

## **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](http://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](mailto: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 \$2,553,411 for fiscal year 2020/2021. 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: 2020/2021** \_\_\_\_\_

PROJECT (Project number, title, & brief description)	TDA - LTF \$ amount	PUC Article & Section	Local Fund Balance	Other	TOTAL
Redwood Transit System	\$ 824,525	Article 4; 99260(a)	\$ -		\$ 824,525
Eureka Transit System	\$ 164,277	Article 4; 99260(a)	\$ -		\$ 164,277
Eureka Dial-A-Ride	\$ 79,438	Article 4; 99260.7			\$ 79,438
Southern Humboldt Intercity	\$ 573,614	Article 4; 99260(a)	\$ -		\$ 573,614
Arcata/McKinleyville Dial-A-Ride	\$ 65,765	Article 4; 99260.7	\$ -		\$ 65,765
Adult Day Health Care - Mad River	\$ 41,779	Article 8; 99400©	\$ -		\$ 41,779
Humboldt Senior Resource Center	\$ 48,402	Article 8; 99400©	\$ -		\$ 48,402
Willow Creek Extension Route	\$ 278,152	Article 4; 99260(a)	\$ -		\$ 278,152
Transit-Set-Aside	\$ 200,000	Article 4; 99260(a)	\$ -		\$ 200,000
Klamath-Trinity Non-Emer Transportation	\$ 109,950	Article 8; 99400©	\$ -		\$ 109,950
Old Arcata Road	\$ 10,000	Article 4; 99260(a)	\$ -		\$ 10,000
Bicycle & Trailways	\$ 65,000	Article 8; 99400(a)			\$ 65,000
County Road Maintenance	\$ 92,509	Article 8; 99402			\$ 418,651
	\$ -		\$ -		\$ -
Reserve for Unmet Transit Needs (Fund 3870)			\$ -		\$ -
<b>TOTAL</b>	<b>\$ 2,553,411</b>		<b>\$ -</b>	<b>-</b>	<b>\$ 2,553,411</b>

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