

Consolidated Grant Program, Administrative Checklist All Projects

Name & Location of Grantee: _____

Date of Site Visit: _____

Grantee Representatives: _____

WSDOT Staff: _____

Required documents and policies

Name of document / policy	Is there a copy in WSDOT's file?	Date on file	Notes/Accepted?
ADA policies	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Asset management plan (<i>transit only</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Bus schedules (<i>accessible online?</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Code of ethics *	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Contracts or subcontracts for services	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Customer complaint process	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Disadvantaged Business Enterprise plan *±	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Drug and alcohol policy (<i>5309 and 5311 only</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Equal employment opportunity policy *±	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Indirect cost allocation plan or rate	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
In-kind valuation plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Job descriptions	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Policy prohibiting harassment	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Purchasing policy	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Single Audit report *±	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Title VI *	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Unfair competition complaint process *	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Vehicle maintenance plan (<i>other than transit</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Volunteer driver policy	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

* Organizations receiving federal funds only

± Requirement is dependent on award/expenditure amount

SERVICE TYPE(S) <input type="checkbox"/> Fixed route <input type="checkbox"/> Route deviated <input type="checkbox"/> Demand response <input type="checkbox"/> Paratransit <input type="checkbox"/> Commuter <input type="checkbox"/> University
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REQUIREMENTS OF ALL FUNDS, QUESTIONS 1 to 28	
Coordination of Transportation Planning, Guide page 1-3	
1. How does your organization participate in the coordinated public transit and human service transportation planning efforts in your region?	<input type="checkbox"/>
HSTP follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Marketing Efforts Guide page 1-4	
2. What effort does your organization make to promote service or to increase ridership?	<input type="checkbox"/>
3. Are your marketing materials published in any languages other than English? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
4. Where applicable, do your marketing efforts, including vehicle signage, state that the services are available to the general public? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/>
5. If your current schedules and promotional materials are not online, please provide a hard copy.	<input type="checkbox"/>
Marketing follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Civil Rights Guide page 1-7	
6. What effort does your organization make to reach out to minorities, Limited English Proficiency populations and low-income populations and to serve as members of your policy and/or advisory committees?	<input type="checkbox"/>
7. How does your organization ensure that the services provided are accessible to all people regardless of race, color, religion, sex, national origin or disability?	<input type="checkbox"/>
8. As a best practice, does your organization have a written policy in place to prevent harassment, intimidation, and coercion? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Has the policy been updated since last reviewed by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip b)	<input type="checkbox"/>
b. What pages of the policy include the following elements:	<input type="checkbox"/>
i. A definition covering all forms of harassment	
ii. The filing procedure and investigation process	
iii. Corrective measures	

Topic

Follow-up

9. Has your organization received any written complaints within the last 12 months alleging discrimination (employment practices or services provided)? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a and b)	<input type="checkbox"/>
a. Describe the complaint:	<input type="checkbox"/>
b. What is the status of the complaint?	<input type="checkbox"/>
Civil rights follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Americans with Disabilities Act (ADA) Guide page 1-8	
10. Are ADA accessible vehicles used for all grant funded services? <input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, skip a)	<input type="checkbox"/>
a. How does your organization provide equivalent services to persons with disabilities?	<input type="checkbox"/>
11. Does your organization have an ADA policy? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Has the policy been updated since last accepted by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. What are your policies on the following issues (cite policy page number if present):	<input type="checkbox"/>
i The use of service animals	<input type="checkbox"/>
ii Proper use/maintenance of lifts and securement systems	<input type="checkbox"/>
• What system of regular checks has been established? GRANTEE PROVIDE CHECKLIST	<input type="checkbox"/>
• What is the policy on ramp failures and alternative service (30 min.)?	<input type="checkbox"/>
▶ Are lifts/ramps repaired promptly and before returning to service?	<input type="checkbox"/>
iii Lift/ramp deployment at any stop	<input type="checkbox"/>
iv Will you provide service if mobility device cannot be secured?	<input type="checkbox"/>
v Service to persons using portable oxygen devices or respirators	<input type="checkbox"/>
vi Are persons with disabilities given priority seats (fixed route) / signage?	<input type="checkbox"/>
vii Use of lifts or ramps by standees	<input type="checkbox"/>
viii Approved mobility equipment !New w/c definition!	<input type="checkbox"/>
ix Use of a Personal Care Attendant (PCA)	<input type="checkbox"/>
x Stop announcements (fixed route)	<input type="checkbox"/>
xi Route identification at stops served by multiple vehicles/routes	<input type="checkbox"/>
xii Other accessibility-related equipment such as enunciators	<input type="checkbox"/>
xiii Time allowed to board/disembark the vehicle	<input type="checkbox"/>

Topic

Follow-up

xiv For organizations with 50+ employees, Reasonable Accommodation policy <input type="checkbox"/> N/A	<input type="checkbox"/>
12. What communication and training are provided for employees and contractors regarding ADA requirements and safety/sensitivity regarding individuals with disabilities?	<input type="checkbox"/>
13. Are all facilities and meeting spaces/materials ADA accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
14. How is service information made available to the public in accessible formats?	<input type="checkbox"/>
15. Do you provide route deviation service for demand response? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. If yes, does service deviate for people with disabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. How do you communicate the level of service provided through route deviation?	<input type="checkbox"/>
16. Does your organization provide ADA paratransit service to complement fixed route for those who cannot use fixed route? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a - c)	<input type="checkbox"/>
a. Eligibility process. Please answer and/or explain the following:	<input type="checkbox"/>
i Are eligibility decisions based solely on a doctor's note?	<input type="checkbox"/>
• What percent of applicants are approved?	
ii Are eligibility decisions made within 21 days of application and is approval communicated or presumed?	<input type="checkbox"/>
iii Are persons who are denied or given temporary eligibility given written reasons and notice of their right to appeal?	<input type="checkbox"/>
GRANTEE PROVIDE LETTER OF DENIAL	
• Does the appeals process include opportunity to be heard, separation of functions, decision within 30 days, and written notification of decision/reason?	<input type="checkbox"/>
• If a decision is not made within 30 days, is transportation provided until the decision is issued?	<input type="checkbox"/>
b. What are your policies on the following issues (cite policy page number if present):	<input type="checkbox"/>
i Who is eligible (special needs individual, PCA, companion)?	<input type="checkbox"/>
• Are PCAs and/or companions charged a fare?	<input type="checkbox"/>
• Are out-of-jurisdiction visitors with documentation treated as eligible?	<input type="checkbox"/>
• Are fares no more than twice comparable fixed-route trip?	<input type="checkbox"/>
ii Categories of eligibility	<input type="checkbox"/>
iii If next-day service is proved, what percent of reservations are next-day?	<input type="checkbox"/>
• Are reservations accepted on all days prior to day of service (Sunday?)	<input type="checkbox"/>
iv Are trips negotiated with rider and scheduled within an hour of pickup?	<input type="checkbox"/>
v Are there priorities based on trip purposes?	<input type="checkbox"/>

Topic

Follow-up

vi What percent of trips is subscription?	<input type="checkbox"/>
vii Door-to-door or curb-to-curb?	<input type="checkbox"/>
viii Service area for paratransit (3/4 mile?)	<input type="checkbox"/>
ix Trip service hours (same as fixed route?)	<input type="checkbox"/>
x What is the telephone hold time standard and how is access measured?	<input type="checkbox"/>
• Do callers ever receive busy signals at peak times (how do you know?)	<input type="checkbox"/>
xi What is are the denial rates (overall and next-day)?	<input type="checkbox"/>
• Are rides that are not provided in one hour tracked as denials?	<input type="checkbox"/>
• If one leg of a RT cannot be reserved and rider declines RT, how many denials are tracked?	<input type="checkbox"/>
xii Are restrictions placed on the number of trips and are waiting lists used?	<input type="checkbox"/>
c. What is the on-time performance rate?	<input type="checkbox"/>
d. What is the no-show policy in regard to the following:	
i Suspension policy	<input type="checkbox"/>
ii Determining whether no-show is under rider's control or operator error	<input type="checkbox"/>
iii Cancellation threshold	<input type="checkbox"/>
iv Financial penalties	<input type="checkbox"/>
v Appeal process for suspension or no-show determination	<input type="checkbox"/>
17. Describe the system your organization provides for riders to file ADA grievances:	<input type="checkbox"/>
18. Are employees trained on how to answer calls to your organization made via TTY or Relay Service? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
ADA follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Complaints	Guide page 1-12
19. A customer complaint process is required for state paratransit/special needs grant recipients and recommended as a best practice for all grantees. Do you have a written customer complaint policy/procedure document? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Has the document been updated since last reviewed by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. What pages of the policy include the following elements:	<input type="checkbox"/>

Topic

Follow-up

i Description of options available to make comments or complaints known to transportation provider	<input type="checkbox"/>
ii Sample complaint form/card	<input type="checkbox"/>
iii Description of how organization will address complaints	<input type="checkbox"/>
c. How does your organization make your customer comment/complaint process known to the public?	<input type="checkbox"/>
20. Has your organization received any written complaints regarding services provided or the use of public funds (not already addressed in question 9) OR had any situations that could lead to a future complaint? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, skip a and b)	<input type="checkbox"/>
a. Describe the complaint/circumstance:	<input type="checkbox"/>
b. What is the status of the complaint?	<input type="checkbox"/>
Complaints follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Purchasing	Guide page 1-14
21. Does your organization have a written purchasing policy? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Has the policy been updated since last accepted by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip b)	<input type="checkbox"/>
b. What pages of the purchasing policy include the following elements:	<input type="checkbox"/>
i Graduated purchasing authority (outlining what type of employees can authorize what level/type of purchase)	<input type="checkbox"/>
ii Dollar threshold at which your organization conducts a competitive process (e.g., phone quotes, written quotes, call for bids, etc.)	<input type="checkbox"/>
◆ At what level do you require sealed bids? \$	
iii An appeal process for competitive formal bid awards	<input type="checkbox"/>
22. Does your organization contract out any of the grant funded services? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a - c)	<input type="checkbox"/>
a. List what service(s) are performed by subcontractor(s):	
b. Was a copy of each subcontract approved by WSDOT prior to execution? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
c. Has any subcontract been modified since WSDOT's approval? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
d. Does the subcontract include all the required clauses from your grant agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>

Purchasing and subcontracting follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Employment Practices	Guide page 1-15
23. Do all employees receive minimum wage or higher? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
24. Are any employees subject to overtime under state or FTA law? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a)	<input type="checkbox"/>
a. Do they receive overtime time at a rate of time and a half for hours worked in excess of 40 hours per week? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
25. Has your organization provided sample job descriptions to WSDOT (e.g., Driver, Mechanic, Dispatcher, Manager)? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Have the descriptions been updated since accepted by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip b)	<input type="checkbox"/>
b. Does each job description include the required elements:	<input type="checkbox"/>
i. If the position is exempt or non-exempt from the Fair Labor Standards Act <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
ii. <i>FTA 5309, 5311, and 5311(f) funds only</i> - If the position is subject to FTA drug and alcohol testing <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/>
26. Are the following signs located where applications for employment are accepted and/or hiring takes place?	<input type="checkbox"/>
a. Employee Polygraph Protection Act <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. Equal Opportunity Employment is the Law <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
27. Are the following signs located in employee gathering areas, e.g. employee break room, lounge, or lunch room?	<input type="checkbox"/>
a. Job Safety & Health Protection <input type="checkbox"/> Yes <input type="checkbox"/> No (WA L&I)	<input type="checkbox"/>
b. Notice to Employees – if a Job Injury Occurs <input type="checkbox"/> Yes <input type="checkbox"/> No (WA L&I)	<input type="checkbox"/>
c. Your Rights as a Worker <input type="checkbox"/> Yes <input type="checkbox"/> No (WA L&I)	<input type="checkbox"/>
d. Equal Opportunity Employment is the Law <input type="checkbox"/> Yes <input type="checkbox"/> No (US EEO)	<input type="checkbox"/>
e. Notice to Employees – Unemployment Benefits <input type="checkbox"/> Yes <input type="checkbox"/> No (US ESD)	<input type="checkbox"/>
f. Employee Polygraph Protection Act <input type="checkbox"/> Yes <input type="checkbox"/> No (US DOL)	<input type="checkbox"/>
g. Fair Labor Standards Act – Minimum Wage Poster <input type="checkbox"/> Yes <input type="checkbox"/> No (US DOL)	<input type="checkbox"/>
h. Family Medical Leave Act of 1993 <input type="checkbox"/> Yes <input type="checkbox"/> No (US DOL)	<input type="checkbox"/>
i. USERRA <input type="checkbox"/> Yes <input type="checkbox"/> No (US DOL)	<input type="checkbox"/>

Topic

Follow-up

Employment practices follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Volunteer Drivers	Guide page 2-2
28. If your organization uses volunteer drivers, do you have a volunteer driver policy? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/>
Volunteer drivers follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Records Retention (all funds)	Guide page 1-25
29. Are records related to grant funded projects retained for at least 6 years past the completion of the project or the life of the asset, whichever is longer? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
Records retention follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
REQUIREMENTS SPECIFIC TO FTA FUNDS ONLY, QUESTIONS 30 to 50	
	<input type="checkbox"/> N/A
Audit	Guide page 1-24
	FTA
30. Did your organization spend over \$500,000 in FTA funds in the previous FTA fiscal year? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a - d)	<input type="checkbox"/>
a. Did your organization complete the required (circular A-133) single audit for FTA funds? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
i. What the single audit performed by a <u>separate, independent</u> auditor? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. Were there any findings in the most recent single audit report? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip i)	<input type="checkbox"/>
i. Has your organization addressed the findings? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:	<input type="checkbox"/>
c. Does the single audit report contain a completed schedule of federal funds received? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
d. Was a copy of the audit report submitted to WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>

Topic

Follow-up

Audit follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:		
Ethics	Guide page 1-25	FTA
31. Does your organization have a written code of ethics (ethics policy)? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
a. Has the code of ethics been modified since last accepted by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip b)		<input type="checkbox"/>
b. What pages of the policy address the following issues:		<input type="checkbox"/>
i Personal conflict of interest		<input type="checkbox"/>
ii Organizational conflict of interest		<input type="checkbox"/>
iii Identification and prevention		<input type="checkbox"/>
c. Does the policy cover employees, officers, board members, and agents? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain variation from wording		<input type="checkbox"/>
32. Did your organization receive \$100,000 or more in FTA funds during the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a)		<input type="checkbox"/>
a. Did your organization engage in lobbying activities? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip i and ii)		<input type="checkbox"/>
i How did you ensure that no FTA funds were used to pay for lobbying expenses?		<input type="checkbox"/>
ii Did your organization submit the required Standard Form-LLL "Disclosure Form to Report Lobbying" to WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
Ethics follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:		
Employment Practices	Guide page 1-27	FTA
33. Was your organization awarded \$1,000,000+ in FTA funds for operating or capital activities <i>or</i> \$250,000+ in planning funds in the last year AND have 50 or more public transportation-related employees? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a)		<input type="checkbox"/>
a. Does your organization have an equal employment opportunity policy? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>
i Has it been updated since last submitted WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/>

Employment practices follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:		
Purchasing	Guide page 3-3	FTA
34. Has your organization made any project purchases with a third party exceeding \$3,000? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	
a. Does your organization comply with the procurement requirements outlined in FTA Circular 4220.1F (micro, small and large purchases)? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	
b. Do you have documentation showing you gathered an adequate number of competitive quotes? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	
35. Does your organization use FTA funds to purchase goods and services in the amount of \$100,000 or more per procurement? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	
Purchasing follow -up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:		
Title VI	Guide page 1-28	FTA
36. Does your organization have a written Title VI policy? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	
a. Has the policy been updated since last accepted by WSDOT or FTA? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip b)	<input type="checkbox"/>	
b. What pages of the plan include the following elements:	<input type="checkbox"/>	
i Complaints procedures, to include tracking any active investigations, lawsuits, or complaints naming the grantee or WSDOT?	<input type="checkbox"/>	
ii Reasonable steps through a four-factor analysis to ensure meaningful access for persons with limited English proficiency (LEP)?	<input type="checkbox"/>	
iii Identification of how your organization notifies beneficiaries of your service and their rights under Title VI?	<input type="checkbox"/>	
Notification must include: <ul style="list-style-type: none"> • Basic Title VI non-discrimination language • Contact information to file a compliant • Contact information for more information 	<input type="checkbox"/>	
37. Describe how your organization notifies the public of their rights under Title VI (must go beyond website notification).	<input type="checkbox"/>	
38. Is there a specific non-English speaking population in your service area that exceeds either 1,000 people or 5% of the population (whichever is less)? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a)	<input type="checkbox"/>	

Topic

Follow-up

a. Are your vital documents translated into that language? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
Title VI follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Disadvantaged Business Enterprise Guide page 1-29 FTA	
39. Does your organization expect to award contracts with a combined total of \$250,000 or more in FTA funds during the current fiscal year (excluding rolling stock)? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a and b)	<input type="checkbox"/>
a. Are any contracts paid with FTA funds not administered by WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip i)	<input type="checkbox"/>
i Did your organization develop a DBE goal and plan approved by FTA? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. Did your board adopt WSDOT's plan? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
40. Please describe your good faith effort to purchase from DBE vendors:	<input type="checkbox"/>
41. Does your organization use the Minority and Women Owned Business Enterprise Handbook or on-line directory? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
DBE follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Signage: Labor postings (FTA 5311 & 5316 only) Guide page 1-17 FTA	<input type="checkbox"/> N/A
42. Is the 5333(b) Special Warranty (Appendix F) prepared on your organization's letterhead and posted in an area where transportation employees gather? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Are Appendices A and C attached behind the Special Warranty? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. Are the 5333(b) procedures on "How to File a Claim" also attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
43. Does your organization have an existing union collective bargaining agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No (if no, skip a)	<input type="checkbox"/>
a. Are the arbitration procedures required of 5333(b) (Appendix C) attached to the union contract as an addendum? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
Signage follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Charter Services and Unfair Competition Guide page 1-32 FTA	
44. What special events did you provide service for in the past year? <input type="checkbox"/> N/A (if N/A, skip a - d)	<input type="checkbox"/>

Topic

Follow-up

a. How did your organization learn of the event?	<input type="checkbox"/>
b. Did the event organizers approach you directly? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
c. Did the organizers post the event for hire on the FTA Charter website or did they advertise for transportation companies?	<input type="checkbox"/>
d. How was your organization compensated? <input type="checkbox"/> Special Fare <input type="checkbox"/> Donation	<input type="checkbox"/>
45. Did your organization register on the FTA Charter Registry? <input type="checkbox"/> Yes <input type="checkbox"/> No • What is your four-digit charter registry number in TEAM?	<input type="checkbox"/>
46. Has your organization provided any charter services, exempt or otherwise? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no skip a - c)	<input type="checkbox"/>
a. Do you log all charter trips? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
b. Did you register the exempt trip(s) on the FTA Charter Registry? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
c. Did your organization report the charter(s) to WSDOT on your quarterly report(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
d. Is your organization a Qualified Human Services Organization (QHSO)? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
e. Are you registered on the FTA Charter Registry as a QHSO? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
47. Does your organization have written procedures to handle complaints received that allege unfair competition? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
a. Has the procedure been updated since last submitted to WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
Charter service and unfair competition follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
School Bus Services Guide page 1-34 FTA	
48. Does your organization provide school bus transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
49. Does your organization provide school “tripper service”? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, skip a)	<input type="checkbox"/>
a. If yes, how is the service promoted to general public?	<input type="checkbox"/>
School bus follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
Program Income Guide page B-5 FTA	
50. Does your organization earn any non-fare revenue on grant-funded programs? <input type="checkbox"/> Yes <input type="checkbox"/> No (If no, skip a)	<input type="checkbox"/>
a. Did you report income details to WSDOT? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>

Topic

Follow-up

Program income follow-up: <input type="checkbox"/> Required: <input type="checkbox"/> Recommended: Other Comments:	
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