Ames Area 2008
Passenger Transportation Development Plan

Submittal Date: March 30, 2007
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Introduction

The Passenger Transportation Development Plan (PTDP) is a required planning document mandated by the newly reauthorized transportation bill SAFETEA-LU. This mandate charged each urbanized and regional area with the task of coordinating transportation with all transportation providers and human service agencies to improve transportation services for persons with disabilities, older residents and individuals with lower incomes. The Iowa Department of Transportation is requiring the Ames Area Metropolitan Planning Organization (AAMPO) to be responsible for the Ames area plan. The AAMPO will approve the final recommendations within the PTDP plan due to their overall responsibility.

The PTDP document is a four-year plan to identify needs, objectives and goals that will identify transportation projects to meet these needs and goals. The plan will be modified each year. Its primary focus is to develop services for the disabled, aging, and low-income populations. It is also an arena to allow human service providers to discuss needs for their specific clients that will result in a better transportation network for all residents. This is also an avenue to avoid possible duplication of services to allow coordination between service and transportation providers. It is anticipated that this coordinated plan will enhance transportation access, minimize duplication of federal services and encourage cost-effective transportation solutions.

Furthermore, all federal funding directed toward underserved populations: the Elderly and Disabled program (5310); the Job Access and Reverse Commute (5316) and the New Freedom program (5317) are required to have a coordinative effort in developing needs and objectives within this plan. Beginning in FY2007, federal law requires that all projects proposing use of federal assistance from 5310, 5316 and 5317 must first be derived from the PTDP document. Iowa requires that all projects receiving either state or federal transit funding be included in the PTDP. Any projects developed within the PTDP by the AAMPO can then be incorporated into the local Transportation Improvement Plan (TIP) for further inclusion into the statewide TIP.

Finally, participation and enhanced communication by multiple partners will result from this planning effort. Coordination will encompass not only the transit providers (private and public), but human service agencies as well to realize this PTDP. The success of the plan depends on community-wide involvement and participation in the planning process.

Background

In response to the new SAFETEA-LU bill, the Iowa Department of Transportation developed guidelines for MPO’s to formulate their own Passenger Transportation Development Planning process (PTDP). The Office of Public Transit began by conducting regional Mobility Action Planning (MAP) conferences during the summer 2006 in cooperation with MPO’s and transit systems. The goal was to assist MPO and RPA agencies to complete their PTDP process by February 1, 2007.

The Ames Passenger Transportation Development Plan discusses the transportation efforts within the City of Ames city limits as required by federal and IDOT guidelines. The Central Iowa Regional Transportation Planning Agency (CIRTPA/Region 11) is responsible for the rural PTDP efforts for the following eight counties: Boone County, Dallas County, Jasper County, Madison County, Marion County, Polk County, Story County and Warren County. Story County encompasses the Ames city limits and therefore transportation outside of the urbanized Ames city limits would be covered by CIRPTA’s PTDP document. The two metropolitan areas of Ames and Des Moines would be excluded within CIRPTA’s efforts since their respective Metropolitan Planning Organizations are responsible for coordination within their urbanized areas.
Ames began their PTDP process in November 2006. This PTDP incorporated a coordinated planning process bringing both Transportation Providers and Human Service Agencies to the table in early January 2007 to discuss issues/needs and possible solutions for those needs. It is there that the needs of all parties were addressed and project justifications were developed for transit systems operating in the area.

**Methodology**

In early December, a transportation provider survey was distributed to 14 providers (public and private) in the Ames area. Four (28.5%) of the following providers responded to the survey marked with an asterisk and indicated an interest in participating in the development of transportation projects for the Ames area.

**Public Transportation Providers**
- *CyRide
- *Heartland Senior Services (subcontractor to Heart of Iowa Regional Transit Agency)**

**Private Transportation Providers**
- *Central Iowa Transit, Inc. and CIT Charter Inc.*
- *Farley’s Limousine Service*
- Midwest Coaches, Inc.
- Ames Taxi
- Northland Travel
- Jamison Express
- Budget Cab
- AJ’s Best Stretch Limousine
- Ames Limousine Service
- Crown Limousine Ltd.
- Racing Limos of Central Iowa
- Star Shuttle Party Buses

In addition, 42 human service providers in the Ames area were contacted and were requested to participate in the PTDP process by completing a survey. Those participants were asked to also participate in the development of the needs/objectives/solutions/projects session in early January. The following 22 participants (52.4%) took part by completing the survey and are identified below. (A full list of where surveys were sent is in Appendix C.) Of the 22 agencies, 6 individuals within these agencies highlighted grey below and transportation provider representatives on the next page attended the Ames area transportation meeting held on January 11, 2007. During this meeting, projects were identified to be incorporated into the PTDP based on the needs identified within the surveys and at the meeting. In addition, those agencies highlighted yellow also indicated they provided transportation to their clients by vehicles they owned/operated. However, only Heartland Senior Services provided additional information regarding their fleets when requested. None of the other transportation providers below in yellow attended the coordination meeting in January as well.

**Human Service Providers**
- American Red Cross
- Center for Creative Justice (CCJ)
- Good Neighbor Emergency Assistance Inc.
- Friendship Ark Homes
- Habitat For Humanity of Central Iowa
- Heartland Senior Services
- Homeward
- Iowa Department of Human Services (DHS)
- Lutheran Services in Iowa
- Mainstream Living Employment & Learning
- Mary Greeley Medical Center
- Mid-Iowa Community Action (MICA)
- Retired and Senior Volunteer Program (2)
- Riverside Manor
- Story County Commission of Veteran Admin.
- Story County Community Housing Corporation
- Story County Community Life Program
- The Abington on Grand
- United Way of Story County
- Youth & Shelter Services Inc.*
- Youth & Shelter Services: Pathways
- Youth & Shelter Services – Healthy Futures
Other Attendees

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shari Atwood</td>
<td>CyRide</td>
</tr>
<tr>
<td>Vanessa Baker-Latimer</td>
<td>City of Ames Planning &amp; Housing</td>
</tr>
<tr>
<td>Tom Davenport</td>
<td>CyRide</td>
</tr>
<tr>
<td>John Grzywacz</td>
<td>CIT</td>
</tr>
<tr>
<td>John Joiner</td>
<td>Ames Area MPO</td>
</tr>
<tr>
<td>Sheri Kyras</td>
<td>CyRide</td>
</tr>
<tr>
<td>Dylan Mullenix</td>
<td>Des Moines Area MPO</td>
</tr>
<tr>
<td>Kristin Nanke</td>
<td>HIRTA</td>
</tr>
<tr>
<td>Dominic Roberge</td>
<td>Public Works</td>
</tr>
<tr>
<td>Casey Speake</td>
<td>CIT</td>
</tr>
</tbody>
</table>

Existing Transportation Operations

Transportation operations within the Ames metropolitan area generally consist of the following transportation providers that responded to the survey questionnaire:

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Ames Transit Agency - CyRide</th>
<th>Heartland Senior Services</th>
<th>Central Iowa Transit, Inc and CIT Charters, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed-Route</td>
<td>Public transit for Story County as contractor for Heart of Iowa Regional Transit Association, ADA service for City of Ames (Dial-A-Ride - DAR) as contractor for CyRide</td>
<td>School transportation to Ames Community School District, “EXTRA” service to CyRide for high volume bus stops to ISU; Wilkinson apartment complexes transportation, private motorcoach service for hire, Des Moines School District “Activity” transportation and ISU event transportation.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Who is Eligible?</th>
<th>General Public</th>
<th>Seniors, Persons with Disabilities and general public</th>
<th>Ames Community School District, CyRide, Jefferson Lines and Burlington Trailways, as the operator of the Ames Bus Depot</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Hours/Days of Operation</th>
<th>Ames Transit Agency - CyRide</th>
<th>Heartland Senior Services</th>
<th>Central Iowa Transit, Inc and CIT Charters, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday through Friday</td>
<td>6am – 12 am</td>
<td>6am – 12 am (City of Ames; 6pm end time for rest of county)</td>
<td>All times</td>
</tr>
<tr>
<td>Saturday</td>
<td>8:00 am to 12:00 am</td>
<td>8:00 am to 12:00 am (City of Ames only)</td>
<td>All times</td>
</tr>
<tr>
<td>Sunday</td>
<td>9:00 am to 12:00 am</td>
<td>9:00 am to 12:00 am (City of Ames only)</td>
<td>All times</td>
</tr>
<tr>
<td>Holidays</td>
<td>Partial services most holidays, closed Thanksgiving, Christmas and New Year's Day</td>
<td>Partial services most holidays, closed Thanksgiving, Christmas and New Year's Day</td>
<td>All times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Employees</th>
<th>0</th>
<th>15</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative</td>
<td>6</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Drivers</td>
<td>29</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Maintenance</td>
<td>10</td>
<td>25</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>74</td>
<td>25</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full time</th>
<th>Part-time</th>
<th>Full time</th>
<th>Part-time</th>
<th>Full time</th>
<th>Part-time</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>-</td>
<td>3</td>
<td>2</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>29</td>
<td>74</td>
<td>-</td>
<td>25</td>
<td>-</td>
<td>35</td>
</tr>
<tr>
<td>10</td>
<td>6</td>
<td>-</td>
<td>-</td>
<td>4</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>Ames Transit Agency - CyRide</td>
<td>Heartland Senior Services</td>
<td>Central Iowa Transit, Inc and CIT Charters, Inc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------</td>
<td>----------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Union Structure</td>
<td>Yes, International Union of Operating Engineers – Local 234</td>
<td>None</td>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receive Public Money?</td>
<td>Yes</td>
<td>Yes</td>
<td>None directly; however contract with Ames Schools and CyRide receiving local funding from these public organizations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fare Structure</td>
<td>$1.00 adult; 50¢ elderly/disabled, K-12 students and medicare cardholders; free ISU students</td>
<td>County trips - $5.00 each way</td>
<td>n/a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vehicle Fleet</td>
<td><strong>Buses</strong>&lt;br&gt;59&lt;br&gt;<strong>Trucks</strong>&lt;br&gt;3&lt;br&gt;<strong>Vans</strong>&lt;br&gt;2&lt;br&gt;<strong>Sedans</strong>&lt;br&gt;13&lt;br&gt;0&lt;br&gt;2&lt;br&gt;1</td>
<td>13</td>
<td>43</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Vehicles with lifts/ramps:</strong>&lt;br&gt;45 (65.2%)</td>
<td>15 (100%)</td>
<td>4 (11.4%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Vehicles with radios/phones:</strong>&lt;br&gt;69</td>
<td>15</td>
<td>35</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shared Facilities</td>
<td>None</td>
<td>Congregate Meal Site, Activity Center and Adult Day Care</td>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coordination Interests</td>
<td>Networking with transportation/human service providers to look at coordination, contracting to purchase transportation service, cooperatively purchasing vehicles</td>
<td>Networking with transportation/human service providers to look at coordination, centralized fuel purchasing, pooling training resources, cooperatively purchasing vehicles.</td>
<td>Networking with transportation/human service providers to look at coordination, contracting to provide transportation service.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special Needs, New Freedom or JARC funding utilized</td>
<td>Special needs funding utilized to subcontract with Heartland to provide ADA complimentary service.</td>
<td>None</td>
<td>None specified</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Comments</td>
<td>See public comment section on page 14.</td>
<td>ASSET surveys issued spring 2006 provided 300 responses. Majority of comments were positive about the service. The biggest issue was wait time to get to talk to someone in the transportation office during peak hours of the day.</td>
<td>None specified</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
It should be mentioned that one additional private transportation provider responded to the survey, Farley’s Limousine service, located in Boone, Iowa providing transportation statewide. Farley’s has one non-accessible 2000 Lincoln Town Car limousine seating 12-14 passengers. Their service fees are $50-$125 per hour.

The frequency of CyRide’s existing services are identified and broken down into four service periods identified as follows: Weekday, Weekday Night, Saturday, and Sunday/Saturday Night. The peak frequency table below illustrates service frequency during these time periods.

<table>
<thead>
<tr>
<th></th>
<th>Weekday</th>
<th>Wkdy. Night</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red #1</td>
<td>10</td>
<td>40</td>
<td>20</td>
<td>40</td>
</tr>
<tr>
<td>Green #2</td>
<td>20</td>
<td>40</td>
<td>40</td>
<td>40</td>
</tr>
<tr>
<td>Blue #3</td>
<td>20</td>
<td>30</td>
<td>20</td>
<td>40</td>
</tr>
<tr>
<td>Yellow #5</td>
<td>30</td>
<td>-</td>
<td>30</td>
<td>-</td>
</tr>
<tr>
<td>Brown #6</td>
<td>20</td>
<td>-</td>
<td>40</td>
<td>-</td>
</tr>
<tr>
<td>Purple #7</td>
<td>40</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cardinal #21</td>
<td>7</td>
<td>20</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Gold - #22</td>
<td>20</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Orange - #23</td>
<td>3</td>
<td>20</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
The following service map identifies services operated by CyRide during the Weekday time period (6am – 7pm). Routes operated at this time include: Red, Green, Blue, Grey, Yellow, Brown, Purple, Cardinal, Gold, and Orange.
The following service map identifies services operated by CyRide during the time period Weekday Night (7:00pm – 12:30am). Routes operated at this time include: Red, Green, Blue, Cardinal and Orange.
The following service map identifies services operated by CyRide during the time period: Saturdays. Routes operated at this time include: Red, Green, Blue, Yellow and Brown. (Note that the brown route only operates the north half of the route between campus and North Grand Mall).
The following service map identifies services operated by CyRide during the time period: Sundays and Saturday nights. Routes operated at this time include: Red, Green, and Blue.
The following map illustrates the entire Story County area and City of Ames. Heartland Senior Services is responsible for public transit within Story County as well as contracted Dial-A-Ride (DAR) service (ADA Complimentary Service) for CyRide within the City of Ames. The DAR service area is ¾ mile either side of a CyRide fixed route. This ¾ mile boundary has also been expanded to include the entire City of Ames for DAR service.
Existing Coordination Efforts

CyRide coordinates with Central Iowa Transit, Heartland Senior Services and Midwest Coaches in providing transportation to the Ames community. CyRide has an excellent working relationship with each of these organizations. CyRide currently has contracts with CIT and Heartland Senior Service to provide public transportation services for the Ames community and works with Midwest coaches during large event movements. These efforts are described below.

Heartland Senior Services provides public transportation for Story County under contract through Heart of Iowa Regional Transit Authority as well as coordinating with CyRide to provide their ADA complimentary service. In this manner, one transportation provider offers all service within the county with multiple contracts thereby maximizing coordination.

CIT, a private transportation provider, has a proven track record of working with public transportation providers. CIT currently contracts with CyRide to provide “extra service for high capacity corridor services and for Wilkinson apartments. CIT provides the Ames Community School District transportation for students in the Ames area as well as activity transportation for the Des Moines School District. CIT also provides event transportation for Iowa State University. Finally, CIT leases vehicles to the YMCA of Greater Des Moines for their use. Most recently CIT agreed to begin the Airport service that CyRide provides to take individuals to the Des Moines International Airport during ISU breaks. Luggage is now stowed underneath within a coach bus instead of riding with the passengers allowing greater capacity within the vehicle and increased safety not having the luggage mixed among passengers. CyRide believes this to be beneficial for everyone involved, but especially adds to passenger comfort.

In addition, CyRide coordinates University and other Ames resident transportation under a 28E Agreement between the City of Ames, Iowa State University, and Government of the Student Body. Finally, the Passenger Transportation Development Plan efforts have added a layer of coordination with the Ames’ human service agencies. It is believed that this partnership will grow over the next few years with the incorporation of this planning effort.

Conditions of Service Area

The Ames community is perhaps most defined by Iowa State University’s central campus in the center of the community. A radial type service has been developed as a majority of transit services pass through the ISU campus. The City of Ames is approximately 4 miles wide with CyRide routes covering approximately 75% of the developed areas throughout the community during the weekday. Including weekend and evening service, CyRide provides service within ¼ mile of a fixed route to approximately 56% of Ames. This ¼ mile classification equates to about 4 blocks and represents the walking distance most individuals would be willing to travel to use public transportation.

Service fluctuates each semester due to housing occupancy and class times for Iowa State University students. This fluctuation often cannot be anticipated. CyRide staff will quickly identify these high ridership areas on the first few days of class and determines where more service is needed to fill this demand. Then throughout the semester, CyRide staff monitors inbound trips and will place additional buses into service to avoid overcrowding. If these high loads become regular occurrences throughout the semester, this may warrant a permanent increase in the service requiring the CyRide board to approve additional service frequencies.

Due to students overwhelming participation in the system, service frequencies are less frequent in the summer months and breaks to adjust to this lower demand.
Demographics for Ames, Iowa

The following demographic information is reported from the US Census Bureau’s 2000 website in regards to information on the City of Ames’ low-income, elderly and disabled populations. In addition Ames’ population below poverty was graphically illustrated on page 20 and throughout the document with CyRide’s routes overlain.

### Ames, Iowa: Elderly Population

<table>
<thead>
<tr>
<th>Total Population</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 5 years of Age</td>
<td>2,237.0</td>
<td>4.4%</td>
</tr>
<tr>
<td>Over 18 Years of Age</td>
<td>43,320.0</td>
<td>85.4%</td>
</tr>
<tr>
<td>Over 60 Years of Age</td>
<td>5,089.0</td>
<td>10.0%</td>
</tr>
<tr>
<td>Over 65 Years of Age</td>
<td>3,893.0</td>
<td>7.7%</td>
</tr>
<tr>
<td>Median Age</td>
<td>23.6</td>
<td></td>
</tr>
</tbody>
</table>


### Ames, Iowa: Disabled Population

<table>
<thead>
<tr>
<th>Total Population</th>
<th>Number</th>
<th>5-15</th>
<th>16-20</th>
<th>21-64</th>
<th>65+</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability status (over 5 yrs.)</td>
<td>4,001.0</td>
<td>216</td>
<td>357</td>
<td>1243</td>
<td>602</td>
<td>8.3%</td>
</tr>
<tr>
<td>One Type of Disability</td>
<td>2,418.0</td>
<td>13</td>
<td>61</td>
<td>232</td>
<td>159</td>
<td>5.0%</td>
</tr>
<tr>
<td>Sensory disability</td>
<td>13</td>
<td>61</td>
<td>232</td>
<td>159</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Disability</td>
<td>10</td>
<td>31</td>
<td>206</td>
<td>349</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Disability</td>
<td>193</td>
<td>165</td>
<td>229</td>
<td>40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-care Disability</td>
<td>0</td>
<td>0</td>
<td>22</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Go-outside Home disability</td>
<td>0</td>
<td>17</td>
<td>56</td>
<td>45</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employment Disability</td>
<td>0</td>
<td>83</td>
<td>498</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two Types or more of Disability</td>
<td>1,583.0</td>
<td>0</td>
<td>167</td>
<td>880</td>
<td>536</td>
<td>3.3%</td>
</tr>
<tr>
<td>Includes self-care disability</td>
<td>0</td>
<td>34</td>
<td>193</td>
<td>154</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does not include self-care disability</td>
<td>0</td>
<td>133</td>
<td>687</td>
<td>382</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: [http://factfinder.census.gov/servlet/DTTable?_bm=y&-geo_id=16000US1901855-&ds_name=DEC_2000_SF3_U&-redoLog=false&-mt_name=DEC_2000_SF3_U_PCT026](http://factfinder.census.gov/servlet/DTTable?_bm=y&-geo_id=16000US1901855-&ds_name=DEC_2000_SF3_U&-redoLog=false&-mt_name=DEC_2000_SF3_U_PCT026)

### Ames, Iowa: Poverty Status in 1999 of Individuals: 2000

<table>
<thead>
<tr>
<th>All income levels</th>
<th>Below Poverty Level</th>
<th>Percent below poverty level</th>
</tr>
</thead>
<tbody>
<tr>
<td>41,776</td>
<td>8,507</td>
<td>20.4%</td>
</tr>
<tr>
<td>16,260</td>
<td>6,652</td>
<td>40.9%</td>
</tr>
</tbody>
</table>

All individuals for whom poverty status is determined
Unrelated individuals for whom poverty status is determined

Source: [http://factfinder.census.gov/servlet/QTTable?_bm=y&-qr_name=DEC_2000_SF3_U_QTP34-&geo_id=16000US1901855-&ds_name=DEC_2000_SF3_U&-redoLog=false](http://factfinder.census.gov/servlet/QTTable?_bm=y&-qr_name=DEC_2000_SF3_U_QTP34-&geo_id=16000US1901855-&ds_name=DEC_2000_SF3_U&-redoLog=false)
Evaluation of Needs for Services & Equipment

A. Review of Last Year’s Efforts

In FY2006, CyRide coordinated Paratransit Dial-A-Ride (DAR) service with Heartland Senior Services. This partnership has proven to be very successful. Heartland started operating Dial-A-Ride, CyRide’s DAR service, in October 2003 and completed the 100% transition in April 2004. A recent modification occurred in 2005 when Heartland transferred DAR customers to their Medicare supplement funding to achieve 100% payment of trips that qualified for this funding. CyRide is now funding the remaining customers through 5310 and local funding.

CyRide was also granted New Freedom funding for FY2006 that it will apply to FY2007’s budget. This request partially funded a 40’ HD bus to accelerate CyRide’s accessible bus purchases and achieve full accessibility for the fleet more quickly. The remaining request was for operating assistance to enhance service to persons that use mobility aids.

No previous requests for Job Access and Reverse Commute (JARC) funding have been requested by CyRide or the City of Ames.

B. Public Input

CyRide received public input from twenty-two human service providers and four transportation providers through a Passenger Transportation Passenger Survey in December 2006. Transportation providers were described above within the existing transportation operators section of this document. The human services agency survey discussed each agencies needs and desires for transportation within the Ames area and Story County. These survey results are summarized below with highlighted information indicating higher concentrations of agency types.

- Of the 22 human service agencies that responded to the survey, 15 were private non-profit agencies; 3 were public; 3 were private, for-profit and 1 was a city-owned non-profit agency.
- The responding agencies represented a broad range of services, including:
  - Adult Day Care (1 agency)
  - Child Day Care (1 agency)
  - Congregate Nutrition (1 agency)
  - Counseling (2 agencies)
  - Education/Training (5 agencies)
  - Head Start (1 agency)
  - Home Delivered Meals (3 agencies)
  - Job Placement (1 agencies)
  - Medicaid (5 agencies)
  - Medical/Dental Services (4 agency)
  - Mental Health (7 agencies)
  - Recreational/Social (3 agencies)
  - Rehabilitation (6 agencies)
  - Residential Care (4 agencies)
  - Senior Care (5 agencies)
  - Sheltered Employment (1 agency)
  - Supported Employment (2 agencies)
  - Transportation (5 agencies)
  - Volunteer Opportunities (7 agencies)
  - Welfare/Food stamps (2 agencies)
• Adult Probation (1 agency)
• Dispute Resolution (1 agency)
• Disaster Assistance Response (1 agency)
• Affordable Housing (2 agencies)
• Crisis Care (1 agency)
• Prevention (1 agency)
• Foster Care (1 agency)
• Adoption (1 agency)
• Emergency Assistance: Rent, Utilities, Food (2 agencies)
• Life Skills (1 agency)
• SNF Medicare (1 agency)
• Veteran Benefits (1 agency)
• Family Development Services (1 agency)
• Day Services for Developmentally Disable Adults (1 agency)
• 9 agencies had income requirements, 7 had disability requirements, 9 had age requirements and 6 had none of these requirements
• When asked what percentage of their clients were unable to drive themselves to participate in their programs:
  ➢ 6 agencies answered between 75-100%
  ➢ 3 agencies answered between 25-50%
  ➢ 8 agencies answered less than 25%
  ➢ 3 agencies were unsure
• When asked how their clients get to their agency:
  ➢ 14 agencies answered transportation is generally available for their clients’ access.
  ➢ 16 agencies answered that clients drive themselves
  ➢ 16 agencies answered that clients ride with friends or family
  ➢ 5 agencies answered by agency provided transportation (All agencies were followed up through e-mail and via phone for their fleet information but only Heartland Senior Services provided this information.)
  ➢ 7 agencies answered by volunteers
  ➢ 5 agencies answered by staff in non-agency vehicles
  ➢ 2 agencies answered by taxi
  ➢ 7 agencies answered by carpool
  ➢ 12 agencies answered by public transportation
  ➢ 5 agencies answered by a group home’s transportation
  ➢ 11 agencies answered that another agency provided transportation
  ➢ 2 agencies answered by walking
• When asked their hours of operation:
  ➢ 12 agencies operate from 8:00 am to 4:30/5:00 pm, Monday through Friday
  ➢ 8 agencies operated 24/7
  ➢ 3 agency operates various limited hours
• When asked what they perceived the transportation barriers prevention people from accessing their services:
  ➢ 10 agencies responded that transportation services are not available in their clients area
  ➢ 8 agencies responded that transportation service is too expensive
  ➢ 3 agencies responded that transportation services do not operate at the necessary hours to serve their clients
  ➢ 7 agencies responded that transportation providers do not serve the areas their human agency is located
0 agencies responded that transportation providers only want to serve their own clients
2 agencies responded that transportation service was too student focused

- As indicated earlier, only 5 human service agencies identified themselves as providing transportation services with a fleet they own and operate. Only Heartland Senior Services responded to a request for transportation provider information and attended the January coordination meeting. These transportation provider human service agencies are listed again below.

1. Youth & Shelter Services, Inc. (YSS)
2. Friendship Ark Homes
3. Lutheran Services in Iowa
4. Story County Community Life Program
5. Heartland Senior Services

In addition, CyRide holds public input meetings for federal and state grant funding applications. Typically, these meetings are not well attended. CyRide does; however, receive public comment from passengers via telephone or e-mail. CyRide’s policy is to address any customer comment within 24 hours of receiving the comment and to resolve the issue as soon as possible. Comments from the public within the past year were generally related to the following issues:

- Early/late bus at time point
- Not stopping directly at bus stop sign
- Smoking complaint
- Aggressive driver
- Bus not showing
- Transfer difficulties
- Request for extension of service hours on Brown South route
- Request for service on Brown North route
- Request for additional service on Yellow route

CyRide has modified its transit policies/procedures based upon public comments and industry practice. For instance, CyRide recently instituted a new procedure for their DAR passengers to assist customers in modifying trips during times when Heartland’s office is not open. Since CyRide’s dispatch office is available most hours and days of the week, after Heartland’s office closes, its drivers can call CyRide to obtain assistance regarding scheduled trips. Passengers also have been provided with CyRide’s Dispatch number to call after hours if they have a problem with their trip. In this manner, CyRide’s Dispatch office has become the “trouble-shooting” component ensuring that every customer is provided service when needed even during the evenings and weekends when the office is not open. CyRide’s Dispatchers have also provided trips at times when Heartland has been unable to provide the trip due to customer changes or miscommunication.

C. Service Needs

This section of the document will discuss the needs identified by transportation providers and human service agencies participating in the Passenger Transportation Development Plan effort. It identifies service as well as capital needs, but will not include 100% of the needs due to non-participation by some organizations.

This list will show the large demand for service/capital by the participants. Not all the needs/objectives/projects developed as a result of this PTDP will be able to be funded due to limited federal and local funding. It is also important to note, that while projects are identified within this plan as needs and objectives, the projects will need to be approved by the transportation provider and City of
Ames to be placed within a grant application to the Federal Transit Administration, Iowa Department of Transportation or other agency before services or capital purchases can be realized.

CyRide Service Needs - CyRide services were previously described in this document and are illustrated beginning on page 7. The following service improvements to this system have been identified by CyRide staff as immediate needs to enhance transit within the Ames community.

- **Midday South Duff** – The Southeast area of Ames, in the general vicinity of Kate Mitchell School, has been requesting service during the midday. Current service in this area includes service on the Yellow Route during the peak hours and one-midday trip. By modifying the #4 Grey route to operate every 60 minutes during the midday, alternating between the current route and this Southeast area to Crystal Street, previous service levels would be restored to this area.

- **Brown Route – Summer Weekday Extra** – In the summer of 2006, weekday trips during peak times were overcrowded causing numerous requests for additional service on the Brown route from campus to the mall. Existing service operates at 40 minute frequencies on this half of the route. CyRide recommends improving the service frequency to 20 minutes during busy times to relieve this demand. JARC funding could possibly fund this service as it provides work trips to/from the mall and Iowa State University.

- **Brown Route – Weekday Nights** – The Somerset area along Stange Road has grown dramatically along with the demand for bus service to/from this area. Longer operating hours during the weekdays between campus and the mall would better service this area. Anticipated frequencies would be 40 minutes until 9:00 pm.

- **Blue South** – Additional demand for service has been requested on the Blue route during the times described below. This demand has also been evidenced by CyRide with crowded buses on this route.
  - **Friday evening service**: Current service frequencies are at 40 minute intervals. Proposed service frequencies would increase to 20 minutes each Friday evening. This increase would occur from 7:15 pm to 9:45 pm.
  - **Saturday evening service**: Current service on the Blue route operates at 40 minute intervals. Proposed service would increase frequency to 20 minutes along this route.
  - **Sunday service**: Current service on the Blue route is at 40 minute intervals. Proposed service would increase its frequency to 20 minutes from noon through 10:00 pm.

- **Red West** – Additional demand for service has been requested on the Red route during the following times. This demand has also been evidenced by CyRide through higher load capacities on this route.
  - **Friday evening**: Improve service frequency from 40 minutes to 20 minutes between 7:30 pm and 10:30 pm
  - **Sunday**: Improve service frequency from 40 minutes to 20 minutes between the hours of 12:15 pm and 10:00 pm.

- **Subcontracted Services for ADA Complimentary Service** - CyRide currently subcontracts its required ADA Complimentary Service to Heartland Senior Services who also operates service within Story County. Heartland provides door to door service within ¾ mile of any Ames fixed-route service and also to anywhere within the city limits of Ames. This is a continued need for the Ames residents to allow those that are ADA eligible to travel where needed.

Heartland Senior Center Service Needs

- Transportation to rural meal sites for meals and activities
- Transportation for individuals needing to access Adult Day Service from out of Story County
- Out of service hours transportation for agency special events (such as Variety show)
Human Services Service Requests

- CyRide does not run to all of Friendship Ark homes
- Need service route out to Dayton Road Area
- There is not bus service to the major factory section of town which is a great hardship
- Operate routes more often in the evening/weekends
- Lower cost for consumers
- Emergency services (less than 24 hours) with higher cost (2)
- People from Ames have a hard time accessing health care as they are directed to Nevada Medical Clinic.
- Transportation to/from grocery stores
- Transportation to/from employment or employment opportunities
- Transportation to/from school events (public school events – access by parents & siblings)
- HIV patients needing transportation to doctor in Des Moines or Iowa City
- No resources are available for non-Medicaid individuals.
- Bus does not wait at daycare
- Clients get work outside of transportation areas & at times transportation doesn’t run
- Outside of Ames service is sometimes a scheduling challenge
- More transportation to the Des Moines VA Hospital
- Transportation not always available to workplaces
- Would like CyRide route to be added that serves MELC (Mainstream Living – E. 13th & McCormick) area
- For consumers in the rural areas it is expensive to access transportation to get to appointments in Ames
- Can discount prices be given to low-income families on CyRide?

Gap Analysis of CyRide Routes

Gap Analysis Methodology

The following Gap Analysis illustrates graphically the areas of Ames where transportation providers do not provide transportation. This analysis is subdivided into periods of the day or days of the week to recognize varying transit service levels during less frequency usage. The subdivisions used in this analysis are as follows:

- Weekday Service (6:00 am to 6:00 pm)
- Weekday Night Service (6:00 pm to 12:30 am)
- Saturday Daytime Service (6:00 am to 6:00 pm)
- Saturday Evening and Sunday Service (Sat. 6:00 am to 10:00 pm and all day Sunday)

Service routes during different levels of service were compared to areas were residents work, live and travel within Ames. Any commercial, industrial or residential area outside ¼ mile of a transit route was considered not to be served by transit and therefore a service gap.

For this study, land use and demographic data were used to determine where individuals needed to travel to and from throughout the city. Specifically, it was determined that commercial and industrially-zoned areas illustrated locations where residents work. Residential rental units not only communicate where high density living occurs but also where transit dependent individuals may reside. It was determined that transit providers should be providing transportation to the majority of these commercial, industrial and residential areas. In addition, low-income residential areas were identified according to the 2000 Census
for Ames giving special attention to the low-income population. Finally, landmarks identifying elderly residences, assisted living facilities, hospitals and popular destinations were identified. This was done so that areas such as ISU campus not identified as a commercial or industrial area was included in the study. Elderly residences and human service agencies were also documented in this same manner.

CyRide’s routes were then plotted over two layers of the above-described data including:

- zoning of residential rental units, commercial and industrial classifications and
- low-income block groups.

By plotting these demographic groups, it provides the following two graphic illustrations of areas of town that may be in need of more transportation services.
In addition to demographic data, potential destinations that individuals would like to access were plotted as illustrated below. These destinations include: hospitals, nursing homes, assisted living facilities, elderly/disabled/low-income residences and popular destinations. This was not intended to be a complete list of landmarks, but to provide a general sense of where main locations are located within the community.

Passenger Transportation Development Plan

Major Landmarks
As CyRide routes have different service levels depending on the time of day and day of the week, gap analysis maps were created for four different levels of service as described earlier within the “Existing Transportation Operations” section. Those times are:

- Weekday
- Weekday Night
- Saturday
- Sunday/Saturday Night

A ¼ mile buffer was then placed around CyRide routes to show the coverage area served. Typically, a person will walk 3-4 blocks to a bus stop to catch a bus; therefore, the buffered area illustrates the walking distance and route service coverage. This boundary realistically represents the population that CyRide serves within the Ames area as many people will not walk more than four blocks to public transportation.

Another ¾ mile buffer area was added to illustrate fixed-route services which are required for Heartland Senior Services to operate according to ADA guidelines. As was indicated the survey responses and meeting discussion, service gaps for the door-to-door service within Ames, which meets ADA requirements, is not a barrier to mobility. Comments regarding door-to-door type transportation needs reflected the need to travel into Ames from outlying areas or travel in the opposite direction (Ames to outlying areas).
Passenger Transportation Development Plan

Percentage of Population Below Poverty Level: Weekday Service
Passenger Transportation Development Plan
Gap Analysis: Weekday Night Service
Passenger Transportation Development Plan

Percentage of Population Below Poverty Level: Weekday Night Service

Legend:

- **Location**
- **Population**
- **Income**
- **Education**
- **Employment**

Toll Population Below Poverty Percentage: Weekday Night Service

Legend:

- **High**
- **Medium**
- **Low**

CyRide

3/12/2007 28 2008 Ames PTDP
Passenger Transportation Development Plan
Percentage of Population Below Poverty Level: Saturday Service
Passenger Transportation Development Plan

Percentage of Population Below Poverty Level: Sunday-Saturday Night Service
**Gap Analysis Results**

From the previously described maps, the human service/transportation group which met on January 11, 2007 reviewed the illustrations to determine where additional service could benefit residents of Ames. From this analysis, gaps were discovered within each time/day subdivision (Weekday, Weekday Night, Saturday, etc.). The following set of maps (GAP A – G) indicate, and the explanations detail, the Passenger TDP groups consensus on areas where additional services needed to be developed to meet current and future transportation needs within the community.

**GAP A – Dayton Industrial Area:** Bordered by 1600 block of Dayton to the north, SE 5th to the south, across the interstate to the new mall location to the east, and Duff to the west.

The Passenger TDP group and customer requests have identified Gap A, located in northeast Ames, as a significant gap in current transit services. This section of the community serves as the major commercial/industrial zone of the city with businesses such as 3M, Mainstream Living, Mary Greeley Dialysis and Sauer-Danfoss as well as a new proposed mall to be open in Fall ‘08/Spring ’09. This area of town was unanimously chosen by the Passenger TDP group as a priority area for new services.
Gap B was also identified by the Passenger TDP group, which met in January, as an area where customers currently could not conveniently reach by public transportation. This area of Ames encompasses mixed land use with a major Iowa State University complex along the route as well as significant lower income residential developments, a school and commercial opportunities such as K-Mart, Staples, Best Buy, and Borders Books. The advisory group discussed the need for service to this area to improve the quality of life for Ames residents.
GAP C – DayCare to Work Transportation: More information is needed in doing a daycare analysis. Comments were that services did not operate early enough for parents to take the bus to work and still get their child to daycare.

The Passenger TDP advisory group discussed the need to make multiple linked transit trips more convenient and more importantly to reduce the amount of time required from the beginning of their trip to the last destination of the trip. Specifically, the need to travel from a person’s home to daycare, drop their children off at daycare, re-board a bus and travel to their final destination was discussed as a major hurdle to families. Due to the frequency of buses every 20-40 minutes, a trip of this type could take a parent 1½ hours to complete. In addition, the group indicated that the cost of a family to use public transportation was not within the reach of many families. Therefore, the group identified the need to develop new services or increase current bus frequencies to reduce the amount of time and improve the convenience of using public transportation to meet the needs of working families.
GAP D – Outside Ames Transportation: Work and Medical appointment transportation are requested. Vanpool options were also mentioned within this scenario for travel into the Ames area.

Gap D was identified by the need to travel from a community outside of Ames into Ames for medical or shopping trips. With a regional medical facility located in Ames, needs within all of Story County are met within the city limits. The Passenger TDP group identified the need to develop services or enhance coordination between transportation services within Ames (CyRide) and within the county (Heartland Senior Services) to improve the transportation network within the county to meet these needs.
Gap E encompasses one of Ames major commercial districts along South Duff with numerous restaurants, retail outlets and other businesses as well as a large residential area on the southern most end of the identified gap area. Currently public transportation service in this corridor is infrequent with large gaps in service hours leaving residents without a viable option to travel throughout the community from this area. The Passenger TDP group expressed the need to improve transportation options in this area to provide transit options community-wide.
The Stange Rd./Bloomington corridors have large concentrations of residential and commercial development. In addition, this area of Ames has experienced significant growth. These corridors encompass major Iowa State University student housing with the Fredrickson Court and University Village complexes as well as a new major development area with higher density development. The Bloomington Road corridor also houses major apartment complexes within the city. Currently, public transportation services do not operate at frequent service levels or at times of the day needed to accommodate needs along these major corridors.
The last gap, Gap G, was identified by the Passenger TDP group as a need to provide Ames residents with options to travel throughout the community before current service starts on Sunday morning. Currently, public transportation service start at approximately 9:00 am on Sunday making travel to work, church or other personal travel difficult. The group identified the need to start service earlier to meet these community needs.
Management Needs

As part of the Passenger TDP, one requirement is to look at opportunities to provide additional management tools to assist transportation providers in providing the best quality transportation services possible. To this end, this section of the document will discuss current changes planned within the management structure of the organizations and identify any needs in this area.

CyRide

Management changes over the past year have included the hiring of a new Transportation Director as well as a Transit planner which will allow for better coordination of services within CyRide and with other providers within the area.

Additionally, the organization will embark on a construction project in 2007 that will significantly expand the office section of CyRide’s facility to allow for its employees to efficiently manage its operations. The current one-story facility will be replaced with a two-story building that will allow for current and future office space needs within the organization. Additional office equipment will be purchased through this construction period to address current needs in this area.

An area of need for CyRide is in addressing education/marketing of its services. CyRide’s marketing budget does not include funding to educate residents and students about its services. With the influx of new student residents each fall, this is an enormous need. The benefits that can be achieved by this type of activity can be significant.

Heartland Senior Services/CIT

No additional information regarding staffing levels, office equipment, policy board arrangements, marketing was received by CIT or Heartland transit.

D. Existing Fleet Needs

Capital Needs

Cy-Ride Capital Needs

CyRide’s spare ratio (number of unused buses at peak times of the weekday divided by the total number of buses in the entire fleet) for its large bus fleet is currently 18.8%. The Federal Transit Administration allows transit systems to operate at a 20% spare ratio. Operating at a lower than allowed ratio creates several issues for a transit agency of which the most significant is the reliability of its operation. If fewer vehicles are available when circumstances occur on a daily basis such as breakdowns, buses in for maintenance, etc. Transit systems could be in a position to not have enough buses on a particular day to operate all of its routes. A higher spare allows for more vehicles to be in the shop for repairs while allowing staff to still get the required number of vehicles on the street.

1. Replace Non-Accessible Vehicles for Accessible ADA Vehicles— CyRide currently has 68 vehicles within their fleet. Four of these vehicles have been placed within the contingency fleet, and 3 are support equipment leaving 61 total vehicles for operations. Twenty-four (39.3%) of those vehicles cannot load wheelchairs. According to ADA regulations, all new vehicles purchased with federal funding must be equipped with a lift/ramp to accommodate wheelchairs. If more buses were ADA equipped, then individuals in a wheelchair could access more of the CyRide fixed-route system.
2. **Reduce Average Fleet Age** – CyRide has been unable to replace vehicles as desired and currently has an average fleet age of 12.5 years which is significantly higher than the national fleet age of 7.0 years. To be more exact, 25 of CyRide’s 53 large buses are older than 12 years of age and therefore past their useful life. This situation occurred when the University went fare free and CyRide’s need for buses immediately increased in 2002 due to overwhelming ridership. CyRide met this demand by purchasing 13 used buses with local funding. No federal funding for expansion was available. Under current policies, these 13 vehicles will not compete for replacement within the states capital replacement program. CyRide must look elsewhere to replace these vehicles to keep costs to a minimum. Therefore, CyRide has developed a capital plan that requires a commitment to fund 3 buses each year through its 5307 formula federal funding until the fleet age is reduced and this older fleet is retired from the system. If this is not accomplished, these locally purchased CyRide vehicles would reach the age of 40 years before achieving the ability to be replaced within the state’s competitive process. Any expansion of services for grant funding should include new vehicles in order to achieve a lower fleet age.

**Heartland Senior Service Capital Needs**

Heartland Senior Service has fifteen vehicles within their fleet – 13 LD buses and 2 vans. All of Heartland’s vehicles are accessible including their vans. Fourteen of their vehicles are currently past their useful life which is over half of their fleet. Heartland currently has an average fleet age of 7.5. If Heartland were to replace their vehicles according to FTA useful life guidelines, they should be under 4 years for their entire fleet.

**CIT Capital Needs**

CIT did not provide any information regarding their capital needs or vehicle fleet. Therefore, their needs will not be shown within this plan.

**Human Service Agencies Needs**

Requests for capital equipment fleets were requested to agencies that provided their own transportation service within the City of Ames through the initial surveys sent to 42 agencies. Although five agencies responded that they provide their own transportation, only Heartland Senior Services responded with their fleet information. In addition these remaining 4 agencies did not attend the coordination meeting in January 2007. Due to the deadline of this plan, this information will be requested again in the 2009 PTDP after participation in the process is developed. This coordination is essential and takes time to develop as evidenced within the coordination between CyRide and CIT.

**Fleet Utilization Schedules**

**CyRide Fleet Utilization Schedule**

Another requirement of the Passenger TDP is to review transportation provider’s information on the utilization of their fleet or more specifically, the number of service hours each vehicle operates. The following table illustrates this information regarding CyRide’s bus fleet. Low hours may indicate that a vehicle required extensive shop time or may be too costly to operate, but is needed in emergency situations. Vehicles without any hours have been placed within CyRide’s contingency fleet and are most generally located off property. The 2006 vehicles were received in late fall, and therefore, do not have many hours used per week.
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<th>Year</th>
<th>Make</th>
<th>Model</th>
<th>Fleet ID #</th>
<th># of Seats</th>
<th># of Wheelchair Spaces</th>
<th>Base Location</th>
<th>Assignments</th>
<th># of Hours Used/Wk</th>
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Heartland Fleet Utilization Schedule

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Human Service Agencies Needs

Again, information was not provided by surveyed human service agencies after several follow-up e-mails and phone calls. This information request will be improved for the 2009 PTDP.
Replacement Schedules

CyRide Fleet Replacement/Rehabilitation Schedule

The vehicles highlighted with red text below are scheduled to be replaced through the budget process and funding for their procurement has been either identified or secured. The remaining vehicles highlighted in yellow indicate a need to be replaced as they are past their useful life according to FTA; however, funding has not been identified for their replacement.

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<td>05.501</td>
<td>991</td>
<td></td>
<td></td>
<td>433,620</td>
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<tr>
<td>60</td>
<td>2005</td>
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<td>05.501</td>
<td>994</td>
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<td>61</td>
<td>2005</td>
<td>ORION</td>
<td>05.501</td>
<td>995</td>
<td>L</td>
<td></td>
<td>24,171</td>
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<tr>
<td>62</td>
<td>2005</td>
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<td>05.501</td>
<td>996</td>
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<td>63</td>
<td>2005</td>
<td>ORION</td>
<td>05.501</td>
<td>997</td>
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<td>21,674</td>
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<td>64</td>
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<td>FORD</td>
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<td>999</td>
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<td>191</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>65</td>
<td>2006</td>
<td>ORION</td>
<td>VII</td>
<td>1</td>
<td>L</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>66</td>
<td>2006</td>
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<td>67</td>
<td>2006</td>
<td>ORION</td>
<td>VII</td>
<td>3</td>
<td>L</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>68</td>
<td>2006</td>
<td>ORION</td>
<td>VII</td>
<td>4</td>
<td>L</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Heartland Senior Services' replacement schedule for their fleet is identified above. Approximately 93% of Heartland Senior Services’ fleet is past their useful life. It should be noted that the majority of their fleet is operating rural service funded through Heart of Iowa Regional Transit Agency (HIRTA). Their replacement of vehicles would also be documented within CIRPTA’s Region 11 PTDP process but would be incorporated within HIRTA’s entire fleet. However, CyRide hopes to lease a new expansion vehicle to HIRTA/Heartland Senior Services every seven years to aid in their Dial-A-Ride operations for the City of Ames. The vehicle would be owned and maintained by CyRide but operated by Heartland Senior Services.

In addition, HIRTA will purchase Heartland Senior services another 176” LD vehicle in 2008 for a total of $73,000 allowing Heartland Senior Service to better serve the public. This will be funded from HIRTA as the vehicle will be primarily for rural services and it is documented within CIRPTA’s PTDP plan.

CIT Replacement Schedule

CIT did not provide a fleet replacement/rehabilitation schedule.

Human Service Agencies Needs

The human service agencies surveyed did not provide any fleet replacement/rehabilitation schedule.
F. Facility Needs

CyRide, through the development of a Facilities Master Plan, has identified extensive facility needs. Phase II, the new administrative portion of the facility will be constructed beginning in April 2007 through 5309 earmarked funding and infrastructure grant funding. In addition, public information meetings were scheduled through the Transportation Improvement Plan and grants process through Phase II of the Facilities Master Plan. Phase III of the Facilities Master Plan has not yet commenced. The IDOT can reference additional information within the Public Transit Infrastructure Grant submitted to the IDOT December 15, 2006 for additional details in regards to CyRide’s Phase II facility needs for the administrative areas. FTA can access the latest 5309 grant for facility funding for these documents or the architecture plans submitted to their procurement office for the new administrative area. Furthermore, any of CyRide’s grants are public information and may be viewed upon request. CyRide has continued SAFETEA-LU earmarks scheduled through 2009 to fund the facility upgrade needs that are required as noted within the Facilities Master Plan. Only 5309 and Infrastructure Grant funding have been identified to fund future facility needs.

G. Goals/Objectives

Based on the needs identified throughout this plan from the transit providers and human service providers, the policy committee has identified the following overall objectives to be accomplished within the next several years within the Ames area if funding is available. These goals will strive to target the low-income, elderly/disabled, and working populations.

- Reduce fleet ages and improve accessibility of transportation providers
- Extend route hours of service
- Improve frequency of service
- Increase geographic area of service coverage
- Increase involvement/coordination between providers and human service agencies towards transportation services
Financial Resources

As stated within the document purpose earlier, the three federal funding programs that rely upon inclusion in this document for grant approval are the Elderly & Disabled Program (5310), Job Access and Reverse Commute (5316) and New Freedom (5317). However, Iowa is requiring that all state and federal funding be addressed within the PTDP. Each one of these programs is described in detail below.

Special Needs (Elderly & Disabled Program - 5310): This Special Needs program was established to provide federal funding for support of transit activities in rural areas and in urban areas, and to support transit activities providing service to elderly persons and persons with disabilities. Urban and regional transit systems are eligible for this funding through a performance-based distribution formula based on prior year’s statistics that are reported to the Iowa Department of Transportation. This funding could be used to support operating expenses for contracted ADA service (80%) or to purchase vehicles as long as they are primarily utilized for ADA service operations (83%). For CyRide, 5310 funding will be primarily utilized to reimburse Dial-A-Ride services operated by their subcontractor Heartland Senior Services. This DAR service is ADA service for the City of Ames.

Job Access and Reverse Commute (JARC - 5316): The Job Access and Reverse Commute (JARC) program funds the development of transportation service to connect welfare recipients and low income person to employment and support services such as childcare or training. The transportation bill reauthorization changed this program from a discretionary program to a formula based program. This formula is now based on the amount of low-income population. Iowa receives a single allocation for urbanized areas from 50,000 – 200,000 and a separate allocation for non-urbanized areas. Both are available through competitive applications as required in SAFETEA-LU.

CyRide has not competed for past discretionary JARC funding. HIRTA has previously accessed JARC for other counties in Region 11 but not for Heartland Senior Services providing service for Story County. However, with the change requiring all transit systems to develop a Passenger TDP, more systems will begin developing projects and requesting this funding to support their operations. Specifically, JARC subsidizes 50% of operating costs and 80% of capital.

It should be noted that if not all the large urbanized areas or regional systems compete for these funds there would be additional funding available during that year for those that do request funding. For instance, only one system within the large urban transit system competed for federal funding in FY2007 and received full funding for their project.

New Freedom (5317) - The New Freedom program encourages services and facility improvements that go beyond those required by the Americans with Disabilities Act. New Freedom can also expand services to persons with disabilities. The funds are allocated based upon the number of rides it provides to persons with disabilities. Allocations go to designated recipients in areas over 200,000, to States for areas under 200,000 and non-urbanized areas. Projects must be in a locally-developed human service transportation coordinated plan beginning in FY2007. A tenth of the funds may be used for planning, administration and technical assistance.

Under this program, the IDOT gives estimated amounts available called “marks” to each large urban transit system in the UZA’s under 200,000 in population. If not all the systems apply for this funding, then the funding is available to those that do apply is higher if the IDOT deems the project acceptable. This process is similar for regional systems under 50,000 in population.

State Transit Assistance (STA -Special Projects) – The state brought back their special projects program under STA to assist funding coordination projects identified within the PTDP process. Applicants can apply to the Iowa Department of Transportation for funding of approximately $5,000 - $15,000 per year for defined projects.
State Transit Assistance (STA) – This funding provides state funding assistance to support and improve locally sponsored public transit systems. The bulk of this money is distributed among Iowa’s 35 transit systems based upon each transit system’s performance during the previous years in terms of rides, miles and local funding support. In Iowa, 1/20 of the first four cents of the sales tax collected on the sale of motor vehicles and accessory equipment is used to generate these funds. CyRide utilizes the funding for support of their operations.

Iowa’s Clean Air Attainment Program (ICAAP) – This program funds highway/street, transit, bicycle/pedestrian, rail, or freight projects or programs which help maintain Iowa’s clean air quality by reducing transportation-related emissions. Eligible projects will fall into one of the following categories: 1) those which reduce emissions via traffic flow improvements and provide a direct benefit to air quality by addressing ozone, carbon monoxide or PM-10 (particulate matter); 2) those which reduce vehicle miles of travel (VMT); 3) those which reduce single-occupant vehicle trips; and 4) other transportation improvement projects which improve air quality or reduce congestion. Transit capital improvements and/or net operating costs of new transit services are eligible for up to three years (at 80 percent federal/20 percent local participation). A minimum request of $20,000 is required along with a 20% local match to the federal dollars.

Urbanized Area Formula Program (5307) – This program is an annual apportionment for urbanized areas over 50,000 in population to allow for operating, capital and planning activities. For CyRide, the funds can be used to support operating deficits or for capital improvements at 80% federal, 20% non-federal basis. For vehicles designed for access by person with disabilities, the federal share increases to 83% and increases to 90% when used for clean air equipment.

Discretionary Earmarks (5309) – This program provides federal funding assistance due to Congressional earmarks for transit capital improvements including bus/bus facility replacement or expansions, and fixed guideway modernization. Funding has primarily been allocated to CyRide directly for support of their facility upgrades to the maintenance garage and administrative building. The State of Iowa also receives this type of funding for improvements to all transit systems which is given out systematically through a process called Public Transit Management System (PTMS). Transit systems within Iowa may compete for statewide funds so long as they document that they have spent an amount equal to 20% of their federal formula funding and the required local match on qualifying capital.

Surface Transportation Program (STP) – The Surface Transportation Program (STP) funds roadway and transit capital projects on an 80% federal, 20% local basis. The Ames Area Metropolitan Planning Organization program STP funds for the Ames area which can be used on roadway, transit vehicles, or bike/pedestrian enhancement projects. The Ames Area Metropolitan Planning Organization is currently funding the Ames Transit Feasibility Study ($100,000) through 40% STP funding. Reimbursements for this project will be requested directly from the City of Ames.

Non-urbanized Formula Funding (5311) – Non-urbanized Formula Funding is only available for rural transit services and not available as viable funding source for transportation within the City of Ames since Ames is 100% urban. Therefore this funding is not referenced within the urban Ames PTDP plan. This funding would be addressed within CIRPTA’s PTDP for rural funding in Story County. Heartland Senior Services would receive this funding for rural transportation in Story County through their contract with Heart of Iowa Regional Transit Agency (HIRTA).
Below are estimated federal funding “anticipated” for each of these funding sources for the Ames UZA and reflect only formula projections and SAFETEA-LU Earmarks. Funding programs below with question marks indicate that the programs are competitive in nature or discretionary projects.

<table>
<thead>
<tr>
<th>Ames UZA (CyRide)</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>5310 (Elderly/Disabled)</td>
<td>$146,080</td>
<td>$153,384</td>
<td>$161,053</td>
<td>$169,106</td>
<td>$629,623</td>
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<tr>
<td>STA (State Operating Transit Assistance)</td>
<td>$487,859</td>
<td>$512,252</td>
<td>$537,865</td>
<td>$564,758</td>
<td>$2,102,733</td>
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<tr>
<td>5307 (CyRide Formula - delayed a year)</td>
<td>$1,469,563</td>
<td>$1,610,455</td>
<td>$1,713,131</td>
<td>$1,798,788</td>
<td>$6,591,937</td>
</tr>
<tr>
<td>5309 Earmarks (CyRide facility only)</td>
<td>$434,720</td>
<td>$451,440</td>
<td>?</td>
<td>?</td>
<td>$886,160</td>
</tr>
<tr>
<td>5316 (JARC)</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>STA (Special Projects - PTDP Coordination Planning)</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>ICAAP (CMAQ)</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
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<tr>
<td>TOTAL</td>
<td>$2,538,222</td>
<td>$2,727,531</td>
<td>$2,412,049</td>
<td>$2,532,651</td>
<td>$10,210,453</td>
</tr>
</tbody>
</table>

Note: Question marks in the above table represent competitive funding programs that cannot be quantified until applications are approved by state/federal government decision makers. Future years of formula funding beyond 2008 are estimations and increased 5% each year. 5309 earmarks were documented allocations to CyRide within SAFTEA-LU for improvements to the facility.
Passenger Transportation Investment Program

The following projects were recommended to be incorporated into the PTDP investment Program through the January 11, 2007 meeting with the Human Service and Transportation Providers. The committee recommended and ranked projects to be included into the PTDP investment plan. The Ames Area Metropolitan Planning Organization (AAMPO) reviewed the document for its approval informally prior to the draft submission on February 1, 2007. Formal approval of the goals, objectives and investment plans were approved through the AAMPO committees in March 2007. These projects only reflect 5310, 5316, 5317 and ICAAP funding. STP funding is not recommended for transit purposes at this time by the AAMPO. The draft FY2008-FY2011 TIP reflecting additional federal funding projects is included on page 51 of this document. The investment plan below reflects only funding proposed for projects related to low-income, elderly and disabled programs. (Human service agencies did not provide information regarding funding for any programs relating to individuals in these categories.)

Program of Recommended Projects – 2007
The projects below must be incorporated into the 2007 year of funding as the Iowa Department of Transportation will apply for this funding before the 2008 STIP is approved.

<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Project Description</th>
<th>Type</th>
<th>Total Cost</th>
<th>Source</th>
<th>Fed. Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>CyRide</td>
<td>Brown Route Service Frequency and Hours Expansion</td>
<td>OPS</td>
<td>$42,000</td>
<td>5316</td>
<td>$21,000</td>
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<tr>
<td>CyRide</td>
<td>Yellow Route</td>
<td>OPS</td>
<td>$4,400</td>
<td>5316</td>
<td>$2,200</td>
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<tr>
<td>CyRide</td>
<td>Replacement of 40' HD Bus</td>
<td>CAP</td>
<td>$315,000</td>
<td>5317</td>
<td>$94,143</td>
</tr>
<tr>
<td>CyRide</td>
<td>Service to Dayton Industrial Area, Dialysis, Agency Locations @ 13th/Dayton</td>
<td>OPS</td>
<td>$314,000</td>
<td>5316</td>
<td>$157,000</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
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<td>$675,400</td>
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<td>$274,343</td>
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Program of Recommended Projects – First Year 2008

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<thead>
<tr>
<th>Provider Name</th>
<th>Project Description</th>
<th>Type</th>
<th>Total Cost</th>
<th>Source</th>
<th>Fed. Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heartland Senior Services (CyRide Subcontractor)</td>
<td>Subcontracted Ames ADA Complimentary Services - Dial-A-Ride Services</td>
<td>OPS</td>
<td>$111,013</td>
<td>5310</td>
<td>$88,810</td>
</tr>
<tr>
<td>Heartland Senior Services (CyRide Subcontractor)</td>
<td>Replace Heartland Senior Services Service Bus for CyRide ADA Service</td>
<td>CAP</td>
<td>$69,000</td>
<td>5310</td>
<td>$57,270</td>
</tr>
<tr>
<td>CyRide</td>
<td>Expansion</td>
<td>OPS</td>
<td>$44,100</td>
<td>5316</td>
<td>$22,050</td>
</tr>
<tr>
<td>CyRide</td>
<td>Yellow Route</td>
<td>OPS</td>
<td>$4,620</td>
<td>5316</td>
<td>$2,310</td>
</tr>
<tr>
<td>CyRide</td>
<td>Service to Dayton Industrial Area, Dialysis, Agency Locations @ 13th/Dayton</td>
<td>OPS</td>
<td>$329,700</td>
<td>5316</td>
<td>$164,850</td>
</tr>
<tr>
<td>CyRide</td>
<td>Replacement of 40' HD Bus</td>
<td>CAP</td>
<td>$315,000</td>
<td>5317</td>
<td>$98,850</td>
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<tr>
<td>TOTAL</td>
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<td>$873,433</td>
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<td>$434,140</td>
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<tr>
<td>Year</td>
<td>Provider Name</td>
<td>Project Description</td>
<td>Type</td>
<td>Total Cost</td>
<td>Sources</td>
</tr>
<tr>
<td>---------</td>
<td>-----------------------------------</td>
<td>------------------------------------------</td>
<td>--------</td>
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</tr>
<tr>
<td>2009</td>
<td>Heartland Senior Services</td>
<td>Subcontracted Ames ADA</td>
<td>OPS</td>
<td>$134,925</td>
<td>5310</td>
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<tr>
<td></td>
<td></td>
<td>Complimentary Services - Dial-A-Ride Services</td>
<td>OPS</td>
<td>$346,185</td>
<td>5316</td>
</tr>
<tr>
<td></td>
<td>2009 CyRide</td>
<td>Service to Dayton Industrial Area, Dialysis, Agency</td>
<td>OPS</td>
<td>$46,305</td>
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<tr>
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<td>2009 CyRide</td>
<td>Expansion</td>
<td>OPS</td>
<td>$4,851</td>
<td>5316</td>
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<tr>
<td></td>
<td>2009 CyRide</td>
<td>Replacement of 40' HD Bus</td>
<td>CAP</td>
<td>$356,108</td>
<td>5317</td>
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<tr>
<td></td>
<td>2009 CyRide</td>
<td>Vanpool Program - Vans</td>
<td>CAP</td>
<td>$270,000</td>
<td>CMAQ</td>
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<tr>
<td></td>
<td>2009 CyRide</td>
<td>Operating</td>
<td>OPS</td>
<td>$162,455</td>
<td>CMAQ</td>
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<td><strong>2009 Subtotal</strong></td>
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<td></td>
<td><strong>$839,719</strong></td>
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<tr>
<td>2010</td>
<td>Heartland Senior Services</td>
<td>Subcontracted Ames ADA</td>
<td>OPS</td>
<td>$141,671</td>
<td>5310</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Complimentary Services - Dial-A-Ride Services</td>
<td>OPS</td>
<td>$363,494</td>
<td>5316</td>
</tr>
<tr>
<td></td>
<td>2010 CyRide</td>
<td>Service to Dayton Industrial Area, Dialysis, Agency</td>
<td>OPS</td>
<td>$48,620</td>
<td>5316</td>
</tr>
<tr>
<td></td>
<td>2010 CyRide</td>
<td>Expansion</td>
<td>OPS</td>
<td>$5,094</td>
<td>5316</td>
</tr>
<tr>
<td></td>
<td>2010 CyRide</td>
<td>Replacement of 40' HD Bus</td>
<td>CAP</td>
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<td>5317</td>
</tr>
<tr>
<td><strong>2010 Subtotal</strong></td>
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<td></td>
<td></td>
<td><strong>$427,627</strong></td>
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</tr>
<tr>
<td>2011</td>
<td>Heartland Senior Services</td>
<td>Subcontracted Ames ADA</td>
<td>OPS</td>
<td>$148,755</td>
<td>5310</td>
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<tr>
<td></td>
<td></td>
<td>Complimentary Services - Dial-A-Ride Services</td>
<td>OPS</td>
<td>$381,669</td>
<td>5316</td>
</tr>
<tr>
<td></td>
<td>2011 CyRide</td>
<td>Service to Dayton Industrial Area, Dialysis, Agency</td>
<td>OPS</td>
<td>$51,051</td>
<td>5316</td>
</tr>
<tr>
<td></td>
<td>2011 CyRide</td>
<td>Expansion</td>
<td>OPS</td>
<td>$5,348</td>
<td>5316</td>
</tr>
<tr>
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<td>2011 CyRide</td>
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<td>CAP</td>
<td>$392,609</td>
<td>5317</td>
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<tr>
<td><strong>2011 Subtotal</strong></td>
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<td></td>
<td></td>
<td><strong>$449,009</strong></td>
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</tbody>
</table>
Per requirements of the Iowa Department of Transportation, the following proposed projects encompassing all federal and state transit funding for the Ames area for transit projects are included below.

<table>
<thead>
<tr>
<th>Fund Type</th>
<th>System</th>
<th>Project Description</th>
<th>Identification or Remarks</th>
<th>Type</th>
<th>Exp</th>
<th>Project</th>
<th>Total Cost</th>
<th>Federal Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>STA</td>
<td></td>
<td>General Operations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5307/ST</td>
<td>CyRide</td>
<td>General Operations</td>
<td>East 13th/LincolnWay/Dayton</td>
<td>O</td>
<td></td>
<td></td>
<td>5,806,892</td>
<td>$1,610,455</td>
</tr>
<tr>
<td>5316 CyRide</td>
<td>Commercial/Industrial Area</td>
<td>Brown Route Frequency/Hours</td>
<td></td>
<td>O</td>
<td>Exp</td>
<td></td>
<td>329,700</td>
<td>164,850</td>
</tr>
<tr>
<td>5316 CyRide</td>
<td>Expansion</td>
<td></td>
<td></td>
<td>O</td>
<td>Exp</td>
<td></td>
<td>44,100</td>
<td>22,050</td>
</tr>
<tr>
<td>5316 CyRide</td>
<td>Yellow Route Expansion</td>
<td></td>
<td></td>
<td>O</td>
<td>Exp</td>
<td></td>
<td>4,620</td>
<td>2,310</td>
</tr>
<tr>
<td>STA</td>
<td></td>
<td>CyRide One 40’ HD bus with camera</td>
<td>966</td>
<td>C</td>
<td>Rep</td>
<td></td>
<td>359,150</td>
<td>98,850</td>
</tr>
<tr>
<td>5310 CyRide</td>
<td>Contracted paratransit service</td>
<td>1 - 158” Light Duty (Diesel, Urban, Cameras)</td>
<td></td>
<td>O</td>
<td></td>
<td></td>
<td>111,013</td>
<td>88,810</td>
</tr>
<tr>
<td>5310 CyRide</td>
<td>Transit Amenities</td>
<td></td>
<td></td>
<td>C</td>
<td>Exp</td>
<td></td>
<td>69,000</td>
<td>57,270</td>
</tr>
<tr>
<td>5310 CyRide</td>
<td>Yellow Route Expansion</td>
<td></td>
<td></td>
<td>O</td>
<td></td>
<td></td>
<td>4,620</td>
<td>2,310</td>
</tr>
<tr>
<td>5317 Local</td>
<td>CyRide</td>
<td>One 40’ HD bus with camera</td>
<td>966</td>
<td>C</td>
<td>Rep</td>
<td></td>
<td>468,000</td>
<td>388,440</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>10 - 40’ HD buses (Cameras)</td>
<td></td>
<td></td>
<td>C</td>
<td>Rep</td>
<td></td>
<td>3,250,000</td>
<td>2,680,900</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>6 - 158” Light Duty (Diesel, Urban, Cameras)</td>
<td></td>
<td></td>
<td>C</td>
<td>Rep</td>
<td></td>
<td>468,000</td>
<td>388,440</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>Scissor Lift for Shop/Maintenance</td>
<td>Shop Exhaust Removal</td>
<td>Facility Cameras/Proximity Card</td>
<td>C</td>
<td>Exp</td>
<td></td>
<td>35,000</td>
<td>28,000</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>Vehicle Security System Camera Replacement</td>
<td>20 Cameras(20*$1,333) ; 10 Proximity Cards</td>
<td></td>
<td>C</td>
<td>Exp</td>
<td></td>
<td>56,660</td>
<td>45,328</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>Storage area air handling replacement</td>
<td>Stange Rd/Univ Village traffic control</td>
<td></td>
<td>C</td>
<td>Rep</td>
<td></td>
<td>200,000</td>
<td>160,000</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>Garage Rehab and Expansion Phase III (Direct Earmarks)</td>
<td>AVL technology, web planner, passenger counters</td>
<td></td>
<td>C</td>
<td>Exp</td>
<td></td>
<td>543,400</td>
<td>434,720</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>Resurface ISC Commuter Parking</td>
<td></td>
<td></td>
<td>C</td>
<td>Reh</td>
<td></td>
<td>1,000,000</td>
<td>720,000</td>
</tr>
<tr>
<td>5309 CyRide</td>
<td>ISU North Intermodal Facility</td>
<td></td>
<td></td>
<td>C</td>
<td>Exp</td>
<td></td>
<td>15,625,000</td>
<td>12,500,000</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11,237,535</td>
<td>5,781,983</td>
</tr>
<tr>
<td>Capital</td>
<td></td>
<td>Capital</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4,941,210</td>
<td>3,893,508</td>
</tr>
</tbody>
</table>
**Next Steps**

The Passenger Transportation Development Plan is a new process for the Ames Area Metropolitan Planning Organization. While this process was valuable in developing the needs of the Ames area, this will be a planning endeavor that will be further refined over the next few years. Although participation in the process was substantial, it is anticipated that participation will increase over the next year bringing more in-depth discussions in regards to funding and collaboration. Anticipated growth for discussion will be improved particularly in identifying human service providers providing transportation with vehicles they own and operate. Due to the considerable interest between human service and transportation providers with this first PTDP process, the collaborative meetings may be developed into an established routine throughout the year. As the PTDP process develops throughout the state, lessons learned can be shared between MPO’s and RPA’s to help make this process better for all areas in Iowa.
APPENDIX
Appendix A. Transportation Provider Survey Distribution Listing

The transportation providers below were requested to fill out information regarding transportation they provide and need for their organization. The agencies identified in yellow actually filled out survey responses and are provided within Appendix B.

<table>
<thead>
<tr>
<th>Transportation Providers in MPO Area</th>
<th>Contact (Last Name)</th>
<th>Contact (First Name)</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Iowa Transit (CIT)</td>
<td>Klooster</td>
<td>Brent</td>
<td>2701 Ford St.</td>
<td>Ames</td>
<td>IA</td>
<td>50010</td>
</tr>
<tr>
<td>CyRide</td>
<td>Atwood</td>
<td>Shari</td>
<td>1700 6th St.</td>
<td>Ames</td>
<td>IA</td>
<td>50010</td>
</tr>
<tr>
<td>Heartland Senior Services</td>
<td>Nevels</td>
<td>Theresa</td>
<td>205 S. Walnut</td>
<td>Ames</td>
<td>IA</td>
<td>50010</td>
</tr>
<tr>
<td>Midwest Coaches, Inc.</td>
<td>Anderson</td>
<td>Mark</td>
<td>1501 East Lincoln Way</td>
<td>Ames</td>
<td>IA</td>
<td>50010</td>
</tr>
<tr>
<td>Northland Travel (Northwest Iowa Transportation) - NWITours.com</td>
<td></td>
<td></td>
<td>501 E. 4th St.</td>
<td>Huxley</td>
<td>IA</td>
<td>50124</td>
</tr>
<tr>
<td>Windstar Lines</td>
<td></td>
<td></td>
<td>820 SE Dalbey Drive</td>
<td>Ankeny</td>
<td>IA</td>
<td>50021</td>
</tr>
<tr>
<td>Jamison Express</td>
<td></td>
<td></td>
<td>305 N Hwy 69</td>
<td>Huxley</td>
<td>IA</td>
<td>50124</td>
</tr>
<tr>
<td>Ames Taxi</td>
<td></td>
<td></td>
<td>2006 E Lincoln Way</td>
<td>Ames</td>
<td>IA</td>
<td>50010</td>
</tr>
<tr>
<td>Budget Cab</td>
<td></td>
<td></td>
<td>P.O. Box 65890</td>
<td>West Des Moines</td>
<td>IA</td>
<td>50265</td>
</tr>
<tr>
<td>AJ's Best Stretch Limousine</td>
<td></td>
<td></td>
<td>637 10th St</td>
<td>West Des Moines</td>
<td>IA</td>
<td>50265</td>
</tr>
<tr>
<td>Ames Limousine Service</td>
<td>McGonigle</td>
<td>Mike</td>
<td>301 S Maple Ave,</td>
<td>Ames</td>
<td>IA</td>
<td>50010</td>
</tr>
<tr>
<td>Crown Limousine Ltd.</td>
<td></td>
<td></td>
<td>300 N. Linn St.</td>
<td>Slater</td>
<td>IA</td>
<td>50244</td>
</tr>
<tr>
<td>Farley's Limousine Service</td>
<td></td>
<td></td>
<td>1061 Lamb Ln.</td>
<td>Boone</td>
<td>IA</td>
<td>50036</td>
</tr>
<tr>
<td>Racing Limos of Central Iowa</td>
<td></td>
<td></td>
<td>7097 NW 5th Court</td>
<td>Ankeny</td>
<td>IA</td>
<td>50023</td>
</tr>
<tr>
<td>Star Shuttle Party Buses</td>
<td></td>
<td></td>
<td>4675 Merle Hay Rd</td>
<td>Des Moines</td>
<td>IA</td>
<td>50322</td>
</tr>
</tbody>
</table>
Appendix B  Transportation Providers Surveys
Passenger Transportation Provider Fact Sheet

Provider Name: Ames Transit Agency (C.Ride)

Transit System Affiliation:
☐ Designated Public Transit System
☐ Contractor to Designated System
☐ None

Contact Person: Shawn Atwood
Contact E-mail: satwood@cyride.com
Mailing Address: 1700 W. 6th Ave.
City, Zip: Ames, IA 50014
Phone: 515-239-5539

2. General Description of Transit Operations

a. Type of Service(s):
   Fixed Route, Demand Response, Subscription

b. Groups Served:
   City of Ames residents and general public

c. Service Area:
   City of Ames

d. Service Hours and Days of Operation
   Monday through Friday:
     Time: 6:31 a.m. to 12:39 a.m.
   Saturday:
     Time: 7:27 a.m. to 3:30 p.m.
   Sunday:
     Time: 8:53 a.m. - 11:37 p.m.
   Holidays:
     Operates 362 days/year. No operation on the foll

f. Number of Employees Involved in Transit

<table>
<thead>
<tr>
<th>Administrative</th>
<th>Full Time</th>
<th>Part Time</th>
<th>Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Maintenance</td>
<td>10</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Drivers</td>
<td>29</td>
<td>24</td>
<td>0</td>
</tr>
</tbody>
</table>

f. Union. Are any employees covered under a collective bargaining agreement?
☐ Yes  ☐ No

Union: International Union of Operating Eng  Local # 254

h. Receive Public Money?
☐ Yes  ☐ No
3. Fare Structure: $1.00 adult, 50¢ elderly/disabled, K-12 students and medicare cardholders, free ISU students

4. Vehicle Fleet

<table>
<thead>
<tr>
<th>Number of Vehicles:</th>
<th>Buses: 50</th>
<th>Vans: 3</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Trucks: 3</td>
<td>Sedans: 0</td>
</tr>
<tr>
<td></td>
<td>Station Wagons: 11</td>
<td>Other: 0</td>
</tr>
</tbody>
</table>

Wheelchair Spaces: __________

Number of Vehicles With: Wheelchair Lifts/Ramps: 41
Two Way Radios/Phones: 63

5. Performance

<table>
<thead>
<tr>
<th>Operating:</th>
<th>Last Year (FY 06) Actual</th>
<th>Current Year (FY 07) Projected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passengers</td>
<td>4,173,208</td>
<td></td>
</tr>
<tr>
<td>Wheelchair Lift Operations Performed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenue Miles</td>
<td>1,073,581</td>
<td></td>
</tr>
<tr>
<td>Revenue Hours</td>
<td>29,710</td>
<td></td>
</tr>
<tr>
<td>Passenger Revenue/Mile</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Passenger Revenue/Hour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average Daily Passenger Carried</td>
<td>11,528</td>
<td></td>
</tr>
</tbody>
</table>

Financial:

<table>
<thead>
<tr>
<th>Operating Expenses</th>
<th>5,341,197</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Revenues</td>
<td>3,660,985</td>
</tr>
<tr>
<td>Capital Expenses</td>
<td></td>
</tr>
<tr>
<td>Revenue/Mile</td>
<td></td>
</tr>
<tr>
<td>Cost/Passenger Trip</td>
<td></td>
</tr>
<tr>
<td>Cost/Revenue Hour</td>
<td></td>
</tr>
<tr>
<td>Revenue/Revenue Hour</td>
<td></td>
</tr>
<tr>
<td>Average Passenger Fare/Trip</td>
<td></td>
</tr>
</tbody>
</table>

6. Shared Facilities with Other Transportation Providers/Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Type of Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
</tr>
</tbody>
</table>
7. Coordination Efforts with Other Transportation Providers and/or Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Description of Coordination Effort</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Heartland Service Agency</td>
<td>Provides Paratransit Services for Cy-Ride</td>
</tr>
<tr>
<td>2. LT</td>
<td>Provides trips during Cy-Ride peaks to alleviate shortages</td>
</tr>
<tr>
<td>3. Midwest Transportation</td>
<td>Provides vehicles for special events such as Special Olympics</td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
</tr>
</tbody>
</table>

8. What Areas of Transportation Service Coordination Are of Interest to You? (check all that apply)

- [ ] Joining a network of transportation/human service providers to look at coordination
- [ ] Centralized scheduling, dispatch, and vehicle tracking
- [ ] Contracting to purchase transportation service
- [ ] Collaborate in grant writing
- [ ] Contracting to provide transportation service
- [ ] Consolidating service to a single provider
- [ ] Technology for vehicle tracking and ride scheduling
- [ ] Centralized fuel purchasing
- [ ] Pooling training resources
- [ ] Pooling financial resources
- [ ] Sharing of vehicles among agencies
- [ ] Cooperatively purchasing vehicles
- [ ] Other: ____________________________

9. In what ways do you believe your organization can be involved in efforts to coordinate transportation services?

Cy-Ride can lead in coordinating efforts for transportation in Ames among the human service agencies and private operators with the goal of providing efficient services.
10. Please list all projects that have been implemented over the past year that utilized Special Needs (5310), New Freedom (5317), or Job Access Reverse Commute (5316) funding, and their level of success.  

Level of Success:  
A: Successful, will continue if funding available  
B: Not successful, will not continue the project  
C: Unsure  

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Project</th>
<th>Level of Success</th>
</tr>
</thead>
<tbody>
<tr>
<td>5310</td>
<td>Contracting Paratransit Service w 1 transport</td>
<td>A</td>
</tr>
<tr>
<td>5310</td>
<td>Wheelchair lift replacements</td>
<td>A</td>
</tr>
<tr>
<td>5310</td>
<td>Purchase of one 158” LD bus</td>
<td>A</td>
</tr>
</tbody>
</table>

11. Please provide a summary of public comment received from various sources over the last 12 months that deal with positives and negatives of service.  

Incorporated into plan.  

12. The tab of this spreadsheet labeled Provider List includes a list of transportation providers in the Ames MPO areas. Please list any other transportation providers that are not included on this list so that they too can complete these forms.  

(Provide this information in the Provider List tab)

Click here to proceed to the Fleet Analysis tab when finished with this tab.
# Fleet Utilization Analysis

**Transit System Name:** Ames Transit Agency - CyRide

**Data Current As Of:** 12/31/2006

Please complete the following table using information from your existing fleet.

Click here to proceed to the *Fleet Schedule* tab at the bottom of the screen when finished with this tab.

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Year</th>
<th>Fleet ID #</th>
<th># of Seats</th>
<th># of Wheelchair Spaces</th>
<th>Base Location</th>
<th>Assignments</th>
<th># of Hours Used/Week</th>
<th>Used Evening/W Weekend?</th>
<th>Projected Annual Miles</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1975</td>
<td>CAeq</td>
<td>FordBus</td>
<td>859</td>
<td>0</td>
<td>N</td>
<td>CyRide</td>
<td>Support</td>
<td>N</td>
<td>59</td>
</tr>
<tr>
<td>2</td>
<td>1968</td>
<td>GMC</td>
<td>4521</td>
<td>859</td>
<td>45</td>
<td>N</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>3,956</td>
</tr>
<tr>
<td>3</td>
<td>1984</td>
<td>ORION</td>
<td>01.507</td>
<td>890</td>
<td>34</td>
<td>N</td>
<td>CyRide</td>
<td>Contingency</td>
<td>N</td>
<td>-</td>
</tr>
<tr>
<td>4</td>
<td>1984</td>
<td>ORION</td>
<td>01.507</td>
<td>891</td>
<td>34</td>
<td>N</td>
<td>CyRide</td>
<td>Contingency</td>
<td>N</td>
<td>-</td>
</tr>
<tr>
<td>5</td>
<td>1985</td>
<td>ORION</td>
<td>01.507</td>
<td>898</td>
<td>34</td>
<td>N</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>2,317</td>
</tr>
<tr>
<td>6</td>
<td>1987</td>
<td>ORION</td>
<td>01.507</td>
<td>900</td>
<td>34</td>
<td>N</td>
<td>CyRide</td>
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<td>Y</td>
<td>6,476</td>
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<td>1987</td>
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<td>01.506</td>
<td>906</td>
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<td>N</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>942</td>
</tr>
<tr>
<td>8</td>
<td>1987</td>
<td>ORION</td>
<td>01.507</td>
<td>909</td>
<td>34</td>
<td>N</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>9,556</td>
</tr>
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<td>1987</td>
<td>ORION</td>
<td>01.507</td>
<td>910</td>
<td>34</td>
<td>2</td>
<td>CyRide</td>
<td>Large</td>
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<td>5,082</td>
</tr>
<tr>
<td>10</td>
<td>1988</td>
<td>ORION</td>
<td>01.507</td>
<td>912</td>
<td>34</td>
<td>2</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>7,840</td>
</tr>
<tr>
<td>11</td>
<td>1993</td>
<td>GILLIG</td>
<td>35/96</td>
<td>925</td>
<td>32</td>
<td>2</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>33,227</td>
</tr>
<tr>
<td>12</td>
<td>1993</td>
<td>GILLIG</td>
<td>35/96</td>
<td>927</td>
<td>32</td>
<td>2</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>3,555</td>
</tr>
<tr>
<td>13</td>
<td>1996</td>
<td>GILLIG</td>
<td>35/102</td>
<td>933</td>
<td>32</td>
<td>2</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>39,166</td>
</tr>
<tr>
<td>14</td>
<td>1996</td>
<td>GILLIG</td>
<td>35/102</td>
<td>934</td>
<td>32</td>
<td>2</td>
<td>CyRide</td>
<td>Large</td>
<td>Y</td>
<td>39,264</td>
</tr>
<tr>
<td>15</td>
<td>1997</td>
<td>ELDOR</td>
<td>E350</td>
<td>936</td>
<td>13</td>
<td>1</td>
<td>CyRide</td>
<td>Small</td>
<td>Y</td>
<td>9,308</td>
</tr>
<tr>
<td>16</td>
<td>1997</td>
<td>ELDOR</td>
<td>E350</td>
<td>936</td>
<td>13</td>
<td>1</td>
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## Fleet Utilization Analysis

**Transit System Name:** Ames Transit Agency - CyRide  
**Data Current As Of:** 12/30/2006

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# Fleet Utilization Analysis

**Transit System Name:** Ames Transit Agency - CyRide  
**Data Current As Of:** 12/30/2006

Please complete the following table using information from your existing fleet.

Click here to proceed to the **Fleet Schedule** tab at the bottom of the screen when finished with this tab.

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Fleet Replacement/Rehabilitation Schedule

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Data Current As Of: 6/30/2006

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## Fleet Replacement/Rehabilitation Schedule

**Transit System Name:** Des Moines Area Metropolitan Planning Organization  
**Data Current As Of:** 6/30/2006

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## Fleet Replacement/Rehabilitation Schedule

**Transit System Name:** Ames Transit Agency - CYRide  
**Data Current As Of:** 6/30/2006

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<th>R = Wheelchair Ramp</th>
<th>MR = Mobile Radio</th>
<th>F = Farebox</th>
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**Type of Improvement:**  
REP = Replace  
REHAB = Rehabilitate

Please complete the following table for any planned replacement or rehabilitation to your existing fleet.  
Click here to proceed to the Capital Needs tab when finished with this tab.

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<th>Vehicle Equipment</th>
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Capital Needs

Transit System Name: Ames Transit Agency - CrRide

Data Current As Of: 6/30/2006

Category:  
A = Vehicles  
B = Vehicle Related Equipment  
D = Real Property  
C = Non-Vehicle Equipment  
E = Other

Purchase Type:  
REP = Replace  
REHAB = Rehabilitate  
EXP = Expansion

Needs Reference: Fleet ID # of vehicle to be replaced/rehabbed, or name of proposed new service(s) if expansion

Please complete the following table for any planned capital needs.

Click here to proceed to the Provider List tab when finished with this tab.

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Passenger Transportation Provider Fact Sheet

Data Current as of: 1 Nov 06

1. Provider Name: Central Iowa Transit, Inc and CTT Charters, Inc.

Transit System Affiliation: □ Designated Public Transit System
□ Contractor to Designated System
□ None

Contact Person: John Graywa
Contact E-mail: ctrans@aol.com
Mailing Address: 2701 Food Street
City, Zip: Ames, IA 50010

Phone: 515-233-0286

2. General Description of Transit Operations

a. Type of Service(s): Central Iowa Transit, Inc, provides school transportation services to the Ames
Community School District. We also provide "1'XTRA" service to CyRide,
assisting with transportation from high volume bus stops to Iowa State
University. In a collaborative effort between Central Iowa Transit, Inc.,
CyRide and Wilkinson Asset Management we provide a transit route serving
the apartment complexes owned by Wilkinson. CTT Charters, Inc. provides
motorcoach services for hire, assists the Des Moines School District with
" Activity" transportation and works with ISU on event transportation.

b. Groups Served: Ames Community School District, CyRide Jefferson Lanes and Burlington
Transways, as the operator of the Ames Bus Depot.

c. Service Area: Ames, Des Moines

d. Service Hours and Days of Operation

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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Holidays</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

© Des Moines Area Metropolitan Planning Organization
6. Shared Facilities with Other Transportation Providers/Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Type of Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<tr>
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<td>3</td>
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</table>

Des Moines Area Metropolitan Planning Organization

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3/12/2007

71

2008 Ames PTDP
### 7. Coordination Efforts with Other Transportation Providers and/or Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Description of Coordination Effort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ames Community School District</td>
<td>Pupil Transportation</td>
</tr>
<tr>
<td>CyRide</td>
<td>extras and Williamson Shuttle</td>
</tr>
<tr>
<td>Iowa State University</td>
<td>Event Transportation</td>
</tr>
<tr>
<td>Jefferson Labs</td>
<td>Ames Bus Depot</td>
</tr>
<tr>
<td>Burlington Trailways</td>
<td>Ames Bus Depot</td>
</tr>
<tr>
<td>Des Moines School District</td>
<td>Activity Transportation</td>
</tr>
<tr>
<td>YARC of Greater Des Moines</td>
<td>Lease Vehicle</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 8. What Areas of Transportation Service Coordination Are of Interest to You? (check all that apply)

- [ ] Joining a network of transportation/human service providers to look at coordination
- [ ] Centralized scheduling, dispatch, and vehicle tracking
- [ ] Contracting to purchase transportation service
- [ ] Collaborate in grant writing
- [ ] Contracting to provide transportation service
- [ ] Consolidating service to a single provider
- [ ] Technology for vehicle tracking and ride scheduling
- [ ] Centralized fuel purchasing
- [ ] Pooling training resources
- [ ] Pooling financial resources
- [ ] Sharing of vehicles among agencies
- [ ] Cooperatively purchasing vehicles
- [ ] Other: _______________________________

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9. In what ways do you believe your organization can be involved in efforts to coordinate transportation services?

We believe that CIT has a proven track record of private working with public, creating a win-win situation.

10. Please list all projects that have been implemented over the past year that utilized Special Needs (5310), New Freedom (5317), or Job Access Reverse Commute (5316) funding, and their level of success.

<table>
<thead>
<tr>
<th>Level of Success</th>
<th>A: Successful, will continue if funding available</th>
<th>B: Not successful, will not continue the project</th>
<th>C: Unsure</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Project</th>
<th>Level of Success</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11. Please provide a summary of public comment received from various sources over the last 12 months that deal with positives and negatives of service.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12. The tab of this spreadsheet labeled *Provider List* includes a list of transportation providers in both the MPO and the CIRTPA areas. Please list any other transportation providers that are not included on.

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Passenger Transportation Provider Fact Sheet

Data Current as of: 12-Dec-06
(date)

1. Provider Name: Heartland Senior Services as Contracted by HERTA Public Transit

Transit System Affiliation: □ Designated Public Transit System
□ Contractor to Designated System
□ None

Contact Person: Theresa Nevels
Phone: 515-233-2006
Contact E-mail: hsstransport@qwest.net
Mailing Address: 205 S Walnut
City, Zip: Ames, IA 50010

2. General Description of Transit Operations

a. Type of Service(s): Public transit for Story County. Provided ADA service for City of Ames.

b. Groups Served: Seniors, disabled, and general public.

c. Service Area: Story County

d. Service Hours and Days of Operation

Monday through Friday: 6:00 AM to 12:00 AM (City of Ames only, 6:00 PM
Saturday: 8:00 AM to 12:00 AM (City of Ames only)
Sunday: 9:00 AM to 12:00 AM (City of Ames only)
Holidays: Partial services most holidays, closed Thanksgiving

e. Number of Employees Involved in Transit

<table>
<thead>
<tr>
<th></th>
<th>Full Time</th>
<th>Part Time</th>
<th>Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintenance</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Drivers</td>
<td>0</td>
<td>25</td>
<td>15</td>
</tr>
</tbody>
</table>

f. Union. Are any employees covered under a collective bargaining agreement? □ Yes □ No

Union: ___________________________ Local # __________

3. Receive Public Money? □ Yes □ No

© CyRide
3. Fare Structure: County trips $5.00 each way

4. Vehicle Fleet

<table>
<thead>
<tr>
<th>Type</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buses</td>
<td>13</td>
</tr>
<tr>
<td>Vans</td>
<td>2</td>
</tr>
<tr>
<td>Trucks</td>
<td></td>
</tr>
<tr>
<td>Sedans</td>
<td></td>
</tr>
<tr>
<td>Station Wagons</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Wheelchair Spaces</td>
<td>37</td>
</tr>
</tbody>
</table>

Number of Vehicles With:
- Wheelchair Lifts/Ramps: 15
- Two Way Radios/Phones: 15

5. Performance

<table>
<thead>
<tr>
<th></th>
<th>Last Year (FY 06)</th>
<th>Current Year (FY 07)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Actual</td>
<td>Projected</td>
</tr>
<tr>
<td>Passengers</td>
<td>65762</td>
<td>66956</td>
</tr>
<tr>
<td>Wheelchair Lift Operations Performed</td>
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<td></td>
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<tr>
<td>Revenue Miles</td>
<td>406472</td>
<td>446000</td>
</tr>
<tr>
<td>Revenue Hours</td>
<td>25468</td>
<td>30000</td>
</tr>
<tr>
<td>Passenger Revenue/Mile</td>
<td>1.03</td>
<td>0.98</td>
</tr>
<tr>
<td>Passenger Revenue/Hour</td>
<td>16.36</td>
<td>14.5</td>
</tr>
<tr>
<td>Average Daily Passenger Carried</td>
<td>176.1</td>
<td>183</td>
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</table>

Financial:

<table>
<thead>
<tr>
<th></th>
<th>Last Year (FY 06)</th>
<th>Current Year (FY 07)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Actual</td>
<td>Projected</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>782871</td>
<td>826088</td>
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<tr>
<td>Operating Revenues</td>
<td>771468</td>
<td>837416</td>
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<tr>
<td>Capital Expenses</td>
<td></td>
<td></td>
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<tr>
<td>Cost/Revenue Mile</td>
<td>1.93</td>
<td>1.85</td>
</tr>
<tr>
<td>Revenue/Revenue Mile</td>
<td>1.99</td>
<td>1.88</td>
</tr>
<tr>
<td>Cost/Passenger Trip</td>
<td>12.28</td>
<td>12.34</td>
</tr>
<tr>
<td>Cost/Revenue Hour</td>
<td>30.74</td>
<td>27.53</td>
</tr>
<tr>
<td>Revenue/Revenue Hour</td>
<td>30.29</td>
<td>27.93</td>
</tr>
<tr>
<td>Average Passenger Fare/Trip</td>
<td>6.53</td>
<td>6.8</td>
</tr>
</tbody>
</table>

6. Shared Facilities with Other Transportation Providers/Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Type of Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Heartland Senior Services</td>
<td>Congregate Meal Site, Activity Center, and Adult Day Care</td>
</tr>
<tr>
<td>2</td>
<td></td>
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<tr>
<td>3</td>
<td></td>
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<tr>
<td>4</td>
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</tbody>
</table>
7. Coordination Efforts with Other Transportation Providers and/or Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
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</tr>
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<tbody>
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<td>23</td>
<td></td>
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<tr>
<td>24</td>
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</tr>
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<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Level of Success: 
A: Successful, will continue if funding available 
B: Not successful, will not continue the project 
C: Unsure

11. Please provide a summary of public comment received from various sources over the last 12 months that deal with positives and negatives of service.

ASSET surveys issued in spring, 300 surveys returned, most comments were positive about the service. Most passengers felt bus was timely, drivers were friendly, biggest issue is wait time to get to talk to someone in transportation office during peak hours of day.

12. The tab of this spreadsheet labeled Provider List includes a list of transportation providers in the Ames MPO areas. Please list any other transportation providers that are not included on this list so that they too can complete these forms. (Provide this information in the Provider List tab)

Click here to proceed to the Fleet Analysis tab when finished with this tab.
# Fleet Utilization Analysis

**Transit System Name:** Healthcare Senior Services  
**Data Current As Of:** 12/12/2004

Please complete the following table using information from your existing fleet.

Click here to proceed to the Fleet Schedule tab at the bottom of the screen when finished with this tab.

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Year</th>
<th>Fleet ID #</th>
<th># of Seats</th>
<th># of Wheelchair Spaces</th>
<th>Base Location</th>
<th>Assignments</th>
<th># of Hours Used/Week</th>
<th>Used Evening/W Weekend?</th>
<th>Used Annual Miles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ford</td>
<td>Goshen</td>
<td>1998</td>
<td>7632</td>
<td>15</td>
<td>4</td>
<td>Ames</td>
<td>public transit</td>
<td>55</td>
<td>yes</td>
<td>41644</td>
</tr>
<tr>
<td>Ford</td>
<td>Supreme</td>
<td>1993</td>
<td>7621</td>
<td>17</td>
<td>2</td>
<td>Ames</td>
<td>public transit</td>
<td>21</td>
<td>no</td>
<td>19392</td>
</tr>
<tr>
<td>Ford</td>
<td>Collins</td>
<td>1997</td>
<td>7627</td>
<td>20</td>
<td>2</td>
<td>Ames</td>
<td>public transit</td>
<td>10</td>
<td>no</td>
<td>11844</td>
</tr>
<tr>
<td>Ford</td>
<td>Supreme</td>
<td>1993</td>
<td>7620</td>
<td>17</td>
<td>2</td>
<td>Ames</td>
<td>public transit</td>
<td>17</td>
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<td>Chevy</td>
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<td>Venture</td>
<td>1998</td>
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<td>1</td>
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<td>Ames</td>
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<td>yes</td>
<td>45444</td>
</tr>
</tbody>
</table>

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Please call (515)-239-5539 to obtain permission for use
# Fleet Replacement/Rehabilitation Schedule

**Transit System Name:** HARTA for Heartland Senior Services  
**Data Current As Of:** 3/3/2007

<table>
<thead>
<tr>
<th>Equipment Code:</th>
<th>L = Wheelchair Lift</th>
<th>R = Wheelchair Ramp</th>
<th>MR = Mobile Radio</th>
<th>F = Fatebox</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Improvement:</td>
<td>REP = Replace</td>
<td>REHAB = Rehabilitate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please complete the following table for any planned replacement or rehabilitation to your existing fleet.

Click here to proceed to the Capital Needs tab when finished with this tab.

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Year</th>
<th>Fleet ID #</th>
<th>Vehicle/Equipment</th>
<th>Previously Rehabbed (Yes/No)</th>
<th>Mileage as of 6-30-06</th>
<th>Scheduled FY07</th>
<th>Proposed FY08</th>
<th>Proposed FY09</th>
<th>Proposed FY10</th>
<th>Proposed FY11</th>
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<tbody>
<tr>
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<td>1998</td>
<td>7632</td>
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Please call (515)-239-5539 to obtain permission for use.
## Capital Needs

**Transit System Name:** HARTA for Heartland Senior Services  
**Data Current As Of:** 3/5/2007

**Category:**  
- A = Vehicles  
- B = Vehicle Related Equipment  
- C = Non-Vehicle Equipment  
- D = Real Property  
- E = Other

**Purchase Type:**  
- REP = Replace  
- REHAB = Rehabilitate  
- EXP = Expansion

**Needs Reference:** Fleet ID # of vehicle to be replaced/rehabbed, or name of proposed new service(s) if expansion

**Please complete the following table for any planned capital needs.**

Click here to proceed to the Provider List tab when finished with this tab.

<table>
<thead>
<tr>
<th>Category</th>
<th>Purchase Type</th>
<th>Needs Reference</th>
<th># of Seats</th>
<th># of Wheelchair Spaces</th>
<th>Description</th>
<th>Current Year FY 07</th>
<th>FY 08</th>
<th>FY 09</th>
<th>FY 10</th>
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Come ride with us!

Transportation Services

Heraldland

Website: Heraldlandtransferservices.com

Call: (515) 233-2906

To arrange transportation with us:

Fares

- Assistance needs
- Destination
- Pick-up location
- Appointment time
- Appointment date

When calling please let us know:

Grocery Shopping: $1.00 suggested donation
Church service: $1.00 suggested donation
Public Ride: $2.00 each way
mileage
the cost of
drivers for only
volunteer
driver
available from
Community
out-of-
handicap

and grocery trips.
for congruence meals
Senior's discuss
door services for
accessible door-to-
door services for

assistance needs
transportation and
individuals day-to-day
accommodating each
the Ames city limits
door-to-door services within
ADA eligible riders provide
Dial-A-Ride services for

needs.
the public
Transportation is
available to the
Handicapped
general public.

Door services to
accessible door-to-
Handicapped

3/12/2007
Come Ride With Us

Volunteer Driver Opportunity

Transportation Services

HEARTLAND

Heart of Iowa Regional Transit Agency
Received Federal and State Transit monies through

Resources
Aging

United Way of Story County

RSVP

In partnership with

Hearland

Senior Services

205 South Walnut Avenue, Ames, IA 50010

(515) 233-2906
The Volunteer Driver Program

84

For questions regarding the Volunteer Driver Program, please call our office at 515-233-2906.

Becoming a Volunteer Driver

The Volunteer Driver Program involves training and making a process with one of our staff and taking a simple application. Completing an orientation will help you.

If you are interested in becoming a volunteer driver,

Volunteer Driver Requirements

1. Acceptable Motor Vehicle Record
2. Acceptable proof of insurance
3. Letter of acceptable coverage from volunteer insurance company
4. Clean driving record and abuse check
5. Minimum confidentiality of personal using service
6. Obeys all traffic laws

Benefits to Your Community

Volunteer drivers make transportation more affordable. The volunteer driver's personal vehicle is provided in the volunteer driver, the Transportation Department is provided in the transportation department.

Volunteer Driver's Role

The volunteer driver will transport individuals in a safe and effective manner as dispatched by the senior service provider. This allows them to seek appropriate health care and have access to recreation activities in and around the community.

Purpose of the Volunteer Driver Program

To assist our community members in maintaining their health and quality of life by providing accessible and affordable transportation.

Benefits to Volunteer Drivers

Volunteer drivers for the Volunteer Driver Program can receive a $1500 cash incentive. The process of becoming a volunteer driver involves completing an application and participating in a brief orientation.

Heartland Transportation Services

3/12/2007
Services Public Transport Department

All rides are provided from Heartland Senior Services Trans Link. They use local transportation systems to provide rides. Insurance requirements. They also complete an interview process to meet MVR and score of medical appointments.

The need can be as simple as going to the grocery store or medical appointments. The program uses volunteers from the community to assist the transportation needs of rural Story County.

The Volunteer Driver Program has been developed to meet the transportation needs of rural Story County. The Volunteer Driver Program has been developed to meet the transportation needs of rural Story County. The Volunteer Driver Program has been developed to meet the transportation needs of rural Story County.

Volunteer Driver Program

Transportation

The Volunteer Driver Program is designed to provide accessible and affordable transportation for seniors who do not have reliable transportation. This brochure provides information about how to obtain the Volunteer Driver Program.

Purpose of the Volunteer Driver Program

To assist our community members in

Using this service.

To use this service, and how to arrange a ride.

The Volunteer Driver Program provides transportation services to meet the transportation needs of rural Story County.
Passenger Transportation Provider Fact Sheet

Provider Name: Farley's Limousine Service

Contact Person: Timothy F. Farley
Phone: 515-298-2919
Fax: 515-433-2194
Mailing Address: 1061 Lamb Lane, Boone, Iowa 50036

2. General Description of Transit Operations
   a. Type of Service(s):
      Limousine Service
   b. Groups Served:
      12-14 Pass
   c. Service Area:
      All over the State
   d. Service Hours and Days of Operation:
      Monday through Friday: 24 hours a day
      Saturday: 
      Sunday: 
      Holidays: 
   e. Number of Employees Involved in Transit:
      | Administrative | Full Time | Part Time | Volunteers |
      |---------------|-----------|-----------|------------|
      |               | 1         |           |            |
      | Maintenance   | 1         |           |            |
      | Drivers       | 2         | 2         |            |
   
   f. Union: Are any employees covered under a collective bargaining agreement?
      Yes [ ] No [x]
      Union: 
      Local #:
   g. Receive Public Money:
      Yes [ ] No [x]

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3. Fare Structure:

$50.00 to $125.00 Per hour

4. Vehicle Fleet

Number of Vehicles: Buses: ________  Vans: ________
Trucks: ________  Sedans: ________
Station Wagons: ________  Other: Limo
Wheelchair Spaces: No

Number of Vehicles With: Wheelchair Lifts/Ramps: None
Two Way Radios/Phones: 515-223-2419

5. Performance

<table>
<thead>
<tr>
<th>Operating:</th>
<th>Last Year (FY 06) Actual</th>
<th>Current Year (FY 07) Projected</th>
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</thead>
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<td>Wheelchair Lift Operations</td>
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<tr>
<td>Revenue Miles</td>
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<td>Revenue Hours</td>
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<td>Passenger Revenue/Mile</td>
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<tr>
<td>Passenger Revenue/Hour</td>
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<td>Average Daily Passenger</td>
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<tr>
<td>Operating Revenues</td>
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<tr>
<td>Capital Expenses</td>
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<tr>
<td>Cost/Revenue Mile</td>
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<td>Revenue/Revenue Mile</td>
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<tr>
<td>Cost/Passenger Trip</td>
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<td>Cost/Revenue Hour</td>
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<tr>
<td>Revenue/Revenue Hour</td>
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<tr>
<td>Average Passenger Fare/Trip</td>
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6. Shared Facilities with Other Transportation Providers/Human Service Agencies:

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Type of Facility</th>
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7. Coordination Efforts with Other Transportation Providers and/or Human Service Agencies

<table>
<thead>
<tr>
<th>Name of Provider/Agency</th>
<th>Description of Coordination Effort</th>
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</table>

8. What Areas of Transportation Service Coordination Are of Interest to You? (check all that apply)

- [x] Joining a network of transportation/human service providers to look at coordination
- [ ] Centralized scheduling, dispatch, and vehicle tracking
- [x] Contracting to purchase transportation service
- [x] Collaborate in grant writing
- [ ] Contracting to provide transportation service
- [x] Consolidating service to a single provider
- [ ] Technology for vehicle tracking and ride scheduling
- [ ] Centralized fuel purchasing
- [ ] Pooling training resources
- [ ] Pooling financial resources
- [ ] Sharing of vehicles among agencies
- [ ] Cooperatively purchasing vehicles
- [ ] Other: Limo Service

9. In what ways do you believe your organization can be involved in efforts to coordinate transportation services?

Limo Service
10. Please list all projects that have been implemented over the past year that utilized Special Needs (5310), New Freedom (5317), or Job Access Reverse Commute (5316) funding, and their level of success.

   Level of Success:
   A: Successful, will continue if funding available
   B: Not successful, will not continue the project
   C: Unsure

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Project</th>
<th>Level of Success</th>
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   *Note:*

11. Please provide a summary of public comment received from various sources over the last 12 months that deal with positives and negatives of service.

12. The tab of this spreadsheet labeled *Provider List* includes a list of transportation providers in the Ames MPO area. Please list any other transportation providers that are not included on this list so that they too can complete these forms.

(Provide this information in the *Provider List* tab)

Click here to proceed to the *Fleet Analysis* tab when finished with this tab.
<table>
<thead>
<tr>
<th>Model</th>
<th># of Transits</th>
<th>Year</th>
<th>Fleet ID No</th>
<th>Mile</th>
<th>Date</th>
<th>Location</th>
<th>Arrangements</th>
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</thead>
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<td>01/01/2020</td>
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</table>

Please complete the following table with information on your current fleet.

The table should be used to record the number of transits and the miles traveled for each transit on a monthly basis.

Please call (515) 239-5538 to obtain permission for use.
# Fleet Replacement/Rehabilitation Schedule

## Equipment Code:
- L = Wheelchair Lift
- R = Wheelchair Ramp
- MR = Mobile Radio
- F = Facebox

## Type of Improvement:
- REP = Replace
- REHAB = Rehabilitate

Please complete the following table for any planned replacement or rehabilitation to your existing fleet.

Click here to proceed to the Capital Needs tab when finished with this tab.

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Year</th>
<th>Fleet ID #</th>
<th>Vehicle Equipment</th>
<th>Previously Rehabbed (Yes/No)</th>
<th>Mileage as of 6-30-06</th>
<th>Scheduled FY 07</th>
<th>Proposed FY 08</th>
<th>Proposed FY 09</th>
<th>Proposed FY 10</th>
<th>Proposed FY 11</th>
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### Capital Needs

**Transit System Name:**

**Data Current As Of:**

**Category:**  
- **A** = Vehicles  
- **B** = Vehicle Related Equipment  
- **C** = Non-Vehicle Equipment  
- **D** = Real Property  
- **E** = Other

**Purchase Type:**  
- **REP** = Replace  
- **REHAB** = Rehabilitate  
- **EXP** = Expansion

**Needs Reference:** Fleet ID #, of vehicle to be replaced/rehabbed, or name of proposed new service(s) if expansion

Please complete the following table for any planned capital needs.

Click here to proceed to the Provider List tab when finished with this tab.

<table>
<thead>
<tr>
<th>Category</th>
<th>Purchase Type</th>
<th>Needs Reference</th>
<th># of Seats</th>
<th># of Wheelchair Spaces</th>
<th>Description</th>
<th>Current Year FY-07</th>
<th>FY-08</th>
<th>FY-09</th>
<th>FY-10</th>
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</tbody>
</table>

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### Appendix C. Human Service Provider Survey Distribution Listing

The human service agencies below were mailed a survey and requested to fill out information regarding transportation they provide and need for their organization. The agencies identified in yellow actually filled out survey responses and are provided within Appendix D.

<table>
<thead>
<tr>
<th><strong>Human Service Agencies</strong></th>
<th><strong>Contact (First Name)</strong></th>
<th><strong>Contact (Last Name)</strong></th>
<th><strong>Address</strong></th>
<th><strong>City</strong></th>
<th><strong>State</strong></th>
<th><strong>Zip</strong></th>
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<tbody>
<tr>
<td>Access-Assault Care Center Extending Shelter &amp; Support</td>
<td></td>
<td></td>
<td>PO Box 1429</td>
<td>Ames</td>
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<td>American Red Cross</td>
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<td>Ames/ISU Bike Commission</td>
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<td>Skrdia</td>
<td>2933 Monroe Drive</td>
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<tr>
<td>Center - Mid-Iowa Health</td>
<td>Toni</td>
<td>Shropshire</td>
<td>1111 Duff Avenue</td>
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<td>IA</td>
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<td>Center for Creative Justice (CCJ)</td>
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<td>210 Lynn Ave</td>
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<td>IA</td>
<td>50010</td>
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<td>CPC Administrator</td>
<td>Deb</td>
<td>Schidroth</td>
<td>126 S. Kellogg, Suite 201</td>
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<td>Human Service Agencies (continued)</td>
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<td>Contact (Last Name)</td>
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<td>City</td>
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<td>YMCA Campus</td>
<td>Rubie</td>
<td>Luke</td>
<td>109 Lab of Mechanics</td>
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<td>Youth &amp; Shelter Services Inc.</td>
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<td>Zuerner Frederica LISW</td>
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<td>208 5th St.</td>
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Appendix D. Human Service Provider Surveys
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Amencar Rep Cares
Agency Abbreviation or Acronym: 
Contact Person: DEWEY YERMAN
Title: Exec. Director
Mailing Address: 426 5th Street
AMES, IA 50010
Street Address (if different): 
Telephone: 515-232-5104
Fax: 515-232-5675
E-mail: 
Web Site: www.lincolnwayare.org

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?

☐ Private, non-profit
☐ Private, for-profit
☐ Public
☐ Other: 

2. Which service does your agency provide? (Please check all that apply)

☐ Adult Day Care
☐ Child Day Care
☐ Chore Services
☐ Congregate Nutrition
☐ Counseling
☐ Education/Training
☐ Head Start
☐ Home-Delivered Meals
☐ Job Placement
☐ Medicaid
☐ Medical/Dental
☐ Mental Health
☐ Recreational/Social
☐ Rehabilitation
☐ Residential Care
☐ Senior Care
☐ Sheltered Employment
☐ Supported Employment
☐ Transportation
☐ Volunteer Opportunities
☐ Welfare/Food Stamps
☐ Other: DISASTER ASSISTANCE/RESPONSE

3. Do you provide services to clients in more than one location?

☐ Yes
☐ No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

☐ WE SERVE STORY, BOONE & GREENE COUNTIES

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Agency Name:

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes
   - No
   
   If Yes, please check all that apply:
   - Age - please specify
   - Disability - please specify
   - Income - please specify
   - Other - please specify

6. How many persons make up your total client database?
   
   Of your total client database, how many clients do you estimate are unable to drive
   themselves to your services?

7. During an average week, how many people visit your agency to seek service?

8. How do your clients get to your agency or service location (please check all that apply)
   - Drive themselves
   - Ride with family or friends
   - Agency operated transportation (Does your agency provide transportation service for clients
     & thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify):
   - Car pool with other clients
   - Public transportation system
     (please specify):
   - Consolidated agency transportation system
   - Live in a group home and are transported by the group home’s vehicle
   - Another agency provides the service (please specify):
   - Other - please specify

9. What are your agency’s primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - 24 Hours/Day - 7 Days/Week
   - Other

10. Is the transportation needed generally available to THESE clients in order for them to have
     complete access to the services your agency provides, when needed?
    - Yes
    - No

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Agency Name:

11. From your perspective, what are the transportation barriers that are preventing people from accessing services that your agency provides in the areas marked in Question 4.
   - No sufficient transportation services are available
   - Transportation providers are too costly
   - Transportation services do not operate at the same hours as human service agencies
   - Transportation services do not serve locations where agencies are located
   - Transportation providers only want to serve their own clients
   - Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
   - Yes, interested
   - No, not interested
   - Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014

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Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Center for Creative Justice

Agency Abbreviation or Acronym: CCS

Contact Person: Mark Kubik

Mailing Address: 210 Lynn Ave.

Ames, IA 50014

Street Address (if different)

Telephone: (515) 292-3820

Fax: (515) 292-1223

E-mail: CCS@creativejustice.org

Web Site: www.creativejustice.org

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - Private, non-profit
   - Private, for-profit
   - Public
   - Other: 

2. Which service does your agency provide? (Please check all that apply)
   - Adult Day Care
   - Child Day Care
   - Chore Services
   - Congregate Nutrition
   - Counseling
   - Education/Training
   - Head Start
   - Home-Delivered Meals
   - Job Placement
   - Medicaid
   - Medical/Dental
   - Mental Health
   - Recreational/Social
   - Rehabilitation
   - Residential Care
   - Senior Care
   - Sheltered Employment
   - Supported Employment
   - Transportation
   - Volunteer Opportunities
   - Welfare/Food Stamps
   - Other: Adult Day
   - Other: Residential Care
   - Other: Sheltered Employment
   - Other: Transportation
   - Other: Volunteer Opportunities
   - Other: Welfare/Food Stamps

3. Do you provide services to clients in more than one location?
   - Yes
   - No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Please call (515)-239-5539 to obtain permission for use.
4. What geographic area do you serve? (Please list all cities serviced in each county)
- Boone County
- Dallas County
- Hamilton County
- Hardin County
- Jasper County
- Marshall County
- Polk County

5. Does your agency have eligibility requirements for clients to use your services?
- Yes [ ]
- No [X]

If Yes, please check all that apply:
- Age - please specify
- Disability - please specify
- Income - please specify
- Other - please specify

6. How many persons make up your total client database?

7. Of your total client database, how many clients do you estimate are unable to drive themselves to your services?

Approx. 1/3

8. During an average week, how many people visit your agency to seek service?

18.20

9. How do your clients get to your agency or service location? (Please check all that apply)
- Drive themselves
- Ride with family or friends
- Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
- Volunteers bring them
- Staff brings them (non-agency operated transportation)
- Taxi (please specify): 
- Car pool with other clients
- Public transportation system (please specify): Cy-Ride
- Consolidated agency transportation system
- Live in a group home and are transported by the group home's vehicle
- Another agency provides the service (please specify):
- Other - please specify: Work

10. What are your agency's primary service hours?
- Weekdays - approximately 8:00 a.m. to 5:00 p.m.
- Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
- 24 Hours/Day - 7 Days/Week
- Other

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: 

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the area marked in Question 4.

☐ No sufficient transportation services are available
☐ Transportation providers are too costly
☐ Transportation services do not operate at the same hours as human service agencies
☐ Transportation services do not serve locations where agencies are located
☐ Transportation providers only want to serve their own clients
☐ Other (please specify) 

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes - interested
☒ No - not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Friendship Assisted Living
Agency Abbreviation or Acronym: 
Contact Person: May Beth Orsborn
Mailing Address: 130 S. Sheldon Ave., Ames, 50014
Street Address (if different): 
Telephone: 292-9556
Fax: 268-8527
E-mail: maybeth@friendship.org
Web Site: friendship.org

Agency Information

This section requests information about your organization and the types of services provided to you clients.

1. Which of the following best describes your agency?
   - [X] Private, non-profit
   - [ ] Public
   - [ ] Private, for-profit
   - [ ] Other: 

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [X] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other: 

3. Do you provide services to clients in more than one location?
   - [X] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk:

N/A

Please call (515)-239-5539 to obtain permission for use.
Agency Name: [Signature]

4. What geographic area do you serve? (Please list all cities serviced in each county)
   [ ] Boone County
   [ ] Dallas County
   [ ] Hamilton County
   [ ] Hardin County
   [ ] Jasper County
   [ ] Marshall County
   [ ] Polk County

5. Does your agency have eligibility requirements for clients to use your services?
   [X] Yes   [ ] No

   If Yes, please check all that apply:
   [X] Age- please specify
   [X] Disability- please specify
   [ ] Income- please specify
   [ ] Other- please specify

   MR waiver approved

6. How many persons make up your total client database?
   [ ] 15

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   [ ] 15

7. During an average week, how many people visit your agency to seek service?
   [ ] N/A

8. How do your clients get to your agency or service location (please check all that apply)
   [ ] Drive themselves
   [X] Ride with family or friends
   [X] Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   [ ] Volunteers bring them
   [X] Staff brings them (non-agency operated transportation)
   [ ] Taxi (please specify): [ ]
   [ ] Car pool with other clients
   [X] Public transportation system
       (please specify): [ ] Cy-Ride
   [ ] Consolidated agency transportation system
   [X] Live in a group home and are transported by the group home’s vehicle
   [X] Another agency provides the service (please specify): [ ] NFTA
   [ ] Other- please specify

9. What are your agency’s primary service hours?
   [ ] Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   [ ] Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   [X] 24 Hours/Day - 7 Days/Week
   [ ] Other

10. Is the transportation needed generally available to THOSE clients in order for them to have complete access to the services your agency provides, when needed?
    [ ] Yes   [X] No

   [ ] Yes  [ ] No
   [ ] N/A

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3/12/2007 104 2008 Ames PTDP
Agency Name: [Handwritten text]

11. From your perspective, what are the transportation barriers that are preventing people from accessing services that your agency provides in the areas marked in Question 4.
- No sufficient transportation services are available
- Transportation providers are too costly
- Transportation services do not operate at the same hours as human service agencies
- Transportation services do not serve locations where agencies are located
- Transportation providers only want to serve their own clients
- Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met:

[Handwritten text]

13. Please describe other transportation needs in your service area that you feel need to be addressed.

[Handwritten text]

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
- Yes - Interested
- No - Not interested
- Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Good Neighbor Emergency Assistance, Inc.
Agency Abbreviation or Acronym: GNEA
Contact Person: Siglinde Prior
Title: Director
Mailing Address: 508 Kellogg Ave
Amer, IA 50010
Street Address (if different):

Telephone: 515-296-1449
Fax: 515-296-1449
E-mail: gneainc@gmail.com
Web Site: http://www.gneainc.org

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?

☐ Private, non-profit
☐ Private, for-profit
☐ Public
☐ Other:

2. Which service does your agency provide? (Please check all that apply)

☐ Adult Day Care
☐ Child Day Care
☐ Chore Services
☐ Congregate Nutrition
☐ Counseling
☐ Education/Training
☐ Head Start
☐ Home-Delivered Meals
☐ Job Placement
☐ Medicaid
☐ Medical/Dental
☐ Mental Health
☐ Recreational/Social
☐ Rehabilitation
☐ Residential Care
☐ Senior Care
☐ Sheltered Employment
☐ Supported Employment
☐ Transportation
☐ Volunteer Opportunities
☐ Welfare/Food Stamps
☐ Other: Emergency Assistance

3. Do you provide services to clients in more than one location?

☐ Yes
☒ No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Just Story County

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: Good Neighbor

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes
   - No

   If Yes, please check all that apply:
   - Age- please specify
   - Disability- please specify
   - Income- please specify
   - Other- please specify

6. How many persons make up your total client database?
   - ~4000 adult applicants
   - ~130

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   - ~130

7. During an average week, how many people visit your agency to seek service?
   - 20-30

8. How do your clients get to your agency or service location (please check all that apply)
   - Drive themselves
   - Ride with family or friends
   - Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify):
   - Car pool with other clients
   - Public transportation system (please specify):
     - Consolidated agency transportation system
     - Live in a group home and are transported by the group home’s vehicle
     - Another agency provides the service (please specify):
     - Other- please specify

9. What are your agency’s primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - 24 Hours/Day - 7 Days/Week
   - Weekdays 9:00 am - 12:00 noon

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
    - Yes
    - No

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Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

- [ ] No sufficient transportation services are available.
- [ ] Transportation providers are too costly.
- [ ] Transportation services do not operate at the same hours as human service agencies.
- [ ] Transportation services do not serve locations where agencies are located.
- [ ] Transportation providers only want to serve their own clients.
- [ ] Other (please specify):

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

Our agency works with the low-income older people here in Ames. There is a huge transportation problem in Ames & Surrounding communities. Some people from Ames have a hard time accessing health care because McFarland Clinic turns people away—so they need to go to a nearby clinic. There is no bus service to the major factory section of town—great hardship.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

- [ ] Yes—interested
- [ ] No—not interested
- [ ] Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014

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Please call (515)-239-5539 to obtain permission for use.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Data Current As Of: 12/14/06

Agency Name: Habitat for Humanity of Central Iowa

Agency Abbreviation or Acronym: HFHCI

Contact Person: Stew Dreger

Title: Executive Director

Mailing Address: 401 Clark Ave. Ste 100

Ames, IA 50010

Street Address (If different): Same

Telephone: 515-232-8815

Fax: 515-233-2650

E-mail: director@hfhci.org

Web Site: www.hfHCI.org

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?

- [ ] Private, non-profit
- [ ] Private, for-profit
- [ ] Public
- [ ] Other

2. Which services does your agency provide? (Please check all that apply)

- [x] Adult Day Care
- [ ] Child Day Care
- [ ] Chore Services
- [ ] Congregate Nutrition
- [ ] Counseling
- [ ] Education/Training
- [x] Head Start
- [ ] Home-Delivered Meals
- [ ] Job Placement
- [x] Medicaid
- [x] Medical/Dental
- [ ] Mental Health
- [ ] Recreational/Social
- [ ] Rehabilitation
- [ ] Residential Care
- [ ] Senior Care
- [ ] Sheltered Employment
- [ ] Supported Employment
- [ ] Transportation
- [ ] Volunteer Opportunities
- [x] Welfare/Food Stamps
- [ ] Other: Affordable housing

3. Do you provide services to clients in more than one location?

- [x] Yes
- [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Webster City - Hamilton County

Eldora - Hardin County

May build in other cities in these counties in the future.
Agency Name: HFHCI

4. What geographic area do you serve? (Please list all cities serviced in each county)
- Boone County
- Dallas County
- Hamilton County
- Hardin County
- Jasper County
- Marshall County
- Polk County

Webster City > not limited to these cities just where we have built to date

5. Does your agency have eligibility requirements for clients to use your services?
- Yes
- No

If Yes, please check all that apply:
- Age - please specify
- Disability - please specify
- Income - please specify
- Other - please specify

Willingness to partner

6. How many persons make up your total client database?

105 members in Partner Families we have assisted

7. During an average week, how many people visit your agency to seek service?

Unknown

8. How do your clients get to your agency or service location (please check all that apply)
- Drive themselves
- Ride with family or friends
- Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
- Volunteers bring them
- Staff brings them (non-agency operated transportation)
- Taxi (please specify):
- Car pool with other clients
- Public transportation system
  (please specify):
- Consolidated agency transportation system
- Live in a group home and are transported by the group home’s vehicle
- Another agency provides the service (please specify):
- Other - please specify
  Walk

9. What are your agency’s primary service hours?
- Weekdays - approximately 8:00 a.m. to 5:00 p.m.
- Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
- 24 Hours/Day - 7 Days/Week
- Other Weekdays 9-3

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
- Yes
- No
11. From your perspective, what are the transportation barriers that are preventing people from accessing services that your agency provides in the areas marked in Question 4.
   - No sufficient transportation services are available
   - Transportation providers are too costly
   - Transportation services do not operate at the same hours as human service agencies
   - Transportation services do not serve locations where agencies are located
   - Transportation providers only want to serve their own clients
   - Other (please specify) ____________

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
   - Yes- interested
   - No- not interested
   - Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Heartland Senior Services
Agency Abbreviation or Acronym: HSS
Contact Person: Theresa Neely
Mailing Address: 208 S Walnut
Ames, IA 50010
Street Address (if different)

Telephone: 515-233-2906
Fax: 515-233-6986
E-mail hsstransport@qwest.net
Web Site: www.heartlandseniorgservices.com

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - ☐ Private, non-profit
   - ☐ Private, for-profit
   - ☐ Public
   - ☐ Other: __________________________

2. Which service does your agency provide? (Please check all that apply)
   - ☐ Adult Day Care
   - ☐ Child Day Care
   - ☐ Chore Services
   - ☐ Congregate Nutrition
   - ☐ Counseling
   - ☐ Education/Training
   - ☐ Head Start
   - ☐ Home-Delivered Meals
   - ☐ Job Placement
   - ☐ Medicaid
   - ☐ Medical/Dental
   - ☐ Mental Health
   - ☐ Recreational/Social
   - ☐ Rehabilitation
   - ☐ Residential Care
   - ☐ Senior Care
   - ☐ Sheltered Employment
   - ☐ Supported Employment
   - ☐ Transportation
   - ☐ Volunteer Opportunities
   - ☐ Welfare/Food Stamps
   - ☐ Other: __________________________

3. Do you provide services to clients in more than one location?
   - ☐ Yes
   - ☐ No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: Heartland Senior Services

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - [ ] Boone County
   - [ ] Dallas County
   - [ ] Hamilton County
   - [ ] Hardin County
   - [ ] Jasper County
   - [ ] Marshall County
   - [ ] Polk County

5. Does your agency have eligibility requirements for clients to use your services?
   - [ ] Yes
   - [ ] No

If Yes, please check all that apply:
   - [ ] Age - please specify
   - [ ] Disability - please specify
   - [ ] Income - please specify
   - [ ] Other - please specify

6. How many persons make up your total client database?
   _______________________

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   _______________________

7. During an average week, how many people visit your agency to seek service?
   _______________________

8. How do your clients get to your agency or service location (please check all that apply)
   - [ ] Drive themselves
   - [ ] Ride with family or friends
   - [ ] Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - [ ] Volunteers bring them
   - [ ] Staff brings them (non-agency operated transportation)
   - [ ] Taxi (please specify):
   - [ ] Car pool with other clients
   - [ ] Public transportation system
     - [ ] (please specify): HURT A Public Transit operated by Heartland Senior Services
     - [ ] Consolidated agency transportation system
     - [ ] Live in a group home and are transported by the group home's vehicle
     - [ ] Another agency provides the service (please specify):
     - [ ] Other - please specify

9. What are your agency's primary service hours?
   - [ ] Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   - [ ] Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - [ ] 24 Hours/Day - 7 Days/Week
   - [ ] Other

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
    - [ ] Yes
    - [ ] No

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: Heartland Senior Services

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.
   □ No sufficient transportation services are available
   □ Transportation providers are too costly
   □ Transportation services do not operate at the same hours as human service agencies
   □ Transportation services do not serve locations where agencies are located
   □ Transportation providers only want to serve their own clients
   □ Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.
    Transportation to rural meal sites for meals and activities, transportation for individuals needing to accessing Adult
    Day Services from out of Story County, Out of service hours transportation for agency special events (ex. Variety
    Show)

13. Please describe other transportation needs in your service area that you feel need to be addressed.
    Accessibility of transportation in Rural Story County, Rural Story County Preschool transportation,

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
    □ Yes- interested
    □ No- not interested
    □ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area
    Metropolitan Planning Organization area. Please list any other human service agencies in operation that are
    not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: HOMeward Home health & Public Health
Agency Abbreviation or Acronym:
Contact Person: [Handwritten name]
Street Address: 114 Duff Ave., Ames, IA 50014
Mailing Address:
Telephone: 515-239-6730
Fax: 515-233-7556
E-mail: mawy@wmci.com
Web Site:

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [ ] Public
   - [ ] Private, for-profit
   - [ ] Other:

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/ Food Stamps
   - [ ] Other:

3. Do you provide services to clients in more than one location?
   - [ ] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Home health care services provided in a radius of Ames include the above counties.

The Public Health Services only involve Story County.

Home care services only within Ames city limits.

© Cy-Ride

Please call (515)-239-5539 to obtain permission for use.
Agency Name: Homeward

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County
   - Home health services listed as 50 miles.
   - Staff travel hours.

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes ✓
   - No

   If Yes, please check all that apply:
   - Age - please specify
   - Disability - please specify
   - Income - please specify
   - Other - please specify

6. How many persons make up your total client database?
   - 1650

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   - 10

7. During an average week, how many people visit your agency to seek service?
   - 200

8. How do your clients get to your agency or service location? (please check all that apply)
   - Drive themselves ✓
   - Ride with family or friends
   - Agency operated transportation (does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify): Lynne Busse
   - Car pool with other clients
   - Public transportation system (please specify): Cy-Ride
   - Consolidated agency transportation system
   - Live in a group home and are transported by the group home's vehicle
   - Another agency provides the service (please specify):
   - Other - please specify

9. What are your agency's primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m. ✓
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - 24 Hours/Day - 7 Days/Week
   - Other

10. Is the transportation needed generally available to these clients in order for them to have complete access to the services your agency provides, when needed?
    - Yes ✓
    - No

Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

- No sufficient transportation services are available
- Transportation providers are too costly
- Transportation services do not operate at the same hours as human service agencies
- Transportation services do not serve locations where agencies are located
- Transportation providers only want to serve their own clients
- Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

We have not uncounlered any unmet needs re: transportation. Our clients appears satisfied with transportation to our different clinic sites throughout Story County.

13. Please describe other transportation needs in your service area that you feel need to be addressed.


14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

- Yes - interested
- No - not interested
- Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W, 6th Street
Ames, IA 50014

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Please call (515)-239-5539 to obtain permission for use.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Lutheran Services in Iowa
Agency Abbreviation or Acronym: LST
Contact Person: Kate Stewart
Title: Service Coordinator
Mailing Address: 1823 Northwestern Ave.
Ames, IA 50010
Street Address (if different) -
Telephone: 515-232-7262
Fax: 515-232-7416
E-mail: Kathryn.Stewart@lsto.org
Web Site: www.lsto.org

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   ✔ Private, non-profit
   □ Private, for-profit
   □ Public
   □ Other:

2. Which service does your agency provide? (Please check all that apply)
   □ Adult Day Care
   □ Child Day Care
   □ Chore Services
   □ Congregate Nutrition
   ✔ Counseling
   ✔ Education/Training
   □ Head Start
   □ Home-Delivered Meals
   □ Job Placement
   ✔ Medicaid
   □ Medical/Dental
   □ Mental Health
   ✔ Recreational/Social
   ✔ Rehabilitation
   ✔ Residential Care
   ✔ Senior Care
   □ Sheltered Employment
   □ Supported Employment
   □ Transportation
   □ Volunteer Opportunities
   □ Welfare/Food Stamps
   □ Other:

3. Do you provide services to clients in more than one location?
   ✔ Yes
   □ No.

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

LST serves all of these counties listed above. LST does not have an "official" office in each of these counties, but LST does have staff serve clients in all of these counties.

Polk Co. - LST Des Moines Center
2116 University Ave.
Des Moines, IA 50311

© Cy-Ride

Please call (515)-239-5539 to obtain permission for use.
Agency Name: Lutheran Services in Iowa (LSI)

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County

Service all cities in every county

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes [ ]
   - No [ ]

   If Yes, please check all that apply:
   - Age - please specify
   - Disability - please specify
   - Income - please specify
   - Other - please specify

6. How many persons make up your total client database?

   Of your total client database, how many clients do you estimate are unable to drive
towards your services?
   [ ] Hundreds
   [ ] Over 1,000

7. During an average week, how many people visit your agency to seek service?

   Majority of LSI Service
   to be done in consumers home or out in the community
   not at "LSI office"

8. How do your clients get to your agency or service location (please check all that apply)
   - Drive themselves
   - Ride with family or friends
   - Agency operated transportation (Does your agency provide transportation service for clients &
     thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify):
   - Car pool with other clients
   - Public transportation system

   (please specify): Cy-Ride, Dial a Ride

9. What are your agency's primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - 24 Hours/Day - 7 Days/Week
   - Other [ ]

10. Is the transportation needed generally available to THESE clients in order for them to have
     complete access to the services your agency provides, when needed?
     - Yes [ ]
     - No [ ]

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: *Lutheran Services in Iowa (LSI)*

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

- [X] No sufficient transportation services are available.
- [ ] Transportation providers are too costly.
- [ ] Transportation services do not operate at the same hours as human service agencies.
- [ ] Transportation services do not serve locations where agencies are located.
- [ ] Transportation providers only want to serve their own clients.
- [ ] Other (please specify).

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

- Routes out to Dayton Rd. area.
- More often in the evening & on weekends.
- Lower cost for consumers.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

*As an advocate for our consumers, we often hear from the Ames area that bus service does not run when needed—odd hrs. (evenings/weekends) when they need to get to work or appointments. For consumers in the rural areas it is expensive to access transportation to get to appointments in Ames.*

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

- [X] Yes, interested.
- [ ] No, not interested.
- [ ] Unsure.

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

*Again, please return survey by December 20, 2006 to:*

**Shari Atwood, Transit Planner**

**CyRide**

**1700 W. 6th Street**

**Ames, IA 50014**

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Please call (515)-239-5539 to obtain permission for use.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: **Mainstream Living, Employment, Learning Center**
Agency Abbreviation or Acronym: MELE
Contact Person: Pat Steele
Title: Dir. Voc. Services
Mailing Address:
P.O. Box 1603
Ames, IA 50010
1200 McFarland
Street Address:
Telephone: 515-232-3591
Fax: 515-232-3591
E-mail:
Web Site:

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [x] Private, for-profit
   - [ ] Public
   - [ ] Other: 

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other: 

3. Do you provide services to clients in more than one location?
   - [ ] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

All Story No.

© Cy-Ride

Please call (515)-239-5539 to obtain permission for use.
Agency Name:  

4. What geographic area do you serve? (Please list all cities serviced in each county)  
- Boone County  
- Dallas County  
- Hamilton County  
- Hardin County  
- Jasper County  
- Marshall County  
- Polk County  
- McAlister, McCall  

5. Does your agency have eligibility requirements for clients to use your services?  
- Yes  
- No  

If Yes, please check all that apply:  
- Age—please specify  
- Disability—please specify  
- Income—please specify  
- Other—please specify  

6. How many persons make up your total client database?  

Of your total client database, how many clients do you estimate are unable to drive themselves to your services?  

7. During an average week, how many people visit your agency to seek service?  

8. How do your clients get to your agency or service location? (Please check all that apply)  
- Drive themselves  
- Ride with family or friends  
- Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)  
- Volunteers bring them  
- Staff brings them (non-agency operated transportation)  
- Taxi (please specify):  
- Car pool with other clients  
- Public transportation system (please specify):  
- Consolidated agency transportation system  
- Live in a group home and are transported by the group home’s vehicle  
- Another agency provides the service (please specify):  
- Other—please specify  

9. What are your agency's primary service hours?  
- Weekdays - approximately 8:00 a.m. to 5:00 p.m.  
- Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.  
- 24 Hours/Day - 7 Days/Week  
- Other  

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?  
- Yes  
- No  

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Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

[ ] No sufficient transportation services are available
[ ] Transportation providers are too costly
[ ] Transportation services do not operate at the same hours as human service agencies
[ ] Transportation services do not serve locations where agencies are located
[ ] Transportation providers only want to serve their own clients
[ ] Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

\[\text{Would like CyRide route to be added that serves our area.}\]

13. Please describe other transportation needs in your service area that you feel need to be addressed.

\[\text{See Above}\]

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

[ ] Yes, interested
[ ] No, not interested
[ ] Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow CyRide to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014

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Please call (515)-239-5539 to obtain permission for use.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Mary Greeley Medical Center
Agency Abbreviation or Acronym: MGMC
Contact Person: Ron Smith
Title: Planning & Research Coord.
Mailing Address: 111 Butt Ave
Ames, IA 50010
Street Address (if different):
Telephone: (515) 239-2415
Fax: (515) 239-5092
E-mail: smith@mgmc.com
Web Site: www.mgmc.org

Agency Information

This section requests information about your organization and the types of services provided to you clients.

1. Which of the following best describes your agency?
   - □ Private, non-profit
   - □ Private, for-profit
   - □ Public
   - □ Other: City owned, non-profit

2. Which service does your agency provide? (Please check all that apply)
   - □ Adult Day Care
   - □ Child Day Care
   - □ Chore Services
   - □ Congregate Nutrition
   - □ Counseling
   - □ Education/Training
   - □ Head Start
   - □ Home-Delivered Meals
   - □ Job Placement
   - □ Medicaid
   - □ Medical/Dental
   - □ Mental Health
   - □ Recreational/Social
   - □ Rehabilitation
   - □ Residential Care
   - □ Senior Care
   - □ Sheltered Employment
   - □ Supported Employment
   - □ Transportation
   - □ Volunteer Opportunities
   - □ Welfare/Food Stamps
   - □ Other: 

3. Do you provide services to clients in more than one location?
   - □ Yes
   - □ No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk:
- ❌ Newton Falls
- ✅ Marshalltown
- ✅ Webster City
- ✗ Radiation Therapy

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: Mercy Medical Center

4. What geographic area do you serve? (Please list all cities serviced in each county)

☐ Boone County
☐ Dallas County
☐ Hamilton County
☐ Hardin County
☐ Jasper County
☐ Marshall County
☐ Polk County

Allamakee, Elkader, Elk Horn, Goldfield, Kevin, Maquoketa

5. Does your agency have eligibility requirements for clients to use your services?
☐ Yes
☒ No

If Yes, please check all that apply:
☐ Age- please specify
☐ Disability- please specify
☐ Income- please specify
☐ Other- please specify

6. How many persons make up your total client database?

_________________________

Of your total client database, how many clients do you estimate are unable to drive themselves to your services?

_________________________

7. During an average week, how many people visit your agency to seek service?

_________________________

8. How do your clients get to your agency or service location? (please check all that apply)

☐ Drive themselves
☐ Ride with family or friends
☐ Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
☐ Volunteers bring them
☐ Staff brings them (non-agency operated transportation)
☐ Taxi (please specify): __________________________
☐ Car pool with other clients
☐ Public transportation system (please specify): Heartland Senior Services
☐ Consolidated agency transportation system
☐ Live in a group home and are transported by the group home's vehicle
☐ Other agency provides the service (please specify):
☐ Other- please specify

9. What are your agency's primary service hours?

☐ Weekdays - approximately 8:00 a.m. to 5:00 p.m.
☐ Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
☒ 24 Hours/Day - 7 Days/Week
☐ Other: __________________________

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?

☐ Yes
☒ No

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Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

☐ No sufficient transportation services are available
☐ Transportation providers are too costly.
☐ Transportation services do not operate at the same hours as human service agencies
☐ Transportation services do not serve locations where agencies are located
☐ Transportation providers only want to serve their own clients
☐ Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

New volunteer ride program offered as part of the Portland & ILSUP could potentially resolve many transportation issues for our clients. Cost effective & convenient.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes - interested
☒ No - not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Heartland Transportation
Volunteer Driver Program

This brochure provides information about what services the Volunteer Driver program provides, who is eligible to use the service, and how to arrange a ride using this service.

Purpose of the Volunteer Driver Program
To assist our community members in maintaining their desired quality of life by providing accessible and affordable transportation.

Description of Volunteer Driver Program
The Volunteer Driver Program has been developed to meet the transportation needs of rural Story County. The program uses volunteers from each community to assist fellow community members in receiving the transportation services they desire and need. That need can be as simple as going to the grocery store or medical appointments.

All of our volunteers are prescreened to meet MVR and insurance requirements. They also complete an extensive orientation before beginning to provide rides. All rides are dispatched from Heartland Senior Services Public Transit department.

Rider Eligibility Guidelines
1. Passengers must be able to navigate on their own
2. No individuals using wheelchairs
3. In town trips qualify
4. Out of town and out of county trips qualify
5. Rides must be for 2 or fewer passengers
6. A parent or guardian must accompany all children under the age of 18
7. Passengers must provide appropriate car booster seats for young children
8. There are no income requirements

How to Schedule a Ride
To arrange for a ride call us at: 515-233-2906.
All rides will be scheduled through Heartland Senior Services transit. We will contact a volunteer driver and give the passenger a return call to confirm the ride.

Cost of Rides
In town trips: $1.50 each way
Out of town trips: $0.39 per mile
Out of county trips: $0.39 per mile
A reduced fare is available based on monthly income
Please complete survey by December 20, 2006

Agency Name: Mid Iowa Community Action (MICA)

Agency Abbreviation or Acronym:

Contact Person: Janelle Durlin
Title: Story Co Health Services Coord.

Mailing Address:
126 S. Kellogg
Suite 1
Ames, IA 50010

Street Address:

Telephone:
515-956-3312
Fax: 515-956-3310
E-mail: janelle@micaonline.org

Agency Information

This section requests information about your organization and the types of services provided to you clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [ ] Private, for-profit
   - [ ] Public
   - [ ] Other:

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [X] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [X] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other:

Please see attached brochures to see what programs MICA provides.

3. Do you provide services to clients in more than one location?
   - [X] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Boone - Augusta Lutheran Church, 309 S Greene

Hardin - Eldora Public Library, 1202 10th St
   • Iowa Falls - Immanuel Lutheran Church, 313 Lee Lane

© Cy-Ride

Please call (515)-239-5539 to obtain permission for use.
Agency Name: **m i c A**

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - [X] Boone County
   - [ ] Dallas County
   - [X] Hamilton County
   - [X] Hardin County
   - [ ] Jasper County
   - [ ] Marshall County
   - [ ] Polk County
   - [X] Webster City, Radcliff, Eldora, J A Falls

5. Does your agency have eligibility requirements for clients to use your services?
   - [X] Yes
   - [ ] No

   If Yes, please check all that apply:
   - [X] Age: please specify
   - [X] Disability: please specify
   - [ ] Income: please specify
   - [ ] Other: please specify
   - WIC programs, pregnant moms + kids age 0-5
   - many different programs with income guidelines

6. How many persons make up your total client database?
   - see attached

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   - 60 each month

7. During an average week, how many people visit your agency to seek service?
   - 300

8. How do your clients get to your agency or service location (please check all that apply)
   - [X] Drive themselves
   - [X] Ride with family or friends
   - [ ] Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - [X] Volunteers bring them
   - [ ] Staff brings them (non-agency operated transportation)
   - [ ] Taxi (please specify):
   - [X] Car pool with other clients
   - [ ] Public transportation system (please specify): CyRide
   - [ ] Consolidated agency transportation system
   - [ ] Live in a group home and are transported by the group home's vehicle
   - [ ] Another agency provides the service (please specify):
   - [ ] Other: please specify

9. What are your agency's primary service hours?
   - [X] Weekdays - approximately 8:00 a.m. to 8:00 p.m.
   - [ ] Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - [ ] 24 Hours/Day - 7 Days/Week
   - [ ] Other:

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
    - [X] Yes
    - [ ] No
    - except for HIV clients who need to go to the doctor in Des Moines or Iowa City

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11. From your perspective, what are the transportation barriers that are preventing people from accessing services that your agency provides in the areas marked in Question 4.

- No sufficient transportation services are available
- Transportation providers are too costly
- Transportation services do not operate at the same hours as human service agencies
- Transportation services do not serve locations where agencies are located
- Transportation providers only want to serve their own clients
- Other (please specify) lack of funding to buy gas vouchers for families

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

HIV clients do not have a "specialist" in Story County, therefore, must drive to Des Moines or IA City for care. No resources are available for non-Medicaid individuals.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

Can discount prices be given to low income families on CyRide?

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

- Yes - Interested
- No - not interested
- Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014

© Cy-Ride

Please call (515)-239-5539 to obtain permission for use.
Mid-Iowa Community Action, Inc.
Building Communities.

Individuals served each year:

**MICA's Health Services Programs:**
WIC Program – 2,100 (Boone & Story counties)
Living With HIV Program – 25 (Story & Boone)
Child and Adult Care Food Program
– 225 (Story & Hamilton)
Maternal Health Program – 120 (Story & Boone)
Child Health Program 350 (Story)

**MICA's Family Development Programs**
Food Pantry – 2,500
Energy Assistance & All Family Development Programs - 8,100

Story County Community Dental Clinic – 1,060
The Family Development Program provides support for risk-reduction measures and new strategies, including education and development needs. Children and families involved in their development and education programs are provided with a comprehensive plan tailored to their needs.

The Family Development and Support Services

These programs are designed to provide a comprehensive support system for families and children. The programs include

- Education and Training Services
- Support Services
- Health and Nutrition Services
- Children's Services

These services are focused on improving the overall health and well-being of children and families. Services include education, training, and health and nutrition programs.

The Family Development Program also provides support for new and existing programs, including

- Early Childhood Education
- Parent Education
- Community Development

These programs are designed to improve the lives of children and families by providing education, training, and support services.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

<table>
<thead>
<tr>
<th>Agency Name:</th>
<th>Retired and Senior Volunteer Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency Abbreviation or Acronym:</td>
<td>Central Iowa RSVP</td>
</tr>
<tr>
<td>Contact Person:</td>
<td>Kalen Petersen</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>617 Pennsylvania Ave</td>
</tr>
<tr>
<td>City,</td>
<td>Story City, IA 50248</td>
</tr>
<tr>
<td>State:</td>
<td></td>
</tr>
<tr>
<td>Zip:</td>
<td></td>
</tr>
</tbody>
</table>

**Agency Information**

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [ ] Public
   - [ ] Private, for-profit
   - [x] Other: 

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [x] Other: 

3. Do you provide services to clients in more than one location?
   - [x] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

**Story & Marshall County**

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Please call (515)-239-5539 to obtain permission for use.
4. What geographic area do you serve? (Please list all cities serviced in each county):
   □ Boone County
   □ Dallas County
   □ Hamilton County
   □ Hardin County
   □ Jasper County
   □ Marshall County
   □ Polk County
   Storm - all communities
   Marshall -

5. Does your agency have eligibility requirements for clients to use your services?
   □ Yes     □ No
   If Yes, please check all that apply:
   □ Age - please specify
   □ Disability - please specify
   □ Income - please specify
   □ Other - please specify
   55

6. How many persons make up your total client database?
   900
   Of your total client database, how many clients do you estimate are unable to drive
to themselves to your services?
   100

7. During an average week, how many people visit your agency to seek service?
   10

8. How do your clients get to your agency or service location (please check all that apply):
   □ Drive themselves
   □ Ride with family or friends
   □ Agency operated transportation (Does your agency provide transportation service for clients
   & thereby own a vehicle to transport their clients?)
   □ Volunteers bring them
   □ Staff brings them (non-agency operated transportation)
   □ Taxi (please specify):
   □ Car pool with other clients
   □ Public transportation system
     (please specify): Heartland or Cy-Ride
   □ Consolidated agency transportation system
   □ Live in a group home and are transported by the group home's vehicle
   □ Another agency provides the service (please specify):
   □ Other - please specify

9. What are your agency's primary service hours?
   □ Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   □ Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   □ 24 Hours/Day - 7 Days/Week
   □ Other

10. Is the transportation needed generally available to THESE clients in order for them to have
    complete access to the services your agency provides, when needed?
    □ Yes     □ No

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Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

- No sufficient transportation services are available
- Transportation providers are too costly
- Transportation providers do not operate at the same hours as human service agencies
- Transportation services do not serve locations where agencies are located
- Transportation providers only want to serve their own clients
- Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

Our service is volunteer management. We currently partner with Heartland Jr. Serv to recruit volunteers to be part of their vol. driver program. This need was assessed after the Comprehensive Community Needs Assessment was conducted.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

RSVP volunteers are currently assisting Heartland by supplementing their existing transportation services.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

- Yes-interested
- No-not interested
- Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Data Current As Of: 12/01/06

Agency Name: River City Mover

Agency Abbreviation or Acronym: 

Contact Person: Greg Anderson

Title: Administrator

Mailing Address: 120 West 4th Street

City: Ames

State: Iowa

Telephone: 231-2903

Fax: 231-5576

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [x] Private, for-profit
   - [ ] Public
   - [ ] Other: 

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other: 

3. Do you provide services to clients in more than one location?
   - [ ] Yes
   - [x] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

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Please call (515)-239-5539 to obtain permission for use.
Agency Name:

4. What geographic area do you serve? (Please list all cities serviced in each county)

☐ Boone County
☐ Dallas County
☐ Hamilton County
☐ Hardin County
☐ Jasper County
☐ Marshall County
☐ Polk County

5. Does your agency have eligibility requirements for clients to use your services?

☐ Yes  ☐ No

If Yes, please check all that apply:

☐ Age, please specify
☐ Disability, please specify
☐ Income, please specify
☐ Other, please specify

6. How many persons make up your total client database?

☐ 5

Of your total client database, how many clients do you estimate are unable to drive themselves to your services?

☐ 3

7. During an average week, how many people visit your agency to seek service?

☐ 2

8. How do your clients get to your agency or service location (please check all that apply)

☐ Drive themselves
☐ Ride with family or friends
☐ Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
☐ Volunteers bring them
☐ Taxi (please specify):
☐ Public transportation system
☐ Consolidated agency transportation system
☐ Live in a group home and are transported by the group home’s vehicle
☐ Another agency provides the service (please specify):
☐ Other, please specify

9. What are your agency’s primary service hours?

☐ Weekdays - approximately 8:00 a.m. to 5:00 p.m.
☐ Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
☐ 24 Hours/Day - 7 Days/Week
☐ Other

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?

☐ Yes  ☐ No
Agency Name:

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4?

☐ No sufficient transportation services are available
☐ Transportation providers are too costly
☐ Transportation services do not operate at the same hours as human service agencies
☐ Transportation services do no serve locations where agencies are located
☐ Transportation providers only want to serve their own clients
☐ Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

Would be nice to be able to get transportation services calling in at least 1 day before transportation is needed. Many times administration or prospective resident wants to see a resident that day & we can't get transportation unless a days notice is given.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes- interested
☐ No- not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Story County V.A.
Agency Abbreviation or Acronym: SCVA
Contact Person: Brett McLean
Title: Director
Mailing Address: 120 South Kellogg Suite 201
Ames IA 50010
Street Address (at different)
Telephone: 382 7242
Fax: 382 7242
E-mail: Bmclean@storycounty.com
Web Site: WWW.STORYCOUNTY.COM

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [ ] Private, for-profit
   - [X] Public
   - [ ] Other:

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [X] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Sheltered Employment
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other:

3. Do you provide services to clients in more than one location?
   - [ ] Yes
   - [X] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.
Agency Name: Story Co. VA

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County

   Story County

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes
   - No

   If Yes, please check all that apply:
   - Age - please specify
   - Disability - please specify
   - Income - please specify
   - Other - please specify

6. How many persons make up your total client database?
   - 7,000 +

7. Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   - 10%

8. During an average week, how many people visit your agency to seek service?
   - 20 +

9. How do your clients get to your agency or service location (please check all that apply)
   - Drive themselves
   - Ride with family or friends
   - Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify):
   - Car pool with other clients
   - Public transportation system (please specify):
   - Consolidated agency transportation system
   - Live in a group home and are transported by the group home’s vehicle
   - Another agency provides the service (please specify):
   - Other - please specify

10. What are your agency’s primary service hours?
    - Weekdays - approximately 8:00 a.m. to 5:00 p.m. 4:30
    - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
    - 24 Hours a Day - 7 Days/Week
    - Other

11. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
    - Yes
    - No
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

☐ No sufficient transportation services are available
☐ Transportation providers are too costly
☐ Transportation services do not operate at the same hours as human service agencies
☐ Transportation services do no serve locations where agencies are located
☐ Transportation providers only want to serve their own clients
☐ Other (please specify):

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

More transportation to the Des Moines VA Hospital.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes - interested
☐ No - not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014

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Commission of Veterans Affairs
Story County

Eugene O'Neal
Executive Director
1725 5th Street, Suite 200
Des Moines, IA 50309
Ph. 515-282-7939
Fax: 515-282-7939
Office: 515-282-7912

VETERANS AFFAIRS

The Story County Commission of Veterans Affairs currently offers the following assistance for military veterans:

- Workshops/Programs
- Community Activities
- Ethiopia
- Application for admission to the Iowa Veterans' Home
- Application for a Health Care System
- Senior Citizen Health Insurance
- Michigan Veterans Benefits
- Windows on the World
- Transportation
- Prescription medication
- Home care and related assistance
- Food and financial assistance
- Clothing
- Part or mortgage payments
- Medical
- Social security
- Non-service-connected pension
- Special monies
- Compensation
- Supplemental Security Income

The Commission of Veterans Affairs provides assistance to Story County veterans and their family members who are not eligible for federal service-connected compensation. The Commission offers programs to improve the quality of life for veterans through education, employment, and recreation. The Commission also provides assistance to veterans in need of special services. The Commission is committed to helping veterans achieve the best possible quality of life.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Story County Community Housing Corporation
Agency Abbreviation or Acronym: SCCHC
Contact Person: Richard Webb
Title: Exec Dir
Mailing Address: 130 S Sheldon #204
Ames IA 50014
Street Address (if different):
Telephone: 291-3674
Fax:
E-mail: rwebb@scclt.com
Web Site: www.scclt.com

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [x] Private, non-profit
   - [ ] Private, for-profit
   - [ ] Public
   - [ ] Other: ____________________________

2. Which services does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [x] Other: Housing
   - [ ] Other: ____________________________

3. Do you provide services to clients in more than one location?
   - [ ] Yes
   - [x] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Currently just Ames.

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: [SCULC]

4. What geographic area do you serve? (Please list all cities serviced in each county):

- Boone County
- Dallas County
- Hamilton County
- Hardin County
- Jasper County
- Marshall County
- Polk County

5. Does your agency have eligibility requirements for clients to use your services?
- Yes [-]
- No [ ]

If Yes, please check all that apply:
- Age - please specify
- Disability - please specify
- Income - please specify
- Other - please specify

- [ ] $15,000 or less
- [ ] $15,000-$25,000
- [ ] $25,000-$50,000
- [ ] $50,000-$100,000
- [ ] $100,000 or more

6. How many persons make up your total client database?

- [ ] 25

Of your total client database, how many clients do you estimate are unable to drive themselves to your services?

- [ ] 10

7. During an average week, how many people visit your agency to seek service?

- [ ] 1

8. How do your clients get to your agency or service location (please check all that apply)
- [ ] Drive themselves
- [ ] Ride with family or friends
- [ ] Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
- [ ] Volunteers bring them
- [ ] Staff brings them (non-agency operated transportation)
- [ ] Taxi (please specify):
- [ ] Car pool with other clients
- [ ] Public transportation system (please specify):
- [ ] Consolidated agency transportation system
- [ ] Live in a group home and are transported by the group home's vehicle
- [ ] Another agency provides the service (please specify):
- [ ] Other - please specify:

9. What are your agency’s primary service hours?
- [ ] Weekdays - approximately 8:00 a.m. to 5:00 p.m.
- [ ] Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
- [ ] 24 Hours/Day - 7 Days/Week
- [ ] Other - or when appointments demand.

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
- [ ] Yes [-]
- [ ] No [ ]

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11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

- No sufficient transportation services are available
- Transportation providers are too costly
- Transportation services do not operate at the same hours as human service agencies
- Transportation services do not serve locations where agencies are located
- Transportation providers only want to serve their own clients
- Other (please specify): too student-focused.

12. Please describe transportation needs specific to your agency that you feel are NOT being met:

[Blank space]

13. Please describe other transportation needs in your service area that you feel need to be addressed:

[Blank space]

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

- Yes - Interested
- No - not Interested
- Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014.

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Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Story County Community Life Program
Agency Abbreviation or Acronym: SCLP
Contact Person: Gayla Harken
Title: Director
Mailing Address: 104 S. Hazel Ave.
Ames, IA 50010
Street Address (if different):

Telephone: 515-956-2602  Fax: 515-956-2601
E-mail: gharken@storycounty.com  Web Site:

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - Private, non-profit
   - Public
   - Private, for-profit
   - Other:

2. Which service does your agency provide? (Please check all that apply)
   - Adult Day Care
   - Child Day Care
   - Chore Services
   - Congregate Nutrition
   - Counseling
   - Education/Training
   - Head Start
   - Home-Delivered Meals
   - Job Placement
   - Medicaid
   - Medical/Dental
   - Mental Health
   - Recreational/Social
   - Rehabilitation
   - Residential Care
   - Senior Care
   - Sheltered Employment
   - Transportation
   - Volunteer Opportunities
   - Welfare/Food Stamps
   - Other:

3. Do you provide services to clients in more than one location?
   - Yes  [ ]
   - No  [ ]

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Throughout Story County

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Please call (515)-239-5539 to obtain permission for use.
4. What geographic area do you serve? (Please list all cities serviced in each county)

- Boone County
- Dallas County
- Hamilton County
- Hardin County
- Jasper County
- Marshall County
- Polk County

5. Does your agency have eligibility requirements for clients to use your services?

- [ ] Yes
- [ ] No

If Yes, please check all that apply:
- [ ] Age - please specify: 18 or older
- [ ] Disability - please specify: Functional Impairment
- [ ] Income - please specify: $10,000
- [ ] Other - please specify: 

6. How many persons make up your total client database?

- [ ] 200

7. Of your total client database, how many clients do you estimate are unable to drive themselves to your services?

- [ ] 175

8. During an average week, how many people visit your agency to seek service?

- [ ] 75

9. How do your clients get to your agency or service location (please check all that apply)

- [ ] Drive themselves
- [ ] Ride with family or friends
- [ ] Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
- [ ] Volunteers bring them
- [ ] Staff brings them (non-agency operated transportation)
- [ ] Taxi (please specify): 
- [ ] Car pool with other clients
- [ ] Public transportation system (please specify): Heartland / Dial-a-Ride / CyRide
- [ ] Consolidated agency transportation system
- [ ] Live in a group home and are transported by the group home's vehicle
- [ ] Another agency provides the service (please specify):
- [ ] Other - please specify:

10. What are your agency's primary service hours?

- [ ] Weekdays - approximately 8:00 a.m. to 5:00 p.m. at administration building
- [ ] Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
- [ ] 24 Hours/Day - 7 Days/Week for residential services
- [ ] Other:

Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.
- [ ] No sufficient transportation services are available.
- [ ] Transportation providers are too costly.
- [ ] Transportation services do not operate at the same hours as human service agencies.
- [ ] Transportation services do no serve locations where agencies are located.
- [ ] Transportation providers only want to serve their own clients.
- [ ] Other (please specify).

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

Clients get work outside of transportation areas & at times transportation doesn’t run. Outside of Ames service is sometimes a scheduling challenge.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
- [ ] Yes - Interested
- [ ] No - not interested
- [ ] Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Story County Community Life Program
Agency Abbreviation or Acronym: CLP
Contact Person: Gayla Hacken
Title: Director
Mailing Address: 104 S. Hazel Avenue, Ames, IA 50010
Street Address (of different)
Telephone: 515-956-2600
Fax: 515-956-2601
E-mail
Web Site:

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [ ] Private, non-profit
   - [ ] Private, for-profit
   - [ ] Public
   - [ ] Other: County Government

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [ ] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Sheltered Employment
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other:

3. Do you provide services to clients in more than one location?
   - [x] Yes
   - [ ] No

Within Story County
If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: Story County Community Life Program

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes [ ]
   - No [ ]

   If Yes, please check all that apply:
   - Age- please specify [ ]
   - Disability- please specify [ ]
   - Income- please specify [ ]
   - Other- please specify [ ]

   MI Mr DD

6. How many persons make up your total client database? [ ]

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services? [ ]

   75 9/0

7. During an average week, how many people visit your agency to seek services? [ ]

   75

8. How do your clients get to your agency or service location (please check all that apply)
   - Drive themselves [ ]
   - Ride with family or friends [ ]
   - Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?) [ ]
   - Volunteers bring them [ ]
   - Staff brings them (non-agency operated transportation) [ ]
   - Taxi (please specify): [ ]
   - Car pool with other clients [ ]
   - Public transportation system (please specify): [ ]
   - Consolidated agency transportation system [ ]
   - Live in a group home and are transported by the group home's vehicle [ ]
   - Another agency provides the service (please specify): [ ]
   - Other- please specify [ ]

9. What are your agency's primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m. [ ]
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m. [ ]
   - 24 Hours/Day - 7 Days/Week [ ]
   - Other [ ]

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
    - Yes [ ]
    - No [ ]
Agency Name: Story County Community Life Program

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

☐ No sufficient transportation services are available.
☐ Transportation providers are too costly.
☐ Transportation services do not operate at the same hours as human service agencies.
☐ Transportation services do not serve locations where agencies are located.
☐ Transportation providers only want to serve their own clients.
☐ Other (please specify):

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

13. Please describe other transportation needs in your service area that you feel need to be addressed:

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes, interested
☐ No, not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

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CyRide
1700 W. 6th Street
Ames, IA 50014

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Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Data Current As Of: 12-5-2006

Agency Name: City of Human Services

Agency Abbreviation or Acronym: DSHS

Contact Person: Ellen Hansen

Title: I. M. Administrator

Mailing Address: 1200 So. Kellogg, Ste. 203

Ams, IA, 50205

Street Address (if different)

Telephone: 515-956-9558

Fax: 515-956-2599

E-mail: ehansen@dhss.state.ia.us

Web Site: www.dhss.state.ia.us

Agency Information

Resent 11/1/01 to
enhanse@dhss.state.ia.us

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?

☐ Private, non-profit

☒ Public

☐ Private, for-profit

☐ Other: ________________________________

2. Which service does your agency provide? (Please check all that apply)

☐ Adult Day Care

☐ Child Day Care (Younger)

☐ Chore Services

☐ Congregate Nutrition

☐ Counseling

☐ Education/Training

☐ Head Start

☐ Home-Delivered Meals

☒ Job Placement

☐ Medicaid

☐ Medical/Dental

☐ Mental Health

☐ Recreational/Social

☐ Rehabilitation

☐ Residential Care

☐ Senior Care

☐ Supported Employment

☐ Transportation

☐ Volunteer Opportunities

☐ Welfare/Food Stamps

☐ Other: ________________________________

3. Do you provide services to clients in more than one location?

☒ Yes

☐ No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Pott.

Hamilton County - 3500 Superior St., Webster City, IA 50595

Hardin County - 1301 14th Ave., Eldora, IA 50627

Jasper County - 115 W. 3rd Ave., Newton, IA 50208

Marshall County - 304 W. 1st St., Marshalltown, IA 50158

Please call (515)-239-5539 to obtain permission for use.
Agency Name: 

4. What geographic area do you serve? (Please list all cities serviced in each county)

☐ Boone County
☐ Dallas County
☐ Hamilton County
☐ Hardin County
☐ Jasper County
☐ Marshall County
☐ Polk County

Legend: 

☐ Served by Other Service Area

5. Does your agency have eligibility requirements for clients to use your services?

☐ Yes
☐ No

If Yes, please check all that apply:

☐ Age - please specify
☐ Disability - please specify
☐ Income - please specify
☐ Other - please specify

6. How many persons make up your total client database?

Under 1,000
1,000 to 2,999
3,000 to 4,999
5,000 to 7,499
7,500 to 9,999
10,000 to 14,999
15,000 to 19,999
20,000 to 24,999
25,000 to 29,999
30,000 to 39,999
40,000 or more

7. During an average week, how many people visit your agency to seek service?

Unknown

8. How do your clients get to your agency or service location? (please check all that apply)

☐ Drive themselves
☐ Ride with family or friends
☐ Agency operated transportation (Does your agency provide transportation service for clients and thereby own a vehicle to transport their clients?)
☐ Volunteers bring them
☐ Staff brings them (non-agency operated transportation)
☐ Taxi (please specify):
☐ Car pool with other clients
☐ Public transportation system (please specify):
☐ Consolidated agency transportation system
☐ Live in a group home and are transported by the group home's vehicle
☐ Another agency provides the service (please specify):
☐ Other - please specify

9. What are your agency's primary service hours?

☒ Weekdays - approximately 8:00 a.m. to 6:00 p.m.
☐ Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
☐ 24 Hours/Day - 7 Days/Week
☐ Other

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?

☐ Yes
☐ No

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Agency Name: DHS

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.
   - [x] No sufficient transportation services are available
   - [x] Transportation providers are too costly
   - [ ] Transportation services do not operate at the same hours as human service agencies
   - [ ] Transportation services do not serve locations where agencies are located
   - [ ] Transportation providers only want to serve their own clients
   - [x] Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.
   - Transportation to/from grocery stores
   - Transportation to/from employment or employment opportunities
   - Transportation to/from school events (public school events only or co-owned by parent or siblings)

13. Please describe other transportation needs in your service area that you feel need to be addressed.
   - Transportation to and from medical and dental appointments
   - Transportation to/from grocery stores
   - Transportation to/from employment or employment opportunities

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
   - [ ] Yes, interested
   - [ ] No, not interested

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

   Again, please return survey by December 20, 2006 to:

   Shari Atwood, Transit Planner
   CyRide
   1700 W. 6th Street
   Ames, IA 50014

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Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Abington on Grand

Agency Information

1. Which of the following best describes your agency?
   - Private, non-profit
   - Public
   - Other

2. Which service does your agency provide? (Please check all that apply)
   - Mental Health
   - Adult Day Care
   - Child Day Care
   - Home Delivered Meals
   - Job Placement
   - Medicaid
   - Medicare/Dental

3. Do you provide services to clients in more than one location?
   - Yes
   - No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.
<table>
<thead>
<tr>
<th>Agency Name: ABINGTON ON GRAND</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. What geographic area do you serve? (Please list all cities serviced in each county)</td>
</tr>
<tr>
<td>Boone County</td>
</tr>
<tr>
<td>Dallas County</td>
</tr>
<tr>
<td>Hamilton County</td>
</tr>
<tr>
<td>Hardin County</td>
</tr>
<tr>
<td>Jasper County</td>
</tr>
<tr>
<td>Marshall County</td>
</tr>
<tr>
<td>Polk County</td>
</tr>
<tr>
<td>5. Does your agency have eligibility requirements for clients to use your services?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>If Yes, please check all that apply:</td>
</tr>
<tr>
<td>Age</td>
</tr>
<tr>
<td>Disability</td>
</tr>
<tr>
<td>Income</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>6. How many persons make up your total client database?</td>
</tr>
<tr>
<td>70</td>
</tr>
<tr>
<td>Of your total client database, how many clients do you estimate are incapable of driving themselves to your services?</td>
</tr>
<tr>
<td>70</td>
</tr>
<tr>
<td>7. During an average week, how many people visit your agency to seek services?</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>8. How do your clients get to your agency or service location? (Please check all that apply)</td>
</tr>
<tr>
<td>Drive themselves</td>
</tr>
<tr>
<td>Ride with family or friends</td>
</tr>
<tr>
<td>Agency operated transportation</td>
</tr>
<tr>
<td>Volunteers bring them</td>
</tr>
<tr>
<td>Staff brings them (non-agency operated transportation)</td>
</tr>
<tr>
<td>Taxi (please specify)</td>
</tr>
<tr>
<td>Carpool with other clients</td>
</tr>
<tr>
<td>Public transportation system</td>
</tr>
<tr>
<td>Consolidated agency transportation system</td>
</tr>
<tr>
<td>Another agency provides the service (please specify)</td>
</tr>
<tr>
<td>Ambulance services</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>9. What are your agency's primary service hours?</td>
</tr>
<tr>
<td>Weekdays</td>
</tr>
<tr>
<td>Weekdays and Weekends</td>
</tr>
<tr>
<td>24 Hours/7 Days/Week</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>10. Is the transportation needed generally available with the PTDP speaks, in order for them to have complete access to the services your agency provides, when needed?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

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II. From your perspective, what are the transportation barriers that are preventing people from accepting choices that would reduce emissions in the areas marked in question 3?

- None

Don't hesitate to fill in any transportation barriers that you perceive as being present.

Work with us on less than 24 hr notice. Maybe an emergency service that would cost a little more for less than less than 24 hr notice.

Please indicate which of the following transportation services are available for use:

- [ ] Cab service
- [ ] Door-to-door transportation services
- [ ] Transportation services for trips to/from the same locations on a regular basis
- [ ] Transportation services for trips to/from places of employment
- [ ] Transportation services for trips to/from places of recreation
- [ ] Transportation services for trips to/from places of shopping
- [ ] Other (please specify):

Please describe transportation service that you imagine that you perceive as being present.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W 6th Street
Ames, IA 50014

Please call (515)239-5539 to obtain permission for use.
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Youth Shelter Services - Pathways
Agency Abbreviation or Acronym: YSS
Contact Person: Sheila Paul
Mailing Address: 400 Kellogg
Street Address (of different)
Telephone: 515-239-3141
E-mail: sPaul@yssames.org

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   [ ] Private, non-profit
   [ ] Private, for-profit
   [ ] Public
   [ ] Other:

2. Which service does your agency provide? (Please check all that apply)
   [ ] Adult Day Care
   [ ] Child Day Care
   [ ] Chore Services
   [ ] Congregate Nutrition
   [ ] Counseling
   [ ] Education/Training
   [ ] Head Start
   [ ] Home-Delivered Meals
   [ ] Job Placement
   [ ] Medicaid
   [ ] Medical/Dental
   [ ] Mental Health
   [ ] Recreational/Social
   [ ] Rehabilitation
   [ ] Residential Care
   [ ] Senior Care
   [ ] Sheltersed Employment
   [ ] Supported Employment
   [ ] Transportation
   [ ] Volunteer Opportunities
   [ ] Welfare/Food Stamps
   [ ] Other:

3. Do you provide services to clients in more than one location?
   [ ] Yes
   [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Boone Dallas Marshall

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© Cy-Ride
<table>
<thead>
<tr>
<th>Agency Name: Youth Shelter Services</th>
</tr>
</thead>
</table>
4. What geographic area do you serve? (Please list all cities served in each county)
- Boone County
- Dallas County
- Hamilton County
- Hardin County
- Jasper County
- Marshall County
- Polk County

- All towns

5. Does your agency have eligibility requirements for clients to use your services?
- Yes
- No

If Yes, please check all that apply:
- Age- please specify
- Disability- please specify
- Income- please specify
- Other- please specify
- 25 and under
- Receiving EIP

6. How many persons make up your total client database?

7. Of your total client database, how many clients do you estimate are unable to drive themselves to your services?

8. During an average week, how many people visit your agency to seek service?

8. How do your clients get to your agency or service location (please check all that apply)
- Drive themselves
- Ride with family or friends
- Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
- Volunteers bring them
- Staff brings them (non-agency operated transportation)
- Taxi (please specify):
- Car pool with other clients
- Public transportation system (please specify): Cy-Ride
- Consolidated agency transportation system
- Live in a group home and are transported by the group home's vehicle
- Another agency provides the service (please specify):
- Other- please specify

9. What are your agency's primary service hours?
- Weekdays - approximately 8:00 a.m. to 5:00 p.m.
- Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
- 24 Hours/Day - 7 Days/Week
- Other

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
- Yes
- No

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Please call (515)-239-5539 to obtain permission for use.
Agency Name: Youth Shelter Services

11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.
- No sufficient transportation services are available
- Transportation providers are too costly
- Transportation services do not operate at the same hours as human service agencies
- Transportation services do not serve locations where agencies are located
- Transportation providers only want to serve their own clients
- Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

People do not live on the bus route. Difficult to establish route time to take kids to daycare then to work. Bus does not wait at daycare.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

More routes, earlier times for when people need to be to work early.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes - interested
☐ No - not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

Again, please return survey by December 20, 2006 to:

Shari Atwood, Transit Planner
CyRide
1700 W. 6th Street
Ames, IA 50014

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Client Transportation Service Needs Assessment Survey

Agency Name: Youth Shelter Services, Inc.

Agency Abbreviation or Acronym: YSS

Contact Person: 

Mailing Address: P.O. Box 1628
Ames, IA 50010

Street Address: 420 Kellogg

Telephone: 515-233-3411
Fax: 515-233-2440

E-mail: 

Web Site: www.yss.ames.ia.us

Agency Information

This section requests information about your organization and the types of services provided to your clients.

1. Which of the following best describes your agency?
   - [X] Private, non-profit
   - [ ] Private, for-profit
   - [ ] Other:

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [X] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [X] Mental Health
   - [ ] Recreational/Social
   - [ ] Rehabilitation
   - [ ] Residential Care
   - [ ] Senior Care
   - [ ] Shelters/Insurance
   - [ ] Supported Employment
   - [ ] Transportation
   - [ ] Volunteer Opportunities
   - [ ] Welfare/Food Stamps
   - [ ] Other:

3. Do you provide services to clients in more than one location?
   - [X] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk:

Boone - Youth Shelter Services of Boone Co
YSS, Marshall Boone 50036

Hamilton - Youth + Family Center


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Agency Name: US5

4. What geographic area do you serve? (Please list all cities serviced in each county):
   - Boone County: Boone, Madrid, Ogden, Boxholm
   - Dallas County: Huxley, Perry, W. Des Moines, Grimes
   - Hardin County: Webster City
   - Jasper County: Marshalltown
   - Marshall County: Des Moines

5. Does your agency have eligibility requirements for clients to use your services? □ Yes □ No
   - If Yes, please check all that apply:
     - Age- please specify
     - Disability- please specify
     - Income- please specify
     - Other- please specify
     - Sliding fee based on income

6. How many persons make up your total client database? ________

Of your total client database, how many clients do you estimate are unable to drive
themselves to your services? ________

7. During an average week, how many people visit your agency to seek service? ________

8. How do your clients get to your agency or service location? (please check all that apply)
   - Drive themselves
   - Ride with family of friends
   - Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify):
   - Car pool with other clients
   - Public transportation system (please specify): Cy-Ride, Boone Co Transport
   - Consolidated agency transportation system
   - Live in a group home and are transported by the group home's vehicle
   - Another agency provides the service (please specify):
   - Other- please specify

9. What are your agency's primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m.
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - 24 Hours/Day - 7 Days/Week
   - Other ________

10. Is the transportation needed generally available to THESE clients in order for them to have
    complete access to the services your agency provides, when needed? □ Yes □ No

Please call (515)-239-5539 to obtain permission for use.
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.
   - No sufficient transportation services are available
   - Transportation providers are too costly
   - Transportation services do not operate at the same hours as human service agencies
   - Transportation services do not serve locations where agencies are located
   - Transportation providers only want to serve their own clients
   - Other (please specify)  

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.
   - Yes - interested
   - No - not interested
   - Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

   Again, please return survey by December 20, 2006 to:

   Shari Atwood, Transit Planner
   CyRide
   1700 W. 6th Street
   Ames, IA 50014
Please complete survey by December 20, 2006

Client Transportation Service Needs Assessment Survey

Agency Name: Youth & Shelter Services - Healthy Futures

Agency Abbreviation or Acronym: YSS

Contact Person: Kim Venteicher

Mailing Address: 420 Kellogg Ave.

Street Address (if different)

Telephone: 232-4332 ext 410

Fax

E-mail

Web Site

Agency Information

This section requests information about your organization and the types of services provided to you clients.

1. Which of the following best describes your agency?
   - [X] Private, non-profit
   - [ ] Private, for-profit
   - [ ] Public
   - [ ] Other:

2. Which service does your agency provide? (Please check all that apply)
   - [ ] Adult Day Care
   - [ ] Child Day Care
   - [ ] Chore Services
   - [ ] Congregate Nutrition
   - [ ] Counseling
   - [ ] Education/Training
   - [ ] Head Start
   - [ ] Home-Delivered Meals
   - [ ] Job Placement
   - [ ] Medicaid
   - [ ] Medical/Dental
   - [X] Family Development Services
   - [ ] Other:

3. Do you provide services to clients in more than one location?
   - [ ] Yes
   - [ ] No

If Yes, please list all locations in the following counties: Boone, Dallas, Hamilton, Hardin, Jasper, Marshall and Polk.

Story & Boone Counties

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Please call (515)-239-5539 to obtain permission for use.
Agency Name:

4. What geographic area do you serve? (Please list all cities serviced in each county)
   - Boone County
   - Dallas County
   - Hamilton County
   - Hardin County
   - Jasper County
   - Marshall County
   - Polk County

5. Does your agency have eligibility requirements for clients to use your services?
   - Yes [X]  No

   If Yes, please check all that apply:
   - Age- please specify
   - Disability- please specify
   - Income- please specify
   - Other- please specify

6. How many persons make up your total client database?
   - 50

   Of your total client database, how many clients do you estimate are unable to drive themselves to your services?
   - 30

7. During an average week, how many people visit your agency to seek service?
   - 5

8. How do your clients get to your agency or service location (please check all that apply)
   - Drive themselves [X]
   - Ride with family or friends [X]
   - Agency operated transportation (Does your agency provide transportation service for clients & thereby own a vehicle to transport their clients?)
   - Volunteers bring them
   - Staff brings them (non-agency operated transportation)
   - Taxi (please specify):
   - Car pool with other clients
   - Public transportation system (please specify): Cy-Ride
   - Consolidated agency transportation system
   - Live in a group home and are transported by the group home's vehicle
   - Another agency provides the service (please specify):
   - Other- please specify

9. What are your agency's primary service hours?
   - Weekdays - approximately 8:00 a.m. to 5:00 p.m. [X]
   - Weekdays and Weekends - approximately 8:00 a.m. to 5:00 p.m.
   - 24 Hours/Day - 7 Days/Week
   - Other

10. Is the transportation needed generally available to THESE clients in order for them to have complete access to the services your agency provides, when needed?
    - Yes [ ]  No [X]
11. From your perspective, what are the transportation barriers that are preventing people from accessing service that your agency provides in the areas marked in Question 4.

☐ No sufficient transportation services are available
☐ Transportation providers are too costly
☐ Transportation services do not operate at the same hours as human service agencies
☐ Transportation services do not serve locations where agencies are located
☐ Transportation providers only want to serve their own clients
☐ Other (please specify)

12. Please describe transportation needs specific to your agency that you feel are NOT being met.

Transportation not always available to work places.

13. Please describe other transportation needs in your service area that you feel need to be addressed.

14. Please indicate your potential interest in becoming involved with a collaborative effort of transportation services and resources in central Iowa.

☐ Yes - Interested
☐ No - Not interested
☐ Unsure

15. Following is a list of Human Service Agencies and/or collaborative transportation partners in the Ames Area Metropolitan Planning Organization area. Please list any other human service agencies in operation that are not included on this list. This will allow Cy-Ride to distribute this survey request to all the available Human Service Agencies.

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