

Project ID
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## CMAQ: Transit Improvements / Programs

Project Name\*\*: \_\_\_\_\_ MPMS# (if known): \_\_\_\_\_

This is an interactive application form. Please fill it out completely and review your entries carefully. After completing the form, save it to your computer, and include it with your application package submission as described in the Application Instructions.

**The fields marked with a double asterisk (\*\*) are required.**

1. Type of Transit Program\*\* (for bus pull-offs, go to 'Traffic Flow Improvements' form): **Select all types of transit programs that apply. To select contiguous types of transit programs, click and drag your selection or depress the 'Shift' key while making your selections. To select non-contiguous types of transit programs, depress the 'Ctrl' key while making your selections. Selections should be made using mouse click(s).**

<b>Select all that apply:</b>
Vehicle Replacement / New Purchase
Transit Amenities Improvements
Change in Service Frequency for Existing Service
Change in Time of Day for Existing Service
New Express Service Coverage (new routes, or extensions)
New Local Service Coverage (new routes, or extensions)
New Shuttle Service at Transit Stop
Transit Center
Bus Rapid Transit
Financial Incentives for Potential Transit Users
High Speed Rail
Public Education, Outreach, Marketing, Promotions (see 'Transportation Demand Management' form)
Other

If other, describe: \_\_\_\_\_

2. Transit System Characteristics\*\*:

- a. Service Area (square miles): \_\_\_\_\_
- b. Estimated Service Area Population: \_\_\_\_\_
- c. Estimated Service Area Employment: \_\_\_\_\_
- d. Annual Vehicle Revenue Hours: \_\_\_\_\_
- e. Annual Vehicle Revenue Miles: \_\_\_\_\_
- f. Average Weekday Unlinked Trips: \_\_\_\_\_
- g. Vehicles Operated in Maximum Service: \_\_\_\_\_
- h. Peak-To-Base Ratio: \_\_\_\_\_

3. The Associated Transit Agency is\*\*: \_\_\_\_\_

**A. Vehicle Replacement and/or New Purchase Project:**

4. Vehicles to be Replaced:

- a. Quantity: \_\_\_\_\_ Heavy Duty Transit Bus \_\_\_\_\_ Para Transit Bus
- b. Average Age: \_\_\_\_\_ years

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## 5. Replacement Vehicles:

a. Number: \_\_\_\_\_ Heavy Duty Transit Bus \_\_\_\_\_ Para Transit Bus

b. Bus Model Year: \_\_\_\_\_

c. Fuel Type (select one): 

If other, describe: \_\_\_\_\_

## 6. Will the new vehicles be dedicated to special service/routes?

\_\_\_\_\_ Yes \_\_\_\_\_ No

a. Daily vehicle revenue miles on service route: \_\_\_\_\_

## 7. Are the new vehicles associated with an increase in service?

\_\_\_\_\_ Yes \_\_\_\_\_ No

a. Average additional daily vehicle revenue miles/new vehicle: \_\_\_\_\_

B. Transit Amenities Improvement Project:

8. Daily Boardings on Route(s) Impacted by Improvements: \_\_\_\_\_ boardings

9. Level of Improvement (select one):  Explain: \_\_\_\_\_

10. Night Service Availability:

\_\_\_\_\_ Yes \_\_\_\_\_ No

11. Peak-to-Base Ratio (optional): \_\_\_\_\_

12. Service Type (select one): 

If other, describe: \_\_\_\_\_

13. Time Period Targeted (select one): C. Change in Service Frequency for Existing Service Project:

14. Change in Daily Revenue Bus VMT on Impacted Routes: \_\_\_\_\_ miles

15. Daily Boardings on Route(s) Impacted by Improvement: \_\_\_\_\_ boardings

16. Headway: Existing \_\_\_\_\_ minutes and Proposed \_\_\_\_\_ minutes

17. Parallel Service Headway (optional): \_\_\_\_\_ minutes

18. Service Change Duration: \_\_\_\_\_ hours

19. Percentage Share of Service Operated Closed Door (express): \_\_\_\_\_%

## 20. Data for Buses Providing New Service:

a. Average Year Bus Was Manufactured: \_\_\_\_\_

b. Bus Fuel Type (select one): 

If other, describe: \_\_\_\_\_

c. Service Type (select one): 

If other, describe: \_\_\_\_\_

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D. Change in Time of Day for Existing Service Project:

21. Change in Daily Revenue Bus VMT on Impacted Routes: \_\_\_\_\_ miles

22. Base Unlinked Transit Trips on Impacted Route(s): \_\_\_\_\_ trips

23. Percentage Share of Service Operated Closed Door (as factor): \_\_\_\_\_ %

24. Number of Hours of Service Change: \_\_\_\_\_

25. Type of Service (select one): 26. Time Period of Service Change (select one): 

27. Data for Buses Providing New Service:

a. Average Year Bus Was Manufactured: \_\_\_\_\_

b. Bus Fuel Type (select one): 

If other, describe: \_\_\_\_\_

E. New Express Service Coverage (new routes, or extensions) Project:

28. Change in Daily Revenue Bus VMT on New Express Service: \_\_\_\_\_ miles

29. Daily Bus Vehicle Trips on New Express Service: \_\_\_\_\_ trips

30. Park-n-Ride Spaces Serving New Express Service: \_\_\_\_\_ spaces

31. Headway for New Express Service: \_\_\_\_\_ minutes

32. Percentage Share of Service Operated Closed Door: \_\_\_\_\_ %

33. Data for Buses Providing New Service:

a. Average Year Bus Was Manufactured: \_\_\_\_\_

b. Bus Fuel Type (select one): 

If other, describe: \_\_\_\_\_

F. New Local Service Coverage (new routes, or extensions) Project:

34. Total Households Within ½ Mile Radius of New Service: \_\_\_\_\_ households

35. Change in Daily Revenue Bus VMT on New Local Service: \_\_\_\_\_ miles

36. Ratio of New Transit Revenue Miles in Previously Unserved Areas to All New Miles: \_\_\_\_\_

37. Share of Households Along New One-Way Loop Service: \_\_\_\_\_

38. Off Peak Headway for New Service: \_\_\_\_\_ minutes

39. Peak Headway for New Service: \_\_\_\_\_ minutes

40. Night Service Available? \_\_\_\_\_ Yes \_\_\_\_\_ No

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## 41. Data for Buses Providing New Service:

a. Average Year Bus Was Manufactured: \_\_\_\_\_

b. Bus Fuel Type (select one): 

If other, describe: \_\_\_\_\_

G. New Shuttle Service at Transit Stop Project:

42. Total Station Boardings: \_\_\_\_\_ boardings

## 43. Shuttle Information:

a. Shuttle Fare: \$ \_\_\_\_\_

b. Headway: \_\_\_\_\_ minutes

c. Shuttle Capacity: \_\_\_\_\_

d. Shuttle Route Distance: \_\_\_\_\_ miles

e. Average Year Bus Was Manufactured: \_\_\_\_\_

f. Bus Fuel Type (select one): 

If other, describe: \_\_\_\_\_

H. Transit Center Project:

44. Change in Daily Revenue Bus VMT on Impacted Routes: \_\_\_\_\_ miles

45. Average In-Vehicle Travel Time (minutes): \_\_\_\_\_ Existing and \_\_\_\_\_ Proposed

46. Average Transfer Wait Time (&gt; 0 minutes): \_\_\_\_\_ Existing and \_\_\_\_\_ Proposed

47. Number of Existing Riders: \_\_\_\_\_ riders

48. Number of Existing Transfers: \_\_\_\_\_

49. Percentage Share of Service Operated Closed Door: \_\_\_\_\_%

50. Service Type (select one): 

If other, describe: \_\_\_\_\_

51. Night Service Available?

\_\_\_\_\_ Yes \_\_\_\_\_ No

52. Average Year Bus Was Manufactured: \_\_\_\_\_

53. Bus Fuel Type (select one): 

If other, describe: \_\_\_\_\_

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Project Name\*\*: \_\_\_\_\_ MPMS# (if known): \_\_\_\_\_

I. Bus Rapid Transit Project:

54. Increase in Daily Revenue Bus VMT Due to BRT: \_\_\_\_\_ miles
55. Attracted New Ridership Due to Implementation of BRT: \_\_\_\_\_
56. Percentage Share of New Ridership Diverted from Autos: \_\_\_\_\_%
57. Percentage of People Walking to BRT Stations for Work Trip: \_\_\_\_\_%
58. Off Peak Headway for BRT Service: \_\_\_\_\_ minutes
59. Peak Headway for BRT Service: \_\_\_\_\_ minutes
60. Night Service Available? \_\_\_\_\_ Yes \_\_\_\_\_ No
61. Average Distance from Home to BRT Stations Parking Lots: \_\_\_\_\_ miles
62. Average Year Bus Was Manufactured: \_\_\_\_\_
63. Bus Fuel Type (select one):
- If other, describe: \_\_\_\_\_
64. Is New BRT Service (select one):
65. Road Section Length: \_\_\_\_\_ miles
66. Speed Limit: \_\_\_\_\_ mph
67. Number of Lanes (1-way): \_\_\_\_\_ lanes
68. Volume (1-way AADT): \_\_\_\_\_
69. Peak Hour Level of Service (A-F):
70. If New BRT Service is on Exclusive New Bus Lanes (answer below):
- a. Is an HOV / Bus-Only Lane to Be Added? \_\_\_\_\_ Yes \_\_\_\_\_ No
- b. Is a Queue Jump Lane to Be Added? \_\_\_\_\_ Yes \_\_\_\_\_ No
- c. Is a Bus Pull-Off Lane to Be Added? \_\_\_\_\_ Yes \_\_\_\_\_ No
- d. Average Number of Buses per Hour: \_\_\_\_\_ AM \_\_\_\_\_ Midday \_\_\_\_\_ PM \_\_\_\_\_ Night
- e. Number of Buses per Hour Using Bus Pull-Off Lane (if applicable): \_\_\_\_\_ buses

J. Financial Incentives for Potential Transit Users Project:

71. Daily Fare Reduction / Incentive: \$ \_\_\_\_\_
72. Number of Employees in Affected Area: \_\_\_\_\_ employees

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### K. High Speed Rail Project:

73. Description of Proposal:

	<u>Origin City</u>	<u>Destination City</u>
a. Population:	_____	_____
b. Employment:	_____	_____
c. Income:	_____	_____

74. Proposed HSR Speed (select one):

75. Total Length of Corridor: \_\_\_\_\_ miles

76. Length of Corridor in County: \_\_\_\_\_ miles

### L. Public Education, Outreach, Marketing, Promotions:

Information about this type of project should be provided on a 'Transportation Demand Management' form.

### M. Other:

77. Describe transit improvements/programs that do not fit above categories A-L.

78. Additional Information:

**If you need additional space, use and attach as many 'Additional Information' forms as needed.**