

Transportation Disadvantaged Trip & Equipment Grant Recipient Information

Legal Name	Broward County Florida		
Federal Employer Identification Number	59-6000531-037		
Registered Address	1 N. University Drive		
City and State	Plantation, FL	Zip Code	33324
Contact Person for this Grant	Paul Strobis	Phone Number Format 111-1111	954-357-8321
E-Mail Address [Required]	pstrobis@broward.org		
Project Location [County(ies)]	Broward	Proposed Project Start Date	7/1/2022
	Budget Allocation		
		- State Allocation [90%]	\$5,248,034.00
		unt – Local Match [10%]	\$583,114.00
		/oluntary Dollar Amount	\$0.00
		luntary Dollars [In Kind]	0.00
	Local Materi for Ve	Total Project Amount	\$5,831,148.00
		Total i Toject Alliount	\$3,831,1 4 8.00
	Capital Equipment Request		
		of Capital Equipment	¢ Amount
	Description	i oi Capitai Equipilient	\$ Amount
		Total Project Amount	\$ 0.00
			\$ 5.05
_	ew IS Required if Requesting Capital E		
The purchase of capital equipi	ment is included and has been review	ed by theLoc	cal Coordinating Board.
Signature of Local Coordinating	g Board Chairperson D	ate	
	esentative, hereby certify that the info the 2022-23 Program Manual and Instr		

Date

Signature of Grant Recipient Representative



Transportation Disadvantaged Trip & Equipment Grant Service Rates

Name of Grant Recipient	Broward County Florida
Project Location [County(ies)]	Broward
Service Rate Effective Date	July 1, 2022

Grant Ag	reement Service Rates	
Type of Service Transportation Mode	Unit of Measure (Trip or Passenger Mile)	Cost Per Unit
* Ambulatory	Trip	29.78
* Wheel Chair	Trip	51.04
* Stretcher		
Bus Pass – Daily	Pass	
Bus Pass – Weekly	Pass	
Bus Pass – Monthly	Pass	70.00
Bus Pass- Monthly Reduced	Pass	40.00
ADA Paratransit Fare	Trip	3.50

^{*} Ambulatory, Wheel Chair and Stretcher must all use the <u>same Unit of Measure</u> either Trip or Passenger Mile; Cannot mix, all must be the same regardless of Transportation Mode.

	CTC Name:	Broward Co	ounty	
Cour	ty (Service Area):	Broward Co	ounty	
C	ontact Person:	Paul Strobi	S	
	Phone #	954-357-83	21	
	ck Applicable Mizational typ	Character E:		ORK TYPE:
ORGA	Governmental	E:	NETW	Fully Brokered
ORGA	Governmental Private Non-P	rofit	NETW	Fully Brokered Partially Brokered
ORGA	Governmental	rofit	NETW	Fully Brokered

Comprehensive Budget Worksheet CTC: Broward County Version 1.4 County: Broward County 1. Complete applicable GREEN cells in columns 2, 3, 4, and 7 APPROVED Budget, as Upcoming Year'
PROPOSED ACTUALS amended Budget Proposed % Change from from Confirm whether revenues are collected as a system subsidy VS Oct 1st of Oct 1st of Oct 1st of • a purchase of service at a unit price. % Change from Prior Year to from Current Year to 2020 2021 2022 Sept 30th of Sept 30th of Sept 30th of Current Upcoming Year 2022 2023 Explain Changes in Column 6 That Are > ± 10% and Also > ± \$50,000 2021 REVENUES (CTC/Operators ONLY / Do NOT include coordination contractors!) Local Non-Govt Medicaid Co-Pay Received Donations/ Contributions In-Kind, Contributed Services Bus Pass Program Revenue District School Board \$ 22,899,323 21,794,623 \$ 25,422,991 -4.8% 3,665,664 \$ 7,840,954 -13.2% Compl. ADA Services County Cash 113.9% County In-Kind, Contributed Services City Cash City In-kind, Contributed Services Other Cash
Other In-Kind, Contributed Services Bus Pass Program Revenue 5,248,034 -6.5% 22.2% 4,593,910 \$ 4,295,597 \$ Non-Spons. Trip Program Non-Spons. Capital Equipment Rural Capital Equipment Other TD (specify in explanation) Bus Pass Program Revenue USDOT & FDOT 49 USC 5307 1,188,826 -100.0% 49 USC 5310 49 USC 5311 (Operating) 49 USC 5311(Capital) Block Grant Service Development Commuter Assistance Other DOT (specify in explanation) Bus Pass Program Revenue AHCA Other AHCA (specify in explanation) **Bus Pass Program Revenue** DCF Alcoh, Drug & Mental Health Family Safety & Preservation
Comm. Care Dis./Aging & Adult Serv. Other DCF (specify in explanation) Bus Pass Program Revenue DOH Children Medical Services County Public Health Other DOH (specify in explanation)

Bus Pass Program Revenue DOE (state) Carl Perkins Div of Blind Services Vocational Rehabilitation Day Care Programs Other DOE (specify in explanation) Bus Pass Program Revenue AWI WAGES/Workforce Board Other AWI (specify in explanation) Bus Pass Program Revenue DOEA Older Americans Act Community Care for Elderly Other DOEA (specify in explanation) Bus Pass Program Revenue Community Services Other DCA (specify in explanation)
Bus Pass Admin. Revenue

1 APD Office of Disability Determination Developmental Services Other APD (specify in explanation) Bus Pass Program Revenue	Prior Year's ACTUALS from Oct 1st of 2020 to Sept 30th of 2021 2	Current Year's APPROVED Budget, as amended from	Upcoming Year's PROPOSED Budget from Oct 1st of 2022 to Sept 30th of 2023 4	% Change from Prior Year to Current Year 5	Proposed % Change from Current Year to Upcoming Year 6	Confirm whether revenues are collected as a system subsidy VS a purchase of service at a unit price. Explain Changes in Column 6 That Are > ± 10% and Also > ± \$50,000
1 APD Office of Disability Determination Developmental Services Other APD (specify in explanation) Bus Pass Program Revenue	from Oct 1st of 2020 to Sept 30th of 2021	APPROVED Budget, as amended from Oct 1st of 2021 to Sept 30th of 2022	PROPOSED Budget from Oct 1st of ▼ 2022 to Sept 30th of 2023	from Prior Year to Current Year	% Change from Current Year to Upcoming Year	a purchase of service at a unit price. $Explain\ Changes\ in\ Column\ 6\ That\ Are > \pm\ 10\%\ and\ Also > \pm\ $50,000$
Office of Disability Determination Developmental Services Other APD (specify in explanation) Bus Pass Program Revenue	2	3	4	5	6	7
Office of Disability Determination Developmental Services Other APD (specify in explanation) Bus Pass Program Revenue						
Office of Disability Determination Developmental Services Other APD (specify in explanation) Bus Pass Program Revenue						
Developmental Services Other APD (specify in explanation) Bus Pass Program Revenue						
Bus Pass Program Revenue						
ON						
(specify in explanation) Bus Pass Program Revenue						
Other Fed or State						
xxx						
xxx						
Bus Pass Program Revenue						
Other Revenues						
Interest Earnings						
xxxx						
Bus Pass Program Revenue						
Balancing Revenue to Prevent Deficit						
Actual or Planned Use of Cash Reserve					_	
Balancing Revenue is Short By = Total Revenues =	\$32,903,187	None \$29,755,884	None \$38,511,979	-9.6%	29.4%	
EVERNOTURES (OTO/On anatoma ONI)	(/D-NOT:	advela Oaandina	ion Contractor	1)		
EXPENDITURES (CTC/Operators ONLY	/ DO NOT II	iciude Coordinat	ion Contractors	!)		
perating Expenditures _abor \$	733,650	\$ 963,690	\$ 992,601	31.4%	3.0%	
Fringe Benefits \$		\$ 319,860	\$ 329,456	44.6%	3.0%	
Services \$		\$ 333,970	\$ 310,180	16.4%	-7.1%	
Materials and Supplies						
Utilities Casualty and Liability						
Taxes \$	56,098	\$ 84,650	\$ 87,190	50.9%	3.0%	
Purchased Transportation:						
Purchased Bus Pass Expenses School Bus Utilization Expenses						
Contracted Transportation Services \$	26,195,453	\$ 24,388,050	\$ 29,534,713	-6.9%	21.1%	
Other Miscellaneous						
vii docinari le dud						
Operating Debt Service - Principal & Interest						
Operating Debt Service - Principal & Interest Leases and Rentals						
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund		\$	\$			
Operating Debt Service - Principal & Interest Leases and Rentals	-	\$ -	\$ -			
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services \$ Allocated Indirect Apital Expenditures		\$ -	<u>\$</u>			
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Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services Allocated Indirect apital Expenditures Equip. Purchases with Grant Funds Equip. Purchases with Rate Generated Rev.	1,188,826	\$3,665,664.00	\$ 7,257,840	-100.0% -13.2%	98.0%	
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services Allocated Indirect apital Expenditures Equip. Purchases with Grant Funds Equip. Purchases with Local Revenue \$ 2000.	1,188,826				98.0%	
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services Allocated Indirect apital Expenditures Equip. Purchases with Grant Funds Equip. Purchases with Rate Generated Rev.	1,188,826				98.0%	
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund n-Kind, Contributed Services \$ Allocated Indirect appital Expenditures Equip. Purchases with Grant Funds \$ Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Take Generated Rev. Capital Debt Service - Principal & Interest	1,188,826 4,221,128	\$3,665,664.00	\$ 7,257,840	-13.2%		
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund n-Kind, Contributed Services \$ Allocated Indirect appital Expenditures Equip. Purchases with Grant Funds \$ Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Take Generated Rev. Capital Debt Service - Principal & Interest	1,188,826 4,221,128				98.0%	
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund n-Kind, Contributed Services \$ Allocated Indirect appital Expenditures Equip. Purchases with Grant Funds \$ Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Take Generated Rev. Capital Debt Service - Principal & Interest	1,188,826 4,221,128	\$3,665,664.00	\$ 7,257,840	-13.2%		
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund n-Kind, Contributed Services \$ Allocated Indirect appital Expenditures Equip. Purchases with Grant Funds \$ Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Local Revenue Equip. Purchases with Take Generated Rev. Capital Debt Service - Principal & Interest	1,188,826 4,221,128	\$3,665,664.00	\$ 7,257,840	-13.2%		
Operating Debt Service - Principal & Interest e.eases and Rentals Contrib. to Capital Equip. Replacement Fund n-Kind, Contributed Services \$ Allocated Indirect applied Expenditures Equip. Purchases with Grant Funds \$ Squip. Purchases with Local Revenue \$ Capip. Purchases with Local Revenue \$ Capip. Purchases with Rate Generated Rev. Capital Debt Service - Principal & Interest	1,188,826 4,221,128	\$3,665,664.00	\$ 7,257,840	-13.2%		- -
Operating Debt Service - Principal & Interest Leases and Rentals Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services \$ Allocated Indirect Indir	1,188,826 4,221,128 4,221,128 50 \$32,903,187	\$3,665,664.00 \$29,755,884	\$ 7,257,840 \$ 38,511,979	-13.2%		-
Operating Debt Service - Principal & Interest e.eases and Rentals Contrib. to Capital Equip. Replacement Fund n-Kind, Contributed Services \$ Allocated Indirect applied Expenditures Equip. Purchases with Grant Funds \$ Squip. Purchases with Local Revenue \$ Capip. Purchases with Local Revenue \$ Capip. Purchases with Rate Generated Rev. Capital Debt Service - Principal & Interest	1,188,826 4,221,128 4,221,128 50 \$32,903,187	\$3,665,664.00 \$29,755,884	\$ 7,257,840	-13.2%		-

ACTUAL year GAIN (program revenue) MUST be reinvested as a trip or system subsidy. Adjustments must be Identified and explained in a following year, or applied as a Rate Base Adjustment to proposed year's rates on the next sheet.

	Prior Year's	Current Year's APPROVED Budget, as amended	Upcoming Year's PROPOSED			
		APPROVED Budget, as				
	from Oct 1st of 2020 to Sept 30th of 2021	from	Budget from Oct 1st of ▼ 2022 to Sept 30th of 2023	% Change from Prior Year to Current Year	Current Year to Upcoming Year	
1	2	3	4	5	6	7

Budgeted Rate Base Worksheet CTC: Broward County County: Broward County 1. Complete applicable GREEN cells in column 3; YELLOW and BLUE cells are automatically completed in column 3 2. Complete applicable GOLD cells in column and 5 pcoming Year's BUDGETED What amount of the Budgeted Revenue in col. 2 will be What amount of the Oct 1st of Subsidy Revenue in col. 4 will come from in cot. 2 will be generated at the rate per unit determined by this spreadsheet, OR used as local match for these type revenues? Budgeted Rate Subsidy Revenue EXcluded from the Rate Base 2022 col. 4 will come from funds to purchase equipment, OR will be used as match for the purchase of equipment? to Sept 30th of 2023 REVENUES (CTC/Operators ONLY) Local Non-Govt YELLOW cells are <u>NEVER</u> Generated by Applying Authorized Rates Farebox Medicaid Co-Pay Received Donations/ Contributions Donations/ Contributions In-Kind, Contributed Services Other Bus Pass Program Revenue Local Government BLUE cells Should be funds generated by rates in this spreadsheet District School Board Compl. ADA Services County Cash 25,422,991 7,840,954 25,422,991 7,247,128 - \$ 593,826 \$ County In-Kind, Contributed Services City Cash City In-kind, Contributed Services Other Cash Other In-Kind, Contributed Services Bus Pass Program Revenue CTD GREEN cells cal match req MAY BE Revenue Generated by Applying Authorized Rate per Mile/Trip Charges 5,248,034 Non-Spons. Trip Program \$ 583,115 Non-Spons. Capital Equipment Rural Capital Equipment Other TD Bus Pass Program Revenue Fill in that portion of budgeted revenue in Column 2 that will be GENERATED through the application of authorized per mile, per trip, or combination per trip plus per mile rates. Also, include the amount of funds that are Earmarked as local match for USDOT & FDOT 49 USC 5307 49 USC 5310 49 USC 5311 (Operating) 49 USC 5311(Capital) Transportation Services and NOT Capital Equipment Block Grant If the Farebox Revenues are used as a source of Local Match Service Development Dollars, then identify the appropriate amount of Farebox Revenue that represents the portion of Local Match required on any state or federal grants. This does not mean that Farebox is Bus Pass Program Revenue AHCA the only source for Local Match. Please review all Grant Applications and Agreements Bus Pass Program Revenue containing State and/or Federal funds for the proper Match Requirement levels and allowed sources. Alcoh, Drug & Mental Health Family Safety & Preservation Comm. Care Dis./Aging & Adult Serv Other DCF Bus Pass Program Revenue DOH Fill in that portion of Budgeted Rate Subsidy Revenue in Column 4 that will come from Funds Earmarked by the Funding Source for Purchasing Capital Equipment. Also include the portion of Local Funds earmarked as Match related to the County Public Health Other DOH Bus Pass Program Revenue Purchase of Capital Equipment if a match amount is required by DOE (state) the Funding Source. Carl Perkins Day Care Programs Other DOE Bus Pass Program Revenue \$ WAGES/Workforce Board Bus Pass Program Revenue \$ DOEA Older Americans A Community Care for Elderly Other DOEA Bus Pass Program Revenue DCA Bus Pass Program Revenue

Budgeted Rate Base Worksheet CTC: Broward County County: Broward County 1. Complete applicable GREEN cells in column 3; YELLOW and BLUE cells are automatically completed in column 3 2. Complete applicable GOLD cells in column and 5 Upcoming Year's BUDGETED What amount of the Budgeted Revenue in col. 2 will be What amount of the What amount of the Subsidy Revenue in col. 4 will come from funds to purchase equipment, OR will be used as match for the purchase of equipment? Oct 1st of in cot. 2 will be generated at the rate per unit determined by this spreadsheet, OR used as local match for these type revenues? Budgeted Rate Subsidy Revenue EXcluded from the Rate Base 2022 to Sept 30th of 2023 Office of Disability Determination Developmental Services Other APD Bus Pass Program Revenue DJJ DJJ Bus Pass Program Revenue Other Fed or State XXX Bus Pass Program Revenue Other Revenues Interest Earnings Bus Pass Program Revenue Balancing Revenue to Prevent Deficit Actual or Planned Use of Cash Reserve Total Revenues = \$ 38,511,979 5,841,860 \$ 32,670,119 \$ EXPENDITURES (CTC/Operators ONLY) \$ 32,670,119 Operating Expenditures Amount of <u>Budgeted</u> Operating Rate Subsidy Revenue 992,601 329,456 310,180 Fringe Benefits Services Materials and Supplies Casualty and Liability 87,190 Purchased Transportation: Purchased Bus Pass Expenses School Bus Utilization Expenses Contracted Transportation Services Other Miscollipsopure 29,534,713 Operating Debt Service - Principal & Interest Contrib. to Capital Equip. Replacement Fund In-Kind, Contributed Services ¹ Rate Base Adjustment Cell Capital Expenditures Equip. Purchases with Grant Funds Equip. Purchases with Local Revenue Equip. Purchases with Rate Generated Rev. If necessary and justified, this cell is where you could optionally adjust proposed service rates up or down to adjust for program revenue (or unapproved profit), or losses from the <u>Actual</u> period shown at the bottom of the Comprehensive Budget Sheet. This is not the only acceptable location or method of 7,257,840 Capital Debt Service - Principal & Interest only acceptable location or method of reconciling for excess gains or losses. If allowed by the respective funding sources, excess gains may also be adjusted by providing system subsidy revenue or by the purchase of additional trips in a period following the Actual period. If such an adjustment has been made, provide notation in the respective exlanation area of the Comprehensive Budget tab. minus EXCLUDED Subsidy Revenue = \$ Budgeted Total Expenditures INCLUDED in 32,670,119 Rate Base = s 5,841,860 Rate Base Adjustment¹ = Adjusted Expenditures Included in Rate Base = \$ 5,841,860 ¹ The Difference between Expenses and Revenues for Fiscal Year: 2020 - 2021 Once Completed, Proceed to the Worksheet entitled "Program-wide Rates"

Worksheet for Program-wide Rates

CTC: Broward County Version 1.4

County: Broward County

1. Complete Total Projected Passenger Miles and ONE-WAY Passenger Trips (GREEN cells) below

Do NOT include trips or miles related to Coordination Contractors!

Do NOT include School Board trips or miles UNLESS......

INCLUDE all ONE-WAY passenger trips and passenger miles related to services you purchased from your transportation operators!

Do NOT include trips or miles for services provided to the general public/private pay UNLESS..

Do NOT include escort activity as passenger trips or passenger miles unless charged the full rate for service!

Do **NOT** include fixed route bus program trips or passenger miles!



Fiscal Year 2022 - 2023

Avg. Passenger Trip Length = 11.3 Miles

Rates If No Revenue Funds Were Identified As Subsidy Funds

Rate Per Passenger Mile = \$ 19.73

Rate Per Passenger Trip = \$ 222.93

Once Completed, Proceed to the Worksheet entitled "Multiple Service Rates"

Vehicle Miles

The miles that a vehicle is scheduled to or actually travels from the time it pulls out from its garage to go into revenue service to the time it pulls in from revenue service.

Vehicle Revenue Miles (VRM)

The miles that vehicles are scheduled to or actually travel while in revenue service. Vehicle revenue miles exclude:

Deadhead

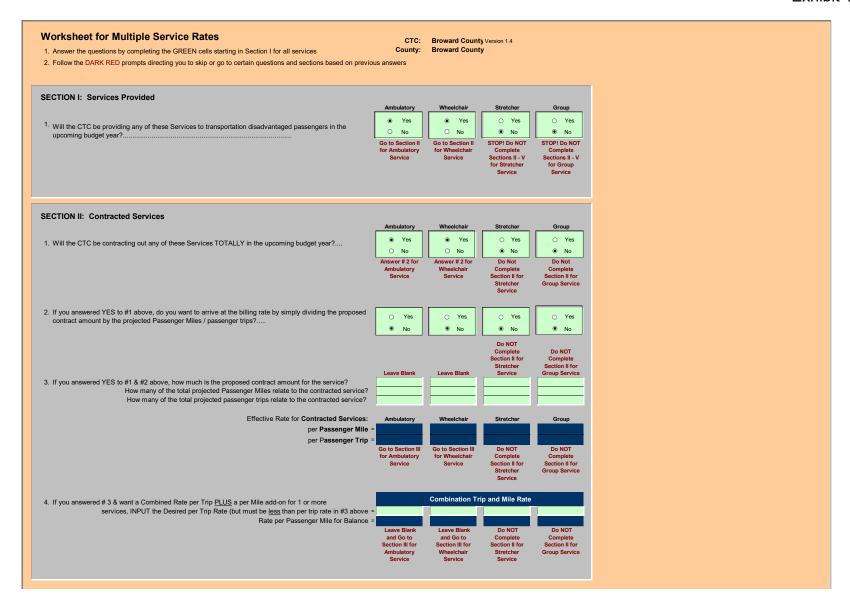
Operator training, and

Vehicle maintenance testing, as well as

School bus and charter services.

Passenger Miles (PM)

The cumulative sum of the distances ridden by each passenger.



CTDRateCalcTemplate 2022-2023 xls: Multiple Service Rates

SECTION II: Escont Service 1. Do you service Compare and excepts a feet? 2. If you introduced Yes to 81, db you and to charge the feet purpowerpility OR. Proposed Trans No. Proposed Trans No. SECTION IV: Group Service Loading 1. Interest Trans No. SECTION IV: Group Service Trans No. SECTION IV: Group Service Loading 1. Interest Trans No. SECTION IV: Group Service Loading 1. Interest Trans No. SECTION IV: Group Service Loading 1. Interest Trans No. SECTION IV: Group Service Loading 1. Interest Trans No. SECTION IV: Group Service Loading 1. Interest Trans No. SECTION IV: Gr	Worksheet for Multiple Service Rates 1. Answer the questions by completing the GREEN cells starting in Section I for all services 2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers	· · · · · · · · · · · · · · · · · · ·		
SECTION IV: Crosp Service Loading 1. If you are except Yes to 81 and consistend 82, the flow much will you charge each excerc? 2. If you are except Yes to 81 and consistend 82, the flow much will you charge each excerc? 3. If you are except Yes to 81 and consistend 82, the flow much will you charge each excerc? 4. How much will you charge each excerc? 5. If you are except Yes to 81 and consistend 82, the flow much will you charge each excerc? 5. If you are except Yes to 81 and consistend 82, the flow much will you have been serviced and much and the flower of the	1. Do you want to charge all escorts a fee? No Skip #2 - 4 and Section IV and			
SECTION IV: Group Service Loading 1. If the message "You Must Complete This Section" appears to the right, what is the projected total number of Group Service Passenger Miles (concerned have black)	per passenger mile?			
SECTION V: Rate Calculations for Multiple Services: 1. Injust Projected Passenger Miles and Passenger Trips for each Service in the CREEN on the Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 1,362,112 = 1,563,121 = 37,063 = 1,563,121 = 37,063 = 1,563,121 = 30,00 = 10,00 = 10,00 per passenger Miles (excluding totally contracted services addressed in Section II) = 1,72,753 = 8,80 = 80,00 = 80,00 = 10,00 per passenger Mile Rate per Passenger Mile Rate per Passenger Mile Rate per Passenger Mile Or Rate per Trip (sex must be less than per trip rate above) = Rate per Passenger Mile or Balance ** Rate per Passenger Mile or Services while for Balance ** Rate per Passenger Mile or Services while for Balance ** Rate per Passenger Mile or Services while for Balance ** Rate per Passenger Mile or Services while for Balance ** Rate per Passenger Mile or Services while for Balance ** Rate per Passenger Mile or Balance ** Rate per Passenger	4. How much will you charge each escort?	Leave Blank		
1. Input Projected Passenger Miles and Passenger Trips for each Service in the GREEN cells and the Nates for each Service will be calculated automatically * Miles and Trips you input must be all as the role and on the "Projected Assessed in the Section II above * Be sure to leave the service BLANK if you answered NO in Section for YES to question #2 in Section III above * Be sure to leave the service BLANK if you answered NO in Section for YES to question #2 in Section III above * Rate per Passenger Mile ** Projected Passenger Miles (excluding totally contracted services addressed in Section III) = 1,952,112 ** Projected Passenger Trips (excluding totally contracted services addressed in Section III) = 172,753 ** Rate per Passenger Trips S263 S4.52 S0.00 S0.00 S0.00 ** Projected Passenger Trips (excluding totally contracted services addressed in Section III) = 172,753 ** Rate per Passenger Trips S2678 S51.04 S0.00 S0.00 S0.00 ** So.00 S0.00 S0.00 S0.00 ** So.00 ** So.00 S0.00 ** So.00 ** So.00 S0.00 ** So.00 ** S	1. If the message "You Must Complete This Section" appears to the right, what is the projected total number of Group Service Passenger Miles? (otherwise leave blank)			
Projected Passenger Trips (excluding totally contracted services addressed in Section II) = 172,753 = 139,930 * 32,823 * * * * * * * * * * * * * * * * * * *	Input Projected Passenger Miles and Passenger Trips for each Service in the GREEN cells and the Rates for each Service Miles and Trips you input must sum to the total for all Services entered on the "Program-wide Rates" Worksheet, MINUS re			
2 If you answered # 1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services, Combination Trip and Mile Rate Ambul Wheel Chair Stretcher Leave Blank Lave Blank La	* Be sure to leave the service BLANK if you answered NO in Section I or YES to question #2 in Section II Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 1,952,112	Ambul Wheel Chair = 1,581,210 + 370,901	Stretcher Gro	
Rates If No Revenue Funds Were Identified As Subsidy Funds Ambul Wheel Chair Stretcher Group \$17.37 \$29.78 \$0.00 \$0.00 \$0.00 per passenger per group Ambul Wheel Chair Stretcher Group \$17.37 \$29.78 \$0.00 \$0.00 \$0.00 per passenger per group Ambul Wheel Chair Stretcher Group \$196.29 \$336.50 \$0.00 \$0.00 \$0.00 per passenger per group	* Be sure to leave the service <u>BLANK</u> if you answered NO in Section I or YES to question #2 in Section II Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 1,952,112 Rate per Passenger Mile = 1,952,112 Projected Passenger Trips (excluding totally contracted services addressed in Section II) = 172,753	Ambul Wheel Chair = 1,581,210 + 370,901 \$2.63 \$4.52 Ambul Wheel Chair = 139,930 + 32,823	Stretcher Leave Blank	\$0.00 per group oup \$0.00
Rate per Passenger Mile = \$17.37 \$29.78 \$0.00 \$0.00 \$0.00 Stretcher Stretcher Group	* Be sure to leave the service BLANK if you answered NO in Section I or YES to question #2 in Section II Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 1,952,112 Rate per Passenger Miles Projected Passenger Trips (excluding totally contracted services addressed in Section II) = 172,753 Rate per Passenger Trips 2 If you answered # 1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services, INPUT the Desired Rate per Trip (but must be less than per trip rate above) and the services is the services of	Ambul Wheel Chair = 1,581,210 + 370,901 \$2.63 \$4.52 Ambul Wheel Chair = 139,930 + 32,823 \$29.78 \$51.04 Combination Combina	Stretcher Leave Blank S0.00 S0.00 Per passenger Stretcher Leave Blank S0.00 S0.00 Per passenger Stretcher Leave Blank S0.00 S0.00 Per passenger Authorized Blank Eave Blank Leave Blank	\$0.00 per group \$0.00 per group \$0.00 per group
Rate per Passenger Trip = \$196.29 \$336.50 \$0.00 \$0.00 per passenger per group	* Be sure to leave the service BLANK if you answered NO in Section I or YES to question #2 in Section II Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 1,952,112 Rate per Passenger Miles Projected Passenger Trips (excluding totally contracted services addressed in Section II) = 172,753 Rate per Passenger Trips 2 If you answered # 1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services, INPUT the Desired Rate per Trip (but must be less than per trip rate above) and the services is the services of	Ambul Wheel Chair = 1,581,210 + 370,901 \$2.63 \$4.52 Ambul Wheel Chair = 139,930 + 32,823 \$29.78 \$51.04 Combination Combina	Stretcher Leave Blank \$0.00 \$0.00 per passenger Stretcher Leave Blank \$0.00 \$0.00 per passenger A control of the control o	\$0.00 per group \$0.00 per group \$0.00 \$0.00 \$0.00
	* Be sure to leave the service BLANK if you answered NO in Section I or YES to question #2 in Section II Projected Passenger Miles (excluding totally contracted services addressed in Section II) = 1,952,112 Rate per Passenger Miles Projected Passenger Trips (excluding totally contracted services addressed in Section II) = 172,753 Rate per Passenger Trips 2 If you answered # 1 above and want a COMBINED Rate per Trip PLUS a per Mile add-on for 1 or more services, INPUT the Desired Rate per Trip (but must be less than per trip rate above) = Rate per Passenger Mile for Balance = Rate per	Ambul Wheel Chair = 1,581,210 + 370,901 \$2.63 \$4.52 Ambul Wheel Chair = 139,930 + 32,823 \$29.78 \$51.04 Combination Combi	Stretcher Leave Blank \$ 0.00 \$ 0.00 \$ 0.00 \$ per passenger Leave Blank \$ 0 \$ 0.00 \$ per passenger Leave Blank \$ 0 \$ 0.00 \$ per passenger Leave Blank \$ 0.00 \$ per passenger Leave Blank \$ 0.00 \$ per passenger Leave Blank Stretcher Leave Blank \$ 0.00 \$ per passenger Leave Blank Stretcher Leave Blank Stretcher Gro Leave Blank Stretcher Gro Stretcher	\$0.00 per group \$0.00 per group \$0.00 \$0.00 per group

CTDRateCalcTemplate_2022-2023.xls: Multiple Service Rates

Worksheet for Multiple Service Rates

CTC: Broward County Version 1.4 County: Broward County

- 1. Answer the questions by completing the GREEN cells starting in Section I for all services
- 2. Follow the DARK RED prompts directing you to skip or go to certain questions and sections based on previous answers

Page 10 of 10 CTDRateCalcTemplate_2022-2023.xls: Multiple Service Rates