

83 - M - 57

RESOLUTION

DEC 08 1965

Resolution authorizing the filing of an application with the Department of Transportation, United States of America, for a grant under the Urban Mass Transportation Act of 1964, as Amended.

WHEREAS, the Secretary of Transportation is authorized to make grants for mass transportation projects;

WHEREAS, the contract for financial assistance will impose certain obligations upon the applicant, including the provision by it of the local share of project costs;

WHEREAS, it is required by the U. S. Department of Transportation in accord with the provisions of Title VI of the Civil Rights Act of 1964, that in connection with the filing of an application for assistance under the Urban Mass Transportation Act of 1964, as Amended, the applicant give an assurance that it will comply with Title VI of the Civil Rights Act of 1964 and the U. S. Department of Transportation requirements thereunder; and

WHEREAS, it is the goal of the Applicant that minority business enterprise be utilized to the fullest extent possible in connection with this project, and that definitive procedures shall be established and administered to ensure that minority businesses shall have the maximum feasible opportunity to compete for contracts when procuring construction contracts, supplies, equipment contracts, or consultant and other services:

NOW THEREFORE, BE IT RESOLVED by the Orange County Board of County Commissioners

1. That Lou Treadway, Chairman is authorized to execute and file an application and a grant contract, on behalf of Orange County with the U. S. Department of Transportation, to aid in the financing of Phase II Southwest Corridor Alternatives Analysis/Draft Environmental Impact Statement Study.
2. That Lou Treadway, Chairman is authorized to execute and file with such application an assurance or any other document required by the U. S. Department of Transportation effectuating the purposes of Title VI of the Civil Rights Act of 1964.
3. That Michael J. Tako, P. E., Transportation Director is authorized to furnish such additional information as the U. S. Department of Transportation may require in connection with the application or the project.
4. That Lou Treadway, Chairman is authorized to set forth and execute affirmative minority business policies in connection with the project's procurement needs.

001097

CERTIFICATE

The undersigned duly qualified and acting Chairman of the Orange County Board of County Commissioners certifies that the foregoing is a true and correct copy of a resolution, adopted at a legally convened meeting of the Orange County Board of County Commissioners held on December 5, 19 83.

*Chris L. DeLeon*

If applicant has an official seal, impress here.

NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXPIRES JAN 25 1986  
BONDED INBU GENERAL INS. UNDERWRITERS

Attest

Orange County

Thomas Locker, Clerk

*Lou Treadway*  
by Lou Treadway Chairman  
Board of County Commissioners

*Mary Jo Garrison*  
Deputy Clerk

12/5/83  
Date

Section 8

OMB Approval No. 29-R0718

FEDERAL ASSISTANCE

1. TYPE OF ACTION

PREAPPLICATION

APPLICATION

NOTIFICATION OF INTENT (Opl)

REPORT OF FEDERAL ACTION

(Mark appropriate box)

2. APPLICANT'S APPLICATION NUMBER

a. NUMBER: One (1)

b. DATE: Year month day  
19 83-12-05

3. STATE APPLICATION IDENTIFIER NUMBER

a. NUMBER

b. DATE ASSIGNED: Year month day  
19

4. LEGAL APPLICANT/RECIPIENT

a. Applicant Name: Orange County Board of Commissioners, FL

b. Organization Unit: County

c. Street/P.O. Box: P. O. Box 1393

d. City: Orlando

e. State: Florida

f. Contact Person (Name & telephone No.): Michael J. Tako (305) 420-3843

g. County: Orange

h. ZIP Code: 32802

5. FEDERAL EMPLOYER IDENTIFICATION NO.

a. NUMBER: 20-505

b. TITLE: Urban Mass Transportation Administration Technical Studies Grant

7. TITLE AND DESCRIPTION OF APPLICANT'S PROJECT

Urban Mass Transportation Administration Technical Studies Grant Phase II - Alternatives Analysis and Draft Environmental Impact Statement

APPROVED BY THE BOARD OF COUNTY COMMISSIONERS AT THEIR MEETING

DEC 05 1983

8. TYPE OF APPLICANT/RECIPIENT

A-State B-Interstate C-Substate District D-County E-City F-School District G-Special Purpose District

H-Community Action Agency I-Higher Educational Institution J-Indian Tribe K-Other (Specify):

Enter appropriate letter:  D

9. TYPE OF ASSISTANCE

A-Basic Grant B-Supplemental Grant C-Less D-Insurance E-Other

Enter appropriate letter(s):  A

10. AREA OF PROJECT IMPACT (Name of cities, counties, States, etc.)

Orange County, Osceola County and Orlando, Florida

11. ESTIMATED NUMBER OF PERSONS BENEFITING

571,441

12. TYPE OF APPLICATION

A-New B-Renewal C-Revision D-Continuation E-Augmentation

Enter appropriate letter:  A

13. PROPOSED FUNDING

a. FEDERAL	\$ 1,222,000 .00
b. APPLICANT	97,150 .00
c. STATE	152,750 .00
d. LOCAL	55,600 .00
e. OTHER	.00
f. TOTAL	\$ 1,527,500 .00

14. CONGRESSIONAL DISTRICTS OF:

a. APPLICANT	b. PROJECT
FL	FL
16. PROJECT START DATE Year month day 19 83-01-01	17. PROJECT DURATION 13 Months
18. ESTIMATED DATE TO BE SUBMITTED TO FEDERAL AGENCY	19 83-12-15

15. TYPE OF CHANGE (For 11a or 11b)

A-Increase Dollars B-Decrease Dollars C-Increase Duration D-Decrease Duration E-Cancellation F-Other (Specify):

N/A

Enter appropriate letter(s):

20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code)

Urban Mass Transportation Administration, Atlanta, GA 30309

21. REMARKS ADDED

Yes  No

22. THE APPLICANT CERTIFIES THAT:

a. To the best of my knowledge and belief, data in this preapplication/application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached requirements if the application is approved.

b. If required by OMB Circular A-95 this application was submitted, pursuant to instructions therein, to appropriate clearinghouses and all responses are attached:  Yes  No

Response attached:  Yes  No

(1) Florida State Clearinghouse

(2) East Central Florida Regional Planning Council

(3)

23. CERTIFYING REPRESENTATIVE

a. TYPED NAME AND TITLE: Lou Treadway, Commissioner and Chairman

b. SIGNATURE:

c. DATE SIGNED: Year month day  
19 83-12-05

24. AGENCY NAME

25. APPLICATION RECEIVED: Year month day  
19

26. ORGANIZATIONAL UNIT

27. ADMINISTRATIVE OFFICE

28. FEDERAL APPLICATION IDENTIFICATION

27. ADDRESS

29. FEDERAL GRANT IDENTIFICATION

31. ACTION TAKEN

a. AWARDED

b. REJECTED

c. RETURNED FOR AMENDMENT

d. DEFERRED

e. WITHDRAWN

32. FUNDING

a. FEDERAL	\$ .00
b. APPLICANT	.00
c. STATE	.00
d. LOCAL	.00
e. OTHER	.00
f. TOTAL	\$ .00

33. ACTION DATE: Year month day  
19

33. CONTACT FOR ADDITIONAL INFORMATION (Name and telephone number)

34. STARTING DATE: Year month day  
19

35. ENDING DATE: Year month day  
19

37. REMARKS ADDED

Yes  No

36. FEDERAL AGENCY A-95 ACTION

a. In taking above action, any comments received from clearinghouses were considered. If agency response is due under provisions of Part 1, OMB Circular A-95, it has been or is being made.

b. FEDERAL AGENCY A-95 OFFICE (Name and telephone no.)

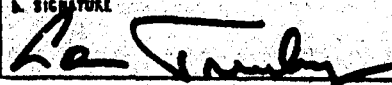
SECTION I - APPLICANT/RECIPIENT DATA

SECTION II - CERTIFICATION

SECTION III - FEDERAL ACTION

Section 9

OMB Approval No. 29-R0718

<b>FEDERAL ASSISTANCE</b>		2. APPLICANT'S APPLICATION	9. NUMBER One (1)	3. STATE APPLICATION IDENTIFIER	6. NUMBER																				
1. TYPE OF ACTION <input type="checkbox"/> PREAPPLICATION <input checked="" type="checkbox"/> APPLICATION <input type="checkbox"/> NOTIFICATION OF INTENT (OpI) <input type="checkbox"/> REPORT OF FEDERAL ACTION	(Mark appropriate box)	4. LEGAL APPLICANT/RECIPIENT	10. AREA OF PROJECT IMPACT (Names of cities, counties, States, etc.)	11. ESTIMATED NUMBER OF PERSONS BENEFITING	12. TYPE OF APPLICATION																				
4. LEGAL APPLICANT/RECIPIENT a. Applicant Name : Orange County Board of Commissioners, FL b. Organization Unit : County c. Street/P.O. Box : P. O. Box 1393 d. City : Orlando e. State : Florida f. Contact Person (Name & telephone No.): Michael J. Tako (305) 420-3843		5. FEDERAL EMPLOYER IDENTIFICATION NO. a. COUNTY : Orange b. ZIP Code: 32802		6. PRO. GRAM (From Federal Catalog) a. NUMBER : 200505 b. TITLE : Urban Mass Transportation Administration Technical Studies Grant																					
7. TITLE AND DESCRIPTION OF APPLICANT'S PROJECT Urban Mass Transportation Administration Technical Studies Grant Phase II - Alternatives Analysis and Draft Environmental Impact Statement APPROVED BY THE BOARD OF COUNTY COMMISSIONERS AT THEIR MEETING DEC 05 1983		8. TYPE OF APPLICANT/RECIPIENT A-State B-Interstate C-Substate District D-County E-City F-School District G-Special Purpose District H-Community Action Agency I-Higher educational institution J-Indian Tribe K-Other (Specify):		9. TYPE OF ASSISTANCE A-Basic Grant B-Supplemental Grant C-Loan D-Insurance E-Other (Specify)																					
10. AREA OF PROJECT IMPACT (Names of cities, counties, States, etc.) Orange County, Osceola County and Orlando, Florida		11. ESTIMATED NUMBER OF PERSONS BENEFITING 571,441		12. TYPE OF APPLICATION A-New B-Renewal C-Revision D-Continuation E-Augmentation F-Other (Specify) Enter appropriate letter: A																					
13. PROPOSED FUNDING <table border="1"> <tr><td>a. FEDERAL</td><td>\$ 346,000</td><td>.00</td></tr> <tr><td>b. APPLICANT</td><td>27,500</td><td>.00</td></tr> <tr><td>c. STATE</td><td>43,250</td><td>.05</td></tr> <tr><td>d. LOCAL</td><td>15,750</td><td>.00</td></tr> <tr><td>e. OTHER</td><td></td><td>.00</td></tr> <tr><td>f. TOTAL</td><td>\$ 432,500</td><td>.00</td></tr> </table>		a. FEDERAL	\$ 346,000	.00	b. APPLICANT	27,500	.00	c. STATE	43,250	.05	d. LOCAL	15,750	.00	e. OTHER		.00	f. TOTAL	\$ 432,500	.00	14. CONGRESSIONAL DISTRICTS OF: a. APPLICANT : FL b. PROJECT : FL 16. PROJECT START DATE (Year month day) 19 83-01-01 17. PROJECT DURATION : 13 Months 18. ESTIMATED DATE TO BE SUBMITTED TO FEDERAL AGENCY : 19 83-12-15		15. TYPE OF CHANGE (For 13a or 14a) A-Increase Dollars B-Decrease Dollars C-Increase Duration D-Decrease Duration E-Cancellation F-Other (Specify) N/A Enter appropriate letter(s):			
a. FEDERAL	\$ 346,000	.00																							
b. APPLICANT	27,500	.00																							
c. STATE	43,250	.05																							
d. LOCAL	15,750	.00																							
e. OTHER		.00																							
f. TOTAL	\$ 432,500	.00																							
20. FEDERAL AGENCY TO RECEIVE REQUEST (Name, City, State, ZIP code) Urban Mass Transportation Administration, Atlanta, GA 30309				21. REMARKS ADDED <input type="checkbox"/> Yes <input type="checkbox"/> No																					
22. THE APPLICANT CERTIFIES THAT:		a. To the best of my knowledge and belief, data in this preapplication/application are true and correct, the document has been duly authorized by the governing body of the applicant and the applicant will comply with the attached agreement if the assistance is approved. b. If required by OMB Circular A-95 this application was submitted, pursuant to instructions therein, to appropriate clearinghouses and all responses are attached:																							
23. CERTIFYING REPRESENTATIVE a. TYPED NAME AND TITLE Lou Treadway Commissioner and Chairman b. SIGNATURE  c. DATE SIGNED 19 83-12-05		(1) Florida State Clearinghouse <input checked="" type="checkbox"/> (2) East Central Florida Regional Planning Council <input checked="" type="checkbox"/> (3) <input type="checkbox"/>																							
24. AGENCY NAME		26. ORGANIZATIONAL UNIT		27. ADMINISTRATIVE OFFICE																					
25. ADDRESS		28. FEDERAL APPLICATION IDENTIFICATION		29. FEDERAL GRANT IDENTIFICATION																					
31. ACTION TAKEN <input type="checkbox"/> a. AWARDED <input type="checkbox"/> b. REJECTED <input type="checkbox"/> c. RETURNED FOR AMENDMENT <input type="checkbox"/> d. DEFERRED <input type="checkbox"/> e. WITHDRAWN		32. FUNDING <table border="1"> <tr><td>a. FEDERAL</td><td>\$</td><td>.00</td></tr> <tr><td>b. APPLICANT</td><td></td><td>.00</td></tr> <tr><td>c. STATE</td><td></td><td>.00</td></tr> <tr><td>d. LOCAL</td><td></td><td>.00</td></tr> <tr><td>e. OTHER</td><td></td><td>.00</td></tr> <tr><td>f. TOTAL</td><td>\$</td><td>.00</td></tr> </table>		a. FEDERAL	\$	.00	b. APPLICANT		.00	c. STATE		.00	d. LOCAL		.00	e. OTHER		.00	f. TOTAL	\$	.00	33. ACTION DATE : 19 34. CONTACT FOR ADDITIONAL INFORMATION (Name and telephone number)		34. STARTING DATE : 19 35. ENDING DATE : 19 37. REMARKS ADDED <input type="checkbox"/> Yes <input type="checkbox"/> No	
a. FEDERAL	\$	.00																							
b. APPLICANT		.00																							
c. STATE		.00																							
d. LOCAL		.00																							
e. OTHER		.00																							
f. TOTAL	\$	.00																							
36. FEDERAL AGENCY A-95 ACTION		a. In taking above action, any comments received from clearinghouses were considered. If agency response is due under provisions of Part 1, OMB Circular A-95, it has been or is being made. b. FEDERAL AGENCY A-95 OFFICIAL (Name and telephone no.)																							

SECTION I - APPLICANT/RECIPIENT DATA

SECTION II - CERTIFICATION

SECTION III - FEDERAL AGENCY ACTION