Please provide the following documents and label as shown for **fixed route service only**. Information is strongly preferred in electronic format. Please indicate on the below checklist as to the status and availability of the information. Items marked as available on-site only may be requested to be scanned and electronically provided as needed.

| **Requested Item** | ***Mark Form in which Data to Be Provided*** |
| --- | --- |
| **Electronic** | **On-Site Only** | **Not Available** | **Not Applicable** |
| **BACKGROUND** |
| * 1. Current Articles of Incorporation (if revised in last 5 years)
 |  |  |  |  |
| * 1. Current Strategic and/or Business Plan (including Mission, Vision, Strategic Goals, and Objectives)
 |  |  |  |  |
| **Act 44 Performance Targets and Prior Action Plan** |
| * 1. Describe efforts to achieve 5-year performance targets (include supporting documentation)
 |  |  |  |  |
| * 1. Describe any changes or factors that impacted operations, finance, and statistical reporting in the last 5 years
 |  |  |  |  |
| * 1. List the status of prior Action Plan items and provide reasons for any incomplete or ongoing actions
 |  |  |  |  |
| **GOVERNANCE/GENERAL MANAGEMENT** |
| * 1. List of governing body members including terms and tenure of each member as well as contact information
 |  |  |  |  |
| * 1. Governing Board minutes and complete agenda packets (including all attachments) from the last 12 months
 |  |  |  |  |
| * 1. List of all committees of the Board with minutes and complete agenda packets from the last 12 months
 |  |  |  |  |
| * 1. Governing body bylaws (if revised in last 5 years)
 |  |  |  |  |
| * 1. Organization chart delineating decision authority by roles.
 |  |  |  |  |
| * 1. Formal succession plans for all key positions.
 |  |  |  |  |
| * 1. Performance evaluation process for the Executive Director by the Governing Body
 |  |  |  |  |
| * 1. Management agreements for any outsourced management functions
 |  |  |  |  |
| * 1. COVID response plan and documentation of any related service and workforce changes
 |  |  |  |  |
| **OVERSIGHT AND REVIEWS** |
| * 1. Two most recent annual reports from chief executive officer to governing board
 |  |  |  |  |
| * 1. Most recent triennial review and any other applicable FTA/PennDOT compliance reviews (i.e. FMO, Procurement) in the previous 5 years
 |  |  |  |  |
| **HUMAN RESOURCES** |
| * 1. All collective bargaining agreements as well as any related documents (e.g. letters or memoranda of understanding, letter agreements, side letters that clarify or modify the collective bargaining agreements, etc.)
 |  |  |  |  |
| * 1. Equal Employment Opportunity Plan
 |  |  |  |  |
| * 1. Turnover rate by position for each of the last 5 years
 |  |  |  |  |
| * 1. List current and planned job openings
 |  |  |  |  |
| * 1. Describe recruitment efforts for drivers and mechanics (include supporting documentation)
 |  |  |  |  |
| **FINANCE** |
| * 1. Current operating budget projections
 |  |  |  |  |
| * 1. Current 4-year and 12-year Capital Budget plan and/or 12-year Capital Budget
 |  |  |  |  |
| * 1. Use of CARES, CRSSA, and ARPA funds (include budget and actual expenditure documentation)
 |  |  |  |  |
| * 1. Accounts receivable (AR) and payable (AP) aging reports
 |  |  |  |  |
| * 1. Fixed-Route and Shared-Ride Cost Allocation Procedures/Data
 |  |  |  |  |
| * 1. Parent organization audit report if a component/enterprise unit of another organization (i.e. county, multi-function agency, etc.), (i.e., if not an independent authority)
 |  |  |  |  |
| **CONTRACTING** |
| * 1. All contract agreements involving purchased transportation
 |  |  |  |  |
| * 1. Contracts for the provision of services or special operations agreements to specific agencies, localities, colleges, universities, or other entities (e.g. route guarantees, UPass)
 |  |  |  |  |
| * 1. Professional or other services contracts over $100,000
 |  |  |  |  |
| * 1. DBE Program Plan
 |  |  |  |  |
| * 1. Current DBE Goal and Methodology
 |  |  |  |  |
| **OPERATIONS** |
| * 1. Operations Manual and/or Operators Handbook (if modified in the last 5 years)
 |  |  |  |  |
| * 1. New driver training and retraining handout materials
 |  |  |  |  |
| * 1. Act 44 data verification documents and findings (12 months)
 |  |  |  |  |
| * 1. Current service and performance standards
 |  |  |  |  |
| **FARES AND FARE SECURITY** |
| * 1. Fare policy analyses and findings
 |  |  |  |  |
| **MAINTENANCE** |
| * 1. Vehicle maintenance plan, programs and procedures manual (including PM schedules)
 |  |  |  |  |
| * 1. Copies of PM records for randomly selected vehicles (to be reviewed on-site, upon request if needed)
 |  | X |  |  |
| * 1. Facility maintenance plan, programs, and procedures manual (including PM schedules)
 |  |  |  |  |
| * 1. Asset management plan (if different from above)
 |  |  |  |  |
| * 1. Annual expenditure on parts and end of year inventory value of parts on hand for each of past 5 years
 |  |  |  |  |
| **OPERATIONAL SCHEDULING/PLANNING** |
| * 1. Revenue miles, revenue hours & fares from any charter services provided in each of the last 6 years
 |  |  |  |  |
| * 1. Latest Transit Development Plan (TDP)
 |  |  |  |  |
| * 1. Monthly ridership by route for the last 12 months
 |  |  |  |  |
| **SAFETY AND SECURITY**  |
| * 1. Summary of Worker Compensation Claims, by year, for each of last 5 years
 |  |  |  |  |
| * 1. Description of accident/incident policy and definitions, including how they are recorded and monitored (separated by employee and patron)
 |  |  |  |  |
| * 1. Property collisions and other NTD reportable incidents for the past 5 years including dates and loss amounts
 |  |  |  |  |
| * 1. Safety training and collision reduction plan(s)
 |  |  |  |  |
| * 1. Current Security Plan and documentation for coordinating with first responders
 |  |  |  |  |
| * 1. Emergency Preparedness/Continuity of Operations Plan (COOP)
 |  |  |  |  |
| * 1. Records of safety committee meetings for past 2 years
 |  |  |  |  |
| * 1. Public Transit Agency Safety Plan (PTASP), including documentation of coordination with the MPO and first responders
 |  |  |  |  |
| **CUSTOMER SERVICE** |
| * 1. Complaint procedures manual/policy and 2 most recent reports
 |  |  |  |  |
| * 1. Other customer service metrics maintained by the agency
 |  |  |  |  |
| **INFORMATION TECHNOLOGY** |
| * 1. Computer disaster recovery plan if not part of a Continuity of Operations Plan (COOP)
 |  |  |  |  |
| * 1. List of software used for Accounting/Financial, Maintenance, Scheduling, Farebox, and Data Collection (e.g. AVL, APC, Avail, etc.)
 |  |  |  |  |
| * 1. Current IT Strategic Plan
 |  |  |  |  |
| * 1. Current IT Security Plan
 |  |  |  |  |
| **CAPITAL PROGRAMMING** |
| * 1. Short and Long-term capital programs or plans including:
* Transit component of TIP
* Capital needs list (outside of the TIP)
 |  |  |  |  |
| * 1. Contact information for any assets owned, operated, or maintained by others
 |  |  |  |  |
| * 1. Listing of any real estate or other major assets not in the Capital Planning Tool (CPT)
 |  |  |  |  |
| **MARKETING AND PUBLIC RELATIONS** |
| * 1. Local news clippings from past 5 years (to be reviewed on-site, do not provide at this time)
 | N/A | X | N/A | N/A |
| * 1. Current year marketing plan, policies, and performance metrics
 |  |  |  |  |
| * 1. Reports, input, recommendations, etc. from ridership committees and/or advocacy groups for the past 2 years
 |  |  |  |  |
| * 1. Title VI Program
 |  |  |  |  |