# Funding Application

Section 5310 Grant: Enhanced Mobility of Seniors and Individuals with Disabilities

Introduction

On October 1, 2012 the Moving Ahead for Progress in the 21st Century (MAP-21) was passed into law as the new federal transportation funding legislation. MAP-21 replaced the former law known as SAFETEA-LU, ending both the New Freedom (Section 5317 grant) and the Elderly Individuals and Individuals with Disabilities (Section 5310 grant) as distinct programs. Under Map-21, the new section 5310 consolidates activities previously funded by the New Freedom grant and the SAFETEA-LU 5310 grant. Activities previously funded under New Freedom are also eligible under the Enhanced Mobility for Seniors and Individuals with Disabilities Program (Section 5310).

With the passage of MAP-21, transportation projects receiving funding under Section 5310 must “be included in the local coordinated human service-public transportation plan.” However, on an interim basis, FTA defines ‘‘included in’’ to mean essentially the same as ‘‘derived from,’’ which is consistent with the policy established under SAFETEA–LU, so long as there is evidence the plan was developed and approved with inclusion from the specific targeted populations. The 2014 Coordinated Public Transit-Human Services Transportation Plan Update (CPT-HSTP) is the policy document applicants should reference for project proposals for 5310 funds.

The Fixing America’s Surface Transportation (FAST) Act was signed into law in December, 2015 and continues the Section 5310 program. **This funding application addresses the Federal Transit Administration (FTA) program funded by MAP-21 and FAST Act: Section 5310 Enhanced Mobility for Seniors and Individuals with Disabilities Program.**

**Background on Grant Program**

Section 5310 – Seniors and Individuals with Disabilities

This program is intended to enhance mobility for seniors and persons with disabilities by providing funds for programs to serve the special needs of transit-dependent populations beyond traditional public transportation services and Americans with Disabilities Act (ADA) complementary paratransit services.

The amount of funding available through this call for applications is $492,598 in federal funding with $245,733 apportioned in FFY17 and $246,865 apportioned in FFY18.



Eligibility Overview: Section 5310 Grant Funds

**Eligible Applicants**

Section 5310 is a formula grant program for member jurisdictions in the Durham Chapel Hill – Carrboro Metropolitan Planning Organization (DCHC MPO). Applicants may include state or local government authorities; private non-profit organizations; and operators of public transportation services including private operators of public transportation services.

**Eligible Use of Program Funds:**

Section 5310 program funds are intended to fund innovative and flexible programs that identify the transportation needs of individuals with disabilities and older adults. Therefore, it is expected that 5310 funds be directed to meet these needs by funding new programs and services, or to continue existing programs.

**Eligible Projects:**

5310 funds may be used for the planning, capital or operating costs of services and facilities that improve mobility for seniors and persons with disabilities. Specific project eligibility is detailed later in this document under each program’s description. Further, the DCHC-MPO is soliciting projects that have been derived from the adopted 2014 Coordinated Public Transportation - Human Services Transportation Plan Update (CPT- HSTP). The plan outlines a vision for improving mobility options for the disabled, aging, and low- income population living in the region. Federal funding of projects through these two programs will be utilized to meet plan goals.

Application Requirements

**PART I: Funding Request – Grants Title Page PART II: Project Narrative**

Please include the following documents:

1. Map of Applicant Service Area
2. Existing and Proposed Transportation Services
3. Project Needs
4. Goals & Objectives
5. Implementation Plan
6. Coordination (partners in project or coordination with other services, if applicable)
7. Program Outreach Plan
8. Program Effectiveness & Performance Measures

**PART III: Proposed Project Budget**

**PART IV: Required Certifications**

1. Drug and Alcohol Testing Policy or Drug-Free Workplace Policy (*Please attach your*

*organization’s policy to application.*)

1. Local Match Certification Form (*Please attach a signed certification like sample provided.*)
2. Lobbying Certification Form (Please attach a signed certification like sample provided.)
3. Equal Employment Opportunity Certification (Please attach a signed certification like sample provided.)
4. Title VI Non-discrimination policy *(Please attach your organization policy or a signed certification like the sample provided.)*

Project Application Procedures

This Section 5310 program application is for funds to be used within the DCHC MPO service area. The initial project application consists of the program-specific requirements detailed in this package of forms and instructions. After a project application has been selected for funding, the applicant will be required to submit appropriate background Certifications and Assurances, and other documentation necessary to meet the requirements of the FTA and DCHC MPO.

E ligibility Over vie w:

**Program Description:**

This program is intended to enhance mobility for seniors and persons with disabilities by providing

funds for programs to serve the special needs of transit-dependent populations beyond traditional public transportation services and Americans with Disabilities Act (ADA) complementary par transit services.

**Eligible Agencies:**

Section 5310 funds have two categories of projects. Not all sub-recipients are eligible for both

categories. Reference the chart on the next page to view and then select projects your agency is eligible to receive. **Please Note:** *All organizations or business entities receiving 5310 funds must have a Data Universal Numbering System (DUNS) registration number.* This is a nine-digit identification number that provides a unique identification for business entities. Applicants that do not currently have a DUNS number can obtain one for free from Dun and Bradstreet ([www.dnb.com](http://www.dnb.com/)). It takes about five weeks to receive the DUNS number after all the information is entered. **DCHC-MPO will allow organizations to apply without the DUNS number, but will not be able to disburse any grant funds until the DUNS is provided.**

|  |  |
| --- | --- |
| **Traditional 5310 Projects** | **Non-Traditional 5310 Projects** |
| 1. Private, non-profit organizations
2. State or local governmental authorities approved by the

state to:* 1. coordinate services for seniors and individuals with disabilities ***or***
	2. certify that there are no non-profit organizations readily available in the area to provide the service.
 | 1. Private, non-profit organizations.
2. State or local governmental authority approved by the state to coordinate services.
3. Operators of public transportation

(including taxicab programs). |

**Eligible Activities:**

**Traditional Section 5310 Projects** At least 55% of program funds must be used on capital projects that are public transportation projects planned, designed, and carried out to meet the special needs of seniors and individuals with disabilities when public transportation is insufficient, inappropriate, or unavailable. *Capital expenses* that are considered traditional projects include, but are not limited to:

* + Vehicle rehabilitation (e.g. radios, wheelchair lifts, ramps)
	+ Passenger facilities (benches, shelters, and amenities)
	+ Intelligent transportation systems (ITS)
	+ Dispatch and fare collection systems
	+ Lease of equipment when it is more cost effective
	+ Transportation services under contract or lease
	+ Capital and operating expenses associated with contracted services
	+ Mobility management (including travel training, marketing of services, & eligibility management)
	+ Coordination programs among public transportation providers and other human services agencies

**Mobility Management** *is an* eligible *capital cost*. Activities may include: promotion and enhancement of access to transit services; short term management activities for planning/implementation of coordination; support of local coordination bodies and councils; operation of transportation brokerages to coordinate providers; provision of coordination services such as travel training and trip planning for customers; development and operation of one-stop travel call centers; eligibility management; operations and planning using intelligent transportation technology (GIS, GPS, coordinated vehicle scheduling/dispatch/monitoring, coordinated billing, and single smart customer payment systems). The purchase of technology is also an eligible *capital expense*.

**Non-Traditional Section 5310 Projects** Up to 45% of program funds may be used for public transportation projects that exceed the requirements of the ADA, improve access to fixed route service and decrease reliance on paratransit service, or provide alternatives to public transportation that assist seniors and individuals with disabilities with transportation. The following activities are examples of eligible projects that go beyond the minimum requirements of ADA:

* + - Expansion of paratransit service beyond the ¾ mile required by ADA
		- Expansion of service hours for ADA paratransit beyond hours of fixed-route services
		- Incremental cost of providing same day service; incremental cost of making door-to-door service available to all ADA paratransit riders
	+ Enhancing service by providing escorts or assisting riders through the door of their destination
	+ Purchase of equipment designed for mobility aids that exceed the dimensions/weight ratings under the ADA and labor costs of aides to help drivers with over-sized wheelchairs
	+ Installation of additional securement locations in public buses beyond ADA requirement feeder service to other transit services for which complementary paratransit service is not required under the ADA
	+ Making accessibility improvements to transit and intermodal stations not designated as key stations or renovation to an existing station
	+ Building accessible paths to bus stops that are currently inaccessible (curb cuts, sidewalks, pedestrian signals, or other accessible features)
	+ Improving signage or wayfinding technology
	+ Other technology improvements that enhance accessibility for those with disabilities including ITS
	+ Travel training
	+ Public transportation alternatives that assist seniors and individuals with disabilities with transportation.

**Public Transportation Alternatives** activities may include: ride sharing, and/or vanpooling programs; supporting the administration and expense related to new voucher programs for existing transportation services offered by human service providers (mileage reimbursement as part of a volunteer driver program, taxi trip, or trips provided by human service agency). Vouchers are an operational expense that requires a 50/50 match. Support of volunteer driver and aide programs is also an eligible activity (administration, safety, background checks, scheduling, coordination of passengers, and insurance associated with volunteer driver programs).

###### Cost Sharing/Match Requirement:

The 5310 grant program requires a local match to ensure projects are 100% funded. The FTA’s contribution varies according to project type (please see below). Non-DOT funds and local and private funds can be used as the local match. Examples of types of programs that are potential sources of local match include: employment, training, aging, medical, community services, and rehabilitation services. Funds can be used to support:

* Capital Projects – 80% Fed/20% Local Match
* Operating – 50% Fed/ 50% Local Match
* ADA vehicle-related equipment (on and attached to the vehicle) – 90% Fed/ 10% local

Project Selection for 5310 Grants:

Projects will be awarded through a competitive selection process. Applications will be received by DCHC MPO staff and passed along to the Selection Subcommittee who will review and score the applications. After scoring the proposals, projects recommended for funding will be presented to the DCHC MPO Technical Committee (TC). TC will review the projects recommended for funding and make a recommendation to the DCHC Board. The Board will vote on funding of the recommended projects. The list of approved projects will be published and submitted to the FTA for funding.

**Note:** All proposals should reflect public transportation and human service transportation priorities and projects documented in the CPT-HSTP.

Call for Projects and Application Schedule

* May 23, 2018 TC receives schedule/Notification of 2018 Call for Projects
* June 13, 2018 Board receives schedule/Notification of 2018 Call for Projects
* 5/23/2018–

7/13/2018 Advertising & solicitation for applications

* **7/13/2018** Application deadline: 5:00 pm
* 7/13/2018 –

8/10/2018 LPA reviews and scores proposals; selects projects for recommendation.

* 8/22/2018 TC action on FY2018 Program of Projects recommendations
* 9/12/2018 Board action on FY2018 Program of Projects recommendations
* Notification of funding is conveyed to sub-recipients, federal grant application process is completed, and funding packages are distributed.

## S COR I N G CRI T E R I A

The following information and scoring criteria will be used to score and rate project applications for Section 5310 projects.

1. *Project Needs/Goals and Objectives (****30 points****)*: The project should directly address priority transportation needs identified through the Durham-Chapel Hill-Carrboro MPO’s locally developed Coordinated Public Transportation - Human Services Transportation Plan. Project application should clearly state the overall program goals and objectives, and demonstrate how the project is consistent with the objectives of the 5310 grant program. The project application should indicate the number of persons expected to be served, and the number of trips (or other units of service) expected to be provided.
2. *Implementation Plan and Evaluation (****15 points****):* For all projects, applicants must provide a well- defined service operations plan and/or capital procurement plan, and describe implementation steps and timelines for carrying out the plan. The implementation plan should identify key personnel assigned to this project and their qualifications. Project sponsors should demonstrate their institutional capability to carry out the service delivery aspect of the project as described.
3. *Project Budget (****15 points****):* Projects must submit a clearly defined project budget, indicating anticipated project expenditures and revenues, including documentation of matching funds. Proposals should address long-term efforts and identify potential funding sources for sustaining the service beyond the grant period.
4. *Partnerships and Program Outreach (****25 points****):* Proposed projects will be evaluated based on their ability to coordinate with other public transportation, community transportation and/or social service resources. Projects that include partnerships with non-profits, private business, or other stakeholders will also receive higher points. Project sponsors should clearly identify project stakeholders, and how they will keep stakeholders involved and informed throughout the project. Project sponsors should also describe how they would promote public awareness of the project. Letters of support from key stakeholders and/or customers should be attached to the grant application.
5. *Program Effectiveness and Performance Indicators (****10 points****):* The project will be scored based on the project sponsor’s ability to demonstrate that the proposed project is the most appropriate match of service delivery to the need, and is a cost-effective approach. Project sponsors must also identify clear, measurable outcome-based performance measures to track the effectiveness of the service in meeting the identified goals. A plan should be provided for ongoing monitoring and evaluation of the service, and steps to be taken if original goals are not achieved. Sponsor should describe their steps to measure the effectiveness and magnitude of the impact that the project will have on target markets (i.e., persons with disabilities or seniors for the 5310 funds).
6. *Innovation (****5 points****):* The project will be examined to see if it contains innovative ideas (service concepts or facilities, creative financing, or new technologies) that have the potential for improving access and mobility for the target populations and may have future application elsewhere in the region.

 **Section 5310 Project Evaluation Score Sheet**

**Project Name:)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Funding Type:** Capital Only Operating Only

 Capital & Operating \_Mobility Management/Coordinated Planning

The Selection Committee must find that the answer to each of the following questions is affirmative for a project to be considered eligible for grant funding.

Each proposal will receive a score from the Project Selection Committee according to following criteria:

|  |  |  |
| --- | --- | --- |
| Is the proposed project a non-duplicative service or program? | Yes | No |
| Are eligible local matching funds identified and available? | Yes | No |
| Does the project provide benefits to the Durham – Chapel Hill – Carrboro urbanized area (see map on p.3)? | Yes | No |
|  |  |
|  |  |  |
| **5310 Criteria** |  |
| Is the proposed project a “Traditional Section 5310 Project” or “Non-Traditional Section 5310 Project”? Please Select. | Trad | Non-Trad |
| Is the agency eligible for the project type selected? | Yes | No |
| Is the proposed project identified within the CPT-HSTP (a project listed within the plan)? | Yes | No |
| Is the proposed project targeted toward meeting the transportation needs of seniors and individuals w/ disabilities? | Yes | No |

|  |  |  |
| --- | --- | --- |
|  **Project Evaluation Criteria** | **Possible****Points** | **Project****Score** |
| **Project Need/Goals & Objectives** *30%* |
| How well does this project address high-priority needs identified in the Coordinated Plan? | **20** |  |
| How effectively will this project increase the numbers of target market customers served? | **10** |  |
| **Implementation Plan** *15%* |
| What is the quality of the implementation plan? | **15** |  |
| **Project Budget** *15%* |
| How efficiently will the projects provide benefits to the customers (e.g., cost per customer served). | **10** |  |
| How financially sustainable is the program/service beyond the grant period? | **5** |  |
| **Partnerships, Collaboration, & Outreach** *25%* |
| Does the project maximize resources (coordination with other transit services or local match from other non-DOT Federal programs)? | **5** |  |
| Does the project partner/collaborate with non-profit, human services agencies, or private business? | **10** |  |
| What is the quality of marketing/outreach plan? | **5** |  |
| How widely will the benefits of this project be felt? (more points for region-wide benefits). | **5** |  |
| **Program Effectiveness and Performance Indicators** *10%* |
| What is the quality of the evaluation plan? Are performance monitoring metrics and key performance indicators sound and effective in evaluating the project? | **10** |  |
| **Innovation** *5%* |
| Does the project contain innovative ideas, creative financing, or new technologies that could be applied elsewhere in the region? | **5** |  |
|  | **100** |  |
|  | **Possible****Points** | **Project****Points** |

Application Checklist

Applicants should use this checklist to ensure that all applicable parts of the application and attachments are completed and submitted.

**PART I: Funding Request – Grants Title Page**

* Applicant Data
* Project Description

 **PART II: Project Narrative**

* Map of Applicant Service Area
* Existing and Proposed Transportation Services
* Project Needs
* Goals & Objectives
* Implementation Plan
* Coordination (partners in project or coordination with other services, if applicable)
* Program Outreach Plan
* Program Effectiveness & Performance Measures

**PART III: Proposed Project Budget**

* Project Funding Worksheet
* Project Funding & Local Match

**PART IV: Required Certifications**

* Drug and Alcohol Testing Policy or Drug-Free Workplace Policy (*please attach your*

*organization’s policy to application*)

* Local Match Certification Form (*please attach a signed certification like the sample provided*)
* Lobbying Certification Form (please attach a signed certification like the sample provided)
* Equal Employment Opportunity Certification (please attach a signed certification like sample provided)
* Title VI Non-discrimination policy *(please attach your organization policy or a signed certification like the sample provided)*

# Application for Funding

Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities

**PART I – Applicant Data**

Legal Name: DUNS Number: Contact Person:

Address:

City, State, Zip:

Telephone: Fax:

E-mail:

Agency Type: *Check one please*

 Operator of Public Transit

 Non-profit organization

 State or local government agency Other (please describe)

 State or local government agency certifying that there are no non-profit organizations readily

 available in the area to provide the service.

# Project Description

#### Title:

**Brief Description:**

**Funding Program:**

##### 5310 Traditional Project

5310 Non-traditional Project

**Project Type:** Capital Only

##### Capital & Operating

Operating Only

Mobility Mgt./Coordinated Planning

**New or continuing project?** New

 Continuing

 **Duration of project:** 1 year­­­ \_ Multi-year (number of years)

 Other period of time \_\_\_\_\_\_\_

**Service (days/hours)** (*if applicable*):

**Estimated operating cost per one-way trip** (*if applicable*):

**Estimated daily riders** (*if applicable*):Weekday: Weekend:

# PART II – Narrative

Project Need/Goals and Objectives

1. Describe the unmet transportation need that the proposed project seeks to address and the relevant

planning effort that documents the need. Does it cover an area targeted by the CPT-HSTP? Describe how the project will mitigate the transportation need. Estimate the number of people served and/or the number of service units that will be provided. Describe the specific community this project will serve, and provide pertinent demographic data and/or maps.

1. What are the project’s goals and objectives?

Implementation Plan

1. Describe key personnel assigned to this project, and your agency’s ability to manage the project.
2. Provide an operational plan for delivering service. Include route or service area map, if applicable. OR provide an implementation plan for completing a capital project, including key milestones and estimated completion date.
3. Explain how this project relates to other services or facilities provided by your agency or firm and demonstrate how it can be achieved within your technical capacity.

Project Budget

1. Project sponsor should provide a complete budget indicating project revenues and expenditures in the

format provided in Part III and describe efforts to ensure its cost-effectiveness.

Partnerships, Collaboration, and Outreach

1. Describe how the project will be coordinated with public and/or private transportation and social service

agencies serving low-income populations, seniors, and individuals with disabilities. Is the project co- sponsored with other partners?

1. Describe efforts to market the project, and ways to promote public awareness of the program. Letters of support should be obtained from key stakeholders and attached to the grant application.

Program Effectiveness and Performance Indicators

1. Project application should demonstrate that the proposed project is the most appropriate match of

service delivery to the need. Identify performance measures to track the effectiveness of the service in meeting the identified goals. For capital-related projects, project sponsor is responsible to establish milestones and report on the status of project delivery.

1. Describe a plan for monitoring and evaluation of the service, and steps to be taken if original goals are not achieved.

Innovation

1. Describe any proposed use of innovative approaches that will be employed for this project (service

concepts or facilities, creative financing, or new technologies).Discuss what is innovative about the approach and how the innovations could be applied elsewhere in the region.

# PART III – Project Budget

#### Project Funding Worksheet

Please fill in the areas below that are relevant for the project type selected.

* 1. **Total Project Budget** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Capital Federal Share $

**80%**

Capital Local Match $ **20%**

Operating Federal Share $

**50%**

Operating Local Match $

**50%**

ADA vehicle-related equipment Federal Share $ **90%**

ADA vehicle-related equipment Local Match $ **10%**

* 1. **Duration of Project (*please select*):** 1 Year \_\_\_\_\_

 2 Year \_\_\_\_\_

 Other (*note time period*) \_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_

**Project Funding & Local Match**

Local matching funds will be required for all application submittals. For projects requiring operating funds, the required match is 50% from non-DOT funds. For capital projects the required match is 20% from non-DOT funds. Funds from local government, other federal sources, non-profits, and other private sources can be used for the local match required.

* 1. **Local Match Funding Source(s):**
	2. **Will there be a commitment of funds beyond the grant period?** Yes \_No Describe:

**PART IV – Required Certifications & Policies** (please attach to application)

* + 1. Drug and Alcohol Testing Policy or Drug-Free Workplace Policy (*please attach)*
		2. Local Match Certification (*please attach form or letter similar to sample*)
		3. Lobbying Certification Form (please attach a signed certification like sample provided)
		4. Title VI Non-discrimination policy *(please attach your organization policy or a signed certification like the sample provided)*
		5. Equal Employment Opportunity Certification (please attach certification like sample provided)

Local Match Certification Letter Sample

Date

Meg Scully, Grants Administrator

DCHC MPO

101 City Hall Plaza

Transportation Dept.

Durham, NC 27701

**RE: FY 2014 5310 Application**

*(Organization/Business Name)* is submitting an application for the Enhanced Mobility for Seniors and Individuals with Disabilities funds for *(Project name/service)*.

The purpose of this letter is to serve as the official assurance of the 0% local match required for the project. Sufficient funds are allocated in the budget to provide local match should the grant be approved. This letter serves to certify that of the total project cost of $000,000 and requires local matching funds in the amount of $000,000.

Sincerely,

(Name of Finance Administrator/CFO/CEO/etc.)

-------------------------------------------------------------------------------------------------------------------------------------------------------------------

 Title VI Non-Discrimination Policy Statement Sample

It is the policy of *(your organization name)* to ensure that no person shall, on the ground of race, color, sex, age, national origin, or disability, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program of activity as provided by Title VI of the Civil Rights Act of 1964, the Civil Rights Restoration Act of 1987, and any other related non-discrimination Civil Rights laws and authorities.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date

Company Position

 Equal Employment Opportunity Certification

*[Company Name]* provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability or genetics. In addition to federal law requirements, *[Company Name]* complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, and transfer, leaves of absence, compensation and training.

*[Company Name]* expressly prohibits any form of workplace harassment based on race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability, or veteran status. Improper interference with the ability of *[Company Name]*’s employees to perform their job duties may result in discipline up to and including discharge.

Lobbying Certification

*You must select the following certifications if you apply on behalf of your applicant for a Federal grant or cooperative agreement exceeding $100,000, or a loan (including a line of credit), loan guarantee, or loan insurance exceeding $150,000, except if you are applying on behalf of an Indian tribe, tribal organization, or other Indian organization or if we determine otherwise in writing.*

As required by 31 U.S.C. 1352 and U.S. DOT regulations, “New Restriction on Lobbying,” specifically 49 CFR 20.110, you and your Applicant understand that:

1. The lobbying restrictions of your certification apply your Applicant’s request for:

(1) $100,000 or more in Federal funding for a grant or cooperative agreement, and

(2) $150,000 or more in Federal funding for a loan, line of credit, or loan guarantee,

1. Its certification covers the lobbying activities of:

(1) It,

(2) Its principals, and

(3) Its first tier subrecipients:

Therefore, on behalf of your Applicant, you certify to the best of your knowledge and belief, that:

1. No Federal appropriated funds have been or will be paid by or on its behalf to any person:

a. To influence or attempt to influence:

(1) An officer or employee of any Federal agency,

(2) A Member of Congress, an employee of a member of Congress, or an officer of employee of Congress,

b. Regarding the award of a :

(1) Federal grant or cooperative agreement, or

(2) Federal loan, line of credit, loan guarantee, or loan insurance

2. It will submit a complete OMB Standard Form-LLL, “Disclosure of Lobbying Activities (Rev. 7-97),” in accordance with its instructions, if any funds other than Federal appropriated funds have been or will be paid to any person:

a. To influence or attempt to influence:

(1) An office or employee of any Federal agency,

(2) A Member of Congress, an employee of a Member of Congress,or an officer or employee of Congress, or

b. Regarding any application for a:

(1) Federal grant or cooperative agreement,

(2) Federal loan, line of credit, loan guarantee, or loan insurance, and

3. It will include the language of this certification in the award documents for all subawards at all tiers including, but not limited to subcontracts, subgrants, subagreements, and third party contracts under a Federal grant or cooperative agreement, or Federal loan, line of credit, loan guarantee, or loan insurance, and

4. It understands that:

a. This certification is a material representation of fact that the Federal Government relies on, and

b. It must submit this certification before the Federal Government may award funding for a transaction covered by 31 U.S.C. 1352, including a:

(1) Federal grant or cooperative agreement, or

(2) Federal loan, line of credit, loan guarantee, or loan insurance, and

5. It also understands that any person who does not file a required certification will be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Name/Position (printed) Name (signed) Date