

APPENDIX C. ANNUAL CLAIM FORMS CHECKLIST FOR ANNUAL LTF & STAF CLAIMS

■ **ALL Claims:** Claimants shall submit items (a) through (e) as part of the claim.

■ **Transit Claims:** An operator or claimant shall submit items (a) thru (i), inclusive, to file a claim.

ALL claims must include items (a) through (e), inclusive.

HCAOG forms for parts (a), (b), and (c) are provided in this Excel file and on-line at www.hcaog.net.

Claimants are responsible for making sure they submit the most current forms.

- a) This Checklist
- b) Claim Request form
- c) Annual Project and Financial Plan form
- d) Statement of Conformance
- e) Claimants who want to designate funds for a future, specific capital project must request it as part of a claim. The claim must indicate any reserved monies in the subsequent annual claim(s). Before expending these funds for any other purpose, the claimant must identify its proposed changes in an amended claim or subsequent annual claim. [CCR §6648]
- f) If not submitted previously, claimants must submit a complete and accurate record of STA expenditures from the 2009/10 fiscal year to present, citing actual vs. budgeted expenditures and a report of excess LTF funds reclassified for future capital purchases. [CCR §6637]

Transit claims must include items (g) through (m):

- g) To receive an allocation of funds for service outside the claimant's area, a claimant must provide, or have on file with HCAOG, an executed contract pursuant to PUC sections:
- h) If applicable, a statement identifying and substantiating the reason or need for: (1) increasing the operating budget in excess of 15% above the preceding year; (2) a substantial increase or decrease in scope of operations; or (3) capital provisions for major new fixed facilities.
- i) A Satisfactory certification by CHP verifying that the operator is in compliance with §1808.1 of the Vehicle Code, as required in PUC §99251. The certification shall have been completed within the last 13 months, prior to filing claims.
- j) Operating budget. Claimant certifies that its operating budget is not more than 15% greater than its previous year budget unless supported by documentation that substantiates the increase.
- k) An explanation that summarizes how the claimant has addressed applicable audit findings from annual fiscal and compliance audit.
- l) An explanation that summarizes how the claimant has addressed applicable audit findings from triennial performance audit reports.
- m) Claimant certifies that it is making full use of federal funds available under the Federal Transit Act [CCR 6754] (STA claims only)

- n) Claimant certifies that all purposes for claim expenditures are in conformance with the City/Town or Regional Bicycle Plan. (Bike and Ped claims only)

For full information on claim requirements, see HCAOG's TDA Rules (part IV, "TDA REQUIRED REPORTS" Report #16).

CLAIM REQUEST

Check one:

State Transit Assistance (STA) Fund

Local Transportation Fund (LTF)

Claimant: County of Humboldt
Address: 1106 2nd Street, Eureka, CA 95501
Contact Person: Charlotte Merkel
Title: Deputy Public Works Director General Service
Phone: (707) 268-2683
E-mail: cmerkel@co.humboldt.ca.us

The County of Humboldt hereby requests, in accordance with the Transportation Development Act (TDA) of 2013, Chapter 1400, and applicable rules and regulations, that the TDA claim be approved in the amount of \$2,635,838 for fiscal year 2019/2020. These monies are to be drawn from the local transportation fund or the state transit assistant fund held at the County of Humboldt for the purposes and amounts shown in the attached "Annual Project and Financial Plan."

When approved, the claim will be submitted to the County Auditor of the County of Humboldt for payment. Approval of the claim and payment by the County Auditor to this applicant is subject to such monies being on hand and available for distribution, and to the provisions that such monies will be used only in accordance with the terms of the approved annual financial plan.

Authorized representative of claimant:

By: _____
(print name)

Title:

Signature: _____ Submittal date: _____

APPROVED:

By: _____ Date: _____
Marcella Clem
Executive Director, Humboldt County Association of Governments

ANNUAL PROJECT AND FINANCIAL PLAN
Local Transportation Fund (LTF)

Give each project a title and number in sequence, and briefly describe the transportation projects that your jurisdiction proposes. Indicate proposed expenditures for the ensuing fiscal year for all that apply:

- (i) public transportation operating and capital expenditures;
- (ii) construction of facilities for the exclusive use by pedestrians and bicyclists;
- (iii) construction of local streets and roads; and/or
- (iii) right-of-way acquisition.

Claimant: County of Humboldt

Fiscal Year: 2019/2020

PROJECT (Project number, title, & brief description)	TDA - LTF \$ amount	PUC Article & Section	Local Fund Balance	Other	TOTAL
Redwood Transit System	\$ 808,348	Article 4; 99260(a)	\$ -		\$ 808,348
Eureka Transit System	\$ 147,675	Article 4; 99260(a)	\$ -		\$ 147,675
Eureka Dial-A-Ride	\$ 79,439	Article 4; 99260.7			\$ 79,439
Southern Humboldt Intercity	\$ 556,906	Article 4; 99260(a)			\$ 556,906
Arcata/McKinleyville Dial-A-Ride	\$ 65,765	Article 4; 99260.7			\$ 65,765
Adult Day Health Care - Mad River	\$ 41,162	Article 8; 99400©			\$ 41,162
Humboldt Senior Resource Center	\$ 47,687	Article 8; 99400©			\$ 47,687
Willow Creek Extension Route	\$ 272,698	Article 4; 99260(a)			\$ 272,698
Transit-Set-Aside	\$ 200,000	Article 4; 99260(a)			\$ 200,000
Klamath-Trinity Non-Emer Transportation	\$ 108,325	Article 8; 99400©			\$ 108,325
Tish-Non Village	\$ -	Article 4; 99260(a)			\$ -
Old Arcata Road	\$ 10,000	Article 4; 99260(a)			\$ 10,000
Bicycle & Trailways	\$ 65,000	Article 8; 99400(a)			\$ 65,000
County Road Maintenance	\$ 232,833	Article 8; 99402			\$ 232,833
	\$ -		\$ -		\$ -
Reserve for Unmet Transit Needs (Fund 3870)	\$ -		\$ -		\$ -
TOTAL	\$ 2,635,838		\$ -		\$ 2,635,838

Attach a copy of transit revenues and expenditures for the last full fiscal year.

STATEMENT OF CONFORMANCE

LTF

Claimant: County of Humboldt

Fiscal Year of Claim: 2019/2020

Certify all that apply.

-
-
-

LOCAL TRANSPORTATION FUND (LTF) - TRANSIT CLAIM

LTF funds are **not** being used for operating

LTF FUNDS are being used for operating

A total of \$ _____ STA funds will also be claimed for operating during this fiscal year.

If funds are being used for Operating please provide the following information:

Provide information for the last 3 audited fiscal years.

System Operating Costs
 System Revenues
 System Vehicle Service Hours
 System operating cost per revenue vehicle hour

	Previous Fiscal year	Fiscal year	Fiscal year	Fiscal year
System Operating Costs				
System Revenues				
System Vehicle Service Hours				
System operating cost per revenue vehicle hour	\$ -	\$ -	\$ -	\$ -

The claimant named above hereby certifies that this annual claim for local transportation funds in the amount of \$ _____ that is not being used for operating conforms with the requirements of Article 8, PUC Section 99400, of the Transportation Development Act of 1971, and applicable rules and regulations.

CERTIFIED BY CLAIMANT:

By: Thomas K. Mattson

Title: Director

Signature: [Handwritten Signature]

Date: 6/12/19