

CONTRACT FORM 1884 R4 (Refer to ADMINISTRATIVE MANUAL Section 1.13, for procedures)

Mail to: Preliminary: Office of the Comptroller, Contract Signatures, Room 301 Courthouse Final: Office of the Comptroller, Accounts Payable, Room 301 Courthouse Community Business Development Partners, 8th Floor City Campus		CONTRACT TYPE Professional Service - Operating Professional Service - Capital Purchase of Service Preliminary <input checked="" type="checkbox"/> Final <input type="checkbox"/>	
DEPARTMENT NAME MCDOT - Transit/Paratransit		AGENCY NO. 560	DEPARTMENT (HIGH) ORG 5600

VENDOR INFORMATION

VENDOR NO.	ORDER TYPE	NEW or	AMEND	CONTRACT NO.	
WisDOT		X		TBD	
NAME OF VENDOR		ADDRESS			
State of Wisconsin Dept of Transportation		WisDOT - Transit Section			
		4822 Madison Yards Way, 6th Floor South			
		Madison, WI 53705			
TAX I.D. NO.	EFFECTIVE DATES:		LENGTH OF CONTRACT	AMENDMENT ONLY: DOLLAR	TOTAL CONTRACT
	begin date	end date	(IN MONTHS)	CHANGE	AMOUNT
	01/01/18	12/31/18	12		\$ 1,405,782.00

ACCOUNTING INFORMATION

Year to be Expended	Line No	Fund	Agency	Org Unit	Activity	Function	Object	Job Number	Report Cat	Units	Amount to be Expended/ Amendment
2018		0083	560	5901			8123				\$ 1,405,782.00

PURPOSE OF CONTRACT

This is a contract being entered into between Milwaukee County and WisDOT for the 2018 Section 85.205 Urban Mass Transit Paratransit Assistance Program. Execution of this contract will allow Milwaukee County to realize \$1,405,782 in revenue from the State of Wisconsin. There is no budgetary fiscal impact from approval of this contract as the expenditures and revenues were included in the 2018 Operating Budget for Org. Unit 5600 Transit/Paratransit. This is simply recognition of actual revenue in support of the program, there is no revenue object to encumber because revenue cannot be encumbered (REF: Org 5901 Obj 2299). If an expenditure object is needed for reference purposes, Paratransit Services are primarily purchased through Org 5901 Obj 8123.

Was County Board approval received prior to contract execution or contract amendment or extension?

☐

If YES, give County Board File No. _____

Date Approved _____

☒

If NO, why is County Board approval not required?

MCCGO 56.06(1) and 2018 adopted budget.

Was Contract fully executed prior to work being performed (all signatures received)?

☐ YES ☒ NO

Is Vendor a certified professional service DBE?

☐ YES ☒ NO

Steve Nigh

05/01/18

Prepared By

Date

[Signature]
Signature of County Administrator

5/1/18

Date

Sr. Manager Grants Development, MCDOT

Title

Interim Director, Department of Transportation

Title



Wis. Stats. 85.205
Urban Mass Transit Assistance – Paratransit Supplemental Aid
2018 Program Grant Agreement
County of Milwaukee

Grant Agreement Information and Signature Page

Parties to the Agreement:

This Grant Agreement is made by and between the State of Wisconsin Department of Transportation ("the Department") and the County of Milwaukee ("the Recipient").

Citation: Federal, State Statute, State Admin Code:

The Department agrees to provide financial assistance with program monies made available in accordance with the terms and conditions of this Grant Agreement and the provisions of the Recipient's 2018 Public Transit Assistance Program application for funding assistance, which is made part of this Grant Agreement by reference.

Period of Performance:

January 1, 2018 through December 31, 2018

Award Maximum:

As specified on Attachment A to this agreement, the Department agrees to pay Recipient an amount not to exceed
\$1,405,782

This Grant Agreement shall become effective upon its complete execution by the Recipient and the Department.

RECIPIENT

(Please attach additional signatures on a separate sheet, if required by local regulations)

**** ATTACHED ****

STATE OF WISCONSIN

DEPARTMENT OF TRANSPORTATION
Division of Transportation Investment Management
4822 Madison Yards Way, 6th Floor South
P.O. Box 7913
Madison, WI 53705

Signature: _____

Name: _____

Title: _____

Date: _____

Contact: _____

Signature: _____

Name: Ian Ritz

Title: Chief, Transit Section

Date: _____

Contact: (608) 266-0189



Urban Mass Transit Assistance – Paratransit Supplemental Aid
2018 Program Grant Agreement
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Grant Agreement Outline

Section I: RESPONSIBILITIES OF THE DEPARTMENT

A general statement of the Department's responsibilities to the Recipient.

Section II: RESPONSIBILITIES OF THE RECIPIENT

Statements concerning the Recipient's various responsibilities under this Grant Agreement, including (but not limited to) record-keeping requirements, procurement instructions, and reporting requirements to the Department.

Section III: ACCOUNTING, RECORDS, AND AUDIT

Statements concerning the Recipients various responsibilities under this Grant Agreement, including (but not limited to) financial accounting and record-keeping requirements, record maintenance and reporting requirements, and audit procedures.

Section IV: TERMINATION OF AGREEMENT

Statements concerning various ways this Grant Agreement may be terminated.

Section V: ADDITIONAL DOCUMENTS

A list of documents that are part of this Grant Agreement, including: Incorporated Documents, which are part of this Grant Agreement by reference (but are not physically included in this Grant Agreement); and Attached Documents, which are included with and part of this Grant Agreement.

The Recipient must review and understand each additional document.



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Grant Agreement

Main Provisions

Section I: RESPONSIBILITIES OF THE DEPARTMENT

- A. The Department agrees to remit payment to the Recipient in accordance with appropriate statutes, administrative rules, program grant application, and program materials.

Section II: RESPONSIBILITIES OF THE RECIPIENT

- A. The Recipient is responsible for submitting all program reports, invoices, or other required documents as outlined in the program application in the manner and form as prescribed by the Department. The Department may withhold payments to the Recipient if program reports, invoices, and other required documents are not filed in the manner and form as prescribed by the Department.
- B. The Recipient agrees to pay the total operating deficit of the Transit System as its bills become due. If the Recipient contracts for mass transit service with a privately-owned company, the Recipient shall pay the privately-owned company in accordance with actual monthly operating expenses.
- C. The Recipient shall require the Transit System to provide reduced-fare programs for elderly and handicapped persons during nonpeak hours, and shall ensure compliance with that requirement. Such reduced fares may not exceed one-half of the full adult cash fare applicable during peak hours of operation. This requirement is not applicable if the recipient's mass transit system is a shared-ride taxi system.
- D. The Recipient agrees to carry out the project as outlined in its approved application. If the Recipient determines that changes to approved projects are necessary, written approval from the Department must be received before the Recipient may proceed.
- E. The Recipient may not assume expenditures outside the Period of Performance of this Grant Agreement unless the Recipient has sought prior written approval from the Department and has received that approval from the Department.
- F. Third-party contracts, agreements, or purchase-of-service orders shall be available for inspection by the Department, its officials, employees or designees upon request.



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- G. All materials, equipment, and supplies acquired through this Grant Agreement by the Recipient must comply fully with all safety requirements as set forth in law or rule by the State of Wisconsin, and with all applicable OSHA Standards.
- H. The Recipient shall, if other local public bodies contribute assistance to the operation of the Transit System, allocate the state aids received under this Contract among the contributors in proportion to their contributions as shown in Attachment A.

Section III: ACCOUNTING, RECORDS, AND AUDITS

- A. The Recipient shall have a single, organization-wide financial and compliance audit performed by a qualified independent auditor, if required to do so under federal law and regulations. This audit shall be performed in accordance with federal Office of Management and Budget (OMB) Super Circular 2 CFR Part 200 and state single audit guidelines issued by the Wisconsin Department of Administration. Upon notice of any findings from this audit that involve the use of program funds, the Recipient shall inform the Department.
- B. All costs charged to this Grant Agreement shall be supported by properly executed payrolls, time records, invoices, contracts, or vouchers indicating the purpose of the charges. The Recipient, any Recipients, contractors, subcontractors, and their affiliates shall maintain all documents and evidence pertaining to revenues, expenses, and cost allocations related to this Grant Agreement. The Recipient shall be responsible for insuring the compliance of all Recipients, contractors, subcontractors, and affiliates with this provision.
- C. The accounts and records as required above shall be retained for a period of three years after final payment and shall be available upon request by the Department or its designee for inspection and audit purposes.
- D. The Recipient shall permit the Department or their designee access to inspect all vehicles, facilities, and equipment acquired or used as part of the project; all transportation services rendered by the Recipient by the use of such vehicles, facilities, and equipment; and all relevant project data, documents, and records.

Section IV: TERMINATION OF AGREEMENT



Urban Mass Transit Assistance – Paratransit Supplemental Aid
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- A. The Department may terminate this Grant Agreement at any time that the Department determines that the Recipient, lessee, or any third-party contractor has failed to perform in the manner called for in the Grant Agreement, or has failed to fulfill contract obligations. Failure of the Recipient or any third-party contractor to comply with the terms and conditions of this Grant Agreement shall be considered cause for termination.
- B. The Recipient may terminate this Grant Agreement upon receipt of a written, formal request by the Department at least 30 calendar days prior to the proposed termination date.
- C. In the event that this Grant Agreement is terminated, the Department shall be liable only for payment of Attachment A of this Grant agreement for services rendered before the effective date of termination, not to exceed 60% of the total operating costs.



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Section V: ADDITIONAL DOCUMENTS

A. Attached Documents

The following documents have been *included* with this Grant Agreement and are made part of this Grant Agreement.

1. Program-Specific Requirements
2. Attachment A: Schedule of Payments



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Program-Specific Requirements

Wis. Stats. 85.205

Section I: PROJECT REQUIREMENTS

- A. The Recipient is responsible for providing "comparable transportation service required by the federal Americans with Disabilities Act for individuals with disabilities who are unable to use fixed route transportation services."
- B. The Department agrees to pay the Grant Agreement maximum, as identified on the Information and Signature page.

This Grant Agreement will be amended to reduce state payments if sufficient funds are not made available under sec. 20.395, Wis. Stats.

- C. Payments from The Department to the Recipient shall be made in accordance with Attachment A, subject to the maximum payment listed on the Information and Signature page of this Grant Agreement.
- D. If the Department's audit establishes that payment to the Recipient under the terms of this Grant Agreement has exceeded the allowable maximum as started on the Information and Signature Page, the Recipient shall refund to the Department upon demand a sum sufficient to reduce the payment to comply with the maximum allowed on the Information and Signature Page of this Grant Agreement.
- E. The Department may withhold payments to the Recipient if the Recipient has not filed reports as required, until the report is filed in the manner and form prescribed.
- F. The Recipient shall send to the Department all draft contracts between the Recipient and any third-party vendor receiving funds under this agreement. The Department shall review such draft contracts and determine their conformance with the provisions of this agreement. Upon authorization by the Department, the Recipient may execute such contracts.
- G. If the Recipient contracts for transportation service with a third party, the Recipient shall pay the third party in accordance with actual monthly operating deficit. The Recipient may reduce payments to the third party by an amount equal to any overpayments made to the third party under this Grant Agreement.



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- H. The Recipient agrees that the Transit System will be managed and operated in accordance with the provisions of the Transit Management Plan contained in the Recipient's 2018 application for operating assistance and that the full application is made part of this Grant Agreement by reference. Modifications to the 2018 Transit Management Plan may be proposed by either the Recipient or the Department.
- I. A request by the Recipient to modify the 2018 Transit Management Plan must be submitted in writing to the Department in a manner prescribed by the Department, and must be received by the Department at least 14 calendar days prior to the planned implementation date of the proposed change.
- J. If the Department determines that a proposed modification is a "substantive change" to the 2018 Transit Management Plan, and if the Department approves such a "substantive change," the Department shall prepare an amendment to this Grant Agreement and forward it to the Recipient for execution. The Recipient shall not implement a proposed "substantive change" to the 2018 Transit Management Plan until an appropriate amendment to this Grant Agreement has been executed by both the Recipient and the Department.
- K. If the Department determines that a proposed modification to the 2018 Transit Management Plan is a "non-substantive change," the Department shall authorize the Recipient to implement the change, and a formal amendment to this Grant Agreement shall not be required.
- L. A request by the Department to modify the 2018 Transit Management Plan must be submitted in writing to the Recipient at least 28 calendar days prior to the planned implementation date of the proposed change. Within 21 calendar days of receipt of such a request, the Recipient shall respond to the Department's request. If the Recipient agrees to the Department's request, then this Grant Agreement will be modified accordingly and the change implemented.

M. WisDOT Contact:

Title: Public Transit Program Manager
Address: Attn: Ben Vondra
Department of Transportation
Division of Transportation Investment Management
4822 Madison Yards Way, 6th Floor South
P.O. Box 7913
Madison, WI 53705



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Contact: (608) 266-0560 | benjamin.vondra@dot.wi.gov



Urban Mass Transit Assistance – Paratransit Supplemental Aid
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County of Milwaukee

Attachment A: Schedule of Payments

Wis. Stats. 85.205 – Urban Mass Transit Assistance – Paratransit
Supplemental Aid

A. Schedule of Payments:

Period	Scheduled Amount	Estimated Payment Date
Calendar Year 2018	\$1,405,782	June 15, 2018



Urban Mass Transit Assistance – Paratransit Supplemental Aid
2018 Program Grant Agreement
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COUNTY OF MILWAUKEE

Approved as to Execution

DocuSigned by:
Paul D. Kuglitsch 5/11/2018
57104007A18AA23...
Corporation Counsel Date

Pursuant to 59.255(2)(3) Wisc. Statutes

DocuSigned by:
[Signature] 5/14/2018
F3FF9C00D50848B...
Comptroller Date

DocuSigned by:
[Signature] 5/14/2018
08ED03A719964F6...
Interim Director, DOT Date

Pursuant to 59.17(2)(b)(4) Wisc. Statutes

DocuSigned by:
[Signature] 5/17/2018
834C97423365428...
County Executive Date

Pursuant to 59.42(2)(b)(5) Wisc. Statutes

Corporation Counsel Date

Certificate Of Completion

Envelope Id: 25539602172440CEA6F00C86F8BA5D14

Subject: Please DocuSign: 2018 Urban Mass Transit 85.205 Paratransit Grant Agreement.pdf

Source Envelope:

Document Pages: 12

Certificate Pages: 5

AutoNav: Enabled

EnvelopeId Stamping: Enabled

Time Zone: (UTC-06:00) Central Time (US & Canada)

Status: Sent

Envelope Originator:

Judith Pingel

633 W. Wisconsin Ave.

Suite 901

Milwaukee, WI 53203

judith.pingel@milwaukeecountywi.gov

IP Address: 204.194.251.5

Record Tracking

Status: Original

5/8/2018

Holder: Judith Pingel

judith.pingel@milwaukeecountywi.gov

Location: DocuSign

Signer Events

Paul D. Kuglitsch

corpcounsilsignature@milwaukeecountywi.gov

Corporation Counsel

Milwaukee County

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Scott Manske - Comptroller

comptrollersignature@milwaukeecountywi.gov

Comptroller

Milwaukee County

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Julie Esch, Interim Director, MCDOT

julie.esch@milwaukeecountywi.gov

Director of Operations - DAS

Milwaukee County

Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Accepted: 5/2/2014
ID: 29bacf9d-55cd-44b5-929b-6daf951fc6ac

Chris Abele, County Executive

cexsignature@milwaukeecountywi.gov

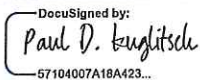
County Executive

Milwaukee County


Security Level: Email, Account Authentication
(None)

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

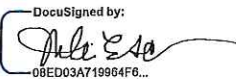
Signature

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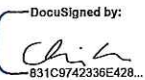
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Timestamp

Sent: 5/8/2018

Resent: 5/11/2018

Resent: 5/11/2018

Resent: 5/11/2018

Viewed: 5/8/2018

Signed: 5/11/2018

Sent: 5/11/2018

Viewed: 5/14/2018

Signed: 5/14/2018

Sent: 5/14/2018

Viewed: 5/14/2018

Signed: 5/14/2018

Sent: 5/14/2018

Viewed: 5/17/2018

Signed: 5/17/2018

Signer Events	Signature	Timestamp
Corporation Counsel corpcounselsignature@milwcnty.com Deputy Corporation Counsel Milwaukee County Security Level: Email, Account Authentication (None) Electronic Record and Signature Disclosure: Not Offered via DocuSign		Sent: 5/17/2018
In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/17/2018
Payment Events	Status	Timestamps
Electronic Record and Signature Disclosure		

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Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of your DocuSign account. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use your DocuSign Express user account to receive required notices and consents electronically from us or to sign electronically documents from us.

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through your DocuSign user account all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Wisconsin Milwaukee County:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: plee@milwcnty.com

To advise Wisconsin Milwaukee County of your new e-mail address

To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at plee@milwcnty.com and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address..

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To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to plee@milwcnty.com and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with Wisconsin Milwaukee County

To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your DocuSign account, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an e-mail to plee@milwcnty.com and in the body of such request you must state your e-mail, full name, IS Postal Address, telephone number, and account number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

Operating Systems:	Windows2000? or WindowsXP?
Browsers (for SENDERS):	Internet Explorer 6.0? or above
Browsers (for SIGNERS):	Internet Explorer 6.0?, Mozilla FireFox 1.0, NetScape 7.2 (or above)
Email:	Access to a valid email account
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	<ul style="list-style-type: none">• Allow per session cookies• Users accessing the internet behind a Proxy Server must enable HTTP

1.1 settings via proxy connection

** These minimum requirements are subject to change. If these requirements change, we will provide you with an email message at the email address we have on file for you at that time providing you with the revised hardware and software requirements, at which time you will have the right to withdraw your consent.

Acknowledging your access and consent to receive materials electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.

By checking the 'I Agree' box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify Wisconsin Milwaukee County as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by Wisconsin Milwaukee County during the course of my relationship with you.

