



ANNUAL APPLICATION FOR FUNDING

AGENCY NAME:

STATE FISCAL YEAR: ▼

Select 5311 or SMTF: ▼

PROJECT INFORMATION

APPLICATION PART 1:

Agency Legal Name	<input type="text" value="City of Rock Hill"/>
<i>Doing Business As:</i>	<input type="text"/>
<i>Federal Tax ID Number:</i>	<input type="text" value="57-6000244"/>
<i>DUNS:</i>	<input type="text" value="05-237-8346"/>
<i>SCEIS Vendor ID:</i>	<input type="text" value="7000030009"/>
<i>Congressional District:</i>	<input type="text" value="5th"/>
<i>COG Region (all applicants):</i>	<input type="text" value="Catawba"/>
<i>MPO Region (urban applicants):</i>	<input type="text" value="Rock Hill - Fort Mill Area Transportation Study RFATS"/>
<i>Web Site Address (if available):</i>	<input type="text" value="http://www.cityofrockhill.com"/>
<i>Board Chair's Name:</i>	<input type="text" value="John Gettys (Mayor)"/>
<i>Authorized Official's Name:</i>	<input type="text" value="David B. Vehaun"/>
<i>Title:</i>	<input type="text" value="City Manager"/>
<i>E-mail:</i>	<input type="text" value="david.vehaun@cityofrockhill.com"/>
<i>Administration Physical Address:</i>	<input type="text" value="155 Johnston Street Rock Hill SC 29731"/>
<i>Operations Physical Address:</i>	<input type="text"/>

2. Agency Type:

- Regional Transit Authority
- Private Non-Profit
- Public Non-Profit
- County City Tribal government or community
- Other Agency (Specify):

APPLICATION PART 2: NARRATIVE DESCRIPTION OF SYSTEM

(Attach any support documents/materials at the end of this application)

This part of the application is divided into several sections, each covering a different aspect of your system and its management. Applicants are urged to provide thorough but concise answers to the questions.

ORGANIZATION

1. Provide a brief description of your agency’s primary mission, including a mission statement if available.

The City of Rock Hill Planning and Development Department provides administrative and technical services in support of transit service planning and operational/compliance oversight within the Rock Hill Urbanized Area. In this capacity, the City of Rock Hill is the direct small urbanized area grantee that receives, coordinates, and implements federal, state, and local transit planning.

2. Year that your agency started providing general public transit services:

2001

3. Number of Transit Employees:

complete Transit Employee FTE Salary/Wage Detail in Part 3 of this application

Administration:

Operations:

Maintenance:

Planning/Tech Assistance:

4. List all subcontracts that are currently in effect:

All subcontractors must be registered in SAM.GOV – refer to Part 5 of this application for more information

Vendor/Purpose	Contract Start Date	Contract End Date	Contract Options
<i>Example: Quick Transit Co / Operations</i>	<i>July 1, 2012</i>	<i>July 1, 2015</i>	<i>(number)</i>
			<i>2-1 year options</i>
York County Council on Ag	7/1/2019	6/30/2020	3-1 year options
Charlotte Area Transit Syst	7/1/2019	6/30/2020	4- 1 year options

Insert item

SYSTEM DESCRIPTION

1. Modes of Service – check all that apply

(reference NTD Glossary: <http://www.ntdprogram.gov/ntdprogram/Glossary.htm>)

- Fixed Route
- Intercity Bus
- Ferry Boat
- Other (Describe):
- Deviated Fixed Route
- Commuter
- Taxi
- Demand Response
- Vanpool
- Bus Rapid Transit

2. If your system includes fixed routes,

how do you meet the ADA paratransit requirements? If the bus routes deviate from normal route to serve ADA passengers, how far will they deviate?

The City of Rock Hill will operate a fixed route system during FY 19-20 however, no SMTF funds will be used to fund this service. A complementary paratransit service will be provided once the fixed route service is implemented and will service the area within 3/4 miles of the fixed route.

3. Service Options – check all that apply

- General Public
- Medicaid/Medicaid Brokerage
- Sponsored Human Service (Not Medicaid)
- Non-Sponsored (in-house) Human Service (Not Medicaid)
- Employment/Work-related
- ADA Complimentary Paratransit
- Other (Describe):

4. Current days and hours of operation:

- Monday Hours:
- Tuesday Hours:
- Wednesday Hours:
- Thursday Hours:
- Friday Hours:
- Saturday Hours:
- Sunday Hours:

5. How many square miles are in your service area?

6. Counties Served (list all)

County Name

Insert item

7. Cities Served (list all)

City Name

Insert item

8. Describe your fare structure for each mode of service. State if no fare is charged.

Express Commuter Bus Route: \$4.40 for a one-way trip (effective July 1, 2014); discounts available for seniors and children.

Demand Response: \$2.50 for a one-way trip for both the Essential Services (Basic Mobility) and Peak Period (Employment) routes.

9. Does your system connect with other modes of transportation? For example, urban public transit services, other rural providers, other human service providers, airports, park-and-ride lots, or intercity bus stations?

Yes No

If yes, describe:

The Express Bus Route (CATS 82X) picks up riders throughout the Rock Hill Urbanized Area and carries passengers to the Charlotte Transportation Center where riders can transition to other regional services as appropriate.

10. Does your agency use public transit vehicles to provide incidental service such as meal delivery or other non-transit services?

Yes No

If yes, describe:

11. Are requested trips or reservations ever denied?

Yes No

If yes, please generally describe why denied and how tracked:

Occasionally, ridership interest on the Demand Response service exceeds the approved budget during the fiscal year. If this occurs, trips or reservations may be denied and is part of the consideration when budgeting for following years.

How many trips were denied last state fiscal year?

12. Is your system planning to either:

- Maintain the same level of service as last year
 Change the level of service

If your system is proposing to change services – changing routes, increasing or decreasing service - please describe the changes and why they are proposed.

We will maintain the same level of service for FY 19-20

13. Will service changes be published for public comment and approved by your Governing Board prior to adoption?

Yes No

ESTIMATED LEVEL SERVICE FOR APPLICATION

Estimate each Service Option: Passenger Trips, Revenue Hours and Revenue Miles for the application SFY:

	Passenger Trips	Revenue Hours	Revenue Miles
General Public			
Medicaid/Medicaid Brokerage			
Sponsored Human Service (Not Medicaid)			
Non-Sponsored (in-house) Human Service (Not Medicaid)			
Employment/Work-related			
ADA Complimentary Paratransit			
Other (Describe):			
Commuter Bus Service	34000	2080	62400
Other (Describe):	16400	9000	133000
Demand Response			

14. Scope of Service

Please describe a detailed summary of services that will be provided during the project fiscal year. Describe any proposed service expansion and planned capital purchases by line item. Note: This scope will be used in the subrecipient subcontract agreement.

• Service Area:

(1) CATS 82X Commuter Bus Service (known as the Rock Hill Express), is operated by the Charlotte Area Transit System through an interlocal agreement with the City of Rock Hill. This route provides express bus service from Downtown Rock Hill to the Charlotte Transportation Center, with established park-n-ride lots in Downtown Rock Hill, Manchester Village as well as Baxter Village along the way to the Charlotte Transportation Center. This service is available Monday through Friday during the morning and evening peak periods. The fare to use this service is \$4.40 for a one-way trip; discounts are available for children and seniors. City of Rock Hill staff provides project administration, performance monitoring, and administration / financial management.

(2) Demand Response Program (known as York County Access), is operated by the York County Council on Aging. This route provides area

APPLICATION PART 3: FINANCIAL MANAGEMENT / SUPPORTING BUDGET INFORMATION

FINANCIAL MANAGEMENT

1. How is the budget monitored for the organization’s transit program budget?

The City actively monitors the transit program budget by reviewing monthly invoice demand and projecting an annual usage level through the entire fiscal year. This approach is designed to ensure that emerging changes in service demand are immediately noted and tracked to ensure that budgetary resources remain in balance at all times.

2. Within your organization, what is the position with overall responsibility to monitor revenues, expenditures and adjustments?

The City's Transportation Manager is thoroughly involved with budget and service development, performance monitoring, and undertaking supplemental budget requests and / or service adjustments as appropriate

3. Name the financial system/accounting system your agency uses including the system modules utilized:

Cayenta

4. List All Federal or State Funds projected to support transit activities for this state fiscal application year (list DOT and Non-DOT funds):

- Urbanized Area Transit Program (Section 5307)
- Rural Transit Program (Section 5311)
- Rural Transit Program JARC (Section 5311 – JARC)
- State Mass Transit Funds (Match for 5307 or Other project w/no federal funds)
- Bus & Bus Facilities Program – Rural (Section 5339)
- Bus & Bus Facilities Program – Small Urban (Section 5339)
- Enhanced Mobility of Seniors & Individuals w/Disabilities – Rural (Section 5310)
- Enhanced Mobility of Seniors & Individuals w/Disabilities – Small Urban (5310)
- Enhanced Mobility NEW FREEDOM Program – Rural (Section 5310 NF)
- Enhanced Mobility NEW FREEDOM Program – Small Urban (Section 5310 NF)

Other (Specify):

APPLICATION PART 4: SUPPORTING DOCUMENTATION

The following documents are to be submitted with your application.

- Board Membership List
- Copy of Public Hearing
- Title VI Program Report
- Surface Public Transportation Providers and Labor Representation
- Asset Management and Property Inventory

List your Board Membership:

City of Rock Hill- City Council

Agency/System Name

<i>Member Name</i>	<i>Title</i>	Employing Agency/ Organization (or Citizen Rep)	<i>Street Address</i>	<i>City/State/ZIP</i>	<i>Phone</i>	<i>E-mail</i>	Board Position (If Applicable)
<i>Example: Joseph Grey</i>	<i>Director</i>	<i>Economic Dev. Commission</i>	<i>123 Spruce Street</i>	<i>Ourtown, SC</i>	<i>(999) 999-9999</i>	<i>jgrey@net.com</i>	<i>Chair</i>
John Gettys	Mayor	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7011	john.gettys@city	Chair
Sandra Oborokumo	Council	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7016	sandra.oborokun	
Kathy Pender	Council	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7016	kathy.pender@ci	
Kevin Sutton	Council	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7016	kevin.sutton@cit	
John A. Black III	Council	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7016	john.black@cityc	
Nikita Jackson	Council	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7016	nikita.jackson@c	
Jim Reno	Council	City of Rock Hill	155 Johnston St	Rock Hill, SC	803-329-7016	jim.reno@cityofr	

2. Describe the Board's role in the decision-making processes and in supporting transit services?

City Council provides both budgetary approval and strategic direction to transit service planning within the Rock Hill Urbanized Area. Specifically, City Council reviews operational data on existing services as well as evaluates staff recommendations to continue and/or initiate new service offerings

Public Hearing Minutes

DATE:	<input type="text"/>
PLACE:	<input type="text"/>
SUBJECT:	<input type="text"/>
BOARD MEMBERS:	<input type="text"/>
PUBLIC:	<input type="text"/>

No Public Hearing Requested.

OR

Minutes of Public Hearing attached

Attach a copy of the Public Hearing Minutes

 [Click here to attach a file](#)

Save

Cancel

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