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BAY AREA AIR QUALITY MANAGEMENT DISTRICT **GRANT APPLICATION** 

TFCA REGIONAL FUND

VEHICLE TRIP REDUCTION GRANT PROGRAM

FYE 2020

### **Applicant Eligibility**

Application packages must be submitted to the Air District **BOTH** electronically (online) and as a hard copy (one copy). Complete and eligible applications received after this date will be reviewed on a first-come, first-served basis until all funds have been awarded. Only complete applications will be evaluated. Please refer to the <u>Vehicle Trip Reduction Grant</u> <u>Program</u> website for complete program eligibility requirements and instructions.

NOTE: This application will work best using Google Chrome or Mozilla Firefox browsers.

PART 1. ELIGIBILITY

Legal Name of Applicant Organization Bay Area Rapid Transit District

Applicant or Applicant Sponsor Type **Public Transit Agency** \*This grant is open only to public entities.

Does the agency have adequate funds to cover all stages of the proposed project from commencement through completion?

Yes

Does the agency have funding from a non-Air District source available and commit to funding at least 10% of total Eligible

Costs ("matching funds")?

### Yes

Is the agency in good standing with the Air District? Applicant must have met all applicable contractual requirements for any project funded by the Air District; have not failed a TFCA fiscal or performance audit in the past three years; and be in compliance with all local, state, and federal air quality regulations.

#### Yes

### **Project Eligibility**

Will the project achieve surplus emission reductions? i.e., reductions that are beyond what is required through regulations, contracts, and other legally binding obligations at the time the Air District executes the project's funding agreement. Yes

Will the project be open for use by all members of the public? Yes

Will the project commence by the end of calendar year 2020 or within 12 months from the date of execution of the funding agreement with the Air District, whichever is later? Yes

Will the project be located within the Air District's jurisdiction? Yes

If you selected "No" to any of the questions above, the project is not eligible for this Program.

What is the total amount of TFCA funds requested? - combined across all components included in a single application **110000** 

WEBINAR			
Name and ema	il of the represen	ative from your agency who attended the webinar and the date of th	e webinar.
Name <b>Mariana Parre</b> i	Email iras <u>MParrei@ba</u> i	Webinar Date <u>t.gov</u> - August 13, 2019	
PART 2. APPLICA	ANT INFORMATIO	N (Page 2 /6)	

APPLICANT'S ADDRESS
Legal Name of Applicant Organization
Bay Area Rapid Transit District

Legal Address	Street Address Line 2	City	State	Zip Code
300 Lakeside Drive		Oakland	CA	94612

Do you have a mailing address different from above? No

- CONTACT INFORMATION

**Project Contact** 

NamePosition/TitleEmail AddressPhone NumberSteve BeroldoManager Access Programssberold@bart.gov510-464-6158

Is the person authorized to sign documents the same as Project Contact? Yes

Is the person completing the application the same as Project Contact? Yes

# PART 3. GENERAL PROJECT INFORMATION (Page 3 /6)

Project Title

Bike Lockers Additions at San Leandro and El Cerrito Plaza BART Stations

Describe the project in 250 words or less. Include goals, risk and uncertainties, and readiness of the project. Shared use electronic bike lockers are now available for secure bike parking at 37 BART stations. This project will increase the number of lockers at San Leandro and El Cerrito Plaza stations where occupancy has reached capacity. When lockers routinely fill up it can discourage BART riders and potential BART riders from cycling to BART and/or using BART. These additional lockers will bring supply back ahead of demand and help BART to continue to grow bike access trips and ridership.

Identify all the components of your proposed project: - Bicycle Electronic Lockers and/or Racks

### -BICYCLE ELECTRONIC LOCKERS AND/OR RACKS

### Schedule

**Start date of Project's Implementation Phase:** indicate when work will commence (e.g., apply for permits, place order for equipment). All projects must commence by the end calendar year 2020 or a total of 12 months from the date of execution of funding agreement by the Air District, whichever is later.

**End date of Project's Implementation Phase:** indicate when all of the installation work for this project will be complete and the project will be open and available for use by the public.

Start date of Project's Implementation Phase End date of Project's Implementation Phase

	Description	Date
Milestone(s)	Diagram proposed locations and circulate for internal BART approvals	01/01/2020
Milestone(s)	Adjust and finalize installation locations and document approvals	01/31/2020
Milestone(s)	Initiate Procurement process	02/03/2020
Milestone(s)	Place order with eLock Technologies	02/17/2020
Milestone(s)	Receive delivery and begin installation	04/01/2020
Milestone(s)	Complete and document installation/operability	06/01/2020

PART 4. PROJECT INFORMATION (Page 4 /6)

## BICYCLE ELECTRONIC LOCKERS AND/OR RACKS PROPOSED BUDGET

Provide a line-item project budget that covers all costs directly related to the construction/installation of the bicycle rack or locker. **Only eligible costs listed under the Program guidance should be listed.** Please include TFCA funds requested, matching funds and source of matching funds. A cost quote must be provided for each new piece of equipment. If match funding for the costs in the Line-Item Budget is derived from more than a single source, specify each funding source and the amount of match funds on a separate line.

#### Select one:

I will fill out the Line-Item Budget for Bicycle Facilities below

- Proposed Budget (enter to nearest dollar)

Description of item	Total cost (\$)	TFCA Funds requested (\$)	Matching Funds (\$)
eLock Gen5 Electronic Bike Lockers	165622	110000	55622
Total Bike Racks and Lockers Cost:			
FFCA Funds Requested for Bike Racks and L	ockers:		
Fotal Matching Funds for Bike Racks and Lo 57302	ckers†:		
Matching Funds: Project sponsors must provide a Manager Funds may not be combined with TFCA Re		-	es. TFCA County Program

Provide the following detailed information for each location where the bicycle facility will be installed. If the project includes <u>more than one bicycle facility location, this section must be completed for each distinct location</u>. To add another location, click on "add another location" on the bottom right-hand corner of this section.

What type of bicycle infrastructure will you install at this site?

- Bicycle Electronic Lockers
- 1. Identify the location of the bicycle facility.

Bicycle	Facility	/ Street	Address
DICYCLE	I acitity		Audiess

6699 Fairmount Avenue El Cerrito

2. Identify the Activity Center(s) (e.g. transit station, office building, or school) and its street address that the bicycle facility serves.

Activity Center	Activity Center Street Address	City
El Cerrito Plaza BART	6699 Fairmount Avenue	El Cerrito
Blank	Added extra line not needed	Blank

3. Is this proposed location in a CARE Highly Impacted Community? No

4. Is this proposed location in a Priority Development Area (PDA)? Yes

Name of Location

El Cerrito

Bicycle Electronic Locker Information -

Provide the **type** and **quantity** of the electronic locker to be purchased (including name of the vendor, if known). If more than one type is selected, please add an additional row for each locker capacity type.

Vendor Name	Model	Quantity	Bike Capacity Per Locker
eLock Technologies	Gen5	6	4

### BICYCLE ELECTRONIC LOCKERS AND/OR RACKS LOCATION

Provide the following detailed information for each location where the bicycle facility will be installed. If the project includes <u>more than one bicycle facility location, this section must be completed for each distinct location</u>. To add another location, click on "add another location" on the bottom right-hand corner of this section.

What type of bicycle infrastructure will you install at this site?

- Bicycle Electronic Lockers

1. Identify the location of the bicycle facility.

Bicycle Facility Street Address

1401 San Leandro Blvd San Leandro

2. Identify the Activity Center(s) (e.g. transit station, office building, or school) and its street address that the bicycle facility serves.

Activity Center Activity Center Street Address City   San Leandro BART 1401 San Leandro Blvd San Leandro   8. Is this proposed location in a CARE Highly Impacted Community? San Leandro   8. Is this proposed location in a Priority Development Area (PDA)? San Leandro   9. Is this proposed location in a Priority Development Area (PDA)? San Leandro   9. Provide the type and quantity of the electronic locker to be purchased (including name of the vendor, if known ore than one type is selected, please add an additional row for each locker capacity type.
Is this proposed location in a CARE Highly Impacted Community? Is this proposed location in a Priority Development Area (PDA)? Bicycle Electronic Locker Information Provide the type and quantity of the electronic locker to be purchased (including name of the vendor, if know
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Vendor Name Model Quantity Bike Capacity Per Locker
eLock Technologies Gen5 5 4

## PART 5. SUPPLEMENTAL DOCUMENTS (Page 5 /6)

-Letter of Commitment or Resolution —

A signed Letter of Commitment from the applicant's authorized representative (e.g., Chief Executive or Financial Officer, Executive Director, or City Manager) or Resolution from the governing body (e.g., City Council, Board of Supervisors, or Board of Directors) that authorizes the submittal of the application; identifies the individual authorized to submit and carry out the proposal; and commits the sponsoring agency to provide all necessary funds to undertake the project including matching funds. Board resolutions may be submitted (by email or mail) after the application due date, but no later than **30 days from the deadline**.

Upload Letter of Commitment or Resolution

Letter	of	Commitment_	BART.pdf
	•••	oonnene_	

- Plan or Agreement -

Is any part of the Proposed Project required to be implemented as part of any Plan or Agreement? No

BICYCLE ELECTRONIC LOCKERS

**Required Supplemental Materials** 

- Bicycle Electronic Lockers Map

Map of the proposed bicycle facility showing the location of the parking. Highlight the location of the proposed bicycle facility and its distance (in miles) to public transit stations/hub, major activity center, or activity centers. Click "add another attachment" below to upload more than one file. (max 5)

Map of proposed bicycle facility San Leandro Station AC transit Map.pdf; San Leandro Station Map.pdf

Map of proposed bicycle facility El Cerrito Plaza Station Map.pdf

-Bicycle Plan

Copy of text from one of the following documents that describes the proposed bike parking facility: adopted countywide bicycle plan, Congestion Management Plan, countywide transportation plan, city general plan or area-specific plan, or Metropolitan Transportation Commission's Regional Bicycle Plan.

Relevant Bicycle Plan Excerpt BART Strategic Bike Plan\_7-12.pdf

Relevant Bicycle Plan Excerpt BART Bike Program Capital Plan\_6-17.pdf

-Bicycle Electronic Lockers Environmental Approval

If applicable, upload proof of environmental review, either a copy of exemption by lead agency, applicable negative declaration, or environmental impact report

#### -W-9-

A copy of your W-9, available from www.irs.gov, is **REQUIRED** for your **paper application**.

DO NOT UPLOAD THIS DOCUMENT.

Please mail to the following address as part of your Paper Application:

Bay Area Air Quality Management District Strategic Incentives Division Attn: Chengfeng Wang, Air Quality Program Manager 375 Beale St., STE 600 San Francisco, CA 94105

-Additional Information

If there's any additional or clarifying information you would like to include with your application, please enter it below (optional). You may also include attachments, click "Add another attachment" below to upload more than on file. (max 5)

Additional Information Attached are quotes from eLock Technologies for the purchase, delivery and setting in place of the 11 quads.

Additional information BART.Quote\_El Cerrito Plaza.pdf

Additional information BART.Quote\_San Leandro.pdf

## PART 6. CERTIFICATION (Page 6 /6)

By checking each box and signing below, I certify that:

I understand that this application is for evaluation purposes only and does not guarantee project funding. - Yes

To the best of my knowledge, the information contained in this application and in any documentation accompanying this application or submitted in furtherance of this application is true and accurate, and I understand that any misstatements or

omissions of material facts may disqualify this grant application and any monies awarded based on it. - Yes

The proposed project and the emission reductions that would be realized from it are not required by any federal, state, or local regulation, judicial order, agreement, memorandum of understanding, contract, mitigation requirement, or other binding obligation that requires the project applicant to implement any portion of the project. - Yes

All matching funds have been disclosed and that this application is for service, equipment/vehicle(s)/engine(s) that neight have been already been funded, nor are currently under consideration for funding by another air district, the California Air Resources Board (ARB), or by another public agency.

- Yes

I understand and agree that no costs funded by this program can be incurred until after the notice of award and after a funding agreement is executed between the project sponsor (grantee) and the Air District.

- Yes

The applicant entity I represent is in compliance and will remain in compliance with all applicable federal, state, and local air quality rules and regulations.

- Yes

I have the legal authority to apply for funding on behalf of the applicant entity and that I am authorized to sign this application on behalf of the applicant.

- Yes

Signed:

Date: \_\_\_\_\_

(Authorized Representative of Applicant)

Name of Authorized Representative of Applicant

Reminder: To complete the application process, <u>you must mail</u> one signed hard copy of the application along with any required supplemental documentation to the Air District at the address below. Board resolutions may be submitted 30 days after the application is submitted.

Bay Area Air Quality Management District Strategic Incentives Division Attn: Chengfeng Wang 375 Beale Street, Suite 600 San Francisco, CA 94105

By clicking the "PREVIEW AND PRINT" button below, you will be able to (1) preview your application, and (2) print <u>one</u> <u>hard copy</u> of your application to be mailed or delivered to the Air District.

Applicants must PRINT a copy of the application PRIOR to clicking "CONFIRM." After you have printed a copy, click the "CONFIRM" button to submit the application.

### Attached Files:

San Leandro Station AC transit Map.pdf (133 KB) El Cerrito Plaza Station AC transit Map.pdf (120 KB) BART Strategic Bike Plan\_7-12.pdf (289 KB) BART Bike Program Capital Plan\_6-17.pdf (8.60 MB) Letter of Commitment\_BART.pdf (625 KB) BART.Quote\_El Cerrito Plaza.pdf (56 KB) BART.Quote\_San Leandro.pdf (56 KB) San Leandro Station Map.pdf (133 KB) El Cerrito Plaza Station Map.pdf (120 KB)