

PROGRAM CONTACTS



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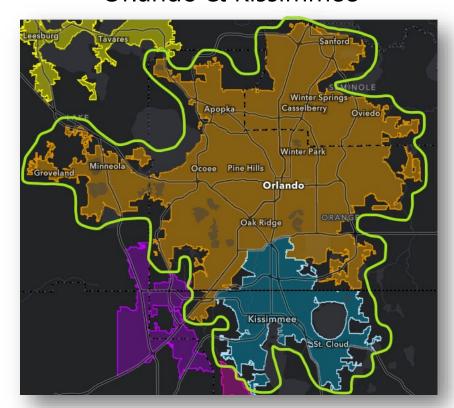
PROGRAM OVERVIEW

FTA's Section 5310

Provides financial assistance for 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 and projects that exceed the requirement of the ADA, improve access to fixed-route service and decrease reliance by individuals with disabilities on complementary paratransit, and alternatives to public transportation that assist seniors and individuals with disabilities.

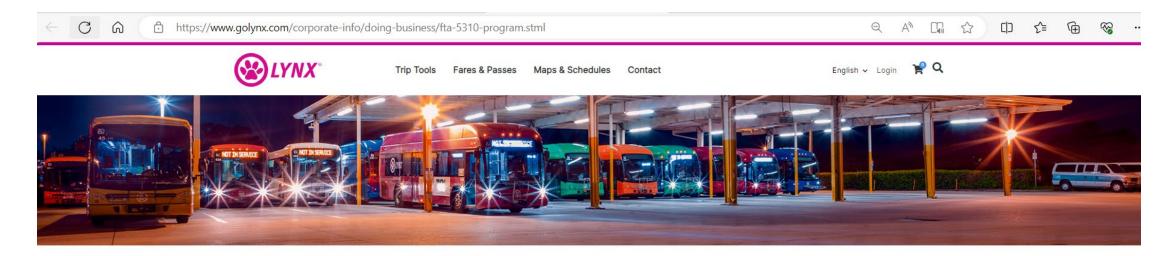
Service Area

Urbanized Areas (UZAs) of Orlando & Kissimmee





PROGRAM OVERVIEW



FTA 5310 Program

The Section 5310 program provides financial assistance for capital and operating 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 and projects that exceed the requirement of the ADA, improve access to fixed-route service and decrease reliance by individuals with disabilities on complementary paratransit, and alternatives to public transportation that assist seniors and individuals with disabilities.

Overview Eligibility How to Apply Human Services Transportation Plan

CRRSAA & ARP

Overview

In 2012, Congress passed a new two-year transportation bill. The Moving Ahead for Progress in

Advertising

Disadvantaged Business
Enterprise

ADA

Title VI

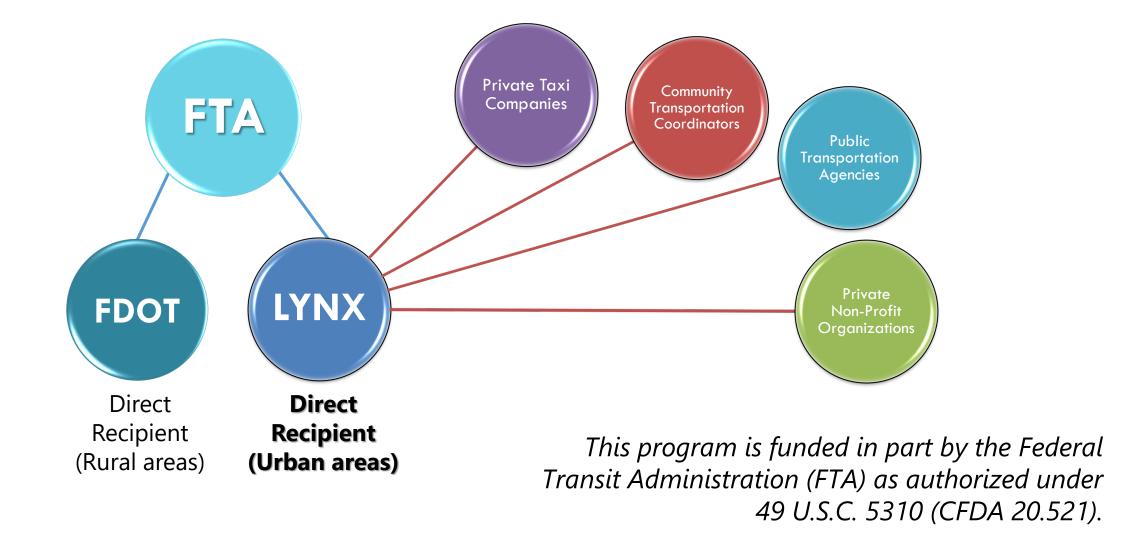
FTA 5310 Program

Media & Filming

Procurement

Contact Information

PROGRAM FUNDING



REQUIREMENT: TRANSPORTATION DISADVANTAGED COORDINATION CONTRACT

Agencies soliciting federal award funds must:

Maintain an active contract with the CTC

Rule Chapter 41-2.002:"A written contract between the Community Transportation Coordinator and an agency who receives transportation disadvantaged funds and performs some, if not all, of its own transportation services, as well as transportation services to others, when shown to be more effective and more efficient from a total system perspective. The contract reflects the specific terms and conditions that will apply to those agencies that perform their own transportation, as well as joint utilization and cost provisions for transportation services to and from the community transportation coordinator."

Complete the monthly and Annual Operating Report

Complete all required on-site/vehicle compliance inspections

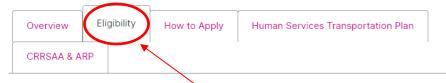


IS MY AGENCY ELIGIBLE FOR FUNDING?

FTA 5310 Program

A | Corporate Info | Doing Business | FTA 5310 Program

The Section 5310 program provides financial assistance for capital and operating 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 and projects that exceed the requirement of the ADA, improve access to fixed-route service and decrease reliance by individuals with disabilities on complementary paratransit, and alternatives to public transportation that assist seniors and individuals with disabilities.



Eligible Sub-recipients

LYNX does not require grant funding applicants to have active agreements with the CTC, but does require awarded sub-recipients to have active coordination contracts; if an awarded agency did not have an active agreement, time and support will be afforded to establish one.

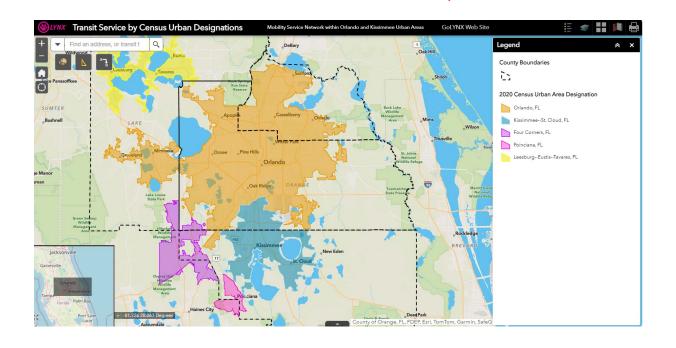
All agencies applying for Section 5310 must meet with the CTC.

Those eligible to apply for Section 5310 funding as a sub-recipient of LYNX include:

- 1. Private non-profit organizations
- 2. State or local governmental authorities
- 3. Operators of public transportation services, including private operators of public transportation services

Eligible Project Areas

Eligible Sub-recipient should provide service to the urbanized areas of Orlando and Kissimmee. Please follow the link to access the maps.





IS MY AGENCY ELIGIBLE FOR FUNDING?



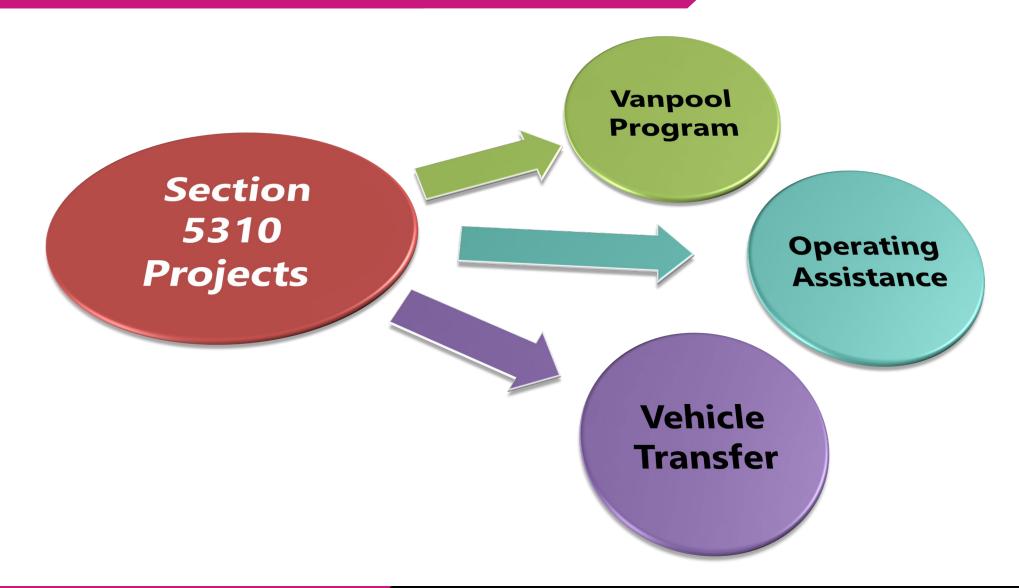
Central Florida Regional Transportation Authority dba LYNX

SECTION 5310 GRANT APPLICATION FISCAL YEAR 2026-2027

Enhanced Mobility of Seniors and Individuals with Disabilities
In accordance with 49 U.S.C. Section 5310 – Fast Act Section 3006



ELIGIBLE 5310 PROJECTS



VANPOOL LEASE PROGRAM

- ✓ Funding Available for up to two (2) years
- ✓ Managed by LYNX's current contractor: Enterprise
- ✓ Various bus floor plans (Turtle Top & Vans) *Specific floorplan requests to suit your operations will be considered.

✓ Reimbursement Program

50 / 50 *

* Additional agency costs include fuel, tolls, or parking if applicable.



Includes:

- □ Preventative Maintenance
- □ *Insurance*
- □ Roadside Assistance



OPERATING ASSISTANCE PROGRAM

Reimbursement Program

50 / 50 *

* LYNX will reimburse 50% of the total transportation operating expenses incurred during the award period.

Examples:

- Salary
- Fringe benefits
- Fuel for the Vanpool vehicle
- Among others

Back up documentation required for reimbursement.







VEHICLE TRANSFER PROGRAM

LYNX may have retired vehicles (over 200,000 miles) available to be transferred to agencies for use in-line with Section 5310 requirements.



Requirements:

- ✓ FTA approvals
- ✓ Having an active contract with the CTC

Agency will be responsible for:

- ✓ Operating the vehicle for at least one year
- ✓ All operating expenses
- ✓ Completing the Annual Operating Report and the monthly trip reporting



SOLICITATION SCHEDULE

Major Task	Dates	
Grant Workshop	September 3, 2025	
Period of Questions & Coordination with CTC	September 4 – 18, 2025	
Applications Due	October 7, 2025	
Recommendation to award	Winter 2025	
Pre-Monitoring Process & Notice to Proceed	Summer 2026	C
Period of Award	October 1, 2026 – September 30, 2028	7 14 21 7



WHAT HAS CHANGED?

Funding:

- When determining whether your agency would like to request funds for the FY 2026–2027 cycle, please keep in mind that **funding will be awarded for a period of up to two (2) years**.
- The **next funding solicitation** will take place for the **FY 2028–2029 cycle**.
- All solicitation documents are available on www.DemandStar.com. For instructions on how to create a free account, please visit: https://www.golynx.com/corporate-info/doing-business/fta-5310-program.stml

FTA 5310 Program

↑ | Corporate Info | Doing Business | FTA 5310 Program

The Section 5310 program provides financial assistance for capital and operating 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 and projects that exceed the requirement of the ADA, improve access to fixed-route service and decrease reliance by individuals with disabilities on complementary paratransit, and alternatives to public transportation that assist seniors and individuals with disabilities.



Notification of Funding

Upon notice of the annual federal appropriation, LYNX will notify all eligible sub-recipients, including DBEs, via U.S. postal mail, e-mail, and/or public notice regarding the availability of funding and the associated grant application(s).

Grant Worksho

The Central Florida Regional Transportation Authority (dba LYNX) will host a grant workshop on September 3, 2025, from 10 a.m. to 11:00 a.m. to discuss the availability of funding under the FY 2026-27 Section 5310 program for the urbanized Orlando and Kissimmee areas, as administered by LYNX. For meetings details, register through EventBrite.

Application packages will be available on September 3, 2025, on DemandStar. Agencies must register to be able to access and upload all solicitation documents. For additional information on the workshop or the LYNX administered 5310 program, please contact Brenda I Garces at BGarces@golynx.com.

In accordance with the Americans With Disabilities Act of 1990, persons needing a special accommodation at this meeting because of a disability or physical impairment should contact Benjamin Gonzalez at 455 N. Garland Ave, Orlando, FL 32801 407-254-6038, not later than three business days prior to the meeting. If hearing impaired, contact LYNX at 407-423-0787 (TDD).

Advertising Disadvantaged Business Enterprise ADA Title VI FTA 5310 Program Media & Filming Procurement

Contact Information

455 N. Garland Ave. Orlando, FL 32801 P: (407) 841-LYNX (5969) inquiry@golynx.com

Solicitation

Thank you for expressing an interest in doing business with LYNX. Please consider registering as a vendor by visiting our website at www.golynx.com and clicking on "Procurement" at the bottom of the page. Register under "Vendor Registration" and you will receive an email confirmation. This will also prompt you to register in DemandStar/OpenBids DemandStar. Once registered with DemandStar/OpenBids, you will receive notifications of any solicitations with the same commodity codes you chose. Make sure to choose all commodity codes that align with your business so that you receive the notifications.

- How to create a free bid account on DemandStar/OpenBids
- Frequently Asked Questions



DemandStar/OpenBids



VENDOR REGISTRATION

LYNX

Thank you for expressing an interest in doing business with LYNX. Please consider registering as a vendor by visiting our website at www.golynx.com and clicking on "Procurement" at the bottom of the page. Register under "Vendor Registration" and you will receive an email confirmation. This will also prompt you to register in DemandStar/OpenBids www.demandstar.com. Once registered with DemandStar/OpenBids, you will receive notifications of any solicitations with the same commodity codes you chose. Make sure to choose all commodity codes that align with your business so that you receive the notifications.

How to create a free bid account on DemandStar/OpenBids Guide

Step by Step Guide on how to create a free bid account on DemandStar/OpenBids
Step #1: Click on "Get Started".

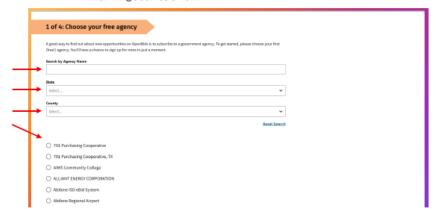


Step #2: Type your Company Name and Email, then click the "Create your OpenBids account" button.

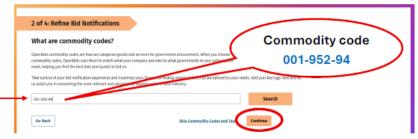


Step #3: Complete Sections 1 through 4

Section 1: Type your Agency Name, select the state and county. Then click on the matching address below.



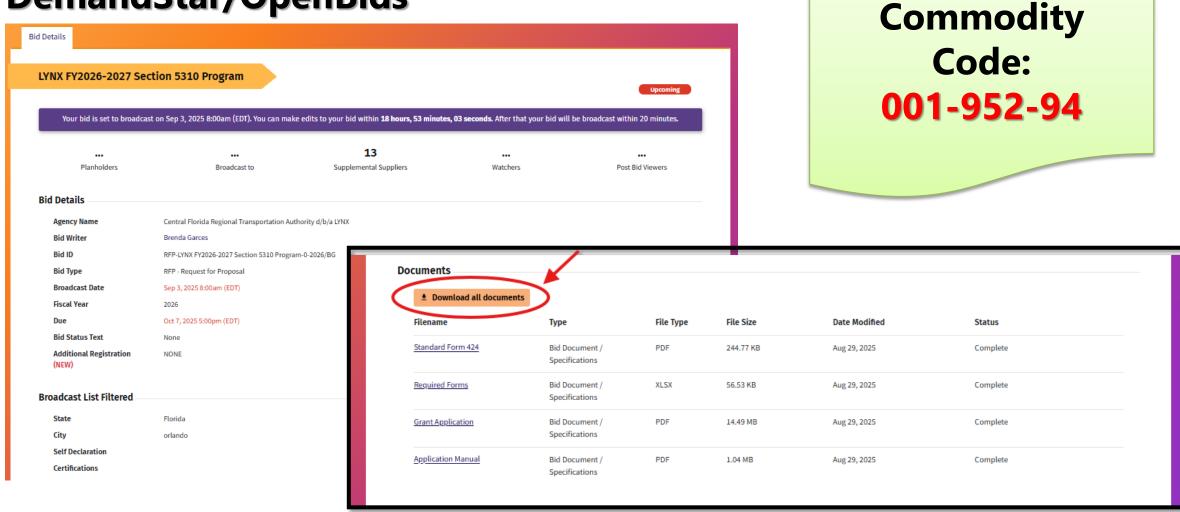
Section 2: A commodity code is required in order to view solicitations that match your services or areas of interest. For the Section 5310 Solicitation, please enter <u>001-952-94</u> as the commodity code, then click "Continue" to proceed. Feel free to add any additional commodity codes that align with the services your agency provides. This will help ensure you receive notifications for future solicitation opportunities that match your services.





WHAT HAS CHANGED?

DemandStar/OpenBids



DEADLINE

Deadline: <u>October 7, 2025</u> by <u>5:00 pm</u>

The solicitation will close at exactly 5:00 p.m. and DemandStar will not allow any additional document uploads beyond that time.

All required files must be uploaded in full prior to the deadline to be considered for this opportunity.



Central Florida Regional Transportation Authority dba LYNX

SECTION 5310 GRANT APPLICATION FISCAL YEAR 2026-2027

Enhanced Mobility of Seniors and Individuals with Disabilities In accordance with 49 U.S.C. Section 5310 – Fast Act Section 3006



RECOMMENDATIONS



Read LYNX's
Transportation
Disadvantaged
Service Plan.

Do not copy and paste information from a previous application!

Show how you have improved.

The Authorized
Representative signing
forms MUST be the same
person designated in the
Board Resolution.

Do not change the format of the application (PDF, Excel).

Maps must be in **COLOR** and inserted into the pdf (Proposed Project Description, question 5-b).

Please review the application as soon as possible so you can submit any questions during the Question Period, which runs from September 4–18.



APPLICATION



Central Florida Regional Transportation Authority dba LYNX

SECTION 5310 GRANT MANUAL

FISCAL YEAR (FY) 2026-2027

Enhanced Mobility of Seniors and Individuals with Disabilities
In accordance with 49 U.S.C. Section 5310 – Fast Act Section 3006



Central Florida Regional Transportation Authority dba LYNX

SECTION 5310 GRANT APPLICATION FISCAL YEAR 2026-2027

Enhanced Mobility of Seniors and Individuals with Disabilities In accordance with 49 U.S.C. Section 5310 – Fast Act Section 3006

CHECKLIST FOR APPLICATION ASSISTANCE = Name of Applicant:

The following documents must be included in Section 5310 Operating, Vanpool and Capital Assistance Applications in the order listed:

Application:

- □ Checklist for Application Assistance
- ☐ Applicant's Cover Letter (Use Template Provided)
- □ Agency Information
- □ Current System Description
- □ Budget Considerations
- □ Proposed Project Description
- ☐ Service Area Maps (LYNX provided map)

Annual Operating Data: (Excel Forms)

- ☐ Form 1: Sections 1-4
- ☐ Form 2: Funding Request
- ☐ Form 3: Local Match Requirement
- ☐ Form 4: Fact Sheet
- □ Form 5: Vehicle Inventory

Required Forms:

- ☐ Application for Federal Assistance (Standard Form 424)
- □ Federal Certifications and Assurances
- □ Exhibit A: CTC Coordination Contract
 - □ CTC Required Meeting Date
 - ☐ Previous AOR submitted to CTC (if current coordinating agency)
- ☐ Exhibit B: Single Audit Act, or Certification of Exemption from Single Audit Act
- ☐ Exhibit C: Coordinated Public Transit Human Services Transportation Plan
- Exhibit D: Governing Board's Resolution
- ☐ Exhibit E: Certification of Equivalent Service



APPLICATION

LYNX FY 2026-2027 Section 5310 GRANT APPLICATION FORM 1: ANNUAL OPERATING DATA **Section 1: Agency Information** Report Date: Agency Name: Address: **Contact Person:** Phone Number: Email: As an authorized Representative of this company, I hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions. July 1, 2024 - June 30, 2025 Period Covered: **Section 2: Trip Information** One-Way Passenger Trips by **Unduplicated Passenger Passenger Type Head Count** Elderly 3,481 Elderly 879 Disabled 10,000 7.000 Disabled Other Other Total 13,481 Total 7.879 **One-Way Passenger Trips Unmet Trip Requests** by Purpose 13,481 Medical Medical **Employment Employment** Education Education Nutritional Nutritional Life Sustaining Life Sustaining

View Burden Statemen	nt		OMB Numbe Expiration Date	
Application for Fede	eral Assistan	ce SF-424		
* 1. Type of Submission: Preapplication Application Changed/Corrected		New	" If Revision, select appropriate letter(6): " Cither (Specify):	
* 3. Date Received:		1. Applicant identifier:		
5a. Federal Entity Identifier	r.		Sb. Federal Award Identifier:	
State Use Only:				
6. Date Received by State:	:	7. State Application	i identifier:	
8. APPLICANT INFORMA	ATION:	_		
* a. Legal Name:				
* b. Employer/Taxpayer ide	entification Numb	er (EIN/TIN):	*c. UEI:	
d. Address:				
* Street1:				
Street2:				
* City:				
County/Parish:				_
* State:				•
Province:				
	: UNITED STA	ATES		T
* Zip / Postal Code:				
e. Organizational Unit:				
Department Name:			Division Name:	
f. Name and contact info	ormation of per	son to be contacted on m	natters involving this application:	
Prefix:	▼	* First Name	e:	
Middle Name:				
* Last Name:				
Suffix:	•			
Title:				
Organizational Affiliation:				
* Telephone Number:			Fax Number:	
* Email:				1

TRANSPORTATION DISADVANTAGED COORDINATION CONTRACT

This Transportation Disadvantages Coordination Contract (the "Contract") is made and entered into by and between the Central Florida Regional Transportation Authority d/b/a LYNX (the "Authority"), a body politic and corporate created by Part III, Chapter 343, Florida Statutes, and ... (hereafter designated as "Agency").

WITNESSETH:

WHEREAS, the Authority is an agency of the state created by Part III, Chapter 343, Florida Statutes, and is authorized to plan, develop, own, purchase, lease and otherwise maintain, operate and manage a regional public transportation system and public transportation facilities in its tricounty service area, including Orange, Seminole and Osceola Counties, and provide services for the transportation disadvantaged; and

WHEREAS, the Authority has been designated as the Community Transportation Coordinator (the "Coordinator") (as defined in Chapter 427, Fla. Stat. (1991) (the "Act") and Rule 41-2, Fla. Admin. Code (the "Rule")), by the Commission for the Transportation Disadvantaged (the "CTD"), whose address is 605 Suwannee Street, MS-49, Tallahassee, Florida 32399-0450, Attention: Executive Director, to serve as Coordinator for its tri-county service area pursuant to the terms of the Memorandum of Agreement between the CTD and the Authority, Contract No. TD1375, with an effective date of July 1, 2013 (the "Memorandum"), a copy of which is available upon request; and

WHEREAS, the Agency, as a condition of receiving financial assistance and to comply with the Act and applicable rules and regulations, is required to coordinate its delivery of transportation services with the Coordinator; and

WHEREAS, this Contract is being provided to Agency as a courtesy to allow Agency to directly bill state or federal funding sources for transportation services, when authorized by and in full compliance with said state or federal funding source, and is intended to evidence their respective compliance with the Act, the Rule and other applicable state or federal laws.

NOW, THEREFORE, in consideration of the premises herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Authority and the Agency agree as follows:

Recitals:

1.01 The recitals set forth above are true and correct and are incorporated herein by reference.

50708734:3

FORM #1: ANNUAL OPERATING DATA

LYNX FY 2026-2027 Section 5310 GRANT APPLICATION FORM 1: ANNUAL OPERATING DATA

Support for Budget and Fact Sheet including data from July 1, 2024, through June 30, 2025 (Sections 1-4)

Section 1: Agency Information

Report Date: 9/3/2025

Agency Name: LYNX

Address: 455 N Garland Ave, Orlando FL 32801

Contact Person: Brenda I Garces Phone Number: 407-254-6101

Email: bgarces@golynx.com

As an authorized Representative of this company, I hereby certify, under the penalties of perjury as stated in Chapter 837.06, F.S., that the information contained in this report is true, accurate, and in accordance with the accompanying instructions.

Period Covered: July 1, 2024 - June 30, 2025

Section 2: Trip Information

One-Way Passenger Trips by Passenger Type		Unduplicated P Head Cou	_
Elderly	3,481	Elderly	87
Disabled	10,000	Disabled	7,0
Other	0	Other	
Total	13,481	Total	7,8

One-Way Passenger Trips by Purpose

Unmet Trip Requests

879 7.000

7,879

Funding Request

During this solicitation cycle, agencies will have the option to request funding for a period of up to two (2) years.

Please use caution when completing these forms, as Section I: Vanpool Program Request and Section II: Operating Assistance Request each provide options for either 12 months or 24 months of funding. **ONLY complete the section that applies to your request.**

For the Vanpool Request, enter the number of vehicles and indicate whether the lease will include insurance or not. The pricing provided reflects the total cost for the entire period (either 12 or 24 months).

LYNX FY 2026-2027 Section 5310 GRANT APPLICATION FORM 2: FUNDING REQUEST

I. Vanpool Program Request

Complete this section ONLY if you are applying for the Vanpool program.

Vanpool Lease Expenses

Note: Lease assistance costs have been calculated based on one (1) or two (2) years of funding (12 or 24 months). The amounts listed reflect estimates for coverage using either our insurance or the agency's private insurance (*the use of private insurance must be approved by the Lease Contractor prior to signing the agreement). These totals are based on cost projections as of September 2025. Please note that prices are subject to change and may vary over time.

ONLY complete the table that corresponds to the funding period you are requesting, either 12 months or 24 months, and select the column that indicates if the vehicle includes our insurance or private insurance. DO NOT FILL OUT BOTH TABLES

Vehicle Type and Funding Period	Quantity	Cost with Insurance	* Cost without Insurance	Sub-total
One Year (12 months) of Funding				
Passenger Van with Wheelchair access				\$ -
Passenger Van without Wheelchair access				\$ -
Cutaway (Turtle Top) Bus with Wheelchair access				\$ -
		Sub-total for (one Year of Funding	\$ -
Two Years (24 months) of Funding				
Passenger Van with Wheelchair access				\$ -
Passenger Van without Wheelchair access				\$ -
Cutaway (Turtle Top) Bus with Wheelchair access				\$ -
		Sub-total for Tv	vo Years of Funding	\$ -
Vanpo	ol Request	& Contribution	on	
Federal Request (50				-
Local Match Contribution (50				-
	Total	Vannool Cost	¢	

Please, identify the purpose of your vehicle requests: the agency intends to (1) extend your current lease (maintain current inventory), (2) replace your current inventory, or (3) add an additional vehicle to expand your transportation services.

for n



LYNX FY 2026-2027 Section 5310 GRANT APPLICATION FORM 2: FUNDING REQUEST

I. Vanpool Program Request

Complete this section ONLY if you are applying for the Vanpool program.

Vanpool Lease Expenses

Note: Lease assistance costs have been calculated based on one (1) or two (2) years of funding (12 or 24 months). The amounts listed reflect estimates for coverage using either our insurance or the agency's private insurance (*the use of private insurance must be approved by the Lease Contractor prior to signing the agreement). These totals are based on cost projections as of September 2025. Please note that prices are subject to change and may vary over time.

ONLY complete the table that corresponds to the funding period you are requesting, either 12 months or 24 months, and select the column that indicates if the vehicle includes our insurance or private insurance. DO NOT FILL OUT BOTH TABLES.

Vehicle Type and Funding Period		Cost with Insurance	* Cost without Insurance	Sı	ub-total
One Year (12 months) of Funding					
Passenger Van with Wheelchair access				\$	-
Passenger Van without Wheelchair access				\$	-
Cutaway (Turtle Top) Bus with Wheelchair access			\$	-	
		Sub-total for Oา	ne Year of Funding	\$	-
Two Years (24 months) of Funding					
Passenger Van with Wheelchair access				\$	-
Passenger Van without Wheelchair access				\$	-
Cutaway (Turtle Top) Bus with Wheelchair access				\$	-
	Sı	ub-total for Two	o Years of Funding	\$	-



II. Operating Assistance Request

Complete this section ONLY if you are applying for Operating Assistance.

Project Related Operating Expenses

Please provide detailed expenses for all services proposed in this application, covering a funding period of one two (2) years (12 or 24 months). Include additional line items as necessary to ensure all costs share fully and accurately represented. If you use categories such as "Other" or "Miscellaneous," clearly specify the items or services included under these categories within the Budget Consideration section of the application.

Estimated expenses, if grant is awarded.

Estimated expenses, if grant is awarded				
Year One Calculations		lculations	Year Two Calculations	
Labor & Fringe Benefits	\$	402,076.00	Labor & Fringe Benefits	
Services	\$	107,624.00	Services	
Materials & Supplies	\$	10,070.00	Materials & Supplies	
Utilities	\$	50,244.00	Utilities	
Casuality & Liability	\$	46,078.00	Casuality & Liability	
Miscellaneous	\$	4,428.00	Miscellaneous	
Leases & Rentals	\$	12,600.00	Leases & Rentals	
Interest	\$	~	Interest	
Vanpool Lease	\$	33,120.00	Vanpool Lease	
Other	\$		Other	
Estimated Total:	\$	666,240.00	Estimated Total: \$ -	

Number of Proposed Trips if grant is Awarded for Year One	Expected Expenses if Gran is Awarded less Vanpool lease cost*	LOST		Total
12,000	\$ 666,240.00	\$	55.52	\$ 666,240.00



III. Vanpool Transfer Program

Complete this section ONLY if you are applying for the Vanpool Transfer Program.

Vehicle Type	Quantity
Passenger Van with Wheelchair access	
Passenger Van without Wheelchair access	
Turtle Top Bus with Wheelchair access	
Total Estimated Vanpool Expenses	0

IV. Total Project Request & Contribution

Funding	Subtotal
Federal Request	
(Vanpool Subtotal + Operating Assitance Subtotal)	\$ 333,120.00
Local Cash Contribution	
(Vanpool Subtotal + Operating Assitance Subtotal) +	\$ 333,120.00
Total Project Cost:	\$ 666 240 00



FORM #3: Local Match Requirement

LYNX FY2026-2027 Section 5310 GRANT APPLICATION FORM 3: LOCAL MATCH REQUEST

Local Match Requirement

Please identify the specific sources of local match funding, both public and private, that will be used to support your proposed project. Applicants may include funds from other federal programs as local match only if those funds are eligible to be used for transportation purposes, excluding any funds from USDOT/FTA programs. For each source listed, include the dollar amount that will be contributed as part of the local match.

Source	Amount
Agency for Persons with Disabilities	\$ 100,000.00
Local Government	\$ 25,000.00
Private Pay	\$ 25,000.00
Local Match Commitment	\$ 150,000.00
Total Project Cost	
Federal Request (50% of Vanpool & Operating)	\$ 150,000.00
Local Match Commitment (50% of Vanpool & Operating)	\$ 150,000.00
Total Cost	\$ 300,000.00

Please, attach documentation of match funds. Proof may consist of, but not be limited to:

- Transportation Disadvantaged (TD) allocation,
- Written statements from county commissions, state agencies, city managers, mayors, town councils, organizations, accounting firms and financial institutions.

Completed by: _E	Brenda I Garces		
Date:	8/20/2025		

- Describe the sources and amounts of Local Match.
- Include all other funds received for transportation purposes.
- Local Cash Contribution amount from Form #2 must match Total Local Match on this form.

FORM #4: Fact Sheet

LYNX FY 2026-2027 Section 5310 GRANT APPLICATION FORM 4: FACT SHEET

FACT SHEET	Previous Fiscal Year*	Projection if Grant is Awarded for One Year	Calculations (if grant is awarded) ~ Do not leave in blank ~	Projection if Grant is Awarded for Two Years	Calculations (if grant is awarded) ~ Do not leave in blank ~
Number of total one way passenger trips served by the agency PER YEAR (for all purposes)	13,481		How was the calculation done.		
Number of one way passenger trips provided to elderly and persons with disabilities PER YEAR	13,481				
Number of unduplicated Persons with Disabilities and Elderly served PER YEAR	7,879				
Urbanized Operating Cost per Trip Formula: Total Expenses - Vanpool Lease 5310 ÷ Total Passenger Trips	\$ 60.24				
Operating Cost per Hour of Service Formula: Total Expenses ÷ Total Revenue Hours	\$ 155.50				
Operating Cost per Mile of Service Formula: Total Expenses ÷ Total Revenue Miles	\$ 19.44				
Normal number of days that vehicles are in operation to provide elderly and disabled persons service PER WEEK	7.0				
Posted hours of normal operations to provide elderly and disabled persons service PER WEEK (please insert total of hours, for example 45, 60).	M-F: 120.0 Sat: 24.0 Sun: 24.0 Total: 168.0	M-F: Sat: Sun: Total:		M-F: Sat: Sun: Total:	

^{*}Data from previous Fiscal Year (FY) is automatically populated from the Annual Operating Report (Form 1)



FORM #5: Vehicle Inventory

Please include your current vehicle inventory as well as the anticipated/requested vehicles.

el r	Make / Size / Type	FDOT Control # or VIN #	Wheelchair Ramp or Lift (specify)	Seats & W/C Positions (i.e. 12+2)	Avg. Miles Per Year	Current Mileage	Expected Retirement Date	Other Equi	pment (GPS, onboard	computer)	Funding Source Used	to Purchase Vehicle	Urban Service Area (Y/N)
#													
F													
ŧ													
+													
		Requested Vehicle chicles requested throu		ier funding so	urces, or alr	eady purchas	sed but not ye	et in service.					
		ehicles requested throu			ources, or alre	Wheelc Ramp of	hair Seats & r Lift Positions	W/C Expected Avg.	Expected Retirement Date	Reson for Retire	ment or Replacement	Other Equi	pment (GPS, onboard comp
<u>+</u>	Please, list all the Ve	ehicles requested throu	ugh this grant, oth			Wheeld Ramp or	hair Seats & r Lift Positions	W/C Expected Avg.		Reson for Retire	ment or Replacement	Other Equi	pment (GPS, onboard comp
<u>+</u>	Please, list all the Ve	ehicles requested throu	ugh this grant, oth			Wheeld Ramp or	hair Seats & r Lift Positions	W/C Expected Avg.		Reson for Retire	ment or Replacement	Other Equi	pment (GPS, onboard comp

PROJECT SELECTION

Multi-agency Evaluation

✓ A multi-agency committee will review the applications and score them based on the evaluation criteria.

Internal Evaluation

- ✓ Subrecipient risk assessment
- ✓ Fact Sheet



Criteria:

- ☐ Documents 22 points max
- ☐ Agency Information 2 points max
- ☐ System Description 18 points max
- ☐ Budget 25 points max
- ☐ Proposed Project 28 points max
- ☐ Overall Impression <u>5 points max</u>

Max Score: 100 points



AWARD REQUIREMENTS

Regional Coordination Efforts

LYNX's Human Services Transportation Plan
 (HSTP)

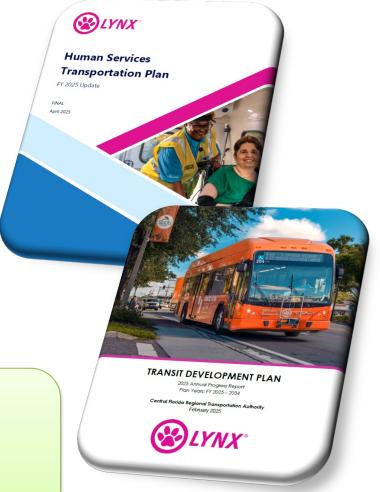
Vehicle Use

- Maintenance Requirements
- Transport seniors and individuals with disabilities

Reviews and Oversight

- Record Keeping Audits
- Virtual Desktop Reviews
- Pre & Post Award Monitoring



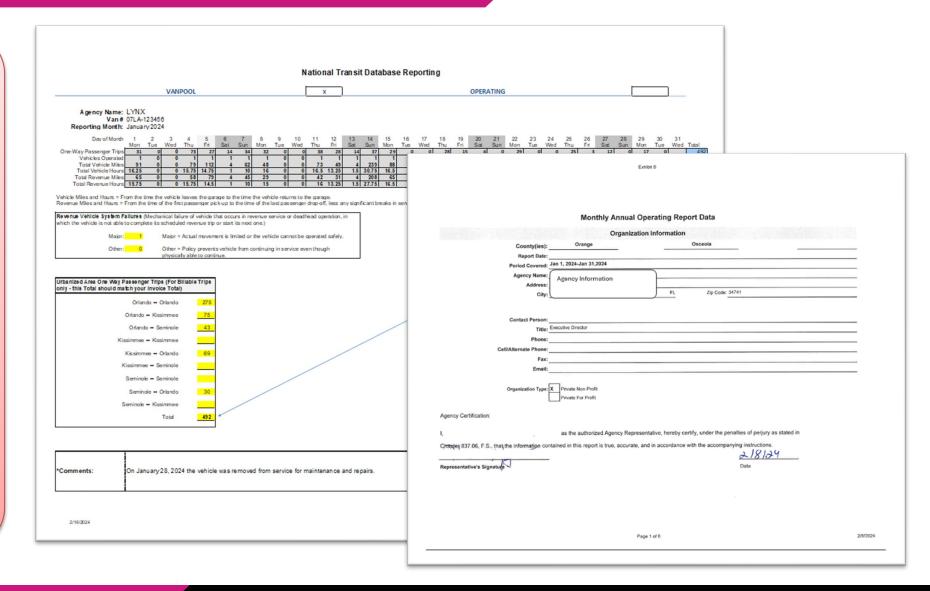




AWARD REQUIREMENTS

Reporting

- MonthlyOperatingData
- Monthly Invoices
- QuarterlyProgressReports
- CTC Reporting& AnnualInspections





WHO SHOULD I CONTACT?



Brenda Garces
LYNX

BGarces@golynx.com

Questions related to the application and Section 5310 Program.



Selita Stubbs CTC

SStubbs@golynx.com

To set up a meeting if you are applying for funding for the first time or if your project is totally changing.



Luis Benitez Enterprise

luis.benitez@em.com

Questions related to Vehicles and Insurance





REMINDER

Application is due: October 7, 2025 by 5:00 pm

Access and upload all solicitation materials on www.DemandStar.com



Central Florida Regional Transportation Authority dba LYNX

SECTION 5310 GRANT APPLICATION FISCAL YEAR 2026-2027

Enhanced Mobility of Seniors and Individuals with Disabilities In accordance with 49 U.S.C. Section 5310 – Fast Act Section 3006



LYNX SECTION 5310 PROGRAM



FTA 5310 Program | Public Transportation in Orange, Seminole & Osceola (golynx.com)

