

Mail PO Box 5310 Stateline, NV 89449-5310 Location 128 Market Street Stateline, NV 89449 Contact

Phone: 775-588-4547 Fax: 775-588-4527 www.trpa.org

TRANSPORTATION DEVELOPMENT ACT CLAIM CHECKLIST

Please check the following items as being either included with the attached TDA claim packet or on file with TRPA. TDA-I through TDA-V are included in this packet and must be filled out annually by claimants.

| ITEM | ATTACHED | ON FILE |
|--|----------|---------|
| TDA-I Annual Transportation Development Act Claim | | N/A |
| TDA-II Annual Claim Form and Financial Plan (for fiscal year of this claim and the prior fiscal year) | | N/A |
| TDA-III Status of Prior Year Funding for Projects (including prior year transit operations, capital, and State of Good Repair projects) | | N/A |
| TDA-IV Productivity Improvement Progress Report | | N/A |
| TDA-V Standard Assurances Conformance Certification | | N/A |
| TDA-VI Claim Certification | | N/A |
| Resolution by governing body that authorizes filing of claim | | |
| CHP Safety Compliance Report (completed within the last 13 months) | | |
| List of projects proposed to be funded with SGR funds | | |
| Adopted or proposed budget for the fiscal year of the claim | | |
| Statement certifying compliance with PUC section 99155 and 99155.5 | | |
| STA Operator Qualifying Criteria calculation based on PUC section 99314.6 | | |
| Online Operations Report for Productivity Improvement Program found here: https://monitoring.laketahoeinfo.org/Transit | N/A | |

TDA-I ANNUAL TRANSPORTATION DEVELOPMENT ACT CLAIM

TRPA Transportation Department Tahoe Regional Planning Agency MAIL TO:

PO Box 5310

Stateline, NV 89449-5310

| CLAIMANT: | |
|---|---|
| ADDRESS: | |
| CITY/ZIP CODE: | |
| CONTACT NAME: | CONTACT NUMBER: |
| | accordance with authority granted under the oplicable rules and regulations adopted by the TRPA, that ollows: |
| Include Article and requested fu Repair (SGR) funds should be inc | and amount (\$) on each line. Requests for State of Good Cluded under STA. |
| LOCAL TRANSPORTATION FUND (LTF): Specify PUC Article 4, 4.5, or 8 | |
| | (FY) |
| | (FY/) |
| | (FY) |
| STATE TRANSIT ASSISTANCE (STA): | |
| | (FY/) |
| | (FY/) |
| | (FY) |
| SUBMITTED BY: | DATE: |

TDA-II ANNUAL CLAIM FORM AND FINANCIAL PLAN

Briefly describe all proposed projects and indicate proposed expenditures by your agency for the ensuing fiscal year for purposes related to public transportation operations, capital, and State of Good Repair. Provide each project a title and include its number as listed in the EIP/Transportation tracker: https://eip.laketahoeinfo.org/. (Use additional forms as necessary).

| CLAIMANT: | FISCAL YEAR: | |
|----------------------|--------------|--|
| | | |
| Project Description: | | |
| | | |
| | | |
| Project Cost: | | |
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| | | |
| Source of Funds: | | |
| | | |
| | | |
| | | |
| Project Description: | | |
| Project Description. | | |
| | | |
| Project Cost: | | |
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| | | |
| Source of Funds: | | |
| Source of Furias: | | |
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| | | |
| Project Description: | | |
| | | |
| Project Cost: | | |
| 1 Toject cost. | | |
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| Source of Funds: | | |
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TDA-III STATUS OF PRIOR YEAR FUNDING FOR PROJECTS

Please list all prior fiscal year TDA claim projects and their status, including projects from previous years which are still active. Include both operating and capital projects. Approved amounts should be as specified in TDA claims approved by TRPA. Expenditures should be up to date and project status should be listed as either "Complete" or "Active." (Use additional forms as necessary).

| FISCAL YEAR | PROJECT TITLE AND EIP TRACKER NUMBER | AMOUNT APPROVED | EXPENDITURES | PROJECT STATUS |
|----------------|---|--------------------|--------------|-------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTAL | | \$ | \$ | |

TDA-IV PRODUCTIVITY IMPROVEMENT PROGRESS REPORT

Please list the recommendations provided in your last Triennial Performance Audit and any outstanding recommendations presented by TRPA as part of the Productivity Improvement Program. Describe your progress towards implementing each recommendation and indicate whether the recommendation has been fully implemented, partially implemented, or not implemented. For recommendations that have been partially implemented or not implemented, please describe the work your agency has undertaken to implement the recommendation thus far and the steps it will take to fully implement the recommendation in the future. (Use additional forms as necessary).

| RECOMMENDATION | YEAR/SOURCE OF RECOMMENDATION | IMPLEMENTATION STATUS |
|----------------|-------------------------------|-----------------------|
| | | |
| | | |
| | | |
| | | |
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| | | |
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| | | |
| | | |

TDA-V STANDARD ASSURANCES CONFORMANCE CERTIFICATION

| CL | AIMANT: FISCAL YEAR: |
|----|--|
| | |
| 1. | 180-DAY CERTIFIED FISCAL AUDIT |
| | Claimant certifies that it has submitted a satisfactory, independent fiscal audit, with the |
| | required certification statement, to TRPA and to the State Controller's Office, pursuant to PUC |
| | 99245 and CCR 6664 for the prior fiscal year (project year minus two). Claimant assures that this |
| | audit requirement will be completed for the current fiscal year (project year minus one). |
| 2. | 90-DAY ANNUAL REPORT |
| | Claimant certifies that is has submitted a State Controller's report in conformance with the |
| | uniform system of accounts and reports, to TRPA and to the State Controller, pursuant to PUC |
| | 99243, for the prior year (project year minus two). Claimant assures that this report will be |
| _ | completed for the current fiscal year (project year minus one). |
| 3. | ELIGIBILITY FOR STATE TRANSIT ASSISTANCE |
| | PUC 99314.5 |
| | (e) Nothing in this section shall be constructed to prohibit, or limit the ability of, a public transit |
| | operator to do the following: (1) Contract with common carriers of persons operating under a franchise or license. |
| | (2) Employ part-time drivers. |
| 4. | |
| •• | Claimants filing a claim for LTF and STA funds certifies that it complies with farebox recovery |
| | requirements laid forth in TRPA Resolution No. 2017-14 adopted by the TRPA Governing Board |
| | in September 2017. Per PUC Section 99270.2, TRPA granted Tahoe transit operators five years |
| | to meet a 15 percent ratio of fare revenues to operating cost for fixed route services and a 10 |
| | percent ratio for demand response services required of an operator serving a new urbanized |
| | area. The claimant recognizes it must comply with a 15 percent farebox recovery standard |
| | following the grace period, or it will be subject to loss of eligibility for TDA funds. |
| 5. | EXTENSION OF SERVICES |
| | Claimant that received an allocation of LTF funds for an extension of service pursuant to PUC |
| | 99268.8 certifies that it will file a report of these services pursuant to CCR 6633.8b within 90 |
| | days after the close of the fiscal year in which that allocation was granted. |
| 6. | RETIREMENT SYSTEM |
| | Claimant filing claim pursuant to PUC Section 99260 certifies that (check one): |
| | |
| | (1) The current cost of its retirement system is fully funded with respect to the |
| | officers and employees of its public transportation system (PUC Section 99271a); or |
| | \Box (2) The operator is implementing a plan approved by the transportation planning |
| | agency which will fully fund the retirement system for such officers and employees within 40 |
| | years (PUC Section 99271a); or |
| | years (i de section 3327 ra), or |
| | \Box (3) The operator has a private pension plan which sets aside and invests on a |
| | current basis funds sufficient to provide for the payment of future pension benefits and which |
| | is fully compliant with the requirements stated in PUC Sections 99272 and 99273. |

7. USE OF FEDERAL FUNDS

Claimant filing a claim for TDA funds for capital intensive projects pursuant to PUC 99268.7 certifies that it has made every effort to obtain federal funding for any project which is funded pursuant to PUC 99268.7.

8. REDUCED FARES FOR ELDERLY AND HANDICAPPED

A claimant filing a claim pursuant to PUC 99260 which offers reduced fares to senior citizens and disabled persons certifies that it is in compliance with PUC 99155.

9. STAFFING ON VEHICLES

Claimant certifies that it is in compliance with PUC Section 99264 that it does not routinely staff, with two or more persons, a vehicle for public transportation purposes designed to be operated by one person.

10. STATE OF GOOD REPAIR

A claimant filing a claim pursuant to PUC Section 99313 and 99314 for SGR funds certifies they provide to TRPA a list of projects to be funded with SGR apportionment made for that fiscal year. The claimant also certifies that all SGR funds be expended on SGR eligible activities specified in PUC 99212.1 (c). Claimants agree to submit annual expenditure reports to TRPA with all pertinent project information.

11. CONFORMANCE WITH TRPA REGIONAL TRANSPORTATION PLAN (RTP)

Claimant certifies that all purposes for claim expenditures conform with transit operator Short Range Transit Plans and the most current Tahoe Regional Transportation Plan.

12. IMPLEMENTATION OF PRODUCTIVITY IMPROVEMENTS

Claimant certifies that the operator has made a reasonable effort to implement the productivity improvements recommended pursuant to PUC Section 99244. The claimant shall also identify efforts made to implement recommendations from the triennial performance audit per PUC 99246.

| Гhe | hereby certifies that the Transportation |
|--|---|
| Development Act claim for fiscal year(s) | in the amount of |
| \$ (LTF) and \$ | (STA) for a total of |
| \$ conforms to the require | ments of the Transportation Development Act and |
| the above conformance requirements. | |
| | |
| Certified by Chief Financial Officer | |
| Title | |
| Date | |

TDA-VI CLAIM CERTIFICATION

| Becky Correa | Placer County Dept. of Public Works | |
|--|--|--------------------|
| I, Becky Correa Chief Financial Office | er for the, | do hereby |
| attest, as required under the California Code of Re | gulations, Title 21, Division 3, Chapter | 2, Section |
| 6632, to the reasonableness and accuracy of the fo | ollowing: | |
| | 22 |) 22 |
| a) The attached budget or proposed budget b) The attached statement identifying and su | for the fiscal year of the claim (FY | 1/23 _{).} |
| b) The attached statement identifying and su | bstantiating the reason or need for ar | nincrease |
| in operating budget in excess of 15 percen | | |
| increase or decrease in scope of operations | | |
| fixed facilities. | , J | |
| c) The attached certification by the Departme | ent of the California Highway Patrol ve | erifvina |
| that the operator is in compliance with Sec | | |
| PUC Section 99251. | | |
| 1 1 | | 0 1 |
| Rall A Form C | Placer County, Dopt. | PW |
| Decoretton of | placer outy 171. | (2.3%) |
| (Signature, Chief Financial Officer) | | |
| | | |
| Placer County Dept. of Public Works | | |
| —————————————————————————————————————— | | |
| (Agency Name) | | |
| a. Y | | |
| 11/2 | | |
| 11/2/20 | | |
| (Date)/ | | |

Before the Board of Supervisors County of Placer, State of California

In the matter of: A Resolution to execute and submit claims for FY 2022-23 Local Transportation Funds, State Transit Assistance Funds and State of Good Repair Funds to submit to the Tahoe Regional Planning Agency and the Placer County Transportation Planning Agency totaling \$11,448,869.

Resolution No.: 2022-218

The following Resolution was duly passed by the Board of Supervisors of the County of Placer at a regular meeting held October 11, 2022, by the following vote on roll call:

Ayes:

WEYGANDT, HOLMES, JONES, GUSTAFSON

Noes:

NONE

Absent:

GORE

Signed and approved by me after its passage.

Attest:

Clerk of said Board

WHEREAS, the County of Placer is eligible to apply for and receive funds from the Local Transportation Fund, State Transit Assistance Fund and the State of Good Repair Program Funds for transit operations, capital assistance and road maintenance; and

WHEREAS, for the Fiscal Year 2022-23, the County of Placer proposes to submit the following claims:

- 1) Local Transportation Fund Claim to the Tahoe Regional Planning Agency (TRPA) in the amount of \$957,115 for Tahoe Truckee Area Regional Transit (TART) operating assistance.
- 2) Local Transportation Fund Claim to the Placer County Transportation Planning Agency (PCTPA) in the amount of \$8,016,200 including \$3,958,000 for Placer County Transit (PCT) operating assistance, \$1,400,000 for TART operating assistance, \$251,950 for electric bus charging engineering and construction, \$2,400,000 for Placer County Road Maintenance, and \$6,250 for payment to the Placer County Transportation Planning Agency as a contribution to the Regional Transportation Planning Process for Fiscal Year 2022-23.
- 3) State Transit Assistance Claim to TRPA in the amount of \$638,810 for TART capital assistance for the compressed natural gas station upgrade and future electric bus charging station construction.

- 4) State Transit Assistance Claim to PCTPA in the amount of \$1,410,484, including \$850,000 for PCT operating assistance, \$210,484 for TART capital assistance for future electric bus charging station construction and \$350,000 for the purchase of a bus for PCT.
- 5) State of Good Repair Fund Claim to the TRPA for the purchase of a bus for TART in the amount of \$80,627.
- 6) State of Good Repair Fund Claim to the PCTPA in the amount of \$345,633, including \$183,704 for one TART bus purchase and \$161,929 for PCT preventative maintenance.

NOW, THEREFORE, BE IT RESOLVED by the Board of Supervisors of the County of Placer, State of California, that the Chair of the Board of Supervisors is authorized and directed to execute the attached FY 2022-23 Local Transportation Fund, State Transit Assistance and State of Good Repair Fund Claims as specifically described in Exhibits "1" through "7" attached hereto and incorporated herein, to the Tahoe Regional Planning Agency and the Placer County Transportation Agency.

Exhibit 1. TRPA – Claim for Local Transportation Fund

Exhibit 2. PCTPA - Claim for Local Transportation Funds

Exhibit 3. TRPA - Claim for State Transit Assistance Funds

Exhibit 4. PCTPA - Claim for State Transit Assistance Funds

Exhibit 5. TRPA - Claim for State of Good Repair Program Funds

Exhibit 6. PCTPA - Claim for State of Good Repair Program Funds

Exhibit 7. Annual TDA Claim Form Project and Financial Plan

Exhibit 1

CLAIM FOR LOCAL TRANSPORTATION FUNDS TRANSIT PURPOSES

TAHOE REGIONAL PLANNING AGENCY

P.O. Box 5310

Stateline, NV 89449-5310

From:

County of Placer

3091 County Center Drive, Suite 220

Auburn, CA 95603

CONTACT: Käthe Trimble – ktrimble@placer.ca.gov

PHONE: 530-745-7594

The COUNTY OF PLACER hereby requests, in accordance with State of California Public Utilities Code, commencing with Section 99200 and the California Code of Regulations commencing with Section 600, that this claim in the amount of \$957,115 for Local Transportation Funds be approved for FY 2022/23, in the following amounts for the following purposes to be drawn from the Local Transportation Fund deposited with the Placer County Treasurer.

P.U.C 99260a, Article 4, Transit Operations:

\$957,115

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

| Approved: | Applicant: |
|--------------------------------|--------------------------------|
| Tahoe Regional Planning Agency | County of Placer |
| By: | By: Ody gusto |
| Title: | Title: Chair, County of Placer |
| Date: | Date: 10/12/22 |

CLAIM FOR LOCAL TRANSPORTATION FUNDS

| TO: | | NTY TRANSPORTATI STREET, AUBURN, (| | | GENCY | |
|--|---|---|--|-------------------------|---|---------------------------------------|
| FROM: | | | | | | |
| | CLAIMANT: | County Of Placer | | | | |
| | ADDRESS: | 3091 County Cent | er Dr. St | e. 220 | | |
| | | Auburn, CA 95603 | 3 | | | |
| CONTACT PI | ERSON: | Käthe Trimble | | | | |
| | | Phone: 530-745-75 | 94 | Ema | il:ktrimble@placer.c | a.gov |
| commencing 6600, that th following am | with Section 99 is claim for Loca ounts for the fo | by requests, in accordance of the Californ of | rnia Code ands be a | e of Regi | ulations commenci for Fiscal Year <u>20</u> | 22/23, in the |
| P.U.C. 99260 | Oa, Article 4, Tra | ansit Operations: | | | \$ 5,358,000 | |
| | Oa, Article 4, Tra | | | | \$Click or tap here | to enter \$ |
| P.U.C. 99275 | 5, Article 4.5, Co | ommunity Transit S | ervices | | \$Click or tap here | to enter \$ |
| P.U.C. 99400 | Oa, Article 8a, Lo | ocal Streets and Ro | ads | | \$2,400,000 | |
| P.U.C. 99402 | 2, Article 8a, Tra | ansportation Planni | ng Proce | ess. | \$6,250 | |
| P.U.C. 99400 | Oc, Article 8c, Co | ontracted Transit Se | ervices: | | \$Click or tap here | to enter \$ |
| P.U.C. 99400 | De, Article 8e, C | apital for Contracte | d Servic | es: | \$Click or tap here | to enter \$ |
| C.C.R. 6648, | Capital Reserve | 2: | | | \$251,950 | |
| payment by the provisions that budget. Claimar | County Auditor to such monies will be nt must submit a co | transmitted to the Place the applicant is subject to used only in accordant complete Fiscal and Complete Fiscal and Complete Fiscal and Complete Place and Complete P | t to such r ice with th ipliance A | monies be le terms o | ng available for distrib f the approved annual | oution, and to the financial plan and |
| APPROVED: | | | APPLI | CANT: C | ounty of Placer | |
| PLACER COL | | | | | | |
| BOARD OF D | ATION PLANNIN | NG AGENCY | | | | |
| BOARD OF L | JIKECTORS | | | | | |
| | | | | | | |
| BY: | | | BY: | Cidy 9 | note- | |
| TITLE | | (signature) | | | | (signature) |
| TITLE: | | | TITLE: | | County of Placer | |
| DATE: | | | DATE: | 10 | 112/22 | |

CLAIM FOR STATE TRANSIT ASSISTANCE FUNDS

| To: | TAHOE REGIONAL PLANNING AGENCY P.O. Box 5310 Stateline, NV 89449-5310 | | |
|------------|---|--|-------------|
| From: | County of Placer 3091 County Center Drive, Suite 220 Auburn, CA 95603 | | |
| CONTAC | T: Käthe Trimble – ktrimble@placer.ca | .gov PHONE: 530-745-759 | 94 |
| The COU | NTY OF PLACER hereby requests, in ac | cordance with State of California Public | c Utilities |
| Code, cor | mmencing with Section 99200 and the Ca | alifornia Code of Regulations commend | ing with |
| Section 6 | 00, that this claim in the amount of \$638, | 810 for State Transit Assistance Funds | s be |
| approved | for FY 2022/23, in the following amounts | for the following purposes to be drawn | n from |
| the State | Transit Assistance Fund deposited with | the Placer County Treasurer. | |
| | | | |
| Transit Op | perations (6730a): | \$0 | |
| Transit Ca | apital (6730a): | \$250,000 | |
| Transit Ca | apital Outlay Reserve (6648): | \$388,810 | |
| | | | |
| When app | proved by TRPA, this claim will be transm | nitted to the El Dorado County Auditor- | |
| Controller | for payment. Approval of this claim, and | d payment by the El Dorado County Au | ditor- |
| Controller | to the applicant is subject to such monie | es being on hand and available for distr | ibution, |
| and is sub | eject to the provision that such monies wi | Il be used only in accordance with the t | terms of |
| the approv | ved annual financial plan. | | |
| Approved | | Applicant: | |
| Tahoe Re | gional Planning Agency | County of Placer | |
| Ву: | | By: Cidy Guston | |
| Title: | | Title: Chair, County of Placer | |
| Date: | | Date: 10/12/22 | |

CLAIM FOR STATE TRANSIT ASSISTANCE FUNDS

| TO: | | NTY TRANSPORTATION STREET, AUBURN, CA 9 | | AGENCY | | |
|--|--|--|--|---|---|--|
| | 233 1127707 | STREET, AODONN, CAS | 3003 | | | |
| FROM: | | | | | | |
| | CLAIMANT: | County Of Placer | | | | |
| | ADDRESS: | 3091 County Center [| Dr. Ste. 220 | | | |
| | | Auburn, CA 95603 | | | | |
| CONTAC | T PERSON: | Käthe Trimble | | | | |
| | | Phone: <u>(530)</u> 745-7594 | Em | ail: <u>ktrimble@placer.ca</u> | i.gov | |
| Code com Section 66 \$ <u>1,410,48</u> 4 | mencing with Sect 500, that this claim I for Fiscal Year 202 | y requests, in accordan tion 99200 and the Calif for State Transit Assist 22/23 , in the following t Assistance fund depos | fornia Code ance be app amounts fo | of Regulations comm roved in the amount r the following purpo | nencing with t of oses to be | |
| Transit O | perations (6730a) | : | | \$850,000 | | |
| Transit C | apital (6730a): | | | \$350,000 | | |
| Transit C | apital Outlay Rese | rve (6648): | | \$210,484 | | |
| Contract | ed Transit Services | \$Click or tap here to enter \$ | | | | |
| Commun | ity Transit Service | s Provided by WPCTSA | (6731.1): | \$Click or tap here to enter \$ | | |
| | | | | | | |
| payment by | the County Auditor to ns that such monies w | transmitted to the Placer Control the applicant is subject to still be used only in accordant | such monies b | eing available for distribu | ution, and to | |
| | | | PLICANT: Co | ounty of Placer | | |
| BY: _ | | BY: | Cidy Gu | obb- | (signature) | |
| TITLE: | | | .E: Chair, C | ounty of Placer | , | |
| DATE: | | DAT | | 12/22 | | |
| | | | | | | |

Exhibit 5

CLAIM FOR STATE OF GOOD REPAIR PROGRAM FUNDS

| To: | TAHOE REGIONAL PLANNING AGENC P.O. Box 5310 Stateline, NV 89449-5310 | Y |
|------------|--|--|
| From: | County of Placer 3091 County Center Drive, Suite 2 Auburn, CA 95603 | 20 |
| CONTAC | T: Käthe Trimble – ktrimble@place | er.ca.gov PHONE: 530-745-7594 |
| The COU | INTY OF PLACER hereby requests, | n accordance with State of California Public Utilities |
| Code, co | mmencing with Section 99200 and th | e California Code of Regulations commencing with |
| Section 6 | 00, that this claim in the amount of \$ | 80,627 for State Of Good Repair Program Funds be |
| approved | for FY 2022/23, in the following amo | ounts for the following purposes to be drawn from |
| the State | Transit Assistance Fund deposited v | vith the Placer County Treasurer. |
| | | |
| Transit O | perations (6730a): | \$0 |
| Transit C | apital (6730a): | \$80,627 |
| | | |
| When app | proved by TRPA, this claim will be tra | ansmitted to the El Dorado County Auditor- |
| Controller | r for payment. Approval of this claim | and payment by the El Dorado County Auditor- |
| Controller | r to the applicant is subject to such m | onies being on hand and available for distribution, |
| and is sul | bject to the provision that such monie | es will be used only in accordance with the terms of |
| the appro | ved annual financial plan. | |
| | | |
| Approved | : | Applicant: |
| Tahoe Re | egional Planning Agency | County of Placer |
| Ву: | | By: Cody Great |
| Title: | | Title: Chair, County of Placer |
| Data | | Date: 10/12/22 |

CLAIM FOR STATE OF GOOD REPAIR PROGRAM FUNDS

| FROM: | MANT: | STREET, AUBURN County Of Place | , | | | |
|---|--------------------------------------|--|-----------------------------------|--|---|--|
| CLA | | County Of Place | | | | |
| | | County Of Place | | | | |
| ADE | RESS: | | | | | |
| | | 3091 County Ce | nter Dr. | Ste. 220 | | |
| | | Auburn, CA 956 | 03 | | | |
| CONTACT PERSON | | Käthe Trimble | | | | |
| CONTACT FERSON | | Phone:(530) 745- | 7504 | Emaild | trimble@plac | cor co gov |
| | | Frione. <u>1550/745</u> - | 7334 | Eman. | ктипріе шріас | cer.ca.gov |
| The County Of Place Code commencing was Section 6600, that to \$345,633 for Fiscal National State of the State | vith Secti his claim Year 2022 | on 99200 and the for State of Good 2/23, in the follow | e Califor d Repair wing amo | nia Code of R Funds be app ounts for the | legulations coroved in the following pu | ommencing with amount of urposes to be |
| Transit Capital (673 | 80a): | | | \$34! | 5,633 | |
| | | | | | | |
| When approved, this clapayment by the County the provisions that such plan and budget. | Auditor to | the applicant is subj | ect to suc | h monies being | available for d | istribution, and to |
| | | | | | | |
| APPROVED: PLACER COUNTY | DI ANNUA | IC ACENICY | APPL | ICANT: Count | ty of Placer | |
| TRANSPORTATION BOARD OF DIRECTO | | IG AGENCY | | | | |
| BOARD OF DIRECTO | JN3 | | | | | |
| | | | | | | |
| BY: | | | BY: | Cide gusto | | |
| | | (signature | *) | 00 | | (signature) |
| TITLE: | | | _TITLE: | Chair, Cour | nty of Placer | |
| DATE: | | | _DATE: | 10/10 | 2/20 | |

ANNUAL TDA CLAIM FORM PROJECT AND FINANCIAL PLAN

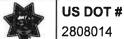
Briefly describe all proposed projects and indicate proposed expenditures by your agency for the ensuring fiscal year for purposes related to public transportation, pedestrian and bicycle facilities, and streets and roads. Provide each project a title and number. (Use additional forms as necessary)

Claimant PLACER COUNTY Fiscal Year 2022/23

| | Fiscal Year 20 | 22123 | | |
|--|----------------------------|--------------|-------------------------|-----------------------------|
| Brief Project Description | Project Cost | | C | |
| a session of the sess | N | | Source of Funding | |
| Placer County Transit | Salaries & Benefits: | \$3,166,818 | LTF – PCTPA | \$3,958,000 |
| Operations 2022/2023 | Services & Supplies | \$5,774,774 | STA – PCTPA | \$850,000 |
| | Vehicle Tracking Upgrades | \$50,000 | FTA 5307 | \$1,045,116 |
| | Contribution to PCTPA SRTP | | FTA 5307 CARES | \$305,000 |
| | Contingency | \$150,000 | FTA 5307 Covid Relief | \$389,823 |
| | Assign to Reserves | \$0 | FTA 5311 | \$24,000 |
| | | | Fares | \$298,153 |
| | | | Other Agency | \$1,475,500 |
| | 1 | | Interest | \$5,000 |
| | i | | Other Gen. Reimbursemen | t \$160,000 |
| | | | Carryover 21/22 LTF | \$400,000 |
| | m-4-1- | 50 741 500 | Operating Transfers In: | \$431,000 |
| | Total: | \$9,341,592 | Total: | \$9,341,592 |
| Placer County Transit | Preventative Maintenance | \$161,929 | SGR - PCTPA | \$345,633 |
| Capital 2022/2023 | PCT Bus | \$575,000 | STA – PCTPA | \$350,000 |
| 100 - 1000 1000 1000 1000 1000 1000 100 | | | Capital Reserve | \$41,296 |
| | Total: | \$736,929 | Total: | \$736,929 |
| Tahoe Truckee Area Regional | Salaries & Benefits: | \$3,679,365 | LTF – TRPA | \$957,115 |
| Transit Operations 2022/2023 | Services & Supplies | \$6,783,124 | LTF - PCTPA | \$1,400,000 |
| W AZ SA AZISANSKAWA WATERIANSKA | Contingency | \$100,000 | STA - TRPA | \$0 |
| | | | FTA 5307 | \$1,300,000 |
| | | | FTA 5311 | \$422,000 |
| | | ÷. | FTA 5307 CARES | \$447,074 |
| | | | FTA 5307 Covid Relief | \$0 |
| | | | Fares (Includes TOT) | \$517,200 |
| 100 | | | T.O.T Funds | \$4,116,200 |
| | | | Other Agency | \$1,402,900 |
| | Total: | \$10,562,489 | Total: | \$10,562,489 |
| Tahoe Truckee Area Regional | 40' TART Bus | \$575,000 | LTF - PCTPA | \$251,950 |
| Transit Capital 2022/2023 | CNG Station Upgrade | \$250,000 | SGR – PCTPA | \$231,930 \$0 |
| Transit Capital 2022/2023 | Bus Charging Station | \$851,244 | SGR - TRPA | \$80,627 |
| | | V051,211 | STA – PCTPA | \$210,484 |
| | | | STA – TRPA | \$638,810 |
| | | | FTA 5310 | \$050,010 \$0 |
| | | | FTA 5339 | \$160,000 |
| | | | FTA 5307 CARES | \$334,373 |
| | Total: | \$1,676,244 | Total: | \$1,676,244 |
| TOTAL Transit: | | \$22,317,254 | | |
| Road Maintenance 2022/2023 | Road Maintenance | \$22,255,951 | LTF - PCTPA | \$22,317,254 |
| Transportation Planning 2022/2023 | Transportation Planning | \$6,250 | Road Fund | \$2,406,250 \$19,855,951 |
| | Total: | \$22,262,201 | Total: | \$22,262,201 |
| Transit / Road Maint. / Planning: | Total: | \$44,579,455 | | \$44,579,455 |
| TOTAL LTF | | | PCTPA | \$8,016,200 |
| | | | TRPA | \$957,115 |
| TOTAL STA | - | | | |
| TOTALBIA | | | PCTPA | \$1,410,484 |
| momal con | | | TRPA | \$638,810 |
| TOTAL SGR | | | PCTPA | \$345,633 |
| | | • | TRPA | \$80,627 |

| | .IFORNIA | | | | | | | | | | Page | Lof. 10 | _ pages |
|--|--|--|--|---------------------------------|---|--|---|--|---------------------|--|--|--------------------------------|-------------------|
| | OF CALIFORNIA H | | DT/ | NEW TERMI | NAL INFORMATION | ON | CA NUMBER | FILE C | ODE NUMB | ER COUN | ITY CODE | BED | pages |
| | | NCE REPO | | ⊠Yes | No | | 42518 | | 46911 | | 29 | | |
| | | RD UPDATE | | TERMINAL 1 | | | CODE | OTHER | PROGRAM | (S) LOCA | TION CODE | SUB | AREA |
| <u>`</u> | tev. 12-17) OPI | 062 | | Truck | ⊠Bus □ | Mod Limo | В | | 1 | | 222 | | 76 |
| CARRIER LEG | | | | TERM | INAL NAME (IF D | IFFERENT) | | | | TELEPHONE | NUMBER (W/ | AREA CO | DE) |
| Placer Cou | - | *************************************** | | | | | | | | (530) 58 | 1-6654 | | |
| | | JMBER, STREET, CI ICKEE, CA 961 | | :) | | | | | | | | | |
| | | REET, CITY, ZIP COL | | RENT FROM A | ROVE) | INSPECTIO | N LOCATION (NUM | IDED ST | DEET OITY | OR COUNT | 4 | | |
| | , ,, ,, | ,, |) (ii | 11270111103011 | 5012) | | oin Creek Rd | | | UR COUNTY |) | | |
| | | | | LICENSE, | FLEET AND | | INFORMATIO | | | | | | |
| HM LIC. NO. | HWT REG. N | O. IMS LIC. NO | D. TR | UCKS AND TY | | S AND TYPES | | | 14-4 | DRIVE | RS | BIT F | LEET SIZE |
| | | | 7 D S | | 1 F | I 15 II | | Mod Limo | | 30 | | Powered 7 | |
| EXP. DATE | EXP. DATE | EXP. DATE | RE | G. CT. | HW VEH. | | HW CONT. | | PPB/CSAT | | | 1 000 | refeu / |
| TERMINIAI S IDI | ENTIFIED IN SECTI | ON 34515(b) CVC | F0 | E CODE MUNE | | | | | Yes | No | N/A | Tov | /ed 1 |
| Yes | ⊠ No | 3N 343 13(b) CVC | FIL | E CODE NUME | EKS OF TERMIN | ALS INCLUDE | D IN INSPECTION | AS A RES | SULT OF SE | CTION 34515 | (b) CVC | | |
| | <u> </u> | | EME | RGENCY (| ONTACTS / | la Callina (| Order of Prefe | ranaal | | | | | |
| EMERGENCY C | CONTACT (NAME) | | | INOLINOT C | | | W AREA CODE) | rencej | | NIGHT TELEI | PHONE NO. (M | // AREA C | ODE) |
| Erin Johns | | | | | | (53 | 0) 581-6654 | 0 | | | (425) 299 | | , |
| | ONTACT (NAME) | | | | DAY TELE | PHONE NO. (V | W AREA CODE) | | | NIGHT TELEI | PHONE NO. (M | // AREA C | ODE) |
| Colby Wie | SZ | | | | | | 0) 745-3539 | | | | (530) 906 | -2799 | |
| | В | ESTIMATED (| CALIFORN | | | TERMINAL | | | 20: | | | | |
| UNDE | 1 - | 001 — C 5 | 0,001 — | D 100,0 | 01 — E | 500.001 — | F 1,000,001 - | G | 2,000,001 | _ Н | 5,000,001 — | I M | ORE THAN |
| 15,000 | 50, | 000 | 00,000 | 500,0 | 00 | 1,000,000 | 2,000,000 | | 5,000,000 | | 10,000,000 | | 0,000,000 |
| | | 10 | Top. | OPERA | TING AUTH | | | | | | | | |
| PUC | □т | | TCP PSC | | - | No DI | PERTY PERMIT AC | TIVE | | MS FITNESS | EVALUATION | | |
| | USDOT NUMBER 2808014 | | MC | | □ MC □ MX | | REASON F | OR INSPE | CTION al Inspect | | | | |
| INSPECTION | | INSPECTION RA | MX TINGS: 9 | S = Satisfacto | 1== | itisfactory | C = Conditiona | | = Unrated | | 4 4 11 1- 1 | | |
| REQUIREMEN | | MAINTENANCE | | The second second second second | R RECORDS | | G. EQUIPMENT | | | MATERIALS | t Applicable | TERMINA | AL. |
| MAINTENANCE PROGRAM | | 1 N/A 2 S 2 | 8 4 8 | 4 5 0 5 | | 2 . N/A - | 0 - 0 - | C . N | /A - NT/A | - N//A N | | | 0 0 |
| DRIVER | | 1 <u>N/A</u> 2 <u>S</u> 3 | 5 4 5 | 1 3 2 3 | 3 3 4 3 | 1 N/A 2 | S 3 S 4_ | 5 1 N | | 3 N/A 4 N | TOTAL TIM | | S 4 S |
| RECORDS | | No 1 Ti | me 2.0 | 1.7 | Time 4.0 | No. 4 | Time 3.0 | | | | TOTAL III | | |
| DD0/50 | | No. I Ti | The state of the s | | | | Time 3.0 | , | | | | 9.0 | |
| DRIVER | | HAZARDOUS MATE | | No. 17 | | CONTAINE | RS/TANKS | VEH | | ED OUT-OF- | | 9.0 | |
| HOURS | | HAZARDOUS MATE | | | violations noted | CONTAINE | | _ | | ED OUT-OF- | SERVICE Units | 9.0 | |
| BRAKES | | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS | | HAZARDOUS MATE | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| BRAKES LAMPS & SIGNALS CONNECTING | | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS BRAKES LAMPS & SIGNALS | | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS BRAKES LAMPS & SIGNALS CONNECTING DEVICES STEERING & SUSPENSION | | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS BRAKES LAMPS & SIGNALS CONNECTING DEVICES STEERING & | | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS BRAKES LAMPS & SIGNALS CONNECTING DEVICES STEERING & SUSPENSION TIRES & WHEELS EQUIPMENT | | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS BRAKES LAMPS & SIGNALS CONNECTING DEVICES STEERING & SUSPENSION TIRES & WHEELS | S 1 | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
| HOURS BRAKES LAMPS & SIGNALS CONNECTING DEVICES STEERING & SUSPENSION TIRES & WHEELS EQUIPMENT REQUIREMENTS CONTAINERS & TANKS | 5 1 | HAZARDOUS MATE No H/M Trans | sported | □ No H/M | violations noted | CONTAINE No. | RS/TANKS Time | VEHI Vehi | cles | | Units | | nis time. |
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UNITED STATES DEPARTMENT OF TRANSPORTATION



Legal: PLACER COUNTY

Operating (DBA): PLACER COUNTY TRANSIT

MC/MX #:

State #: 42518

Federal Tax ID: 94-6000527 (EIN)

Review Type: Non-ratable Review - Special Study

Scope:

Terminal

Location of Review/Audit: Company facility in the U. S.

Operation Types Interstate Intrastate

> Non-HM Carrier:

Non-HM

Business: Corporation

Shipper: Cargo Tank: N/A N/A N/A

Gross Revenue:

for year ending:

Territory:

Company Physical Address:

11448 F AVE

AUBURN, CA 95603

Contact Name:

Phone numbers: (1) 530-889-7536

(2)

Fax

E-Mail Address:

Company Mailing Address:

11448 F AVE

AUBURN, CA 95603

Carrier Classification

Local Government

Other: Intrastate

Cargo Classification

Machinery, Large Objects

Passengers

Equipment

Owned Term Leased Trip Leased Owned Term Leased Trip Leased Truck Trailer 15 0 0 Minibus, 16+

Power units used in the U.S.: 22

Percentage of time used in the U.S.: 100

Does carrier transport placardable quantities of HM?

Is an HM Permit required?

No N/A

Driver Information

>= 100 Miles:

Inter Intra < 100 Miles: 15 15

Average trip leased drivers/month: 0

Total Drivers: 30

CDL Drivers: 30



U.S. DOT #: 2808014

State #: 42518

Review Date: 04/07/2022

Part A

Questions about this report or the Federal Motor Carrier Safety or Hazardous Materials regulations may be addressed to the Federal Motor Carrier Safety Administration at:

California Highway Patrol: 2555 First Avenue Sacramento, CA 95818

Phone: (916)731-6350

Fax:

This TERMINAL REVIEW deals only with safety compliance at this terminal.

Person(s) Interviewed

Name: Jaime Wright

Name: Paul Park

Title: Manager

Title: Supervising Equipment Mechanic



U.S. DOT #: 2808014

State #: 42518

Review Date: 04/07/2022

Part B Violations

Safety Fitness Rating Information:

Total Miles Operated Recordable Accidents

500,000

0

OOS Vehicle (CR): 0

Number of Vehicle Inspected (CR): 4

OOS Vehicle (MCMIS): 0

Number of Vehicles Inspected (MCMIS): 0

Your proposed safety rating is:

This Review is not Rated.



U.S. DOT #: 2808014

State #: 42518

Review Date: 04/07/2022

Part B Requirements and/or Recommendations

1. Distracted Driving Reminder: California Vehicle Code Sections 23123(a), 23123.5, and 23124(a), govern cellular telephone use and texting while driving. Use of hand held cellular telephones and texting while driving is prohibited. Persons under 18 years of age are prohibited from using cellular telephones while driving.





U.S. DOT #: 2808014

State #: 42518

Review Date: 04/07/2022

Part C

Reason for Review: Other

Compliance Monitoring

Annual Terminal Insp

Parts Reviewed Certification:

325 382 383 387 390 391 392 393 395 396 397 398 399 171 172 173 177 178 180

Prior Reviews

Planned Action:

Prior Prosecutions

Reason not Rated: Special Study

Study Code: CA

3/3/2021 12/14/2018 3/23/2017

Unsat/Unfit Information

Is the motor carrier of passengers subject to the safety fitness procedures contained in 49 CFR part 385 subpart A, AND does it transport passengers in a commercial motor vehicle?

Does carrier transport placardable quantities of hazardous materials?

Unsat/Unfit rule:

Corporate Contact: Jaime Wright

Special Study Information:

Corporate Contact Title: Manager

Remarks:

Terminal Name: Placer County

CA#-42518

Terminal Address: 910 Cabin Creek Rd Truckee, CA 96161

FCN - 46911

No

Rating Information:

In accordance with 13 CCR 1233, this terminal has been rated Satisfactory at this time.

On-highway inspections were used to fulfill 0 of 4 required vehicle inspections.

ADDITIONAL INFORMATION:

Of the 30 drivers employed by the carrier at this terminal, only 22 are utilized for bus operations at this time.

Upload Authorized:

Yes

No

Authorized by:

Yes

No

Failure Code:

Verified by:

Uploaded:

Date:

Date:

Inspect 1.118.8010



California Highway Patrol 2555 First Avenue Sacramento, CA 95811 Phone: (916) 731-6300

Internationally Accredited Agency CHP407F/343A

Report Number: CANDHG001284 Inspection Date: 04/06/2022 Start: 8:13 AM PT End: 8:47 AM PT **Inspection Level:** V - Terminal **HM Inspection Type:** None

Carrier: PLACER COUNTY

DBA:

Driver:

11448 F AVE

License#: Date of Birth:

State:

AUBURN, CA, 956032714 **USDOT**: 2808014

Phone#: (530)889-7536

CoDriver: License#:

MC/MX#:

Fax#:

Date of Birth:

State:

State#: 42518 Location: TRUCKEE

Milepost:

Shipper: N/A

Highway: County: NEVADA Origin: N/A

Bill of Lading: N/A

Destination: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit Type Make Year State BU FORES2008 CA

<u>Plate</u> Equipment ID 0801

ИN 1FD4E45S08DA59747

GVWR CVSA Existing 14500

CVSA#

BRAKE ADJUSTMENTS

CCR/001

1 <u>2</u>

Right Left

N/A N/A N/A N/A

Chamber

HYDR HYDR

VIOLATIONS

Section Type Unit OOS CP 1242(d) T-13 1 Ν

Citation # VerifyCrash Violations Discovered

Fire extinguisher not securely mounted-393.95A

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 218309; File Code Number: 46911; Fuel Type: G; Passenger Capacity: 19; WC Passenger Capacity: 2; Bus Type: 1; Beat/Sub Area: 76; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 20

Pursuant to Section 24004 CVC, violations recorded on this SafetyNet Inspection Report must be corrected prior to redispatch. Violations marked out of service must be corrected before the vehicle is operated on the highway. For your convenience, KEEP THIS REPORT OR A COPY IN THE VEHICLE UNTIL ALL VIOLATIONS ARE CLEARED. This document should NOT be forwarded to the court for clearance procedures. DO NOT RETURN THIS FORM TO THE CALIFORNIA HIGHWAY PATROL.

Report Prepared By:

ID/Badge #:

A. Kerns

A17476

Copy Received By:

X

Inspect 1.118.8010



California Highway Patrol 2555 First Avenue Sacramento, CA 95811 Phone: (916) 731-6300

Internationally Accredited Agency CHP407F/343A

Report Number: CANDHG001285 Inspection Date: 04/06/2022 Start: 8:54 AM PT End: 9:41 AM PT Inspection Level: V - Terminal HM Inspection Type: None

Carrier: PLACER COUNTY

DBA: PLACER COUNTY TRANSIT

Driver: License#:

State:

11448 F AVE AUBURN, CA, 956032714

Date of Birth:

USDOT: 2808014

Phone#: (530)889-7536

CoDriver:

State:

MC/MX#:

Fax#:

License#: Date of Birth:

State#: 42518 Location: TRUCKEE

Highway:

Milepost: Origin: N/A Shipper: N/A

Bill of Lading: N/A

County: NEVADA

Destination: N/A

Cargo: N/A

VEHICLE IDENTIFICATION

Unit Type Make Year State <u>Plate</u> BU GILG 2019 CA 1583665 Equipment ID 1941

15GGD3112K3194164 41600

GVWR CVSA Existing

CVSA#

BRAKE ADJUSTMENTS

Axle#

<u>2</u> 1

Right

N/A N/A N/A

Left Chamber

N/A DISC DISC

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 132601; File Code Number: 46911; Fuel Type: CNG; Passenger Capacity: 41; WC Passenger Capacity: 2; Bus

Type: 1; Beat/Sub Area: 76; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 20

Report Prepared By: A. Kerns

ID/Badge #:

A17476

Copy Received By:

X

Driver:

License#:

CoDriver:

License#:

Date of Birth:

Inspect 1.118.8010

State:

State:



California Highway Patrol 2555 First Avenue Sacramento, CA 95811 Phone: (916) 731-6300

Internationally Accredited Agency CHP407F/343A

Report Number: CANDHG001286 Inspection Date: 04/06/2022

Start: 9:47 AM PT End: 10:30 AM PT Inspection Level: V - Terminal HM Inspection Type: None

Carrier: PLACER COUNTY

DBA: PLACER COUNTY TRANSIT

11448 F AVE

AUBURN, CA, 956032714

USDOT: 2808014

MC/MX#:

State#: 42518

Location: TRUCKEE

Highway: **County: NEVADA** Phone#: (530)889-7536

Fax#:

Date of Birth: Milepost:

Origin: N/A

Destination: N/A

Shipper: N/A

Bill of Lading: N/A Cargo: N/A

VEHICLE IDENTIFICATION

Unit Type Make Year State Plate BU GILG 2019 CA 1583664 Equipment ID 1939

GVWR CVSA Existing VIN 15GGD3119K3194162 41600

Placard:

CVSA#

Cargo Tank:

BRAKE ADJUSTMENTS

Axle # Right

Left

1 <u>2</u> N/A N/A N/A N/A

Chamber DISC DISC

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Special Checks: No data for special checks

State Information:

Odometer: 155580; File Code Number: 46911; Fuel Type: CNG; Passenger Capacity: 41; WC Passenger Capacity: 2; Bus

Type: 1; Beat/Sub Area: 76; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 20

Report Prepared By: A. Kerns

ID/Badge #:

A17476

X

Copy Received By:

 \boldsymbol{X}

02808014 CA CANDHG001286

Inspect 1.118.8010



California Highway Patrol 2555 First Avenue Sacramento, CA 95811 Phone: (916) 731-6300

Internationally Accredited Agency CHP407F/343A

Report Number: CANDHG001287 Inspection Date: 04/06/2022

Start: 10:33 AM PT End: 11:13 AM PT

Inspection Level: V - Terminal HM Inspection Type: None

Carrier: PLACER COUNTY

DBA: PLACER COUNTY TRANSIT 11448 F AVE

Driver: License#:

State:

AUBURN, CA, 956032714

Phone#: (530)889-7536

Date of Birth:

USDOT: 2808014

CoDriver: License#:

State:

MC/MX#: State#: 42518

Highway:

Fax#:

Date of Birth:

Location: TRUCKEE

Milepost:

Shipper: N/A

Bill of Lading: N/A

County: NEVADA

Origin: N/A

Cargo: N/A

Destination: N/A

VEHICLE IDENTIFICATION

Unit Type Make Year State Plate BU GILG 2017 CA

Equipment ID 1430951 1728

ИIV 15GGD3111H1187274 41600

GVWR CVSA Existing

CVSA#

BRAKE ADJUSTMENTS

Axle #

<u>2</u> 1

Right Left

N/A N/A N/A

Chamber DISC

N/A DISC

VIOLATIONS: No violations were discovered

HazMat: No HM transported

Placard:

Cargo Tank:

Special Checks: No data for special checks

State Information:

Odometer: 330703; File Code Number: 46911; Fuel Type: CNG; Passenger Capacity: 41; WC Passenger Capacity: 2; Bus

Type: 1; Beat/Sub Area: 76; Regulated Vehicle: Y; Pre-Cleared Vehicle: N; Veh #1 Type: 20

Report Prepared By:

ID/Badge #:

Copy Received By:

A. Kerns

X

A17476



02808014 CA CANDHG001287

| Brief Project Description | Project Cost | | Source of Funding | |
|---|----------------------------|--------------|--------------------------|-----------------|
| Placer County Transit Operations FY 2022/23 | Salaries & Benefits | \$3,166,818 | LTF - PCTPA | \$3,958,000 |
| | Services & Supplies | \$5,774,774 | STA - PCTPA | \$850,000 |
| | Vehicle Tracking Upgrades | \$50,000 | FTA 5307 | \$1,045,116 |
| | Contribution to PCTPA SRTP | \$200,000 | FTA 5307 CARES | \$305,000 |
| | Contingency | \$150,000 | FTA5307 Covid Relief | \$389,823 |
| | Assign to Reserves | \$0 | FTA 5311 | \$24,000 |
| | ŭ | • | Fares | \$298,153 |
| | | | Other Agency | \$1,475,500 |
| | | | Interest | \$5,000 |
| | | | Other Gen. Reimbursement | \$160,000 |
| | | | Carryover 21/22 LTF | \$400,000 |
| | | | Operating Transfers In | \$431,000 |
| | | | Operating transfers in | \$451,000 |
| | Total | \$9,341,592 | Total | \$9,341,592 |
| Placer County Transit Capital FY 2022/23 | Preventative Maintenance | \$161,929 | SGR - PCTPA | \$345,633 |
| | PCT Bus | \$575,000 | STA - PCTPA | \$350,000 |
| | | . , | Capital Reserve | \$41,296 |
| | | | | |
| | Total | \$736,929 | | \$736,929 |
| Tahoe Truckee Area Regional Transit Operations FY 2022/23 | Salaries & Benefits | \$3,679,365 | LTF - TRPA | \$957,115 |
| | Services & Supplies | \$6,783,124 | LTF - PCTPA | \$1,400,000 |
| | Contingency | \$100,000 | STA - TRPA | \$0 |
| | | | FTA 5307 | \$1,300,000 |
| | | | FTA 5311 | \$422,000 |
| | | | FTA 5307 CARES | \$447,074 |
| | | | 5307 Covid Relief | \$0 |
| | | | Fares (Includes TOT) | \$517,200 |
| | | | TOT Funds | \$4,116,200 |
| | | | Other Agency | \$1,402,900 |
| | | | other Agency | 71,402,300 |
| | Total | \$10,562,489 | Total | \$10,562,489 |
| Tahoe Truckee Area Regional Transit Capital FY 2022/23 | 40' TART Bus | \$575,000 | LTF - PCTPA | \$251,950 |
| | CNG Station Upgrade | \$250,000 | SGR - PCTPA | \$0 |
| | Bus Charging Station | \$851,244 | SGR - TRPA | \$80,627 |
| | | | STA - PCTPA | \$210,484 |
| | | | STA - TRPA | \$638,810 |
| | | | FTA 5310 | \$0 |
| | | | FTA 5339 | \$160,000 |
| | | | FTA 5307 CARES | \$334,373 |
| | | | 1177 3307 CARLES | 4334,373 |
| | Total | \$1,676,244 | Total | \$1,676,244 |
| TOTAL Transit | | \$22,317,254 | | \$22,317,254 |
| Road Maintenance FY 2022/23 | Road Maintenance | \$22,255,951 | LTF - PCTPA | \$2,406,250 |
| Transportation Planning FY 2022/23 | Transportation Planning | | Road Fund | \$19,855,951 |
| g , , , | | 1.7 | | , -,, |
| | Total | \$22,262,201 | Total | \$22,262,201 |
| Transit/Road Maintenance/Planning | Total | \$44,579,455 | Total | \$44,579,455 |
| Total LTF | | | РСТРА | \$8,016,200 |
| | | | TRPA | \$957,115 |
| Total STA | | | РСТРА | \$1,410,484 |
| | | | TRPA | \$638,810 |
| Total SGR | | | РСТРА | \$345,633 |
| | | | TRPA | \$80,627 |
| TOTAL TDA FUNDS | | | | \$11,448,869 |
| | • | | | |



Placer County Transit

Elderly/Disabled PUC Section 99155 & 99155.5

Placer County Transit and Tahoe Truckee Area Regional Transit are in compliance with PUC Section 99155 pertaining to reduced transit fares for elderly and disabled persons and Section 99155.5 pertaining to dial-a-ride and paratransit services.

