized, data-driven recommendations and implementation strategies that align with current funding opportunities and community needs. The completed and adopted plan will serve as a clear, updated deliverable that shows the project objectives have been met.

Collectively, these outputs will ensure the project results in a comprehensive, community-informed plan that supports improved coordination, accessibility, and mobility for seniors and individuals with disabilities.

**Cost of mobility management activity \***

\$77,000.00

**Activity deliverables**

	<b>Deliverable description *</b>	<b>Units *</b>	<b>Deliverable date *</b>
⊗	Plans Created	1	9/30/2029

+ Add Deliverable

## Project match

	Match source *	Match amount *	Match percentage *	Match status *
⊗	State	\$15,400.00	100.00%	Planned
		\$15,400.00		

+ Add Item

If "other" selected as match source, please explain source.

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

- Yes
- No

### Task cost and match information:

Total project cost	Match amount	Grant amount
\$77,000.00	\$15,400.00	\$61,600.00

+ Add mobility management

## Environmental Review

### Federal funding/NEPA Applicability

The requirements of the National Environmental Policy Act (NEPA) apply to all projects that receive federal funding. The FTA conducts environmental review for all projects that have identified or planned/programmed FTA funding. Answer the following question to help determine if NEPA requirements apply to the proposed project.

**Will the proposed project involve identified FTA funding? (Not including a grant from the 2027-29 5310 grant program) \***

- Yes
- No

## Project Scope

According to federal regulation, projects evaluated under NEPA must demonstrate "independent utility," meaning the project must be usable and be a reasonable expenditure even if no additional improvements are made in the area. This does not prohibit the construction of a project in phases.

Answer the following questions to help determine if the proposed project demonstrates independent utility:

**Would the project described above require additional improvements to be usable or to be considered a reasonable expenditure? This includes improvements considered part of another project or improvements funded by another grant or state/local funds. \***

- Yes
- No

**Does the proposed project involve development of property or installation of equipment purchased through a separate project, including property or equipment purchased with state or local funds? \***

- Yes
- No

**Does the proposed project involve acquisition of property, equipment, or vehicles that will be developed, constructed, or installed as part of a separate project? \***

- Yes
- No

## Documentation Requirements

Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet. Would the project described include any of the following?

**Would the project described above include any of the following?**

- Final design activities – any design beyond 30%
- Property acquisition – includes, but is not limited to, purchase discussions with property owners that imply or are explicitly binding
- Purchase of construction materials – includes, but is not limited to, purchase of any materials used for the activities listed under the definition of project construction below
- Purchase of rolling stock
- Project construction – FTA definition includes construction, alteration, or repair (including dredging, excavating, and painting) of buildings, structures, or other real property; excludes the assembly, alteration, or repair of vessels or other kinds of personal property.

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

## NEPA Concurrence

Has the FTA already provided NEPA concurrence for this project or components of this project? \*

- Yes
- No
- Not Applicable

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

### Indirect Costs

Does the agency intend to charge any indirect cost to this project? \*

- Yes
- No

### Total Project Costs

#### Project Title

Update SETD Coordinated Human Services Transportation Plan October 2020

#### Total Vehicle Acquisition Cost

\$0.00

#### Total Equipment, Signs and Amenities, Shelter Cost

\$0.00

#### Total Facilities, Bus Barns, and Other Buildings Cost

\$0.00

#### Total Preventive Maintenance Cost

\$0.00

#### Total Mobility Management Cost

\$77,000.00

#### Total Purchased Service Project Cost

\$0.00

#### Total Indirect Costs

**Total Project Cost**

\$77,000.00

**Total Match Amount**

\$15,400.00

**Total Grant Amount**

\$61,600.00

**⊗ Project 3****Is this project for the Lead agency applying on behalf of a subgrantee? \*** Yes  No**Lead Agency legal name \***

Sunset Empire Transportation District

**Lead Agency DBA (Doing Business As) name****Lead Agency mailing address**

900 Marine Drive

**Lead Agency city, state, zip code**

Astoria OR 97103

**Lead Agency Unique Entity Identifier (UEI) \***

[REDACTED]

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

[REDACTED]

**Lead Agency Authorized Representative**

The person authorized to sign the subgrant agreement. If the applicant is applying for the subgrantee, this information would be for the subgrantee. To have the subgrantee sign you can save the application and then send the link to subgrantee prior to submitting it to ODOT.

**Authorized representative first and last name \***

Kathy Kleczek

**authorized representative title \***

Board Commissioner Chair

*Official who has authority to indent agency or company*

**Authorized representative email \***

kathy@ridethebus.org

**Authorized representative phone**

## Project Details

**Project name \***

Operation Equipment purchases

**Describe project service area and where does the majority of service happen. \***

The project service area encompasses the Sunset Empire Transportation District's established service region, which includes the communities of Astoria, Warrenton, Hammond, Seaside, Gearhart, and surrounding areas in Clatsop County, Oregon. Services are designed to connect residential neighborhoods with key destinations such as medical facilities, employment centers, schools, shopping areas, and social service providers.

The majority of service occurs along high-demand corridors between Astoria, Warrenton, and Seaside, where population density, employment opportunities, and essential services are concentrated. These routes experience the highest ridership and provide critical connectivity for daily commuters, seniors, and individuals with disabilities.

Additional service extends to more rural and outlying areas to ensure equitable access to transportation for underserved populations. This includes demand-response and deviated fixed-route services that address mobility gaps for individuals who may not be able to access traditional fixed-route transit.

Overall, the service area supports regional mobility by linking urban and rural communities while prioritizing access to essential services, economic opportunities, and community resources.

**Select the type(s) of service that will be supported by this award. Select all that apply. \***

- |   |   |
|---|---|
| <input type="checkbox"/> Open to the general public at all times                | <input checked="" type="checkbox"/> Deviated Fixed Route                                      |
| <input type="checkbox"/> Open to the general public on a space-available basis  | <input checked="" type="checkbox"/> Fixed Route (excluding commuter and inter-city routes)    |
| <input type="checkbox"/> Open only to seniors and individuals with disabilities | <input checked="" type="checkbox"/> Demand Response (Excluding ADA complementary Paratransit) |
| <input type="checkbox"/> Limited to defined clientele (e.g. residential home)   | <input checked="" type="checkbox"/> ADA Complementary Paratransit                             |

**Indicate the type of service area for the proposed project (Rural, Small Urban or Large Urban) to determine funding eligibility. \***

Rural ▼

*Large Urban (Over 200,000 population), Small Urban (50,000-200,000 population) and Rural (Under 50,000 population)*

*If the proposed project spans more than one geographic type, use the most appropriate or majority of the project location.*

**Does the majority of the operations occur within one of these areas? \***

Not Applicable ▼

*Select "Not Applicable" if operations are not in these areas. This helps PTD determine if additional STIP keys are needed.*

**Select the counties served by this project. \***

- |   |                                     |                                    |                                     |
|---|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> BAKER              | <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LAKE      | <input type="checkbox"/> SHERMAN    |
| <input type="checkbox"/> BENTON             | <input type="checkbox"/> GILLIAM    | <input type="checkbox"/> LANE      | <input type="checkbox"/> TILLAMOOK  |
| <input type="checkbox"/> CLACKAMAS          | <input type="checkbox"/> GRANT      | <input type="checkbox"/> LINCOLN   | <input type="checkbox"/> UMATILLA   |
| <input checked="" type="checkbox"/> CLATSOP | <input type="checkbox"/> HARNEY     | <input type="checkbox"/> LINN      | <input type="checkbox"/> UNION      |
| <input type="checkbox"/> COLUMBIA           | <input type="checkbox"/> HOOD RIVER | <input type="checkbox"/> MALHEUR   | <input type="checkbox"/> WALLOWA    |
| <input type="checkbox"/> COOS               | <input type="checkbox"/> JACKSON    | <input type="checkbox"/> MARION    | <input type="checkbox"/> WASCO      |
| <input type="checkbox"/> CROOK              | <input type="checkbox"/> JEFFERSON  | <input type="checkbox"/> MORROW    | <input type="checkbox"/> WASHINGTON |
| <input type="checkbox"/> CURRY              | <input type="checkbox"/> JOSEPHINE  | <input type="checkbox"/> MULTNOMAH | <input type="checkbox"/> WHEELER    |
| <input type="checkbox"/> DESCHUTES          | <input type="checkbox"/> KLAMATH    | <input type="checkbox"/> POLK      | <input type="checkbox"/> YAMHILL    |

*Select all that apply.*

**Select the activity type(s) for this project. \***

- A. Vehicle Acquisition
- B. Equipment, Signs and Amenities, Shelters
- C. Facilities: Bus Barns and Other Buildings
- D. Preventive Maintenance
- E. Mobility Management
- F. Purchased Service (competitively procured via RFP)

Select all that apply. All deliverables and tasks within a single project must be interrelated or dependent on one another. Unrelated activities cannot be grouped together and submitted as one project. The application will open up additional fields depending on the project that was chosen. Make sure that all required fields for each project type are fully completed.

**B. Equipment, Signs and Amenities, Shelters**

**⊗ Equipment, signs and amenities, or shelters 1**

**Select the activity options to be included in this project. \***

- A. Equipment
- B. Signs and Amenities
- C. Shelters

**Please describe the activity in detail and identify how the activities benefits seniors and individuals with disabilities. \***

This project includes the purchase and implementation of a modern communication radio system for Sunset Empire Transportation District (SETD), including onboard (on-bus) radios, base station equipment, and related system components. The District's existing analog radio system is approaching obsolescence and is no longer aligned with current industry standards. In addition, the District's FCC license is nearing expiration, making this upgrade necessary to maintain compliant and uninterrupted communication capabilities.

The upgraded radio system will transition SETD to a modern, reliable communication platform that incorporates current best practices and improves real-time coordination between dispatch and vehicle operators. Enhanced communication capabilities will support faster response to service disruptions, emergencies, and passenger needs, improving overall operational awareness and system safety. This is especially critical for seniors and individuals with disabilities who depend on consistent and reliable transportation for medical appointments, life-sustaining services, and other essential trips.

By replacing an aging system and ensuring compliance with regulatory requirements, this project strengthens system reliability, supports safe transit operations, and protects the continuity of service. Improved communication directly enhances service quality by reducing delays, improving incident response, and ensuring more dependable connections.

Overall, this investment supports a safe, efficient, and accessible transit system. It directly benefits seniors and individuals with disabilities by minimizing service disruptions and ensuring reliable access to essential services, thereby supporting independence and quality of life

This activity may require the applicant to successfully get FTA NEPA concurrence before incurring any costs.

**On what page are project and activity listed in the adopted Coordinated Plan? \***

Entire Plan

**Coordinate Plan page(s) upload \***

Upload

or drag files here.



SETD Coordinated...

4.3 MB



**Will the equipment, signs and amenities, and/or shelters for this activity be located in a flood zone? \***

Yes

No

[More information on floodplains](#)

**Will the item(s) be covered by flood insurance? \***

Yes

No

**How will you deliver the proposed project activity? \***

In-house

Contractor or consultant

*Check all that apply*

**Capital items to be purchased for this activity (including location)**

**Item 1**

**Item name \***

Updated radio communication system for the district

**Item description \***

Upgrade district-wide communication radios, including installation of onboard (on-bus) radio equipment and supporting base/dispatch communication systems to improve operational coordination, safety, and compliance.

**Item type \***

Radios

**Please provide the location in longitude and latitude format, address and/or tax lot for each project element. Format (Latitude= 45.214940/ Longitude = -123.969360). \***

SETD Operations Facility and on-bus fleet installations Warrenton, OR  
465 Skipanon Drive  
Latitude = 46.165800 / Longitude = -123.923800  
Astoria Transit Center--900 Marine Drive, Astoria, OR. Latitude:  
46.188900/Longitude: -123.831300

*If you can provide latitude/longitude, address and tax lot, that is ideal.*

*If 'on-bus' this needs to be specified.*

**Estimated Request for Proposal (RFP) \***

11/1/2027




**Estimated Purchase Order date**


1/3/2028



**Estimated delivery date**

7/2/2029 

**Final delivery date \***

9/30/2029 

**Quantity \***

20

**Unit cost \***

800

**Total cost**

\$16,000.00

+ Add Item

**Activity deliverables**

**Deliverable description \***

**Units \***

**Deliverable date \***

<input checked="" type="checkbox"/>	Capital Improvements Completed	20	9/30/2029
-------------------------------------	--------------------------------	----	-----------

+ Add Deliverable

**Project match**

**Match source \***

**Match amount \***

**Match percentage \***

**Match status \***

<input checked="" type="checkbox"/>	State	\$3,200.00	100.00%	Planned
-------------------------------------	-------	------------	---------	---------

\$3,200.00

+ Add Item

**If "other" selected as match source, please explain source.**

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

Yes

No

## Task cost and match information

Total project cost	Match amount	Grant amount
\$16,000.00	\$3,200.00	\$12,800.00

### ⊗ Equipment, signs and amenities, or shelters 2

Select the activity options to be included in this project. \*

- A. Equipment
- B. Signs and Amenities
- C. Shelters

Please describe the activity in detail and identify how the activities benefits seniors and individuals with disabilities. \*

This project includes the purchase of essential operational equipment for Sunset Empire Transportation District (SETD), including a shop wheel balancer, tire machine, and air compressor. These items are critical to supporting safe, reliable, and efficient transit operations in a rural area with very limited resources for our coastal area.

The equipment will allow SETD to perform tire mounting, balancing, and related maintenance in-house, reducing reliance on external vendors, lowering maintenance costs, and improving turnaround times for vehicle repairs. Increased efficiency in maintenance operations helps ensure vehicles remain in a state of good repair, reducing the likelihood of breakdowns and service interruptions.

By expanding in-house maintenance capabilities, this project enhances service reliability, safety, and operational efficiency. These improvements directly benefit seniors and individuals with disabilities who depend on consistent and accessible transportation for medical appointments, essential services, and daily activities by minimizing service disruptions and improving overall system dependability.

*This activity may require the applicant to successfully get FTA NEPA concurrence before incurring any costs.*

**On what page are project and activity listed in the adopted Coordinated Plan? \***

Entire Plan

**Coordinate Plan page(s) upload \***

Upload

or drag files here.



SETD Coordinated...

4.3 MB



**Will the equipment, signs and amenities, and/or shelters for this activity be located in a flood zone? \***

Yes

No

[More information on floodplains](#)

**Will the item(s) be covered by flood insurance? \***

Yes

No

**How will you deliver the proposed project activity? \***

In-house

Contractor or consultant

*Check all that apply*

**Capital items to be purchased for this activity (including location)**

**Item 1**

**Item name \***

Shop Equipment

**Item description \***

Shop wheel balancer, tire machine, and air compressor including installation and training.

**Item type \***

Tire Machine, Air compressor and wheel balancer

**Please provide the location in longitude and latitude format, address and/or tax lot for each project element. Format (Latitude= 45.214940/ Longitude = -123.969360). \***

SETD Operations Facility and on-bus fleet installations Warrenton,  
 OR 465 Skipanon Drive  
 Latitude = 46.165800 / Longitude = -123.923800

*If you can provide latitude/longitude, address and tax lot, that is ideal.*

*If 'on-bus' this needs to be specified.*

**Estimated Request for Proposal (RFP) \***

11/3/2027

**Estimated Purchase Order date**

1/3/2028

**Estimated delivery date**

4/24/2028

**Final delivery date \***

9/30/2029

**Quantity \***

1

**Unit cost \***

13,655

**Total cost**

\$13,655.00

+ Add Item

**Activity deliverables**

	<b>Deliverable description *</b>	<b>Units *</b>	<b>Deliverable date *</b>
⊗	Capital Improvements Completed	1	9/30/2029

+ Add Deliverable

## Project match

	Match source *	Match amount *	Match percentage *	Match status *
⊗	State	\$2,731.00	100.00%	Planned
		\$2,731.00		

+ Add Item

If "other" selected as match source, please explain source.

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

Yes

No

## Task cost and match information

Total project cost	Match amount	Grant amount
\$13,655.00	\$2,731.00	\$10,924.00

## ⊗ Equipment, signs and amenities, or shelters 3

Select the activity options to be included in this project. \*

A. Equipment

B. Signs and Amenities

C. Shelters

Please describe the activity in detail and identify how the activities benefits seniors and individuals with disabilities. \*

This project will procure and implement essential IT infrastructure equipment, including laptop computers, a network firewall, and cybersecurity tools and services, with a total estimated cost of \$26,000. These upgrades will modernize the organization's technology environment, strengthen data protection, and improve operational efficiency.

The laptops will support staff and program personnel in delivering transportation coordination, scheduling, communication, and reporting services. The firewall and cybersecurity enhancements will protect sensitive client information, including personal and trip data, from unauthorized access, cyber threats, and service disruptions.

These improvements directly benefit seniors and individuals with disabilities by ensuring reliable, secure, and uninterrupted access to transportation services. Enhanced IT systems will reduce service delays, improve communication with riders, and enable more efficient trip scheduling and coordination. In addition, stronger cybersecurity safeguards help protect the privacy and personal information of vulnerable populations who rely on these services.

Overall, this investment supports continuity of service, improves responsiveness, and enhances the safety and trustworthiness of transportation programs designed for seniors and individuals with disabilities.

*This activity may require the applicant to successfully get FTA NEPA concurrence before incurring any costs.*

**On what page are project and activity listed in the adopted Coordinated Plan? \***

Entire Plan

**Coordinate Plan page(s) upload \***

Upload

or drag files here.



SETD Coordinated...

4.3 MB



**Will the equipment, signs and amenities, and/or shelters for this activity be located in a flood zone? \***

Yes

No

[More information on floodplains](#)

**Will the item(s) be covered by flood insurance? \***

Yes

No

**How will you deliver the proposed project activity? \***

- In-house
- Contractor or consultant

*Check all that apply*

**Capital items to be purchased for this activity (including location)**

**⊗ Item 1**

**Item name \***

IT

**Item description \***

IT infrastructure equipment including laptop and other computers, related support equipment, a network firewall, and cybersecurity tools and services.

**Item type \***

IT

**Please provide the location in longitude and latitude format, address and/or tax lot for each project element. Format (Latitude= 45.214940/ Longitude = -123.969360). \***

SETD Operations Facility 465 Skipanon Drive Warrenton, OR  
Latitude = 46.165800 / Longitude = -123.923800  
Astoria Transit Center--900 Marine Drive, Astoria, OR. Latitude:  
46.188900/Longitude: -123.831300

*If you can provide latitude/longitude, address and tax lot, that is ideal.*

*If "on-bus" this needs to be specified.*


**Estimated Request for Proposal (RFP) \***

10/4/2027


**Estimated Purchase Order date**

1/3/2028

**Estimated delivery date**

4/28/2028 

**Final delivery date \***

9/30/2029 

**Quantity \***

26

**Unit cost \***

1,000

**Total cost**

\$26,000.00

+ Add Item

**Activity deliverables**

**Deliverable description \***

**Units \***

**Deliverable date \***

<input checked="" type="checkbox"/>	Capital Improvements Completed	1	9/30/2029
-------------------------------------	--------------------------------	---	-----------

+ Add Deliverable

**Project match**

**Match source \***

**Match amount \***

**Match percentage \***

**Match status \***

<input checked="" type="checkbox"/>	State	\$5,200.00	100.00%	Planned
-------------------------------------	-------	------------	---------	---------

\$5,200.00

+ Add Item

**If "other" selected as match source, please explain source.**

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

Yes

No

## Task cost and match information

Total project cost	Match amount	Grant amount
\$26,000.00	\$5,200.00	\$20,800.00

+ Add equipment, signs and amenities, or shelters

## Environmental Review

### Federal funding/NEPA Applicability

The requirements of the National Environmental Policy Act (NEPA) apply to all projects that receive federal funding. The FTA conducts environmental review for all projects that have identified or planned/programmed FTA funding. Answer the following question to help determine if NEPA requirements apply to the proposed project.

**Will the proposed project involve identified FTA funding? (Not including a grant from the 2027-29 5310 grant program) \***

- Yes
- No

### Project Scope

According to federal regulation, projects evaluated under NEPA must demonstrate "independent utility," meaning the project must be usable and be a reasonable expenditure even if no additional improvements are made in the area. This does not prohibit the construction of a project in phases.

Answer the following questions to help determine if the proposed project demonstrates independent utility:

**Would the project described above require additional improvements to be usable or to be considered a reasonable expenditure? This includes improvements considered part of another project or improvements funded by another grant or state/local funds. \***

- Yes
- No

**Does the proposed project involve development of property or installation of equipment purchased through a separate project, including property or equipment purchased with state or local funds? \***

- Yes
- No

**Does the proposed project involve acquisition of property, equipment, or vehicles that will be developed, constructed, or installed as part of a separate project? \***

- Yes
- No

## Documentation Requirements

Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet. Would the project described include any of the following?

**Would the project described above include any of the following?**

- Final design activities – any design beyond 30%
- Property acquisition – includes, but is not limited to, purchase discussions with property owners that imply or are explicitly binding
- Purchase of construction materials – includes, but is not limited to, purchase of any materials used for the activities listed under the definition of project construction below
- Purchase of rolling stock
- Project construction – FTA definition includes construction, alteration, or repair (including dredging, excavating, and painting) of buildings, structures, or other real property; excludes the assembly, alteration, or repair of vessels or other kinds of personal property.

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

## NEPA Concurrence

**Has the FTA already provided NEPA concurrence for this project or components of this project? \***

- Yes
- No
- Not Applicable

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

## Indirect Costs

**Does the agency intend to charge any indirect cost to this project? \***

- Yes
- No

## Total Project Costs

**Project Title**

Operation Equipment purchases

**Total Vehicle Acquisition Cost**

\$0.00

**Total Equipment, Signs and Amenities, Shelter Cost**

\$55,655.00

**Total Facilities, Bus Barns, and Other Buildings Cost**

\$0.00

**Total Preventive Maintenance Cost**

\$0.00

**Total Mobility Management Cost**

\$0.00

**Total Purchased Service Project Cost**

\$0.00

**Total Indirect Costs**

**Total Project Cost**

\$55,655.00

**Total Match Amount**

\$11,131.00

**Total Grant Amount**

\$44,524.00

+ Add Project

Next >

Save



# 2027-2029 Section 5310 Formula Grant Application

1 Agency and Project Information    2 Application Totals and Signature

## Total Application Costs

Total Project Cost	Total Match Amount	Total Grant Amount
\$173,743.00	\$34,749.00	\$138,994.00

## Allocation Amount

\$138,996.00

## 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 "File Upload" fields.
- Electronically sign your application by using the pen icon. Type your name in the "Printed Name" section.
- Check the box for the certification statement.
- 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)

## Certification

**Signature \***

x

draw

**Printed Name \***

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**

4/22/2026

[< Back](#)

[Submit Application](#)

[Save](#)

2

<b>Section 5311: Formula Grants for Rural Areas</b>	
<b>Agency</b>	<b>Allocation Estimate</b>
Basin Transit Service Transportation District	\$1,158,005
Benton County	\$403,241
Central Oregon Intergovernmental Council	\$2,179,383
City of Canby	\$605,239
City of Lebanon	\$292,285
City of Pendleton	\$352,162
City of Sandy	\$797,280
City of Silverton	\$112,098
City of Sweet Home	\$290,538
City of Woodburn	\$446,534
Clackamas County	\$909,692
Columbia County	\$756,308
Community Connection of Northeast Oregon, Inc.	\$1,041,262
The Confederated Tribes of the Grand Ronde	\$268,060
The Confederated Tribes of the Umatilla Indian Reservation	\$887,946
Coos County Area Transportation District	\$668,188
Curry County	\$538,251
Grant County Transportation District	\$562,892
Harney County	\$354,825
Hood River County Transportation District	\$898,065
Josephine County	\$484,396
Klamath Tribes	\$326,865
Lane Transit District	\$508,085
Lincoln County	\$1,639,235
Linn County	\$517,306
Malheur County	\$458,878
Mid-Columbia Economic Development District	\$461,064
Morrow County	\$324,312
Ride Connection, Inc.	\$365,969
Salem Area Mass Transit District	\$811,847
South Clackamas Transportation District	\$551,795
Sunset Empire Transportation District	\$1,385,018
Tillamook County Transportation District	\$1,663,894
Umpqua Public Transportation District	\$1,297,652
Yamhill County	\$1,617,098
<b>Grand Total</b>	<b>\$25,935,667</b>

Original 3/4/2026  
[Updated 3/9/2026]



# 2027-2029 Section 5311 Formula Grant Application

## Agency Information

**Agency legal name \***

Sunset Empire Transportation District



Only agencies who appear in this list are eligible.

**Agency DBA (Doing Business As) name**

Sunset Empire Transportation District

**Agency type \***

Special district



Choose the agency type from the dropdown.

**Agency legal address \***

900 Marine Dr.

**City, state, zip code \***

Astoria

**Application contact name \***

David Carr

**Application contact title \***

Executive Director

**Application contact email address \***

David@ridethebus.org

**Application contact phone**

(503) 861-5399

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



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



## Authorized Representative

This is the person who is authorized by the agency to sign the subgrant agreement.

**Authorized representative first and last name \***

Kathy Kleczek

**Authorized representative title \***

Board Commissioner Chair

**Authorized representative email \***

kathy@ridethebus.org

**Authorized representative phone**

## Oregon Public Transportation Division Transit Asset Management (TAM) plan

**How does your agency include input from the public to develop service plans and standards? \***

SETD incorporates public input as a key component in the development of service plans and standards. During updates to major planning documents, such as the Long-Range Transportation Plan and the Coordinated Human Services Transportation Plan, SETD conducts outreach efforts. These efforts include onboard rider surveys, community open houses, and targeted stakeholder interviews to gather direct feedback from riders, community partners, and underserved populations.

In addition, SETD benefits from the Transportation Advisory Committee, which provides ongoing input and guidance on service priorities, performance standards, and community needs. The agency also presents to city councils and the Clatsop County Board of Commissioners to share service updates and gather feedback from local elected officials.

Through these combined efforts, SETD ensures that public input is continuously integrated into service planning, helping to align transit services with community needs, improve accessibility, and support informed decision-making.

**How does your agency market its services? \***

Social Media, website, print advertising, on-board signage, large-screen messaging in the Transit Center lobby, bus shelters, radio, and targeted outreach.

**Does your agency provide incidental transit services such as charter, school trippers, meal delivery, or sightseeing? \***

Yes  No

## Risk Assessment Information

**Will administration of the grant be delegated to a separate agency? \***

Yes  No

## **Financial and Audit Information**

**Is the agency subject to Single Audit requirements? \***

Yes

No

*If an agency expends \$1M or more federal assistance funds annually they are required to have a Single Audit.*

**Attach a copy of the most recent single audit. \***

or drag files here.



FINAL Audit FY24.pdf

0.9 MB



**Does your agency have established financial management policies and procedures? \***

Yes

No

**Does your agency have an established accounting system for federal grants? \***

Yes

No

**What type of accounting system does your agency use? \***

Manual

Automated

Combined

*An example of an "automated" accounting system is a program tool such as QuickBooks. A "manual" accounting system is a book-keeping system for recording business activity transactions where financial records are kept without using a computer system with specialized accounting software. A "combined" system uses a combination of the two systems.*

**What is the financial software utilized?**

Accufund

*If you answered "automated" or "combined," provide the name of the software used for financial management.*

**Can your system separately identify the federal awards and programs that are received? \***

Yes

No

**Can your system identify the source and application of awarded funds and support documentation? \***

Yes

No

**Does the system account for 100 percent of each employee's time? \***

Yes

No

**Does your agency compare expenditure with budget amounts throughout the life of the grant? \***

Yes

No

**Does your agency know the guidance on allowable costs associated with this award? \***

Yes

No

*If "no," please review [2 CFR 200](#) and [FTA C9040.1H, pp. IV-1 - IV-13](#).*

**Was your agency audited by the State and/or Federal government in the past two years? \***

Yes

No

## **Staffing and Resources**

**Does the agency have adequate staff and resources to deliver the project? \***

We have adequate staff to comply with the terms of this agreement.

Need to hire new staff for this work.

Will have to contract a vendor to carry out the program activities.

We have experienced significant turnover - limited resources.

**Did your agency have any turnover of management staff in the last two years? \***

Yes

No

**List the position(s) that experienced turnover. \***

Executive Director, Human Resources, Finance Officer

**Did your agency have turnover or vacancies in program related key positions in the last two years? \***

Yes

No

**List the position(s) that experienced turnover. \***

Yes. SETD experienced vacancies in Executive Director and Finance Manager, within the last two years. The agency took proactive steps to minimize disruption to operations and service delivery, including cross-training staff, utilizing interim coverage, and prioritizing timely recruitment. These efforts ensured continuity in program management, compliance, and service provision. Both vacant positions have since been filled, and staffing levels have stabilized.

**Does the agency provide ongoing training for program and finance personnel? \***

Yes

No

**Procurement**

**Does the agency have established procurement policies? \***

Yes

No

Will adopt 2 CFR 200 during this grant cycle.

**Project Information**

Complete project information for all associated activity. Each project may contain multiple types of service and activities. (Vehicle, Equipment, Facilities, Preventive Maintenance, Contracted Service...). Often recipients have one project, but some may choose to separate work into multiple projects (for example, to aid in tracking purposes).

For each section of the project information, ensure that you have included enough detail and for reviewers to understand each of the project elements. The information provided will help to determine eligibility of project activities as they align with federal funding requirements.

Fields in the application are specific to the answer you provide. Please read each question carefully and ensure that you have provided the details being asked for each question.

⊗ **Project 1**

**Allocation amount**

\$1,385,018.00

**Project title \***

Administration

**Describe project service area and where the majority of service happens. \***

The project service area encompasses the Sunset Empire Transportation District's established service region, including the communities of Astoria, Warrenton, Hammond, Seaside, Gearhart, Cannon Beach, and surrounding areas in Clatsop County, Oregon. Services are designed to connect residential neighborhoods with essential destinations such as medical facilities, employment centers, schools, shopping areas, food banks, shelters, life-sustaining treatment centers, addiction recovery services, and other social service providers.

The majority of service occurs along high-demand corridors between Astoria, Warrenton, and Seaside, where population density, employment opportunities, and critical services are concentrated. These corridors experience the highest ridership and provide vital connectivity for daily commuters, seniors, and individuals with disabilities.

Service is also extended to rural and outlying areas to ensure equitable access for underserved populations. This includes demand-response and deviated fixed-route services designed to address mobility gaps for individuals who are unable to access traditional fixed-route transit, including seniors and individuals with disabilities.

Overall, the service area supports regional mobility by linking urban and rural communities while prioritizing access to essential services and opportunities. The system is designed to ensure that seniors and individuals with disabilities have reliable, accessible transportation to maintain independence and access critical resources.

**Select the type(s) of service that will be supported by this award. Select all that apply. \***

- Open to the general public during all service hours
- Deviated fixed route
- Fixed route (excluding commuter and intercity routes)
- Demand response (Excluding ADA complementary Paratransit)
- ADA complementary paratransit

**Select the counties served by this project. \***

- |   |                                     |                                    |                                     |
|---|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> BAKER              | <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LAKE      | <input type="checkbox"/> SHERMAN    |
| <input type="checkbox"/> BENTON             | <input type="checkbox"/> GILLIAM    | <input type="checkbox"/> LANE      | <input type="checkbox"/> TILLAMOOK  |
| <input type="checkbox"/> CLACKAMAS          | <input type="checkbox"/> GRANT      | <input type="checkbox"/> LINCOLN   | <input type="checkbox"/> UMATILLA   |
| <input checked="" type="checkbox"/> CLATSOP | <input type="checkbox"/> HARNEY     | <input type="checkbox"/> LINN      | <input type="checkbox"/> UNION      |
| <input type="checkbox"/> COLUMBIA           | <input type="checkbox"/> HOOD RIVER | <input type="checkbox"/> MALHEUR   | <input type="checkbox"/> WALLOWA    |
| <input type="checkbox"/> COOS               | <input type="checkbox"/> JACKSON    | <input type="checkbox"/> MARION    | <input type="checkbox"/> WASCO      |
| <input type="checkbox"/> CROOK              | <input type="checkbox"/> JEFFERSON  | <input type="checkbox"/> MORROW    | <input type="checkbox"/> WASHINGTON |
| <input type="checkbox"/> CURRY              | <input type="checkbox"/> JOSEPHINE  | <input type="checkbox"/> MULTNOMAH | <input type="checkbox"/> WHEELER    |
| <input type="checkbox"/> DESCHUTES          | <input type="checkbox"/> KLAMATH    | <input type="checkbox"/> POLK      | <input type="checkbox"/> YAMHILL    |

*Select all that apply.*

**Select the activity type(s) for this project. \***

- |   |   |
|---|---|
| <input type="checkbox"/> A. Vehicle Acquisition                       | <input type="checkbox"/> E. Mobility Management                       |
| <input type="checkbox"/> B. Equipment, Signs and Amenities, Shelters  | <input type="checkbox"/> F. Operations                                |
| <input type="checkbox"/> C. Facilities: Bus Barns and Other Buildings | <input checked="" type="checkbox"/> G. Project Administrative Expense |
| <input type="checkbox"/> D. Preventive Maintenance                    |   |

**G. Project Administrative Expense**

**⊗ Project administrative expense 1**

**Describe the project administration expense. \***

Administrative expenses are essential for the effective management, oversight, and compliance of the Section 5311 program at Sunset Empire Transportation District (SETD) and are consistent with eligible activities identified in FTA Circular 9040.1G. These expenses support the administration of rural public transportation services throughout Clatsop County and ensure that all activities are carried out in accordance with applicable federal and state requirements.

Administrative costs at SETD include general administrative and marketing expenses, insurance premiums, office supplies, and facility and equipment-related costs necessary to support daily operations. These expenses also include costs associated with administering required drug and alcohol testing programs for safety-sensitive employees. In addition, administrative funding supports staff time and associated costs for grant administration, financial management, and regulatory compliance.

SETD administrative staff are responsible for preparing and submitting required reports to the Oregon Department of Transportation (ODOT) and the Federal Transit Administration (FTA), maintaining accurate financial records, developing and monitoring program budgets, processing invoices and reimbursements, and ensuring all documentation meets federal and state grant requirements. Staff also oversee procurement processes, ensure compliance with civil rights requirements including Title VI and ADA, and manage ongoing program monitoring and internal controls.

Additional administrative responsibilities include coordination with ODOT and regional partners, participation in required trainings, and oversight of program requirements to ensure services are delivered in alignment with approved project scopes. These functions are critical to maintaining eligibility for funding and ensuring accountability for public resources.

Overall, these administrative activities enable SETD to operate a compliant, efficient, and responsive transit system, directly supporting the delivery of safe, reliable, and accessible transportation services for residents of Clatsop County and connections to neighboring transit providers.

**How will you deliver the proposed project activity? \***

In-house

Contractor or consultant

*Check all that apply*

**Cost of project administration activity \***

\$300,443.00

## Activity Deliverables

Deliverable description *	Units *	Deliverable date *
<input checked="" type="radio"/> Ridership Percentage Increased	10	9/30/2029

+ Add deliverable

## Project Match

Match source *	Match amount *	Match percentage *	Match status *
<input checked="" type="radio"/> State	\$30,855.50	100.00%	Planned
	\$30,855.50		

+ Add Item

If "other" selected as match source, please explain source.

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

Yes

No

## Task cost and match information

Total project cost	Match amount	Grant amount
\$300,443.00	\$30,855.50	\$269,587.50

+ Add project administrative expense

# Environmental Review

## Federal funding/NEPA Applicability

The requirements of the National Environmental Policy Act (NEPA) apply to all projects that receive federal funding. The FTA conducts environmental review for all projects that have identified or planned/programmed FTA funding. Answer the following question to help determine if NEPA requirements apply to the proposed project.

**Will the proposed project involve identified FTA funding? (Not including a grant from the 2027-29 5310 grant program) \***

Yes

No

## Project Scope

According to federal regulation, projects evaluated under NEPA must demonstrate "independent utility," meaning the project must be usable and be a reasonable expenditure even if no additional improvements are made in the area. This does not prohibit the construction of a project in phases.

Answer the following questions to help determine if the proposed project demonstrates independent utility:

**Would the project described above require additional improvements to be usable or to be considered a reasonable expenditure? This includes improvements considered part of another project or improvements funded by another grant or state/local funds. \***

Yes

No

**Does the proposed project involve development of property or installation of equipment purchased through a separate project, including property or equipment purchased with state or local funds? \***

Yes

No

**Does the proposed project involve acquisition of property, equipment, or vehicles that will be developed, constructed, or installed as part of a separate project? \***

Yes

No

## Documentation Requirements

Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet. Would the project described include any of the following?

**Would the project described above include any of the following?**

- Final design activities – any design beyond 30%
- Property acquisition – includes, but is not limited to, purchase discussions with property owners that imply or are explicitly binding
- Purchase of construction materials – includes, but is not limited to, purchase of any materials used for the activities listed under the definition of project construction below
- Purchase of rolling stock
- Project construction – FTA definition includes construction, alteration, or repair (including dredging, excavating, and painting) of buildings, structures, or other real property; excludes the assembly, alteration, or repair of vessels or other kinds of personal property.

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

**NEPA Concurrence**

**Has the FTA already provided NEPA concurrence for this project or components of this project? \***

- Yes
- No
- Not Applicable

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

**Indirect Costs**

**Does the agency intend to charge any indirect cost to this project? \***

- Yes
- No

**⊗ Project 2**

**Allocation amount**

\$1,385,018.00

**Project title \***

Operations

**Describe project service area and where the majority of service happens. \***

The project service area encompasses the Sunset Empire Transportation District's established service region, which includes the communities of Astoria, Warrenton, Hammond, Seaside, Gearhart, Cannon Beach and surrounding areas in Clatsop County, Oregon. Services are designed to connect residential neighborhoods with key destinations such as medical facilities, employment centers, schools, shopping areas, and social service providers.

The majority of service occurs along high-demand corridors between Astoria, Warrenton, and Seaside, where population density, employment opportunities, and essential services are concentrated. These routes experience the highest ridership and provide critical connectivity for daily commuters, seniors, and individuals with disabilities.

Additional service extends to more rural and outlying areas to ensure equitable access to transportation for underserved populations. This includes demand-response and deviated fixed-route services that address mobility gaps for individuals who may not be able to access traditional fixed-route transit.

Overall, the service area supports regional mobility by linking urban and rural communities while prioritizing access to essential services, economic opportunities, and community resources.

**Select the type(s) of service that will be supported by this award. Select all that apply. \***

Open to the general public during all service hours

- Deviated fixed route
- Fixed route (excluding commuter and intercity routes)
- Demand response (Excluding ADA complementary Paratransit)
- ADA complementary paratransit

**Select the counties served by this project. \***

- |   |                                     |                                    |                                     |
|---|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> BAKER              | <input type="checkbox"/> DOUGLAS    | <input type="checkbox"/> LAKE      | <input type="checkbox"/> SHERMAN    |
| <input type="checkbox"/> BENTON             | <input type="checkbox"/> GILLIAM    | <input type="checkbox"/> LANE      | <input type="checkbox"/> TILLAMOOK  |
| <input type="checkbox"/> CLACKAMAS          | <input type="checkbox"/> GRANT      | <input type="checkbox"/> LINCOLN   | <input type="checkbox"/> UMATILLA   |
| <input checked="" type="checkbox"/> CLATSOP | <input type="checkbox"/> HARNEY     | <input type="checkbox"/> LINN      | <input type="checkbox"/> UNION      |
| <input type="checkbox"/> COLUMBIA           | <input type="checkbox"/> HOOD RIVER | <input type="checkbox"/> MALHEUR   | <input type="checkbox"/> WALLOWA    |
| <input type="checkbox"/> COOS               | <input type="checkbox"/> JACKSON    | <input type="checkbox"/> MARION    | <input type="checkbox"/> WASCO      |
| <input type="checkbox"/> CROOK              | <input type="checkbox"/> JEFFERSON  | <input type="checkbox"/> MORROW    | <input type="checkbox"/> WASHINGTON |
| <input type="checkbox"/> CURRY              | <input type="checkbox"/> JOSEPHINE  | <input type="checkbox"/> MULTNOMAH | <input type="checkbox"/> WHEELER    |
| <input type="checkbox"/> DESCHUTES          | <input type="checkbox"/> KLAMATH    | <input type="checkbox"/> POLK      | <input type="checkbox"/> YAMHILL    |

*Select all that apply.*

**Select the activity type(s) for this project. \***

- |   |  |
|---|--|
| <input type="checkbox"/> A. Vehicle Acquisition                       | <input type="checkbox"/> E. Mobility Management            |
| <input type="checkbox"/> B. Equipment, Signs and Amenities, Shelters  | <input checked="" type="checkbox"/> F. Operations          |
| <input type="checkbox"/> C. Facilities: Bus Barns and Other Buildings | <input type="checkbox"/> G. Project Administrative Expense |
| <input type="checkbox"/> D. Preventive Maintenance                    |  |

**F. Operations**

**⊗ Operations service 1**

**Describe the operations service. \***

The operations service is planned, designed, and carried out through a structured and data-informed approach that ensures reliable, safe, and accessible transportation for the community, with a focus on seniors and individuals with disabilities.

Service planning is guided by the agency's adopted transit plans, including the Coordinated Public Transit-Human Services Transportation Plan, as well as ongoing analysis of ridership trends, trip demand, and community needs. Input from riders, community stakeholders, and frontline staff, including drivers and dispatchers, is regularly incorporated to identify service gaps, improve route connectivity, and enhance overall system performance.

The service is designed to provide accessible, equitable transportation through fixed-route and demand-response services. Routes, schedules, and service areas are developed to maximize coverage and efficiency while ensuring compliance with ADA accessibility requirements. Special consideration is given to key destinations such as medical facilities, senior centers, grocery stores, and employment sites, regional food bank, shelters, life-sustaining treatment centers, addiction recovery services, other social service and the local VA clinic.

Operations are carried out by trained transit operators and supervisory staff who prioritize safety, customer service, and effective communication. Daily service delivery includes route operation, dispatch coordination, and real-time response to service needs such as trip adjustments and rider assistance. Preventive maintenance and regular vehicle inspections are integrated into operations to ensure vehicles remain safe, reliable, and in good working condition.

The agency continuously monitors performance through established metrics such as on-time performance, ridership levels, and service reliability. Adjustments are made as needed to improve efficiency and better meet the needs of the community. This ongoing evaluation process ensures that the service remains responsive, sustainable, and aligned with regional transportation goals.

*Explain how your project is planned, designed, and carried out.*

**Estimated number of unduplicated individuals (older adults and individuals with disabilities) this project proposes to support in the biennial grant period. \***

2,500

**Estimated number of one-way rides this project proposes to provide in the biennial grant period. \***

211,200

**How will you deliver the proposed project activity? \***

In-house

Contractor or consultant

*Check all that apply*

**Cost of operations activity \***

\$1,989,000.00

**Activity Deliverables**

Deliverable description *	Units *	Deliverable date *
<input checked="" type="checkbox"/> Ridership Percentage Increased	10	9/30/2029

+ Add Deliverable

**Project Match**

Match source *	Match amount *	Match percentage *	Match status *
<input checked="" type="checkbox"/> State	\$873,568.80	100.00%	Planned
	\$873,568.80		

+ Add Item

**If "other" selected as match source, please explain source.**

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

Yes

No

## Task cost and match information

Total project Cost	Match amount	Grant amount
\$1,989,000.00	\$873,568.80	\$1,115,431.20

+ Add operations service

## Environmental Review

### Federal funding/NEPA Applicability

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**Will the proposed project involve identified FTA funding? (Not including a grant from the 2027-29 5310 grant program) \***

Yes

No

## Project Scope

According to federal regulation, projects evaluated under NEPA must demonstrate "independent utility," meaning the project must be usable and be a reasonable expenditure even if no additional improvements are made in the area. This does not prohibit the construction of a project in phases.

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Yes

No

**Does the proposed project involve development of property or installation of equipment purchased through a separate project, including property or equipment purchased with state or local funds? \***

Yes

No

**Does the proposed project involve acquisition of property, equipment, or vehicles that will be developed, constructed, or installed as part of a separate project? \***

Yes

No

## Documentation Requirements

Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet. Would the project described include any of the following?

**Would the project described above include any of the following?**

- Final design activities – any design beyond 30%
- Property acquisition – includes, but is not limited to, purchase discussions with property owners that imply or are explicitly binding
- Purchase of construction materials – includes, but is not limited to, purchase of any materials used for the activities listed under the definition of project construction below
- Purchase of rolling stock
- Project construction – FTA definition includes construction, alteration, or repair (including dredging, excavating, and painting) of buildings, structures, or other real property; excludes the assembly, alteration, or repair of vessels or other kinds of personal property.

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

## NEPA Concurrence

**Has the FTA already provided NEPA concurrence for this project or components of this project? \***

Yes

No

Not Applicable

*Answer the following questions to help determine if the proposed project would require completion of FTA's CE Worksheet.*

## Indirect Costs

**Does the agency intend to charge any indirect cost to this project? \***

Yes

No

+ Add Project

## Application Totals

### Total Project Cost

\$2,289,443.00

### Total Match Amount

\$904,424.00

### Total Grant Amount

\$1,385,019.00

### Allocation Amount

\$1,385,018.00

## 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 "File Upload" fields.
- Electronically sign your application by using the pen icon. Type your name in the "Printed Name" section.
- Check the box for the certification statement.
- 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)

## Certification

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

2027-2029 5310 Federal Formula Grant---Rural Apportionment				
Project Name	Total Project Budget	Grant Amount (Federal)	Local Match	Match Source
Preventive Maintenance-RideAssist	\$41,088.00	\$32,870.40	\$8,217.60	State Transportation Improvement Fund (STIF)
Update Coordinated Plan	\$77,000.00	\$61,600.00	\$15,400.00	
Radios	\$16,000.00	\$12,800.00	\$3,200.00	State Transportation Improvement Fund (STIF)
Tire Machine/wheel balancer/air compressor	\$13,655.00	\$10,924.00	\$2,731.00	State Transportation Improvement Fund (STIF)
IT/laptops/cyber security/	\$26,000.00	\$20,800.00	\$5,200.00	State Transportation Improvement Fund (STIF)
<b>Total</b>	<b>\$173,743.00</b>	<b>\$138,996.00</b>	<b>\$34,748.60</b>	

2027-2029 5310 Federal Formula Grant---Surface Transportation Block Grant funding (STBG)				
Project Name	Project Budget	Grant Amount (Federal)	Local Match at 10.27%	Match Source
Preventive Maintenance-Fixed Route	\$55,435.00	\$49,741.00	\$5,693.00	State Transportation Improvement Fund (STIF)
Travel Mobility Planning	\$341,400.00	\$306,338.00	\$35,062.00	State Transportation Improvement Fund (STIF)
Total	\$396,835.00	\$356,081.00	\$40,755.00	

2027-2029 5311 Federal Formula Grant				
Project Name	Project Total	Grant Amount (Federal)	Local Match	Match Source
Administration (match 10.27%)	\$300,443.00	\$269,587.00	\$30,855.50	State Transportation Improvement Fund (STIF)
Operations (match 43.92%)	\$1,989,000.00	\$1,115,431.00	\$873,568.80	State Transportation Improvement Fund (STIF)
Total project budget	\$2,289,443.00	\$ 1,385,018.00	\$904,424.30	