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| **EMSD Annual Report** | | | | | | | | |
| |  | | --- | | Reporting Period: *ex. Year 1* | |  | | | |  | | --- | | Agency: *ex. Orange County Transportation Authority (OCTA)* | |  | | | | | | | |  | | --- | | Project Type: *ex. Capital* | |  | |
| |  | | --- | | Project Manager, Title: *ex. First Name Last Name, CEO* | |  | | | | | | | |  | | --- | | Phone Number: *ex. (888) 888-8888* | |  | | | |
| |  | | --- | | Project Location/Service Area: *ex. South Orange County, Yorba Linda and Brea, all of Orange County, etc…* | |  | | | | | | | | | |
| |  | | --- | | Inception Date: *ex. 01/01/24 \_* | |  | | | | | |  | | --- | | EMSD Grant Amount Awarded: *ex. $500,000 \_* | |  | | | | | |
| |  | | --- | | Project Scope: *ex. Two Minivans and one Large Bus, Three ZEBs, One Wheelchair Lift and Five Ramps, etc…* | | |  |  |  | | --- | --- | --- | | Contract Agreement Number | C – |  |   - | | | | | | | | | |
| **Drug and Alcohol Programs and Related Reporting** | | | | | | | | |
| **Important – Agency must comply with (Check boxes):** | | | | | | | | |
| *Drug-Free Workplace Act of 1988* | | | *California Drug-Free Workplace Act of 1990* | | *U.S. Department of Transportation drug testing regulations* | | | |
| **Drug and Alcohol Program Compliance (Attach applicable documentation)** | | | | | | | | |
| |  | | --- | | Description of your Agency’s Substance Abuse Program and applicable ongoing revisions: | |  | | | | | | | | | |
| |  | | --- | | Description of your Agency’s Drug and Alcohol Program and applicable ongoing revisions: | |  | | | | | | | | | |
| **Required Driver Training (For Vehicle Requests Only)** | | | | | | | | |
| **Driver Training Program Compliance (Attach applicable documentation)** | | | | | | | | |
| |  | | --- | | Description of your Agency’s Driver Training Program for Agency Operators or Contracted Vendor’s Operators: | |  | | | | | | | | | |
| **Training Compliance (Attach applicable CTAA or other industry acceptable driver-related training documentation – add to table as needed)** | | | | | | | | |
| |  |  |  | | --- | --- | --- | | CTAA or other industry acceptable driver-related training (fill in below) courses | | | | **Individual:** | **Course(s):** | **Date of Completion/Proof of Intent to Complete:** | |  |  |  | |  |  |  | | | | | | | | | |
| **Required Maintenance (For Vehicle and Equipment Requests Only)** | | | | | | | | |
| **Vehicle and Equipment Maintenance Compliance (Attach applicable documentation)** | | | | | | | | |
| |  | | --- | | Description of your Agency’s Vehicle and Equipment Maintenance Performance: | |  | | | | | | | | | |
| **Important – Agency must comply with (Check boxes):** | | | | | | | | |
| *Daily pre-trip checks* | *Scheduled preventative maintenance that meets or exceeds the vehicle manufacturer’s standards* | | | *Maintaining maintenance records for each vehicle for five (5) years* | | | *If required, cooperation in annual motor coach carrier terminal inspections conducted by the CHP* | |
| **Useful Life Compliance Commitment Agreement** | | | | | | | | |
| If capital purchases (vehicles, equipment, software, etc.) are purchased with EMSD funds, it is expected that these items will be used for their entire useful life and/or through termination of the service (see timely use of funds section of the guidelines). If termination occurs prior to the completion of the capital item’s useful life and/or grant term, the applicant shall repay OCTA the same percentage of the sale price [or estimated value of the asset(s)] based on straight line depreciation of the asset(s) consistent with the EMSD percentage of initial purchase. Useful life shall be documented in project agreements. | | | | | | | | |
| **Agency Compliance Commitment and Inspection/Periodic Review Agreement** | | | | | | | | |
| It is important to note your agency acknowledges its commitment to transparency and compliance with all of the aforementioned regulations in this reporting form and the 2024 EMSD Guideline. By submitting this report, your agency agrees to facilitate inspections by OCTA, State and Federal regulatory bodies, or their agents. Your agency will provide details of periodic reviews conducted by OCTA or their designated representatives, along with a summary of review outcomes and actions taken to rectify deficiencies. Failure to comply with regulations, including the Drug-Free Workplace Act of 1988 and related requirements, may result in serious consequences such as non-payment or termination of agreements with OCTA. Your agency recognizes that adherence to all related drug and alcohol regulations is crucial for maintaining project integrity and ensuring client and stakeholder safety. | | | | | | | | |