

SECTION 5310 CRRSAA

Operating Assistance Application

Enhanced Mobility of Seniors and Individuals with
Disabilities Program /
Coronavirus Response and Relief Supplemental
Appropriations Act

Missouri Department of Transportation for
Federal Transit Administration
49 U.S.C.

SUBMISSION DEADLINE: MARCH 1, 2021

Completed applications may be emailed to
motransit@modot.mo.gov and in the subject line please indicate “5310
CRRSAA/Agency or Organization Name”

or fax to: 573-522-6460

For technical assistance or questions,
Please email motransit@modot.mo.gov with subject line
“5310 CRRSAA Question”

Revised February 2021

APPLICATION CHECKLIST

THE FOLLOWING MUST BE SIGNED AND INCLUDED WITH THIS APPLICATION

- _____ Completed Application
- _____ Certification: Authorizing Resolution
- _____ Certification: Local Governmental Authority
- _____ Certification: Title VI & Nondiscrimination
- _____ Certifications and Assurances
- _____ E-Verify - Memorandum of Understanding -Homeland Security
- _____ Worker Eligibility Verification Affidavit (Appendix B)
- _____ Letter from RPC(s), MPO'(s) included in a Human Service Transportation Coordination Plan
- _____ Certification of Good Standing with the State of Missouri

All agreements will be required to be processed through DocuSign - for electronic signature(s).

Print: **Name/Title** of the authorized official to sign (execute) the agreement - matching the authorizing resolution.

Print: **Email address** of the authorized official to sign (execute) the agreement.

Print: Name/Tile of authorized personnel to attest (if applicable)

Print: Email address of authorized personnel to attest

Application**Appendix A**

**Federal Transit Administration 49 U.S.C Section 5310
Enhanced Mobility of Seniors and Individuals with Disabilities / CRRSAA**

The CRRSAA Transportation Operating assistance is 100% funding with no local match requirement.

Legal Name of Organization	
	(As shown on the incorporation or charter documents)

List all other DBA names	

Street Address	
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Mailing Address	
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City		State		Zip + 4		County	
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Congressional District		RPC/MPO Plan	
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Executive Director		Phone	
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Grant Contact Person		Phone	
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Email		Fax	
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Federal Employer Identification Number (FEIN)			
DUNS Number			
Nonprofit Corporation Number (issued by the MO Secretary of State)			
Does applicant agency have a Title VI / Non-Discrimination Plan?	<input type="checkbox"/>		
If yes, Title VI/Nondiscrimination Plan approval date (mm/dd/yy):			
Our governing body (board of director, city council, etc.) is made up predominantly of minority and/or low-income individuals.	Yes	No	
Potential riders/clients of our transportation service will be predominantly minority and/or low-income individuals.	Yes	No	

Type of Agency (Senate Bill 40, Sheltered Workshop, Senior Center, etc.)		
Service Area (Cities and Counties)		
Description of Transportation Service Provided in Relationship to this operating project request (including days and hours of operation, geographic area of service and the type of clientele and how vehicle or equipment will be used to support the mobility service for seniors and / or individuals with		

Agency Request for Operating Assistance: \$ _____

Total Operating Expenses for **Calendar Year 2020**: \$ _____

Number of one-way trips for **Calendar Year 2020**: _____

With limited federal funds available, please describe the **need** for operating assistance:

(If additional lines are needed, please attach a second page)

Human Service Transportation Coordination Plan.

Projects selected for funding under Section 5310 must be included in a locally developed coordinated public transit-human services transportation plan.

Recipients must certify that: (1) projects selected for funding under Section 5310 program are included in a locally developed, coordinated public transit-human services transportation plan; and, (2) that the plan was developed and approved through a process that included participation by seniors; individuals with disability; representatives of public, private, not profit transportation of human services.

Plans must contain:

- An assessment of available services that identifies current transportation providers - public, private and nonprofit.
- An assessment of transportation needs of individuals with disabilities and seniors, older adults and people with low incomes.
- Strategies, activation, and/or projects to address the identified gaps between current services and needs, as well as opportunities to improve efficiencies in service delivery.
- Priorities for implementation based on resources (from multiple program sources), time, and feasibility for implementing specific strategies and/or activities identified.

As evidence, include a letter from the appropriate planning agency or agencies, (RPC's), (MPO's), for the proposed service area.

AUTHORIZING RESOLUTION

WHEREAS, the Missouri Department of Transportation is authorized to make grants for elderly and handicapped transportation projects; and,

NOW, THEREFORE, be it resolved by the _____
(Name of Organization)

That the _____ is authorized to execute
(Title of Authorized Individual)

The Agreement(s) on behalf of the _____ : with
the Missouri _____
(Name of Organization)

Highways and Transportation Commission for financial assistance through the Missouri Elderly and Handicapped Transportation Assistance Program.

Adopted this _____ day of _____, 20_____.

Signature _____

Typed Name _____

Title _____
Authorized Official

ATTEST

Name Title

This resolution allows the authorized individual to sign the agreement without further action by the Board.

LOCAL GOVERNMENTAL AUTHORITY CERTIFICATION

(For Government Entities Only)

For governmental entities to be eligible for the "Operating" CRRSAA funding, the state or local government authority needs to be approved by the State to coordinate services for seniors and individuals with disabilities or certify that there are no non-profit organizations readily available in the area to provide the service. See 49 U.S.C. 5310(b)(1) and (b)(2).

As the authorized representative of _____, I certify that:

Our agency is approved by the State to coordinate services for seniors and individuals with disabilities.

OR

There are no non-profit organizations readily available in the area to provide the service.

Name (print): _____

Signature: _____

Title: _____

Date: _____

I

TITLE VI & NONDISCRIMINATION CERTIFICATION

Title VI

A recipient of any federal funds from the U.S. Department of Transportation ("DOT") must comply with federal statutes, regulations, executive orders, and other pertinent directives that govern nondiscrimination in federally assisted programs. Below is a list of the statutes and regulations that may apply to a recipient's program; however, other federal requirements regarding nondiscrimination may be imposed by DOT.

- A. Title VI of the Civil Rights Act of 1964, 78 Stat. 252, 42 U.S.C. §§ 2000d *et seq.*
- B. All requirements imposed by or pursuant to the Code of Federal Regulations, Title 49: Transportation, Subtitle A: Office of the Secretary of Transportation, Part 21: *Nondiscrimination in Federally-Assisted Programs of the Department of Transportation --Effectuation of Title VI of the Civil Rights Act of 1964.*

As part of federal requirements, a recipient of funds from DOT must ensure that it has written policies and procedures in place to ensure nondiscrimination in its programs, up to and including, developing a Title VI Plan.

Nondiscrimination

A recipient of any federal funds from DOT must also comply with federal statutes, regulations, executive orders, and other pertinent directives that govern nondiscrimination in federally assisted programs, including those related to equal employment opportunity and disadvantaged business enterprise participation in federally projects. Below is a list of the statutes and regulations that may apply to a recipient's program; however, other federal requirements regarding nondiscrimination may be imposed by DOT.

- A. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C. § 2000d, and implementing regulations at 49 CFR Part 21 - *Nondiscrimination in Federally Assisted Programs of the Department of Transportation --Effectuation of Title VI of the Civil Rights Act.*
- B. The equal employment opportunity provisions of 49 U.S.C. § 5332 and Title VII of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000e *et seq.*, and implementing regulations, including:
 - 1. 41 CFR Part 60 - *Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor.*
- C. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. §§ 1681 *et seq.*, and implementing regulations at 49 CFR Part 25 - *Nondiscrimination on the Basis of Sex in Education Programs or Activities Receiving Federal Financial Assistance.*

- D. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794, and the Americans with Disabilities Act of 1990, as amended, 42 U.S.C. §§ 12101 *et seq.*, and implementing regulations, including:
1. 49 CFR Part 37 -- *Transportation Services for Individuals with Disabilities (ADA)*.
 2. 49 CFR Part 27 -- *Nondiscrimination on the Basis of Handicap in Programs and Activities Receiving or Benefiting from Federal Financial Assistance*.
 3. 36 CFR Part 1192 and 49 CFR Part 38 -- *Americans with Disabilities (ADA) Accessibility Specifications for Transportation Vehicles*.
 4. 28 CFR Part 35 -- *Nondiscrimination on the Basis of Disability in State and Local Government Services*.
 5. 28 CFR Part 36 -- *Nondiscrimination on the Basis of Disability by Public Accommodations and in Commercial Facilities*.
 6. 41 CFR Subpart 101 - 119 -- *Accommodations for the Physically Handicapped*.
 7. 29 CFR Part 1630 -- *Regulations to Implement the Equal Employment Provisions of the Americans with Disabilities Act*.
 8. CFR Part 64, Subpart F -- *Telecommunications Relay Services and Related Customer Premises Equipment for the Hearing and Speech Disabled*.
 9. 36 CFR Part 1194 -- *Electronic and Information Technology Accessibility Standards*.
 10. Federal civil rights and nondiscrimination directives implementing those federal laws and regulations, unless the federal government determines otherwise in writing.
- E. The Age Discrimination Act of 1975, as amended, 42 U.S.C. §§ 6101 *et seq.*, and implementing regulations at 49 CFR Part 90 - *Nondiscrimination on the Basis of Age in Programs or Activities Receiving Federal Financial Assistance*.
- F. The Age Discrimination in Employment Act, 29 U.S.C. §§ 621 through 634, and implement regulations of the U.S. Equal Employment Opportunity Commission 29 CFR Part 1625 -- *Age Discrimination in Employment Act*.
- G. The Drug Abuse Office and Treatment Act of 1972, as amended, 21 U.S.C. §§ 1101 *et seq.*, the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970, as amended, 42 U.S.C. §§ 4541 *et seq.*, and the Public Health Service Act of 1912, as amended, 42 U.S.C. §§ 290dd through 290dd-2.
- H. Executive Order 12898 --Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations, 42 U.S.C. § 4321 note, and DOT Order 5620.3 at Federal Register Vol. 62 No. 18377 -- *Department of Transportation Actions to Address Environmental Justice in Minority Populations and Low-Income Populations*.

- I. Executive Order 13166 - Improving Access to Services for Persons with Limited English Proficiency, 42 U.S.C. § 2000d – 1 note, and implementing policy guidance at Federal Register Vol. 70 No. 74087 -- *DOT Policy Guidance Concerning Recipients' Responsibilities to Limited English Proficiency (LEP) Persons*.

By submitting its application for 5310 CRRSAA Program funds and signing below, the applicant certifies that it has reviewed the federal requirements regarding nondiscrimination in federally assisted programs and believes that it complies with the required policies and procedures. Also, the applicant acknowledges its understanding that if the applicant does not have the required policies and procedures in place prior to federal funds being obligated, then the applicant's project may become ineligible for federal funding.

Name (print): _____

Signature: _____

Title: _____

Date: _____

**FEDERAL FISCAL YEAR 2021 CERTIFICATIONS AND ASSURANCES
FOR FEDERAL TRANSIT ADMINISTRATION ASSISTANCE PROGRAMS**

Name of Applicant: _____

The Applicant agrees to have **read and comply** with the applicable provisions of Categories 01-21 located in the following link:

<https://www.transit.dot.gov/funding/grantee-resources/certifications-and-assurances/certifications-assurances>

Category	Description	5310	(initial)
01.	Required Certifications and Assurances for Each Applicant.	X	
02.	Lobbying.	X	
03.	Private Sector Protections (only if non-profit agency).	X	
04.	Rolling Stock Reviews and Bus Testing.	X	
05.	Demand Responsive Service.	X	
06.	Intelligent Transportation Systems.	X	
07.	Interest and Financing Costs and Acquisition of Capital Assets by Lease.	n/a	
08.	Transit Asset Management Plan, Public Transportation Agency Safety Program, and State Safety Oversight Requirements.	n/a	
09.	Alcohol and Controlled Substances Testing.	X	
10.	Fixed Guideway Capital Investment Grants Program (New Starts, Small Starts, and Core Improvement).	n/a	
11.	State of Good Repair Program.	n/a	
12.	Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs.	n/a	
13.	Urbanized Area Formula Grants Programs and Passenger Ferry Grant Program.	n/a	
14.	Enhanced Mobility of Seniors and Individuals with Disabilities Programs.	X	
15.	Rural Areas and Appalachian Development Programs.	n/a	
16.	Tribal Transit Programs (Public Transportation on Indian Reservations Programs).	n/a	
17.	State Safety Oversight Grant Program.	n/a	
18.	Public Transportation Emergency Relief Program.	n/a	
19.	Expedited Project Delivery Pilot Program.	n/a	
20.	Infrastructure Finance Programs.	n/a	
21.	Construction Hiring Preferences.	n/a	

FTA FISCAL YEAR 2021 CERTIFICATIONS AND ASSURANCES

FEDERAL FISCAL YEAR 2021 FTA CERTIFICATIONS AND ASSURANCES SIGNATURE PAGE

(Required of all Applicants for federal assistance to be awarded by FTA in FY 2021)

AFFIRMATION OF APPLICANT

Name of the Applicant: _____

Name and Relationship of the Authorized Representative: _____

BY SIGNING BELOW, on behalf of the Applicant, I declare that it has duly authorized me to make these Certifications and Assurances and bind its compliance. Thus, it agrees to comply with all federal laws, regulations, and requirements, follow applicable federal guidance, and comply with the Certifications and Assurances as indicated on the foregoing page applicable to each application its Authorized Representative makes to the Federal Transit Administration (FTA) in federal fiscal year 2021, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent it.

FTA intends that the Certifications and Assurances the Applicant selects on the other side of this document should apply to each Award for which it now seeks or may later seek federal assistance to be awarded by FTA during federal fiscal year 2021.

The Applicant affirms the truthfulness and accuracy of the Certifications and Assurances it has selected in the statements submitted with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. § 3801 *et seq.*, and implementing **U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31**, apply to any certification, assurance or submission made to FTA. The criminal provisions of 18 U.S.C. § 1001 apply to any certification, assurance, or submission made in connection with a federal public transportation program authorized by 49 U.S.C. chapter 53 or any other statute.

In signing this document, I declare under penalties of perjury that the foregoing Certifications and Assurances, and any other statements made by me on behalf of the Applicant are true and accurate.

Signature: _____ Date: _____

Name: _____

Authorized Representative of Applicant

AFFIRMATION OF APPLICANT'S ATTORNEY

For (Name of Applicant): _____

As the undersigned Attorney for the above-named Applicant, I hereby affirm to the Applicant that it has authority under state, local, or tribal government law, as applicable, to make and comply with the Certifications and Assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the Certifications and Assurances have been legally made and constitute legal and binding obligations on it.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these Certifications and Assurances, or of the performance of its FTA assisted Award.

Signature: _____ Date: _____

Name: _____

Attorney for Applicant

Each Applicant for federal assistance to be awarded by FTA and each FTA Recipient with an active Capital or Formula Project or Award must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its electronic signature in lieu of the Attorney's signature within FTA's electronic award and management system, provided the Applicant has on file and uploaded to FTA's electronic award and management system this hard-copy Affirmation, signed by the attorney and dated this federal fiscal year.

WORKER ELIGIBILITY VERIFICATION AFFIDAVIT

STATE OF _____)
) ss
 COUNTY OF _____)

On this _____ day of _____, 20____, before me appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be a person whose name is subscribed to this affidavit, who being by me duly sworn, deposed as follows:

My name is _____, and I am of sound mind, capable of making this affidavit, and personally certify the facts herein stated, as required by Section 285.530, RSMo, to enter into any contract agreement with the state to perform any job, task, employment, labor, personal services, or any other activity for which compensation is provided, expected, or due, including but not limited to all activities conducted by business entities:

I am the _____ of _____, and I am duly authorized, directed, and/or empowered to act officially and properly on behalf of this business entity.

I hereby affirm and warrant that the aforementioned business entity is enrolled in a federal work authorization program operated by the United States Department of Homeland Security, and the aforementioned business entity shall participate in said program to verify information (employment eligibility) of newly hired employees working in connection to work under the within state contract agreement with the Missouri Highways and Transportation Commission (MHTC). I have attached documentation to this affidavit to evidence enrollment/participation by the aforementioned business entity in a federal work authorization program, as required by Section 285.530, RSMo.

In addition, I hereby affirm and warrant that the aforementioned business entity does not and shall not knowingly employ, in connection to work under the within state contract agreement with MHTC, any alien who does not have the legal right or authorization under federal law to work in the United States, as defined in 8 U.S.C. § 1324a(h)(3).

I am aware and recognize that, unless certain contract and affidavit conditions are satisfied pursuant to Section 285.530, RSMo, the aforementioned business entity may be held liable under Sections 285.525 through 285.550, RSMo, for subcontractors that knowingly employ or continue to employ any unauthorized alien to work within the state of Missouri.

I acknowledge that I am signing this affidavit as a free act and deed of the aforementioned business entity and not under duress.

 Affiant Signature

Subscribed and sworn to before me this _____ day of _____, 20____.

 Notary Public

My commission expires:

[Documentation of enrollment/participation in a federal work authorization program is attached. Acceptable enrollment and participation documentation consists of the following two pages of the E-Verify Memorandum of Understanding: (1) A valid, completed copy of the first page identifying the business entity; and (2) A valid copy of the signature page completed and signed by the business entity, the Social Security Administration, and the Department of Homeland Security – Verification Division.]