



**CITRUS COUNTY TRANSPORTATION DISADVANTAGED
LOCAL COORDINATING BOARD (LCB)**

REGULAR MEETING

Thursday, May 14, 2026, at 9:30 a.m.

MEETING LOCATION: Lecanto Government Building, 3600 W. Sovereign Path, Room 166, Lecanto, FL

AGENDA

A. CALL TO ORDER

1. Moment of Silence
2. Pledge of Allegiance
3. Introduction of Board Members and Staff
4. Declaration of Quorum
5. Enter Proof of Publication into the Record

B. APPROVAL/MODIFICATION OF AGENDA (Limited to Board and Staff comment only)

C. REVIEW AND APPROVAL OF MINUTES

1. February 12, 2026, LCB Annual Public Workshop
2. February 12, 2026, LCB Regular Public Meeting

D. ACTION ITEMS

1. Review and Approval of the Community Transportation Coordinator (CTC) Annual Evaluation
2. Review and Approval of the FY 2027 Rate Model Calculation for Citrus County

E. REPORTS

1. Quarterly Report for January 1 through March 31, 2026, by the Community Transportation Coordinator (CTC) - Joanne Granger, Transit Director
2. Key Training Center Quarterly Report for January 1 through March 31, 2026 – Theresa Flick, Programs and Services Director

F. FEATURE PRESENTATION

Glorybee Nunez, Senior Human Services Program Specialist, Florida Agency for Health Care Administration

G. CITIZEN COMMENTS

H. BOARD MEMBER COMMENTS

I. MPO STAFF COMMENTS

J. ADJOURNMENT AND NEXT MEETING – The next regular meeting of the Citrus County Transportation Disadvantaged Local Coordinating Board (LCB) is scheduled for Thursday, September 10, 2026, beginning at 9:30 a.m., at the Lecanto Government Building, 3600 W. Sovereign Path, Room 166, Lecanto, Florida.

The meeting agenda and back-up materials are available online at:

www.hernandocounty.us/hernandocitrusmpo.

REVIEW AND APPROVAL OF MINUTES – FEBRUARY 12, 2026, LCB ANNUAL PUBLIC WORKSHOP

Attached for approval are the Annual Public Workshop Minutes of the Thursday, February 12, 2026, meeting of the Citrus County Transportation Disadvantaged Local Coordinator Board (LCB).

Staff Recommendation: It is recommended the LCB review and approve the Minutes of the February 12, 2026, workshop.

Attachment: Minutes from Thursday, February 12, 2026, Annual Public Workshop



CITRUS COUNTY TRANSPORTATION DISADVANTAGED LOCAL COORDINATING BOARD (LCB)

Thursday, February 12, 2026

ANNUAL PUBLIC WORKSHOP MINUTES

The Citrus County Transportation Disadvantaged Local Coordinating Board (LCB) held its Annual Public Workshop on February 12, 2026, at 9:30 a.m. at the Lecanto Government Building, 3600 W. Sovereign Path, Room 166, Lecanto, Florida. The meeting was advertised in the Citrus Chronicle newspaper, on the Hernando-Citrus MPO website and the Citrus County website. The agenda was available on the Hernando-Citrus MPO website.

MEMBERS PRESENT

Janet Berek, LCB Chairman, Citrus County Commissioner
David Douglas, LCB Vice Chairman, Citizen Advocate – Transit User as Primary Means
Chris Leffert, Florida Department of Transportation, District 7
Stephen Brown, Person with a Disability
Elizabeth Alacci, Florida Department of Children and Family Services
Glorybee Nunez, Florida Department of Health Care Administration
Elizabeth Watson, Alternate Member, State of Florida Agency for Persons with Disabilities
Katie Lucas, Local Medical Community Representative
Joanne Granger, Transit Services Director, Mass Transit Coordinator, non-voting representative of the CTC

MEMBERS ABSENT

Deirdre Barrett LaBelle, Local Representative for Children at Risk
Casey Ladd, Florida Department of Elder Affairs
Debbie Letterman, Regional Workforce Development Board

OTHERS PRESENT

Bob Esposito, MPO Executive Director
Mary Elwin, MPO Coordinator
Joy Turner, MPO Executive Assistant
Theresa Flick, Director, Key Training Center
Tiffany Kersey, Citrus County Transit

MEETING CALLED TO ORDER

- Chairman Berek called the meeting to order at 9:30 a.m.
- The Pledge of Allegiance and the introductions of Board and staff followed the Invocation.
- A quorum was declared, and the affidavit of publication was read into the record.

APPROVAL/MODIFICATION OF AGENDA

Motion: A motion was made by Ms. Lucas to approve the agenda. The motion was seconded by Mr. Douglas and the motion passed 7-0.

[It is noted for the record that LCB member, Elizabeth Alacci, representing the Florida Department of Children and Family Services, arrived at the meeting.]

PRESENTATION

Ms. Elwin gave a presentation on the Metropolitan Planning Organization (MPO), its relationship with the communities it serves, and provided an overview of the Transportation Disadvantaged Program and the role of the Local Coordinating Board.

CITIZEN COMMENTS - There were no citizen comments.

BOARD MEMBER COMMENTS - There were no Board member comments.

MPO STAFF COMMENTS - There were no MPO staff comments.

ADJOURNMENT AND NEXT MEETING

Chairman Barek adjourned the meeting at 9:57 a.m. The next regular meeting of the Citrus County Transportation Disadvantaged Local Coordinating Board (LCB) immediately followed the Annual Public Workshop. The meeting agenda and back-up materials are available online at: www.hernandocounty.us/hernandocitrusmpo.

DRAFT

REVIEW AND APPROVAL OF MINUTES – FEBRUARY 12, 2026, LCB REGULAR PUBLIC MEETING

Attached for approval are the Regular Public Meeting Minutes of the Thursday, February 12, 2026, meeting of the Citrus County Transportation Disadvantaged Local Coordinator Board (LCB).

Staff Recommendation: It is recommended the LCB review and approve the Minutes of the February 12, 2026, meeting.

Attachment: Minutes from Thursday, February 12, 2026, Regular Public Meeting



CITRUS COUNTY TRANSPORTATION DISADVANTAGED LOCAL COORDINATING BOARD (LCB)

Thursday, February 12, 2026

MINUTES

The Citrus County Transportation Disadvantaged Local Coordinating Board (LCB) held a regular quarterly meeting on February 12, 2026, at 9:45 a.m. at the Lecanto Government Building, 3600 W. Sovereign Path, Room 166, Lecanto, Florida. The meeting was advertised in the Citrus Chronicle newspaper, on the Hernando-Citrus MPO website and the Citrus County website. The agenda was available on the Hernando-Citrus MPO website.

MEMBERS PRESENT

Janet Barek, LCB Chairman, Citrus County Commissioner
David Douglas, LCB Vice Chairman, Citizen Advocate – Transit User as Primary Means
Chris Leffert, Florida Department of Transportation, District 7
Stephen Brown, Person with a Disability
Elizabeth Alacci, Florida Department of Children and Family Services
Glorybee Nunez, Florida Department of Health Care Administration
Elizabeth Watson, Alternate Member, State of Florida Agency for Persons with Disabilities
Katie Lucas, Local Medical Community Representative
Joanne Granger, Transit Services Director, Mass Transit Coordinator, non-voting representative of the CTC

MEMBERS ABSENT

Deirdre Barrett LaBelle, Local Representative for Children at Risk
Casey Ladd, Florida Department of Elder Affairs
Debbie Letterman, Regional Workforce Development Board

OTHERS PRESENT

Bob Esposito, MPO Executive Director
Mary Elwin, MPO Coordinator
Joy Turner, MPO Executive Assistant
Theresa Flick, Director, Key Training Center
Tiffany Kersey, Citrus County Transit

MEETING CALLED TO ORDER

- Chairman Barek called the meeting to order at 9:57 a.m., immediately following the Annual Public Workshop.
- A quorum was declared, and the affidavit of publication was read into the record.

APPROVAL/MODIFICATION OF AGENDA

Motion: A motion was made by Mr. Douglas to approve the agenda. The motion was seconded by Ms. Nunez and the motion passed 8-0.

ANNUAL ELECTION OF VICE CHAIRMAN FOR 2026

Motion: A motion was made by Mr. Brown to elect Mr. Douglas as LCB Vice Chairman for 2026. The motion was seconded by Ms. Lucas and the motion passed 8-0.

ANNUAL ELECTION OF GRIEVANCE COMMITTEE MEMBERS FOR 2026

After Board discussion the following LCB Board members were nominated as the Grievance Committee for 2026:

1. David Douglas, Chairman
2. Katie Lucas, Vice Chairman
3. Jeannette Estes, member
4. Steve Brown, alternate member

Motion: A motion was made by Ms. Lucas to approve the nominated LCB Grievance Committee members and positions for 2026. The motion was seconded by Ms. Watson and the motion passed 8-0.

ANNUAL REVIEW AND APPROVAL OF THE LCB GRIEVANCE PROCEDURES

Motion: A motion was made by Mr. Brown to approve the Citrus County LCB Grievance Procedures as written, originally approved on February 13, 2025, and reviewed on February 12, 2026, and authorize the Chairman's signature thereon. The motion was seconded by Ms. Alacci and the motion passed 8-0.

REPORTS

Quarterly Report for October 1 through December 31, 2025, by the Community Transportation Coordinator (CTC)- Joanne Granger, Transit Director

Ms. Granger, representing the CTC, reported that November and December ridership numbers were lower than usual because the service operated three fewer days due to the holidays. Education and training trips also declined during this period, as schools were closed for nearly two weeks in December.

Employment-related trips remain high, which is a positive trend the agency aims to maintain, Ms. Granger noted. Medical and nutritional trips have stayed consistent. The majority of trips this quarter continue to serve transportation-disadvantaged (TD) riders, and there are currently 1,580 active TD applications on file. Veteran trips increased from October through December.

Chairman Berek asked whether the new shopping center has increased ridership. Ms. Granger noted a modest increase in trips to Walmart and Target on the deviated fixed route, while door-to-door service levels have remained steady.

Ms. Granger reported that Citrus Transit has been approved for five additional transit vans and five part-time drivers, which will help accommodate early-morning and later-evening trips. The busiest times for employment trips are between 6–9 a.m. and again around 3 p.m.

The Board also discussed the potential need to extend operating hours to support increasing employment and education demand, as well as the ability to leave phone messages for Citrus Transit personnel at any time. Phone lines are staffed from 8 a.m. to 5 p.m., Monday through Friday, and reservations should be made two days in advance.

Key Training Center Quarterly Report for October 1 through December 31, 2025 – Theresa Flick, Key Training Center Programs and Services Director

Ms. Flick reported that, similar to what Ms. Granger noted earlier, the Key Training Center experienced a decrease in ridership from October through December due to the holidays. During this period, many family members take their loved ones home or out for activities, reducing the need for the Center's transportation services.

Despite the seasonal decline, the Center provided 14,117 total trips, including 1,566 trips for non-ambulatory clients. Most trips (7,199) were for transportation to and from the adult day training program, which is educational in nature. The second-highest trip purpose was medical transportation, accounting for 6,211 trips.

FEATURE PRESENTATION

Chris Leffert, Transit Programs Director for Florida Department of Transportation District 7, provided an overview of the FDOT Section 5310 Grant Program, which serves individuals who are 65 years or older or who have a disability.

Chairman Barek confirmed that Glorybee Nunez, with the Florida Department of Health Care Administration, will deliver the Feature Presentation at the May 14, 2026, Citrus County Transportation Disadvantaged Local Coordinating Board (LCB) meeting.

CITIZEN COMMENTS - There were no citizen comments.

BOARD MEMBER COMMENTS - There were no Board member comments.

MPO STAFF COMMENTS

Mr. Esposito shared the following updates:

- The MPO is in the process of updating the List of Priority Projects and is proposing the following approach:
 - Maintain the current list without expanding it, while identifying cost-feasible, smaller-scale improvements that can be advanced (e.g., turn signals, adding turn lanes, intersection improvements).
 - Move some larger, locally focused projects to a secondary list to position them for potential advancement if local and state funding becomes available.
 - Reduce the number of projects on the Transportation Alternative (TA) list by removing items that will unlikely be able to receive TA funding.
- The Hernando County attorney is reviewing a draft Letter of Understanding (LOU) provided by FDOT for County Line Road. It will be presented to the Hernando County Board of County Commissioners.
- Work has begun on the new two-year Unified Planning Work Program (UPWP), which will outline MPO projects and activities for FY2027-FY2028.
- Traffic counts and level-of-service analysis for both Citrus and Hernando are in progress.
- Mr. Esposito attended the Metropolitan Planning Organization Advisory Council (MPOAC) meeting on Wednesday, January 28, in Orlando.
- Mary Elwin and Mr. Esposito participated in the Florida Metropolitan Planning Partnership (FMPP) meeting on Thursday, January 29, in Orlando, which was well attended by Florida MPOs.
- FTE – The Centralia Road Interchange Study that is being conducted by the Florida Turnpike Enterprise (FTE) is expected to be completed and available at the end of April.
- The MPO is currently updating its Congestion Management Process and its Complete Streets Plan.

ADJOURNMENT AND NEXT MEETING

Chairman Barek adjourned the meeting at 10:40 a.m. The next regular meeting of the Citrus County Transportation Disadvantaged Local Coordinating Board (LCB) is scheduled for Thursday, May 14, 2026, beginning at 9:30 a.m., at the Lecanto Government Building, 3600 W. Sovereign Path, Room 166, Lecanto, Florida. The meeting agenda and back-up materials are available online at:

www.hernandocounty.us/hernandocitrusmpo.

REVIEW AND APPROVAL OF THE COMMUNITY TRANSPORTATION COORDINATOR (CTC) ANNUAL EVALUATION

Attached is the Annual Evaluation of the Community Transportation Coordinator (CTC) conducted by the Hernando-Citrus MPO staff (Planning Agency). Based on the review, the CTC appears to be operating consistent with the Florida Statutes Chapter 427, and Rule 41-2 of the Florida Administrative Code.

Staff Recommendation: It is recommended the LCB review the 2026 Annual CTC Evaluation, provide comments, and approve for submittal to the Florida Commission for the Transportation Disadvantaged (CTD).

Attachment: CTC Annual Evaluation

REVIEW AND APPROVAL OF THE FY 2027 RATE MODEL CALCULATION FOR CITRUS COUNTY

The Commission for the Transportation Disadvantaged (CTD) has approved the attached 2026-2027 Rate Calculation as submitted by the Community Transportation Coordinator (CTC). The CTC utilizes the CTD's Rate Calculation Workbook which contains methodology that considers aspects of the operations and is the basis of the fees charged for services by the CTC for the upcoming year. The CTD requires the Rate Calculation to be reviewed and approved by the Transportation Disadvantaged Local Coordinating Board. The Rate Calculation will be inserted into the Transportation Disadvantaged Service Plan that is annually reviewed and updated. The annual update of the TDSP is scheduled for the next meeting of the Transportation Disadvantaged Local Coordinating Board to be held on September 10, 2026.

Staff Recommendation: It is recommended the LCB review and approve the FY 2027 Rate Model Calculation as reviewed and approved by the Commission for Transportation Disadvantaged.

Attachment: FY 2027 Rate Model Calculation for Citrus County

DRAFT

CTC
EVALUATION WORKBOOK

Florida Commission for the



**Transportation
Disadvantaged**

CTC BEING REVIEWED: _____

COUNTY (IES): _____

ADDRESS: _____

CONTACT: _____ **PHONE:** _____

REVIEW PERIOD: _____ **REVIEW DATES:** _____

PERSON CONDUCTING THE REVIEW: _____

CONTACT INFORMATION: _____

FORMATTED 2011 – 2012

LCB EVALUATION WORKBOOK

ITEM	PAGE
REVIEW CHECKLIST _____	3
EVALUATION INFORMATION _____	5
ENTRANCE INTERVIEW QUESTIONS _____	6
GENERAL QUESTIONS _____	9
CHAPTER 427, F.S. _____	13
RULE 41-2, F.A.C. _____	22
COMMISSION STANDARDS _____	32
LOCAL STANDARDS _____	33
AMERICANS WITH DISABILITIES ACT _____	36
FY GRANT QUESTIONS _____	42
STATUS REPORT _____	43
ON-SITE OBSERVATION _____	45
SURVEYS _____	47
LEVEL OF COST WORKSHEET # 1 _____	52
LEVEL OF COMPETITION WORKSHEET #2 _____	53
LEVEL OF AVAILABILITY WORKSHEET #3 _____	55

REVIEW CHECKLIST & SCHEDULE

COLLECT FOR REVIEW:

- APR Data Pages
- QA Section of TDSP
- Last Review (Date: _____)
- List of Omb. Calls
- QA Evaluation
- Status Report (from last review)
- AOR Submittal Date
- TD Clients to Verify
- TDTF Invoices
- Audit Report Submittal Date

ITEMS TO REVIEW ON-SITE:

- SSPP
- Policy/Procedure Manual
- Complaint Procedure
- Drug & Alcohol Policy (see certification)
- Grievance Procedure
- Driver Training Records (see certification)
- Contracts
- Other Agency Review Reports
- Budget
- Performance Standards
- Medicaid Documents

ITEMS TO REQUEST:

- REQUEST INFORMATION FOR RIDER/BENEFICIARY SURVEY** (Rider/Beneficiary Name, Agency who paid for the trip [sorted by agency and totaled], and Phone Number)
- REQUEST INFORMATION FOR CONTRACTOR SURVEY** (Contractor Name, Phone Number, Address and Contact Name)
- REQUEST INFORMATION FOR PURCHASING AGENCY SURVEY** (Purchasing Agency Name, Phone Number, Address and Contact Name)
- REQUEST ANNUAL QA SELF CERTIFICATION** (Due to CTD annually by January 15th).
- MAKE ARRANGEMENTS FOR VEHICLES TO BE INSPECTED** (Only if purchased after 1992 and privately funded).

INFORMATION OR MATERIAL TO TAKE WITH YOU:

- Measuring Tape Stop Watch

EVALUATION INFORMATION

An LCB review will consist of, but is not limited to the following pages:

1	Cover Page
5 - 6	Entrance Interview Questions
12	Chapter 427.0155 (3) Review the CTC monitoring of contracted operators
13	Chapter 427.0155 (4) Review TDSP to determine utilization of school buses and public transportation services
19	Insurance
23	Rule 41-2.011 (2) Evaluation of cost-effectiveness of Coordination Contractors and Transportation Alternatives
25 - 29	Commission Standards and Local Standards
39	On-Site Observation
40 – 43	Surveys
44	Level of Cost - Worksheet 1
45- 46	Level of Competition – Worksheet 2
47 - 48	Level of Coordination – Worksheet 3

Notes to remember:

- **The CTC should not conduct the evaluation or surveys. If the CTC is also the PA, the PA should contract with an outside source to assist the LCB during the review process.**
- **Attach a copy of the Annual QA Self Certification.**

ENTRANCE INTERVIEW QUESTIONS

INTRODUCTION AND BRIEFING:

- Describe the evaluation process (LCB evaluates the CTC and forwards a copy of the evaluation to the CTD).
- The LCB reviews the CTC once every year to evaluate the operations and the performance of the local coordinator.

The LCB will be reviewing the following areas:

- Chapter 427, Rules 41-2 and 14-90, CTD Standards, and Local Standards
 - Following up on the Status Report from last year and calls received from the Ombudsman program.
 - Monitoring of contractors.
 - Surveying riders/beneficiaries, purchasers of service, and contractors
- The LCB will issue a Review Report with the findings and recommendations to the CTC no later than 30 working days after the review has concluded.
 - Once the CTC has received the Review Report, the CTC will submit a Status Report to the LCB within 30 working days.
 - Give an update of Commission level activities (last meeting update and next meeting date), if needed.

USING THE APR, COMPILE THIS INFORMATION:

1. OPERATING ENVIRONMENT:

- RURAL URBAN

2. ORGANIZATION TYPE:

- PRIVATE-FOR-PROFIT
- PRIVATE NON-PROFIT
- GOVERNMENT
- TRANSPORTATION AGENCY

6. NAME THE ORGANIZATIONS AND AGENCIES THAT PURCHASE SERVICE FROM THE CTC AND THE PERCENTAGE OF TRIPS EACH REPRESENTS?
(Recent APR information may be used)

Name of Agency	% of Trips	Name of Contact	Telephone Number

7. REVIEW AND DISCUSS TD HELPLINE CALLS:

	Number of calls	Closed Cases	Unsolved Cases
Cost			
Medicaid			
Quality of Service			
Service Availability			
Toll Permit			
Other			

GENERAL QUESTIONS

Use the TDSP to answer the following questions. If these are not addressed in the TDSP, follow-up with the CTC.

1. DESIGNATION DATE OF CTC:

2. WHAT IS THE COMPLAINT PROCESS?

IS THIS PROCESS IN WRITTEN FORM? Yes No
(Make a copy and include in folder)

Is the process being used? Yes No

3. DOES THE CTC HAVE A COMPLAINT FORM? Yes No
(Make a copy and include in folder)

4. DOES THE COMPLAINT FORM INCORPORATE ALL ELEMENTS OF THE CTD'S
UNIFORM SERVICE REPORTING GUIDEBOOK?
 Yes No

5. DOES THE FORM HAVE A SECTION FOR RESOLUTION OF THE COMPLAINT?
 Yes No

**Review completed complaint forms to ensure the resolution section is
being filled out and follow-up is provided to the consumer.**

6. IS A SUMMARY OF COMPLAINTS GIVEN TO THE LCB ON A REGULAR BASIS?
 Yes No When applicable

7. WHEN IS THE DISSATISFIED PARTY REFERRED TO THE TD HELPLINE?

8. WHEN A COMPLAINT IS FORWARDED TO YOUR OFFICE FROM THE
OMBUDSMAN PROGRAM, IS THE COMPLAINT ENTERED INTO THE LOCAL
COMPLAINT FILE/PROCESS?
 Yes No

If no, what is done with the complaint?

9. DOES THE CTC PROVIDE WRITTEN RIDER/BENEFICIARY INFORMATION OR BROCHURES TO INFORM RIDERS/ BENEFICIARIES ABOUT TD SERVICES?
 Yes No If yes, what type?

10. DOES THE RIDER/ BENEFICIARY INFORMATION OR BROCHURE LIST THE OMBUDSMAN NUMBER?
 Yes No

11. DOES THE RIDER/ BENEFICIARY INFORMATION OR BROCHURE LIST THE COMPLAINT PROCEDURE?
 Yes No

12. WHAT IS YOUR ELIGIBILITY PROCESS FOR TD RIDERS/ BENEFICIARIES?
An application is required for TD service eligibility and is valid for a two-year period. A current application is available on CCT's website.
Please Verify These Passengers Have an Eligibility Application on File:

TD Eligibility Verification			
Name of Client	Address of client	Date of Ride	Application on File?

13. WHAT INNOVATIVE IDEAS HAVE YOU IMPLEMENTED IN YOUR COORDINATED SYSTEM?

TD Eligibility Verification

Name of Client	Address of Client	Date of Ride	Application on File?
Connie Sanford	2757 N Forest Ridge Blvd, A-112, Hernando FL 34442	3/24/2026	Yes
Nicholas Rivera	6064 E. Plum St., Inverness, FL 34452	3/26/2025	Yes
Cyndi (Cynthia) Kennedy	512 NE 16th Ct, Crystal River, FL 34428	3/24/2026	Yes

14. ARE THERE ANY AREAS WHERE COORDINATION CAN BE IMPROVED?

15. WHAT BARRIERS ARE THERE TO THE COORDINATED SYSTEM?

16. ARE THERE ANY AREAS THAT YOU FEEL THE COMMISSION SHOULD BE AWARE OF OR CAN ASSIST WITH?

17. WHAT FUNDING AGENCIES DOES THE CTD NEED TO WORK CLOSELY WITH IN ORDER TO FACILITATE A BETTER-COORDINATED SYSTEM?

18. HOW ARE YOU MARKETING THE VOLUNTARY DOLLAR?

GENERAL QUESTIONS

Findings:

Recommendations:

COMPLIANCE WITH CHAPTER 427, F.S.

**Review the CTC last AOR submittal for compliance with 427. 0155(2)
“Collect Annual Operating Data for submittal to the Commission.”**

REPORTING TIMELINESS

Were the following items submitted on time?

- a. Annual Operating Report Yes No
- Any issues that need clarification? Yes No

Any problem areas on AOR that have been re-occurring?

List:

- b. Memorandum of Agreement Yes No
- c. Transportation Disadvantaged Service Plan Yes No
- d. Grant Applications to TD Trust Fund Yes No
- e. All other grant application (____%) Yes No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Review the CTC monitoring of its transportation operator contracts to ensure compliance with 427.0155(3), F.S.
“Review all transportation operator contracts annually.”

WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS OPERATOR(S) AND HOW OFTEN IS IT CONDUCTED?

Is a written report issued to the operator? Yes No

If **NO**, how are the contractors notified of the results of the monitoring?

WHAT TYPE OF MONITORING DOES THE CTC PERFORM ON ITS COORDINATION CONTRACTORS AND HOW OFTEN IS IT CONDUCTED?

Is a written report issued? Yes No

If **NO**, how are the contractors notified of the results of the monitoring?

WHAT ACTION IS TAKEN IF A CONTRACTOR RECEIVES AN UNFAVORABLE REPORT?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

ASK TO SEE DOCUMENTATION OF MONITORING REPORTS.

COMPLIANCE WITH CHAPTER 427, F.S.

Review the TDSP to determine the utilization of school buses and public transportation services [Chapter 427.0155(4)]

“Approve and coordinate the utilization of school bus and public transportation services in accordance with the TDSP.”

HOW IS THE CTC USING SCHOOL BUSES IN THE COORDINATED SYSTEM?

Rule 41-2.012(5)(b): *"As part of the Coordinator's performance, the local Coordinating Board shall also set an annual percentage goal increase for the number of trips provided within the system for ridership on public transit, where applicable. In areas where the public transit is not being utilized, the local Coordinating Board shall set an annual percentage of the number of trips to be provided on public transit."*

HOW IS THE CTC USING PUBLIC TRANSPORTATION SERVICES IN THE COORDINATED SYSTEM?

N/A

IS THERE A GOAL FOR TRANSFERRING PASSENGERS FROM PARATRANSIT TO TRANSIT?

Yes No

If YES, what is the goal?

Is the CTC accomplishing the goal? Yes No

IS THE CTC IN COMPLIANCE WITH THIS REQUIREMENT? Yes No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Review of local government, federal and state transportation applications for TD funds (all local, state or federal funding for TD services) for compliance with 427.0155(5).
“Review all applications for local government, federal, and state transportation disadvantaged funds, and develop cost-effective coordination strategies.”

IS THE CTC INVOLVED WITH THE REVIEW OF APPLICATIONS FOR TD FUNDS, IN CONJUNCTION WITH THE LCB? (TD Funds include *all* funding for transportation disadvantaged services, i.e. Section 5310 [formerly Sec.16] applications for FDOT funding to buy vehicles granted to agencies who are/are not coordinated)

Yes No

If Yes, describe the application review process.

If no, is the LCB currently reviewing applications for TD funds (any federal, state, and local funding)? Yes No

If no, is the planning agency currently reviewing applications for TD funds?
 Yes No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

**Review priorities listed in the TDSP, according to Chapter 427.0155(7).
*“Establish priorities with regard to the recipients of non-sponsored transportation disadvantaged services that are purchased with Transportation Disadvantaged Trust monies.”***

REVIEW THE QA SECTION OF THE TDSP (ask CTC to explain):

WHAT ARE THE PRIORITIES FOR THE TDTF TRIPS?

HOW ARE THESE PRIORITIES CARRIED OUT?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Ensure CTC compliance with the delivery of transportation services, 427.0155(8).

“Have full responsibility for the delivery of transportation services for the transportation disadvantaged as outlined in s. 427.015(2).”

Review the Operational section of the TDSP

1. Hours of Service:

2. Hours of Intake:

3. Provisions for After Hours Reservations/Cancellations?

4. What is the minimum required notice for reservations?

5. How far in advance can reservations be place (number of days)?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

COMPLIANCE WITH CHAPTER 427, F.S.

Review the cooperative agreement with the local WAGES coalitions according to Chapter 427.0155(9).
“Work cooperatively with local WAGES coalitions established in Chapter 414 to provide assistance in the development of innovative transportation services for WAGES participants.”

WHAT TYPE OF ARRANGEMENT DO YOU HAVE WITH THE LOCAL WAGES COALITION?

HAVE ANY INNOVATIVE WAGES TRANSPORTATION SERVICES BEEN DEVELOPED?

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

CHAPTER 427

Findings:

Recommendations:

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.006(1), Minimum Insurance Compliance
“...ensure compliance with the minimum liability insurance requirement of \$100,000 per person and \$200,000 per incident...”

WHAT ARE THE MINIMUM LIABILITY INSURANCE REQUIREMENTS?

WHAT ARE THE MINIMUM LIABILITY INSURANCE REQUIREMENTS IN THE OPERATOR AND COORDINATION CONTRACTS?

HOW MUCH DOES THE INSURANCE COST (per operator)?

Operator	Insurance Cost

DOES THE MINIMUM LIABILITY INSURANCE REQUIREMENTS EXCEED \$1 MILLION PER INCIDENT?

Yes No

If yes, was this approved by the Commission? Yes No

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

Citrus County Transit - Drivers

Driver last Name	Drivers License review	Last Physical	CPR/1st Aid	Def.Driving	ADA Training	Event Reporting
Ann Osborn	11/5/2025	3/13/2026	N/A	10/13/2025	7/17/2025	12/10/2025
Kathy Damron	11/5/2025	4/2/2025	N/A	11/4/2025	7/17/2025	12/11/2025
Luis Rodriguez	11/5/2025	8/12/2025	N/A	10/28/2025	7/21/2025	12/17/2025
James Pritchard	11/5/2025	9/24/2025	N/A	12/16/2025	7/29/2025	12/3/2025
Laurabeth Whistler	11/5/2025	9/17/2025	N/A	10/8/2025	7/25/2025	12/5/2025
Maria Hidalgo	11/5/2025	3/16/2026	N/A	10/9/2025	7/21/2025	12/5/2025
Rose Morgan	11/5/2025	9/23/2026	N/A	2/10/2026	10/18/2025	12/11/2025
Felicia Murphy	11/5/2025	10/15/2025	N/A	12/5/2025	11/13/2025	12/3/2025
Michelle Moses	11/5/2025	11/11/2025	N/A	12/19/2025	12/15/2025	12/3/2025
Luis Rivera	11/5/2025	3/11/2026	N/A	10/6/2025	5/29/2025	12/10/2025
Angel flores	11/5/2025	2/5/2025	N/A	10/29/2025	9/12/2025	12/10/2025
Norman Wood	11/5/2025	7/16/2025	N/A	12/22/2025	6/6/2025	12/30/2025
Joseph Garvin	11/5/2025	5/14/2025	N/A	12/29/2025	6/6/2025	12/29/2025
Bill Evans	11/5/2025	6/25/2025	N/A	10/6/2025	6/16/2025	12/5/2025
Mark Wallace	11/5/2025	1/20/2026	N/A	2/12/2026	2/16/2026	2/9/2026
Daniel McGrail	11/5/2025	1/20/2026	N/A	2/12/2026	2/16/2026	2/9/2026
Robert Rock	11/5/2025	4/23/2025	N/A	Pending	7/20/2025	12/10/2025
Brian Dewitt	11/5/2025	3/16/2026	N/A	4/15/2025	8/4/2025	12/15/2025
Kevin Corcoran	11/5/2025	5/20/2025	N/A	12/18/2025	6/16/2025	12/10/2025
Timothy Martin	11/5/2025	12/22/2025	N/A	1/26/2026	2/2/2026	1/21/2026

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.006(3), Drug and Alcohol Testing
“...shall assure the purchaser of their continuing compliance with the applicable state or federal laws relating to drug testing...”

With which of the following does the CTC (and its contracted operators) Drug and Alcohol Policy comply?

- FTA (Receive Sect. 5307, 5309, or 5311 funding)
- FHWA (Drivers required to hold a CDL)
- Neither

REQUEST A COPY OF THE DRUG & ALCOHOL POLICY AND LATEST COMPLIANCE REVIEW.

DATE OF LAST DRUG & ALCOHOL POLICY REVIEW: _____

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

Comments:

COMPLIANCE WITH 41-2, F.A.C.

Compliance with 41-2.011(2), Evaluating Cost-Effectiveness of Coordination Contractors and Transportation Alternatives.

“...contracts shall be reviewed annually by the Community Transportation Coordinator and the Coordinating Board as to the effectiveness and efficiency of the Transportation Operator or the renewal of any Coordination Contracts.”

1. IF THE CTC HAS COORDINATION CONTRACTORS, DETERMINE THE COST-EFFECTIVENESS OF THESE CONTRACTORS.

Cost [CTC and Coordination Contractor (CC)]

	CTC	CC #1	CC #2	CC #3	CC #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					

2. DO YOU HAVE TRANSPORTATION ALTERNATIVES? Yes No
 (Those specific transportation services approved by rule or the Commission as a service not normally arranged by the Community Transportation Coordinator, but provided by the purchasing agency. Example: a neighbor providing the trip)

Cost [CTC and Transportation Alternative (Alt.)]

	CTC	Alt. #1	Alt. #2	Alt. #3	Alt. #4
Flat contract rate (s) (\$ amount / unit)					
Detail other rates as needed: (e.g. ambulatory, wheelchair, stretcher, out-of-county, group)					
Special or unique considerations that influence costs?					
Explanation:					

IS THE CTC IN COMPLIANCE WITH THIS SECTION? Yes No

RULE 41-2

Findings:

Recommendations:

COMPLIANCE WITH 41-2, F.A.C.

Compliance with Commission Standards
“...shall adhere to Commission approved standards...”

Review the TDSP for the Commission standards.

Commission Standards	Comments
Local toll free phone number must be posted in all vehicles.	
Vehicle Cleanliness	
Passenger/Trip Database	

Adequate seating	
Driver Identification	
Passenger Assistance	
Smoking, Eating and Drinking	

Two-way Communications	
Air Conditioning/Heating	
Billing Requirements	

COMMISSION STANDARDS

Findings:

Recommendations:

COMPLIANCE WITH 41-2, F.A.C.

Compliance with Local Standards

“...shall adhere to Commission approved standards...”

Review the TDSP for the Local standards.

Local Standards	Comments
Transport of Escorts and dependent children policy	
Use, Responsibility, and cost of child restraint devices	
Out-of-Service Area trips	
CPR/1st Aid	
Driver Criminal Background Screening	
Rider Personal Property	
Advance reservation requirements	
Pick-up Window	

<i>Measurable Standards/Goals</i>	<i>Standard/Goal</i>	<i>Latest Figures</i>	<i>Is the CTC/Operator meeting the Standard?</i>
Public Transit Ridership	CTC 26,697	CTC 30,396	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
On-time performance	CTC 85%	CTC 99.64%	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Passenger No-shows	CTC <3 per rider/mo	CTC 1	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Accidents	CTC 6	CTC 0	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Roadcalls	CTC <10,000 miles/yr	CTC 1	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Complaints <i>Number filed:</i>	CTC 0	CTC 0	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	
Call-Hold Time	CTC 4 Minutes	CTC 1 Minute	Yes
	Operator A	Operator A	
	Operator B	Operator B	
	Operator C	Operator C	

LOCAL STANDARDS

Findings:

Recommendations:

COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

REVIEW COPIES OF THE PUBLIC INFORMATION PROVIDED.

DOES PUBLIC INFORMATION STATE THAT ACCESSIBLE FORMATS ARE AVAILABLE UPON REQUEST? Yes No

ARE ACCESSIBLE FORMATS ON THE SHELF? Yes No

IF NOT, WHAT ARRANGEMENTS ARE IN PLACE TO HAVE MATERIAL PRODUCED IN A TIMELY FASHION UPON REQUEST?

DO YOU HAVE TTY EQUIPMENT OR UTILIZE THE FLORIDA RELAY SYSTEM?
 Yes No

IS THE TTY NUMBER OR THE FLORIDA RELAY SYSTEM NUMBERS LISTED WITH THE OFFICE PHONE NUMBER? Yes No

Florida Relay System:
Voice- 1-800-955-8770
TTY- 1-800-955-8771

EXAMINE OPERATOR MANUALS AND RIDER INFORMATION. DO CURRENT POLICIES COMPLY WITH ADA PROVISION OF SERVICE REQUIREMENTS REGARDING THE FOLLOWING:

Provision of Service	Training Provided	Written Policy	Neither
Accommodating Mobility Aids			
Accommodating Life Support Systems (O ₂ Tanks, IV's...)			
Passenger Restraint Policies			
Standee Policies (persons standing on the lift)			
Driver Assistance Requirements			
Personal Care Attendant Policies			
Service Animal Policies			
Transfer Policies (From mobility device to a seat)			
Equipment Operation (Lift and securement procedures)			
Passenger Sensitivity/Disability Awareness Training for Drivers			

RANDOMLY SELECT ONE OR TWO VEHICLES PER CONTRACTOR (DEPENDING ON SYSTEM SIZE) THAT ARE IDENTIFIED BY THE CTC AS BEING ADA ACCESSIBLE AND PURCHASED WITH PRIVATE FUNDING, AFTER 1992. CONDUCT AN INSPECTION USING THE ADA VEHICLE SPECIFICATION CHECKLIST.

INSPECT FACILITIES WHERE SERVICES ARE PROVIDED TO THE PUBLIC (ELIGIBILITY DETERMINATION, TICKET/COUPON SALES, ETC...).

IS A RAMP PROVIDED? Yes No

ARE THE BATHROOMS ACCESSIBLE? Yes No

Bus and Van Specification Checklist

Name of Provider:

Vehicle Number (either VIN or provider fleet number):

Type of Vehicle: Minivan Van Bus (>22')
 Minibus (<= 22') Minibus (>22')

Person Conducting Review:

Date:

Review the owner's manual, check the stickers, or ask the driver the following:

- The lift must have a weight limit of at least 600 pounds.
- The lift must be equipped with an emergency back-up system (in case of loss of power to vehicle). Is the pole present?
- The lift must be "interlocked" with the brakes, transmission, or the door, so the lift will not move unless the interlock is engaged. Ensure the interlock is working correctly.

Have the driver lower the lift to the ground:

- Controls to operate the lift must require constant pressure.
- Controls must allow the up/down cycle to be reversed without causing the platform to "stow" while occupied.
- Sufficient lighting shall be provided in the step well or doorway next to the driver, and illuminate the street surface around the lift, the lighting should activate when the door/lift is in motion. Turn light switch on, to ensure lighting is working properly.

Once the lift is on the ground, review the following:

- Must have an inner barrier to prevent the mobility aid from rolling off the side closest to the vehicle until the platform is fully raised.
- Side barriers must be at least 1 ½ inches high.
- The outer barrier must be sufficient to prevent a wheelchair from riding over it.
- The platform must be slip-resistant.
- Gaps between the platform and any barrier must be no more than 5/8 of an inch.
- The lift must have two handrails.
- The handrails must be 30-38 inches above the platform surface.
- The handrails must have a useable grasping area of 8 inches, and must be at least 1 ½ inches wide and have sufficient knuckle clearance.
- The platform must be at least 28 1/2 inches wide measured at the platform surface, and 30 inches wide and 48 inches long measured 2 inches above the platform surface.

- If the ramp is not flush with the ground, for each inch off the ground the ramp must be 8 inches long.
- Lifts may be marked to identify the preferred standing position (suggested, not required)

Have the driver bring the lift up to the fully raised position (but not stowed):

- When in the fully raised position, the platform surface must be horizontally within 5/8 inch of the floor of the vehicle.
- The platform must not deflect more than 3 degrees in any direction. To test this, stand on the edge of the platform and carefully jump up and down to see how far the lift sways.
- The lift must be designed to allow boarding in either direction.

While inside the vehicle:

- Each securement system must have a clear floor area of 30 inches wide by 48 inches long.
- The securement system must accommodate all common wheelchairs and mobility aids.
- The securement system must keep mobility aids from moving no more than 2 inches in any direction.
- A seat belt and shoulder harness must be provided for each securement position, and must be separate from the security system of the mobility aid.

Vehicles under 22 feet must have:

- One securement system that can be either forward or rear-facing.
- Overhead clearance must be at least 56 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.

Vehicles over 22 feet must have:

- Must have 2 securement systems, and one must be forward-facing, the other can be either forward or rear-facing.
- Overhead clearance must be at least 68 inches. This includes the height of doors, the interior height along the path of travel, and the platform of the lift to the top of the door.
- Aisles, steps, and floor areas must be slip resistant.
- Steps or boarding edges of lift platforms must have a band of color which contrasts with the step/floor surface.

COMPLIANCE WITH AMERICANS WITH DISABILITIES ACT

Table 1. ADA Compliance Review - Provider/Contractor Level of Service Chart

Name of Service Provider/ Contractor	Total # of Vehicles Available for CTC Service	# of ADA Accessible Vehicles	Areas/Sub areas Served by Provider/Contractor

BASED ON THE INFORMATION IN TABLE 1, DOES IT APPEAR THAT INDIVIDUALS REQUIRING THE USE OF ACCESSIBLE VEHICLES HAVE EQUAL SERVICE?

Yes No

ADA COMPLIANCE

Findings:

Recommendations:

FY _____/_____ GRANT QUESTIONS

**The following questions relate to items specifically addressed in the FY _
_____/_____ Trip and Equipment Grant.**

DO YOU KEEP ALL RECORDS PERTAINING TO THE SPENDING OF TDTF DOLLARS FOR FIVE YEARS? (Section 7.10: Establishment and Maintenance of Accounting Records, T&E Grant, and FY _____)

Yes No

ARE ALL ACCIDENTS THAT HAVE RESULTED IN A FATALITY REPORTED TO THE COMMISSION WITHIN 24 HOURS AFTER YOU HAVE RECEIVED NOTICE? (Section 14.80: Accidents, T/E Grant, and FY _____)

Yes No Not Applicable

ARE ALL ACCIDENTS THAT HAVE RESULTED IN \$1,000 WORTH OF DAMAGE REPORTED TO THE COMMISSION WITHIN 72 HOURS AFTER YOU HAVE RECEIVED NOTICE OF THE ACCIDENT? (Section 14.80: Accidents, T/E Grant, and FY _____)

Yes No Not Applicable

STATUS REPORT FOLLOW-UP FROM LAST REVIEW(S)

DATE OF LAST REVIEW: _____

STATUS REPORT DATED: _____

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

CTD RECOMMENDATION:

CTC Response:

Current Status:

ON-SITE OBSERVATION OF THE SYSTEM

RIDE A VEHICLE WITHIN THE COORDINATED SYSTEM. REQUEST A COPY OF THE MANIFEST PAGE THAT CONTAINS THIS TRIP.

Date of Observation:

Please list any special guests that were present:

Location:

Number of Passengers picked up/dropped off:

Ambulatory

Non-Ambulatory

Was the driver on time? Yes No - How many minutes late/early?

Did the driver provide any passenger assistance? Yes No

Was the driver wearing any identification? Yes: Uniform Name Tag
 ID Badge No

Did the driver render an appropriate greeting?
 Yes No Driver regularly transports the rider, not necessary

If CTC has a policy on seat belts, did the driver ensure the passengers were properly belted?
 Yes No

Was the vehicle neat and clean, and free from dirt, torn upholstery, damaged or broken seats, protruding metal or other objects? Yes No

Is there a sign posted on the interior of the vehicle with both a local phone number and the TD Helpline for comments/complaints/commendations? Yes No

Does the vehicle have working heat and air conditioning? Yes No

Does the vehicle have two-way communications in good working order? Yes No

If used, was the lift in good working order? Yes No

RIDER/BENEFICIARY SURVEY

Staff making call: _____

County: _____

Date of Call: / /

Funding Source: _____

1) Did you receive transportation service on _____? Yes or No

2) Where you charged an amount in addition to the co-payment? Yes or No

If so, how much?

3) How often do you normally obtain transportation?

Daily 7 Days/Week Other 1-2 Times/Week 3-5Times/Week

4) Have you ever been denied transportation services?

Yes

No. If no, skip to question # 4

A. How many times in the last 6 months have you been refused transportation services?

None

3-5 Times

1-2 Times

6-10 Times

If none, skip to question # 4.

B. What was the reason given for refusing you transportation services?

Ineligible

Space not available

Lack of funds

Destination outside service area

Other _____

5) What do you normally use the service for?

Medical

Education/Training/Day Care

Employment

Life-Sustaining/Other

Nutritional

6) Did you have a problem with your trip on _____?

Yes. If yes, please state or choose problem from below

No. If no, skip to question # 6

What type of problem did you have with your trip?

Advance notice

Cost

Pick up times not convenient

Late pick up-specify time of wait

Assistance

Accessibility

Service Area Limits

Late return pick up - length of wait

Drivers - specify

Reservations - specify length of wait

Vehicle condition

Other

7) On a scale of 1 to 10 (10 being most satisfied) rate the transportation you have been receiving.

8) What does transportation mean to you? (Permission granted by _____ for use in publications.)

Additional Comments:

Contractor Survey

_____ County

Contractor name (optional)

1. Do the riders/beneficiaries call your facility directly to cancel a trip?

Yes No

2. Do the riders/beneficiaries call your facility directly to issue a complaint?

Yes No

3. Do you have a toll-free phone number for a rider/beneficiary to issue commendations and/or complaints posted on the interior of all vehicles that are used to transport TD riders?

Yes No

If yes, is the phone number posted the CTC's?

Yes No

4. Are the invoices you send to the CTC paid in a timely manner?

Yes No

5. Does the CTC give your facility adequate time to report statistics?

Yes No

6. Have you experienced any problems with the CTC?

Yes No

If yes, what type of problems?

Comments:

PURCHASING AGENCY SURVEY

Staff making call: _____

Purchasing Agency name: _____

Representative of Purchasing Agency: _____

1) Do you purchase transportation from the coordinated system?

YES

NO If no, why?

2) Which transportation operator provides services to your clients?

3) What is the primary purpose of purchasing transportation for your clients?

Medical

Employment

Education/Training/Day Care

Nutritional

Life Sustaining/Other

4) On average, how often do your clients use the transportation system?

7 Days/Week

1-3 Times/Month

1-2 Times/Week

Less than 1 Time/Month

3-5 Times/Week

5) Have you had any unresolved problems with the coordinated transportation system?

- Yes
- No If no, skip to question 7

6) What type of problems have you had with the coordinated system?

- Advance notice requirement [specify operator (s)]
- Cost [specify operator (s)]
- Service area limits [specify operator (s)]
- Pick up times not convenient [specify operator (s)]
- Vehicle condition [specify operator (s)]
- Lack of passenger assistance [specify operator (s)]
- Accessibility concerns [specify operator (s)]
- Complaints about drivers [specify operator (s)]
- Complaints about timeliness [specify operator (s)]
- Length of wait for reservations [specify operator (s)]
- Other [specify operator (s)] _____

7) Overall, are you satisfied with the transportation you have purchased for your clients?

- Yes
- No If no, why? _____

**Level of Cost
Worksheet 1**

Insert Cost page from the AOR.

Level of Competition Worksheet 2

1. Inventory of Transportation Operators in the Service Area

	Column A Operators Available	Column B Operators Contracted in the System.	Column C Include Trips	Column D % of all Trips
Private Non-Profit				
Private For-Profit				
Government				
Public Transit Agency				
Total				

2. How many of the operators are coordination contractors? _____
3. Of the operators included in the local coordinated system, how many have the capability of expanding capacity? _____
Does the CTC have the ability to expand? _____
4. Indicate the date the latest transportation operator was brought into the system. _____

5. Does the CTC have a competitive procurement process? _____
6. In the past five (5) years, how many times have the following methods been used in selection of the transportation operators?

	Low bid
	Requests for qualifications
	Negotiation only

	Requests for proposals
	Requests for interested parties

Which of the methods listed on the previous page was used to select the current operators?

7. Which of the following items are incorporated in the review and selection of transportation operators for inclusion in the coordinated system?

	Capabilities of operator
	Age of company
	Previous experience
	Management
	Qualifications of staff
	Resources
	Economies of Scale
	Contract Monitoring
	Reporting Capabilities
	Financial Strength
	Performance Bond
	Responsiveness to Solicitation

	Scope of Work
	Safety Program
	Capacity
	Training Program
	Insurance
	Accident History
	Quality
	Community Knowledge
	Cost of the Contracting Process
	Price
	Distribution of Costs
	Other: (list)

8. If a competitive bid or request for proposals has been used to select the transportation operators, to how many potential operators was the request distributed in the most recently completed process? _____

How many responded? _____

The request for bids/proposals was distributed:

_____ Locally _____ Statewide _____ Nationally

9. Has the CTC reviewed the possibilities of competitively contracting any services other than transportation provision (such as fuel, maintenance, etc...)? _____

Level of Availability (Coordination)
Worksheet 3

Planning – What are the coordinated plans for transporting the TD population?

Public Information – How is public information distributed about transportation services in the community?

Certification – How are individual certifications and registrations coordinated for local TD transportation services?

Eligibility Records – What system is used to coordinate which individuals are eligible for special transportation services in the community?

Call Intake – To what extent is transportation coordinated to ensure that a user can reach a Reservationist on the first call?

Reservations – What is the reservation process? How is the duplication of a reservation prevented?

Trip Allocation – How is the allocation of trip requests to providers coordinated?

Scheduling – How is the trip assignment to vehicles coordinated?

Transport – How are the actual transportation services and modes of transportation coordinated?

Dispatching – How is the real time communication and direction of drivers coordinated?

General Service Monitoring – How is the overseeing of transportation operators coordinated?

Daily Service Monitoring – How are real-time resolutions to trip problems coordinated?

Trip Reconciliation – How is the confirmation of official trips coordinated?

Billing – How is the process for requesting and processing fares, payments, and reimbursements coordinated?

Reporting – How is operating information reported, compiled, and examined?

Cost Resources – How are costs shared between the coordinator and the operators (s) in order to reduce the overall costs of the coordinated program?

Information Resources – How is information shared with other organizations to ensure smooth service provision and increased service provision?

Overall – What type of formal agreement does the CTC have with organizations, which provide transportation in the community?

Preliminary Information Worksheet

Version 1.4

CTC Name: Citrus County Transit
County (Service Area): Citrus County
Contact Person: Tiffany Kersey
Phone # 352-527-7639

Check Applicable Characteristic:

ORGANIZATIONAL TYPE:

- Governmental
- Private Non-Profit
- Private For Profit

NETWORK TYPE:

- Fully Brokered
- Partially Brokered
- Sole Source

Once completed, proceed to the Worksheet entitled "Comprehensive Budget"

Comprehensive Budget Worksheet

Version 1.4

CTC: **Citrus County Transit**
County: **Citrus County**

1. Complete applicable **GREEN** cells in columns 2, 3, 4, and 7

	Prior Year's ACTUALS from Oct 1st of 2024 to Sept 30th of 2025	Current Year's APPROVED Budget, as amended from Oct 1st of 2025 to Sept 30th of 2026	Upcoming Year's PROPOSED Budget from Oct 1st of 2026 to Sept 30th of 2027	% Change from Prior Year to Current Year	Proposed % Change from Current Year to Upcoming Year	Confirm whether revenues are collected as a system subsidy VS a purchase of service at a unit price. Explain Changes in Column 6 That Are > ± 10% and Also > ± \$50,000
1	2	3	4	5	6	7

REVENUES (CTC/Operators ONLY / Do NOT include coordination contractors!)						
Local Non-Govt						
Farebox	\$ 52,991	\$ 55,000	\$ 58,000	3.8%	5.5%	
Medicaid Co-Pay Received						
Donations/ Contributions						
In-Kind, Contributed Services						
Other						
Bus Pass Program Revenue						
Local Government						
District School Board						
Compl. ADA Services						
County Cash	\$ 445,268	\$ 491,951	\$ 500,250	10.5%	1.7%	
County In-Kind, Contributed Services						
City Cash						
City In-kind, Contributed Services		\$ 45,000	\$ 45,000		0.0%	
Other Cash	\$ 15,385	\$ 17,000	\$ 17,000	10.5%	0.0%	
Other In-Kind, Contributed Services						
Bus Pass Program Revenue						
CTD						
Non-Spons. Trip Program	\$ 592,703	\$ 665,000	\$ 667,000	12.2%	0.3%	Utilizing our full allocation for Transportation Disadvantaged, due to an increase in TD clients served.
Non-Spons. Capital Equipment						
Rural Capital Equipment						
Other TD (specify in explanation)						
Bus Pass Program Revenue						
USDOT & FDOT						
49 USC 5307	\$ 520,154	\$ 720,000	\$ 775,000	38.4%	7.6%	The increase in 5311 is due to not receiving our allocation in FY2025 the increase in all is due to the expansion in service.
49 USC 5310						
49 USC 5311 (Operating)	\$ 177,733	\$ 480,000	\$ 520,000	170.1%	8.3%	
49 USC 5311(Capital)						
Block Grant	\$ 348,944	\$ 600,000	\$ 647,500	71.9%	7.9%	
Service Development						
Commuter Assistance						
Other DOT (specify in explanation)						
Bus Pass Program Revenue						
AHCA						
Medicaid						
Other AHCA (specify in explanation)						
Bus Pass Program Revenue						
DCF						
Alcohol, Drug & Mental Health						
Family Safety & Preservation						
Comm. Care Dis./Aging & Adult Serv.						
Other DCF (specify in explanation)						
Bus Pass Program Revenue						
DOH						
Children Medical Services						
County Public Health						
Other DOH (specify in explanation)						
Bus Pass Program Revenue						
DOE (state)						
Carl Perkins						
Div of Blind Services						
Vocational Rehabilitation						
Day Care Programs						
Other DOE (specify in explanation)						
Bus Pass Program Revenue						
AWI						
WAGES/Workforce Board						
Other AWI (specify in explanation)						
Bus Pass Program Revenue						
DOEA						
Older Americans Act						
Community Care for Elderly						
Other DOEA (specify in explanation)						
Bus Pass Program Revenue						
DCA						
Community Services						
Other DCA (specify in explanation)						
Bus Pass Admin. Revenue						

Comprehensive Budget Worksheet

Version 1.4

CTC: **Citrus County Transit**
County: **Citrus County**

1. Complete applicable **GREEN** cells in columns 2, 3, 4, and 7

	Prior Year's ACTUALS from Oct 1st of 2024 to Sept 30th of 2025	Current Year's APPROVED Budget, as amended from Oct 1st of 2025 to Sept 30th of 2026	Upcoming Year's PROPOSED Budget from Oct 1st of 2026 to Sept 30th of 2027	% Change from Prior Year to Current Year	Proposed % Change from Current Year to Upcoming Year	Confirm whether revenues are collected as a system subsidy VS a purchase of service at a unit price. Explain Changes in Column 6 That Are > ± 10% and Also > ± \$50,000
1	2	3	4	5	6	7

APD						
Office of Disability Determination						
Developmental Services						
Other APD (specify in explanation)						
Bus Pass Program Revenue						
DJJ						
(specify in explanation)						
Bus Pass Program Revenue						
Other Fed or State						
5307-Capital	\$ 288,282	\$ 1,192,127	\$ 520,000	313.5%	-56.4%	Receiving 4 replacement busses and 5 expansion transit vans.
xxx						
xxx						
Bus Pass Program Revenue						
Other Revenues						
Interest Earnings						
xxxx						
xxxx						
Bus Pass Program Revenue						
Balancing Revenue to Prevent Deficit						
Actual or Planned Use of Cash Reserve						
Balancing Revenue is Short By =			None			
Total Revenues =	\$2,441,460	\$4,266,078	\$3,749,750	74.7%	-12.1%	

EXPENDITURES (CTC/Operators ONLY / Do NOT include Coordination Contractors!)							
Operating Expenditures							
Labor	\$ 1,109,161	\$ 1,429,680	\$ 1,500,000	28.9%	4.9%	Increase in service and staff. Coverage for sick/leave. Increase in vehicle maintenance due to significant amount of buses over their useful life.	
Fringe Benefits	\$ 451,516	\$ 701,850	\$ 740,000	55.4%	5.4%		
Services	\$ 133,371	\$ 206,281	\$ 220,000	54.7%	6.7%		
Materials and Supplies	\$ 435,363	\$ 666,894	\$ 700,000	53.2%	5.0%		
Utilities	\$ 14,069	\$ 14,147	\$ 14,250	0.6%	0.7%		
Casualty and Liability	\$ 3,530	\$ 3,600	\$ 3,800	2.0%	5.6%		
Taxes							
Purchased Transportation:							
Purchased Bus Pass Expenses							
School Bus Utilization Expenses							
Contracted Transportation Services							
Other							
Miscellaneous	\$ 6,168	\$ 6,500	\$ 6,700	5.4%	3.1%		
Operating Debt Service - Principal & Interest							
Leases and Rentals							
Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services	\$ -	\$ 45,000	\$ 45,000		0.0%		
Allocated Indirect							
Capital Expenditures							
Equip. Purchases with Grant Funds	\$ 288,282	\$ 1,192,127	\$ 520,000	313.5%	-56.4%		
Equip. Purchases with Local Revenue							
Equip. Purchases with Rate Generated Rev.							
Capital Debt Service - Principal & Interest							
Total Expenditures =	\$2,441,460	\$4,266,078	\$3,749,750	74.7%	-12.1%		
See NOTES Below.							

Once completed, proceed to the Worksheet entitled "Budgeted Rate Base"

Actual year LOSSES are shown as Balancing Revenue or Local Non-Government revenue.

Worksheet for Program-wide Rates

CTC: Citrus County Tran Version 1.4
 County: Citrus County

1. Complete Total Projected Passenger Miles and ONE-WAY Passenger Trips (GREEN cells) below

- Do **NOT** include trips or miles related to Coordination Contractors!
- Do **NOT** include School Board trips or miles UNLESS.....
- INCLUDE** all ONE-WAY passenger trips and passenger miles related to services you purchased from your transportation operators!
- Do **NOT** include trips or miles for services provided to the general public/private pay UNLESS..
- Do **NOT** include escort activity as passenger trips or passenger miles unless charged the full rate for service!
- Do **NOT** include fixed route bus program trips or passenger miles!

PROGRAM-WIDE RATES	
Total <u>Projected</u> Passenger Miles =	296,424
Rate Per Passenger Mile = \$	2.25
Total <u>Projected</u> Passenger Trips =	30,496
Rate Per Passenger Trip = \$	21.87

Fiscal Year

2026 - 2027

Avg. Passenger Trip Length =	9.7 Miles
-------------------------------------	------------------

Rates If No Revenue Funds Were Identified As Subsidy Funds	
Rate Per Passenger Mile = \$	12.65
Rate Per Passenger Trip = \$	122.96

Once Completed, Proceed to the Worksheet entitled "Multiple Service Rates"

Vehicle Miles

The miles that a vehicle is scheduled to or actually travels from the time it pulls out from its garage to go into revenue service to the time it pulls in from revenue service.

Vehicle Revenue Miles (VRM)

The miles that vehicles are scheduled to or actually travel while in revenue service. Vehicle revenue miles exclude:

- Deadhead
- Operator training, and
- Vehicle maintenance testing, as well as
- School bus and charter services.

Passenger Miles (PM)

The cumulative sum of the distances ridden by each passenger.

Worksheet for Multiple Service Rates

CTC: Citrus County T1 Version 1.4
 County: Citrus County

1. Answer the questions by completing the GREEN cells starting in Section I for all services
2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers

SECTION I: Services Provided

1. Will the CTC be providing any of these Services to transportation disadvantaged passengers in the upcoming budget year?.....

Ambulatory	Wheelchair	Stretcher	Group
<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Go to Section II for Ambulatory Service	Go to Section II for Wheelchair Service	STOP! Do NOT Complete Sections II - V for Stretcher Service	STOP! Do NOT Complete Sections II - V for Group Service

SECTION II: Contracted Services

1. Will the CTC be contracting out any of these Services TOTALLY in the upcoming budget year?....

Ambulatory	Wheelchair	Stretcher	Group
<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
Skip # 2, 3 & 4 and Go to Section III for Ambulatory Service	Skip # 2, 3 & 4 and Go to Section III for Wheelchair Service	Do Not Complete Section II for Stretcher Service	Do Not Complete Section II for Group Service

2. If you answered YES to #1 above, do you want to arrive at the billing rate by simply dividing the proposed contract amount by the projected Passenger Miles / passenger trips?.....

Ambulatory	Wheelchair	Stretcher	Group
<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

3. If you answered YES to #1 & #2 above, how much is the proposed contract amount for the service?
 How many of the total projected Passenger Miles relate to the contracted service?
 How many of the total projected passenger trips relate to the contracted service?

Ambulatory	Wheelchair	Stretcher	Group
Leave Blank	Leave Blank	Do NOT Complete Section II for Stretcher Service	Do NOT Complete Section II for Group Service
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Effective Rate for Contracted Services:
 per Passenger Mile =
 per Passenger Trip =

Ambulatory	Wheelchair	Stretcher	Group
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Go to Section III for Ambulatory Service	Go to Section III for Wheelchair Service	Do NOT Complete Section II for Stretcher Service	Do NOT Complete Section II for Group Service

4. If you answered # 3 & want a Combined Rate per Trip PLUS a per Mile add-on for 1 or more services, INPUT the Desired per Trip Rate (but must be less than per trip rate in #3 above) =
 Rate per Passenger Mile for Balance =

Combination Trip and Mile Rate			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Leave Blank and Go to Section III for Ambulatory Service	Leave Blank and Go to Section III for Wheelchair Service	Do NOT Complete Section II for Stretcher Service	Do NOT Complete Section II for Group Service

Worksheet for Multiple Service Rates

CTC: **Citrus County TI** Version 1.4
 County: **Citrus County**

1. Answer the questions by completing the GREEN cells starting in Section I for all services
2. Follow the **DARK RED** prompts directing you to skip or go to certain questions and sections based on previous answers

SECTION III: Escort Service

1. Do you want to charge all escorts a fee?.....
 Yes
 No
Skip #2 - 4 and Section IV and Go to Section V
2. If you answered Yes to #1, do you want to charge the fee per passenger trip OR
 per passenger mile?.....
 Pass. Trip **Leave Blank**
 Pass. Mile
3. If you answered Yes to # 1 and completed # 2, for how many of the projected Passenger Trips / Passenger Miles will a passenger be accompanied by an escort? Leave Blank
4. How much will you charge each escort?..... Leave Blank

SECTION IV: Group Service Loading

1. If the message "**You Must Complete This Section**" appears to the right, what is the projected total number of Group Service Passenger Miles? (otherwise leave blank).....
Do NOT Complete Section IV
- And what is the projected total number of Group Vehicle Revenue Miles? Loading Rate **0.00** to 1.00

SECTION V: Rate Calculations for Multiple Services:

1. Input Projected Passenger Miles and Passenger Trips for each Service in the GREEN cells and the Rates for each Service will be calculated automatically
 * Miles and Trips you input must sum to the total for all Services entered on the "Program-wide Rates" Worksheet, MINUS miles and trips for contracted services IF the rates were calculated in the Section II above
 * Be sure to leave the service **BLANK** if you answered NO in Section I or YES to question #2 in Section II

		RATES FOR FY: 2026 - 2027			
		Ambul	Wheel Chair	Stretcher	Group
Projected Passenger Miles (excluding totally contracted services addressed in Section II) =	296,424	273,728	22,696	Leave Blank	Leave Blank
Rate per Passenger Mile =		\$2.13	\$3.66	\$0.00	\$0.00
				per passenger	per group
Projected Passenger Trips (excluding totally contracted services addressed in Section II) =	30,496	28,332	2,164	Leave Blank	Leave Blank
Rate per Passenger Trip =		\$20.82	\$35.69	\$0.00	\$0.00
				per passenger	per group
2. If you answered # 1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services,...		Combination Trip and Mile Rate			
...INPUT the Desired Rate per Trip (but must be less than per trip rate above) =				Leave Blank	Leave Blank
Rate per Passenger Mile for Balance =		\$2.13	\$3.66	\$0.00	\$0.00
				per passenger	per group

		Rates If No Revenue Funds Were Identified As Subsidy Funds			
		Ambul	Wheel Chair	Stretcher	Group
Rate per Passenger Mile =		\$11.99	\$20.56	\$0.00	\$0.00
				per passenger	per group
Rate per Passenger Trip =		\$117.03	\$200.62	\$0.00	\$0.00
				per passenger	per group
Program These Rates Into Your Medicaid Encounter Data					

**QUARTERLY REPORT FOR JANUARY 1 THROUGH MARCH 31, 2026, BY THE COMMUNITY
TRANSPORTATION COORDINATOR (CTC) – Joanne Granger, Transit Director**

As an informational item, attached is the Community Transportation Coordinator (CTC) Quarterly Report for the period of January 1, 2026, through March 31, 2026.

This is an informational item; no action is required.

Staff Recommendation: It is recommended the LCB review the quarterly report and provide comments as desired. No action is required by the LCB at this time.

Attachment: CTC Quarterly Report

County:	Citrus															
CTC:	Citrus County Transit															
Contact:	Joanne Granger															
Email:	Joanne.Granger@citrusbocc.com															
	2025					2025					2026					Jul 2025 - Jun 2026
Trips By Type of Service	Jul	Aug	Sep	Average		Oct	Nov	Dec	Average		Jan	Feb	Mar	Average	Total YTD	AVG YTD
Deviated Fixed Route*	2,444	2,522	2,856	2,607		2,828	2,040	2,385	2,418		2,704	2,601	2,303	2,536	22,683	2520
Demand Response (Door-to-door)																
Ambulatory	2,669	2,988	3,269	2,975		3,559	2,565	2,968	3,031		3,030	3,166	3,427	3,208	27,641	3071
Wheelchair	292	208	250	250		263	183	238	228		277	251	319	282	2,281	253
	2,961	3,196	3,519	3,225		3,822	2,748	3,206	3,259		3,307	3,417	3,746	3,490	29,922	3325
Total Trips	5,405	5,718	6,375	5,833		6,650	4,788	5,591	5,676		6,011	6,018	6,049	6,026	52,605	5845
Passenger Trips By Purpose (Demand Response)																
Education/Training/Daycare	78	496	742	439		906	498	486	630		573	636	585	598	5,000	556
Employment	806	779	864	816		900	680	807	796		822	823	932	859	7,413	824
Medical	704	634	659	666		731	609	623	654		660	693	772	708	6,085	676
Nutritional	802	817	817	812		833	607	786	742		757	736	828	774	6,983	776
Life-Sustaining/Other	571	470	437	493		452	354	504	437		495	529	629	551	4,441	493
Total Trips by Purpose	2,961	3,196	3,519			3,822	2,748	3,206			3,307	3,417	3,746		29,922	
Passenger Trips by Funding Source (Demand Response)																
CTD-Commission for the Transportation Disadvantaged	2,335	2,553	2,809	2,566		3,077	2,143	2,629	2,616		2,756	2,851	3,111	2,906	24,264	2696
CTD-VA Hospital (Tampa/Gainesville/ The Villages)	24	18	23	22		40	32	40	37		39	43	37	40	296	33
APD-Agency for Persons with Disabilities	0	0	0	0		0	0	0	0		0	0	0	0	0	0
DOEA-Department of Elderly Affairs-Veterans	0	0	0	0		0	0	0	0		0	0	0	0	0	0
DOEA-Department of Elderly Affairs-Congregate Dining	0	0	0	0		0	0	0	0		0	0	0	0	0	0
Other-Public	602	625	687	638		705	573	531	603		512	523	598	544	5,356	595
Total Trips By Funding Source	2,961	3,196	3,519	3,225		3,822	2,748	3,200	3,257		3,307	3,417	3,746	3,490	29,916	3324

**KEY TRAINING CENTER QUARTERLY REPORT FOR JANUARY 1 THROUGH MARCH 31, 2026 –
Theresa Flick, Programs and Service Director**

As an informational item, attached is the Key Training Center Quarterly Report for the period of January 1, 2026, through March 31, 2026.

This is an informational item; no action is required.

Staff Recommendation: It is recommended the LCB review the quarterly report and provide comments as desired. No action is required by the LCB at this time.

Attachment: Key Training Center Quarterly Report



*Chester V. Cole
Forever in our hearts*

Corporate Officers

*Carolyn Zemanik
President, Board of Directors*

*Melissa Walker
Executive Director
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amandao@keytrainingcenter.org*

Retail Operations

*Mo Brown, Manager
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Inverness (352) 726-0271
Lecanto (352) 527-0037
Crystal River (352) 564-9477
Wildwood (352) 661-3049
Labels / Inverness (352) 419-7591
Delivery/Pickup (352) 726-0271*

Maintenance

*Chris Linhart, Director Fleet &
Facilities
(352) 795-5541 ext 230
clinhart@keytrainingcenter.org*



KEY TRAINING CENTER
Kindness, Love, Dignity and Respect

To: Joanne Granger, CCT
From: Theresa Flick, KTC
Re: Quarterly data (Jan/Feb/Mar 2026)

Trips by type of service:

Demand response	18,102
Ambulatory	15,614
Wheelchair	2,488

Passenger types by purpose:

Medical	7,965
Educational	9,232
Shopping	181
Other (Recreational)	181
Nutritional	543

5399 W. Gulf to Lake Hwy. • Lecanto, Florida 34461
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www.keytrainingcenter.org • www.facebook.com/KeyTrainingCenter

Transportation Operating Report

Section I: Face Sheet

Agency/Organization Name: CCARC, Inc., dba Key Training Center

Address: 5399 W Gulf to Lake Hwy

City: Lecanto Zip: 34461

Contact Person/Title: Theresa Flick/ Director of Program Operations

Telephone Number: (352) 795-5541 ext 224

Type of Contractor:

Contracted Transportation Operator

Coordination Contractor

Reporting Period: (Check one and enter year(s))

Quarterly Reports

July 1, _____ through September 30,

October 1, _____ through December 31, _____

January 1, 2026 _____ through March 31, 2026

April 1, _____ through June 30, _____

Annual Report

July 1, _____ through June 30, _____

Section II: Operating Data

A. Organization Type (check one)

Private Non-Profit

Private For Profit

Government

Other: _____

B. Certified Minority Business Enterprise? (Check one)

YES

NO

C. One Way Passenger Trip Information: **For Coordination Contractors ONLY**

1. One Way Passenger Trips – by Type and Area (Enter a Number)

Within
Citrus County

Outside
Citrus County

18,102

Demand Response

Advance Reservation

18,102

TOTAL One Way trips

2. One Way Passenger Trips – by Area and Mode of Transportation (Enter a Number)

Within
Citrus County

Outside
Citrus County

15,614

Ambulatory

2,488

Wheelchair

0

Stretcher

3. One Way Passenger Trips – by Passenger Type (Enter a Percentage)

	Elderly	Children	Other	TOTAL
Disabled	<u>18%</u>	_____	<u>82%</u>	<u>100%</u>
Low Income	<u>82%</u>	_____	<u>18%</u>	<u>100%</u>
Other	_____	_____	_____	_____
TOTAL	<u>100%</u>	_____	<u>100%</u>	<u>100%</u>

4. One Way Passenger Trips – by Trip Purpose (Enter a Percentage)

<u>44%</u> Medical	<u>1%</u> Shopping
<u>0%</u> Employment	<u>1%</u> Nutritional
<u>51%</u> Educational/Training	<u>3%</u> Other/Specify: Recreation, Leisure

5. One Way Passenger Trips – by Purchasing Agency

Number Of Trips	Purchasing Agency
_____	<u>Not tracked</u>
_____	_____
_____	_____
_____	_____

(Use Additional Pages if Necessary)

D. Unduplicated Passenger Head Count: **For Coordination Contractors ONLY**

Enter the number of INDIVIDUALS served: 188

E. Number of Unmet Trip Requests: **For Coordination Contractors ONLY**

Enter the number of unmet trip requests: 0

F. Passenger No Shows: **For Coordination Contractors ONLY**

Enter the number of passenger no shows: Not tracked

G. System Complaints:

_____ Service
_____ Employee
_____ Vehicle
_____ Other: Annual Satisfaction Surveys

0 _____ TOTAL System Complaints

H. System Commendations:

— Service
— Employee
— Other: Annual Satisfaction Surveys

0 _____ TOTAL System Commendations

I. Vehicle Information

1. Mileage Information

75,243 Vehicle Miles

_____ Revenue/Passenger Miles

2. Total Road Calls: 1

3. Accidents

Chargeable	NOT Chargeable
_____	_____ Person Only
<u>1</u> _____	_____ Vehicle Only
_____	_____ Person/Vehicle
<u>1</u> _____	<u>0</u> _____ TOTALS

4. Number of Vehicles currently in use:

Total Number of Vehicle	<u>37</u>
a. Number of Wheelchair Lift Equipped	<u>13</u>
b. Number of Stretcher Equipped	<u>0</u>

5. Attach Current Vehicle Inventory

J. Employee Information

Operations Employees:

Type of Employee	Number of Full time Equivalent
_____ Full Time Drivers	_____
<u>42.0</u> Part Time Drivers	<u>21.0</u>
_____ Volunteer Drivers	_____
_____ Other Volunteers	_____
_____ Trainees	_____
<u>2</u> Maintenance Employees	<u>1.0</u>
<u>.5</u> Dispatcher	<u>.25</u>
_____ Schedulers	_____
_____ Call Intake/Reservations	_____
_____ Other	_____
<u>44.5</u> Subtotal	<u>22.25</u> Subtotal

Administrative Employees

<u>2</u> Administrative Employees	<u>1.0</u>
<u>3</u> Management Employees	<u>1.5</u>
<u>5</u> Subtotal	<u>2.5</u> Subtotal
<u>49.5</u> GRAND TOTAL	<u>24.75</u> GRAND TOTAL