

Public Transportation Modernization, Improvement & Service Enhancement Program (PTMISEA)

Final Project Report

Per G.C. 8879.50 (f)(2) "Within six months of the project becoming operable the recipient agency shall provide a report to the administrative agency . . ." Please provide the following information:

Fiscal Year: FY 15

PTMISEA Cycle:

Project Sponsor:

Contributing PTMISEA Sponsor:

Project Name: PTMIESA Lifeline Replacment and Expansion Vehicles

Lo	cal match for repacment and expansion vehicl	
	Replacement and expansion vehicle local	Replacment vehilces for the ECCTA fleet,
Project Scope	match	local match
Project Scope		
Funding	Original Approved Project Cost	Final Project Cost
99313 :		
99314 :		¢4 077 004
	\$1,277,391	\$1,277,391
PTMISEA Interest:	\$0	\$5,663
Other Funds		
Federal:		
State :		
Local :		
Total Project Cost :	\$1,277,391	\$1,283,054
Schedule Date	Original Project Schedule	Final Project Schedule
Begin Environmental:		
End Environmental:		
Begin Design:		
End Design:		
Begin Right of Way:		
End Right of Way:		
Begin Construction:		
End Construction :		
Begin Vehicle/Equipment Order:	23/4/12	12/4/12
End Vehicle/Equipment Order:	2/26/15	2/26/18
Begin Closeout Phase:	2/26/17	3/1/18
End Closeout Phase :	2/26/17	8/13/18
	Anticipated Performance Outcome	Actual Performance Outcome
Denfermence Outcome		
Performance Outcomes		Purchased replacment vehilces for the
Description/Improvement Percentages		ECCTA fleet
Percentages		Increased Ridership by%
		Reduced Oper/Maint Cost by 2% Reduced Emissions by 6% Increased System Reliability by 4%
		Increased System Reliability by 4%
Signature:		
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A Gever Por	te) Coo	J-15-18
Name and Title		Date

Please include verification of the project completed as scoped by providing evidence of completion such as a photo and/or invoice of acquisition.

Note: The same authority that signed the Allocation Request or is designated on the Authorized Agent form must sign here.