Partnership Program Application

A) Applicant Information

Project Sponsor Name	
Project Sponsor Type	◯ Local Government ◯ TMA/TMO
Additional Partners	
Subregional Service Council	◉ Boulder County ◯ Northeast ◯ Northwest ◯ Southeast ◯ Southwest
Contact Person	
Email	
Phone Number	

B) Project Information

Project Title
Briefly describe the project location. *Please include a map and GIS layer (as a .zip file) as an attachment with your submission. If you need assistance creating a GIS shapefile for your service area, please reach out to Cory Schmitt (cory.schmitt@rtd-denver.com) no later than April 30.*
Project Type (select one)
◯ Fixed-route transit service – service operating on a specific route ◯ On-demand transit service – demand-responsive service operating in a specific area ◉ Other mobility service – service that does not fall into the above two categories ◯ Other – project that does not provide service, but enhances mobility through other means

Project Description (a few paragraphs describing your project in more detail)

For funding requests for mobility services, please answer the following four questions:
1. What are the proposed days and hours of operation?
2. Have you had any conversations with service providers? *Note that the service provider will need to be selected competitively.*
3. Will you charge the customer for the service?
4. What is the area of the proposed service area (in square miles)?

Please provide a project implementation timeline, either below or attached to your application, including launch date and important milestones. *Assume a minimum of four months to complete agreements and procure a service provider (if applicable). RTD will announce awardees in August.*
RTD hopes to fund projects that are "shovel-ready." Please describe other funding sources, amounts, your experience in managing these types of projects, and note potential risks to project implementation. If your project includes funding from outside sources, include a letter of support or documentation of the funding source.
Does your organization have a procurement policy and/or standards? If yes, please provide additional information, such as a link to the procurement policy, attach the policy to your submission, or describe your organization's procurement policy. RTD will provide procurement support for organizations that do not have a procurement policy and/or standards in place.

C) Project Data

Using DRCOG's Data Tool, please provide the following information about populations served. For fixed-route proposals, include populations within a ¼ mile buffer. For on-demand proposals, include populations within the service area boundaries.	
Total population	
Total households	
People of color	
People with low-income	
People with limited English proficiency	
People 60 and over	
Youth Under 18	
People with a disability	
Households without a vehicle	
Housing cost-burdened households	

D) Project Budget

Calendar Year	**RTD Funding**	**Local Funding**	**Total**
2026			
2027			
2028			
		Total Project Cost	

Describe sources of funding, including any contingencies (necessary budget approvals, etc). *Local match must be a cash match; in-kind is not eligible as match. If approved, projects will be reimbursed up to 80% of project costs by RTD. Reimbursements will be made either monthly or quarterly.*
Operating cost assumptions (e.g. cost per hour)
Is your project/funding request scalable? *If so, please indicate the least amount of funding you could accept, and how the project scope would be reduced. If not, please explain justification for non-scalable projects.*
Are you proposing to purchase vehicles and how will you procure?
Proposed vehicle cost assumptions, if applicable:
Where will vehicles be serviced and maintained? *Note that RTD is unable to service and maintain other organization's vehicles.*

Please attach a line-item project budget. *Note that funding for the construction of infrastructure is ineligible.*

E) Demonstration of Benefits and Needs

Why is this project needed?
Who benefits from the project?

Does the project serve equity populations? Please describe.
Does the project fill a gap in existing transit service? Please describe.
How does the project align with RTD's Strategic Plan? Specifically, how will it impact two if RTD's strategic priorities - Community Value and Customer Excellence?

How has the project (or similar project) performed in the past? Has it been successful and/or met performance metrics? If new, n/a.

Please use the space below to provide any additional information about your project.

Application Submission Checklist

Please submit all application material to RTD via the application portal by May 14, 2025, at 5pm MT. When submitting, please begin all file names with your organization name (e.g. RTD_application.pdf).

- ☐ Application form (required)
- ☐ Line-item project budget (required)
- ☐ Map of project location (required)
- ☐ GIS layer of project location (required, submit in a .zip file)
- ☐ Project schedule (required, either in the application on page 3 or as an attachment)
- ☐ Procurement policy (required, either in the application on page 3 or as an attachment)