



49 U.S.C. Section 5304

Statewide Transportation Planning

for a State Transportation Agency

FTA 5305(e) Subrecipient Application

Deadline to Apply: May 29, 2026 by 12:00pm HST

NOTE: Please complete all sections of this application. Application packages with incomplete and/or missing information will not be considered.

Agency Name:

UEI No:

Physical Address:

City:

County:

Island:

Zip Code:

Contact Person:

(Project Manager)

Phone:

Fax:

E-mail Address:

Check Area Project Application to Serve: (select all that apply)

Urbanized Area

☐ Oahu

Rural Area

☐ Island of Hawaii

☐ Island of Molokai

☐ Island of Lanai

☐ Island of Kauai

☐ Island of Maui

Small Urbanized Area

☐ Kailua – Kaneohe

☐ Kahului

TOTAL GRANT AMOUNT REQUESTED

Federal Share (80% Grant Fund)\$ _____

Local Share (20% Applicant Match)\$ _____

Estimated Total Cost of Project(s).....\$ _____

Authorized representative certifying the information contained in this application is true and accurate:

Printed Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Phone: _____

Applications must be transmitted to the attention of the following before the deadline:

Honolulu Department of Transportation

Statewide Transportation Planning Office

ATTN: 5304 Program Manager

200 Rodgers Boulevard

Honolulu, Hawaii 96819

Fax: (808) 831-7995 or Email: dotstp@hawaii.gov

Please also include an electronic copy of your complete application package on a flash drive or via email to 5304 program manager.

NOTE: While 5304 applications will be accepted until 7/1/24, it is highly recommended to apply within 90 days of fund expenditures.

1. General Information – Applicant’s Information

Name of Applicant Organization:

Address:

City:

State:

Zip Code:

Authorizing Representative and Title:

Name:

Title:

Telephone:

Fax:

Email:

Website:

Type of Business: (choose one)

☐

Non-Profit Organization

☐

Government Entity or State Department of Transportation (DOT)

☐

Transportation Provider (Private or Public)

Previous Section 5304 Funding: (check one)

☐

Applicant Organization has received Section 5304 funds in the past. If yes, provide the last Fiscal year the Section 5304 Project was awarded.

☐

Applicant Organization has never received Section 5304 funding.

Service Area: Choose all options that apply to best describes the population size of the total service area.

☐

Population less than 50,000 - Non-Urbanized Area

☐

Population between 50,000 - 199,999 - Urbanized Area

☐

Population equal to or greater than 200,000 - Urbanize Area

2a. Applicant Organizational Structure

Describe the overall structure of your organization. If available, provide an Organization Chart.

Number of Employees: (The number and type of your employees.)

____ Full-Time

____ Part-Time

____ Volunteer

____ Contract

____ Other (describe):

____ Other (describe):

Service Years: (Identify the number of years your organization has been in business and service years.)

____ year(s) Applicant Organization has been in business

____ year(s) transportation services were provided

____ year(s) transportation services were provided for the elderly and/or disabled

2b. Applicant Organization's Transportation Management Information

Describe the organization's experience in providing services for your agency's expertise:

Agency Human Resources: Describe the employee position(s) your agency will utilize for operations and management, roles and responsibilities, and number of hours performed by each per week, as it relates to the duties deemed necessary to fulfill the tasks for this application.

3a. Funding Summary

- 1) Identify Type of FTA Funds to be used:
- 2) Identify Federal Fiscal Year (FFY) of funding to be used:
- 3) Identify Source of Local Funds and provide documentation:
- 4) Provide an explanation of project(s) and benefit(s):
- 5) Provide Period of Performance "POP" (The dates activities occur for each work element):
- 6) Does this Application include funds for "Research and Development Activities?":
- 7) Will "Indirect Costs" be applied to this Application? If Yes, provide proof of Federal Approval:

3b. Matching Share Assurance Summary

The agency commits to provide the local matching share for these grants in accordance with the following schedule:

Agency Name	FTA Federal Share (80%)	Local Match (20%)	Cash or In-Kind Services (\$)	Total Amount (All funding sources)

Identify the source of your local match, cash or in-kind services and provide documentation:

3c. Fiscal Year Detailed Breakdown of Funds

To the best of your knowledge, provide the fiscal year breakdown of funds to be utilized:

FTA 5304 Funds	FFY2023	FFY2024	FFY2025	FFY2026
Current Balance				
Used this Grant				
Remaining Balance				

3d. Statewide Transportation Improvement Program (STIP)

- 1) Provide the STIP line item associated with this FTA 5304 grant application:
- 2) Describe the approval and/or amendment process for your STIP:
- 3) How often is your STIP prepared (i.e. number of years):
- 4) Provide a copy of your most recently approved STIP. (attach a file)
- 5) Provide the approval date of your latest STIP (month/day/year):

Provide the activity line items utilized in this grant:

Scope Code	Activity Line Item	STIP Line Item	Activity Line Item Description
<input type="checkbox"/> 441-00	44.27.00	S28	State Planning & Research
<input type="checkbox"/> Other_____			
<input type="checkbox"/> Other_____			
<input type="checkbox"/> Other_____			

3e. Sources of Funding Matrix for Project Elements

Provide matrix which includes the activity line items identified in 3d., to demonstrate the distribution of funding sources utilized for this grant.

[illegible]

3f. Project Benefits by Project Type

Applicants must enter text noting the resulting project benefit(s) in the Section 5 of this application.

Examples of Project Benefits:

- **Operating Assistance**
 - New transportation options
 - Increase passenger capacity
 - Increase service frequency
 - Maintain reliable transit service
 - Improve air quality
- **Preventive Maintenance**
 - Sustain lowered fleet operating costs
 - Sustain reliable transit services
 - Sustain lowered equipment operating costs
 - Sustain lower facility operating costs
 - Reduce unscheduled repair
 - Meet or exceed useful life
 - Meet or exceed asset management plan
 - Sustain vehicle safety and security
 - Sustain facility safety and security
- **Capital Projects/Activities**
 - Increase passenger capacity
 - Increase service reliability
 - Increase operational safety
 - Increase transit system information
 - Improve ADA accessibility
 - Improve bike/pedestrian access
 - Improve system efficiency
 - Improve system reliability
- **Planning Projects/Activities**
 - Improve rider connections through service coordination
 - Identify service gaps or needs for service planning
 - Transit service efficiency identification
 - Identification of transportation needs
 - Identification of transit service priorities
 - Adopted long term transportation plan
 - Adopted short term transportation plan or study
 - Understand results from completed research or pilot projects
 - Finalized training or technical assistance
- **Transit Oriented Development**
 - Promote sustainable communities

Identify tasks associated with any other STIP line item (i.e. other, not listed above):

Written explanation of costs incurred or intended to be incurred for other STIP line item (i.e. paragraph):

List of activities to be performed (not listed elsewhere):

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

4. Project Milestones – For each ALI, list the beginning and end dates for all activities to be performed.

Fill-in the table below in order to demonstrate the timeline or timeframe for all activities occurring within each activity line item (ALI):

Project (1): _____

Activity to be Performed	Start Date	End Date

Project (2): _____

Activity to be Performed	Start Date	End Date

Project (3): _____

Activity to be Performed	Start Date	End Date

Note: Add additional line items to show all activities within a separate file, as needed.

5. Executive Summary – Project Purpose and Public Benefit (describe for each activity line item).

Purpose: Describe the overall reason for the project. Indicate how it is essential to services provided by your organization.

Activities to be performed: Describe the activities to be performed for each line item.

Expected Outcomes: Describe the expected outcomes for the activities to be performed.

Expected Benefits: Describe the expected benefits for the activities to be performed.

Intended Beneficiaries: Describe the benefits to be gained by the program, applicant organization, public, community, government, economy, etc.

Describe the deficiencies and shortcomings to the organization's existing and future services, or other negative outcomes that may arise should the project not be awarded.

6. Financial Information

Financial Statement - Provide and attach for the current or most recent period and two previous years. These statements will be used to review financial stability and sustainability.

Fluctuations in Revenue and Income - If fluctuations in estimated revenue or expenses vary or are expected to vary over the next two years, provide the reasons for the anticipated or actual fluctuations and how such fluctuations will affect the organization's financial stability and sustainability.

7. Legal Information

Legal Resource (check one)

☐

The Applicant Organization has legal counsel

☐

The Applicant Organization does not have legal counsel

8. Project Environmental Findings

For each activity line item provide the following: (see applicable exemption list)

Class Level Description:

Categorical Exclusion Description:

9. Third Party Contractor Disclosure

For each activity line item, indicate whether or not a third-party contractor will be used:

1) _____

2) _____

3) _____

10. Certifying Authority

I am duly authorized to make the following certification on behalf of the Applicant Organization and based on my position, knowledge and experience with the Applicant Organization:

- 1) the information contained in the Application, including attachments, is true and correct;
- 2) the Applicant has the requisite fiscal, managerial, and legal capabilities to carry out the operations and maintenance of the Project in accordance with 40 U.S.C. Section 5304; and
- 3) the Applicant shall adhere to the federal, state and local requirements related to the Project.

Signature Title

Executed on _____ at _____
Date City/County and State

Pre-Award Authority Request



STATE OF HAWAII
DEPARTMENT OF TRANSPORTATION
STATEWIDE TRANSPORTATION PLANNING OFFICE
200 RODGERS BOULEVARD
HONOLULU, HAWAII 96819-1812

Pre-Award Authority Request

Pursuant to Federal Register Notice Vol. 86, No. 175 dated September 14, 2021:

FTA will issue specific guidance to recipients regarding pre-award authority at the time of selection. FTA does not provide pre-award authority for competitive funds until projects are selected and even then, there are Federal requirements that must be met before costs are incurred. Funds under this Notice of Funding Opportunity (NOFO) cannot be used to reimburse applicants for otherwise eligible expenses incurred prior to FTA award of a Grant Agreement until FTA has issued pre-award authority for selected projects, or unless FTA has issued a "Letter of No Prejudice" for the project before the expenses are incurred. For more information about FTA's policy on pre-award authority.

Notice to all grant applicants:

Consistent with FTA policy on pre-award authority, a project must have met all applicable Federal requirements prior to incurring expenses. The recipient assumes all risk and is responsible for ensuring that all applicable federal program and grant requirements are met to retain eligibility. Recipients are also advised that incurring certain project costs prior to NEPA completion may render the entire project ineligible for Federal assistance. Therefore, FTA strongly encourages all recipients to consult with the appropriate FTA regional office regarding the anticipated environmental review requirements and the applicability of Federal conditions and requirements before incurring expenses under pre-award authority with the hope of future reimbursement.

To that effect, **attach** supporting written documentation which addresses all of the following requirements:

- (1) The pre-award time period.
- (2) The line-item budget for the time period.
- (3) The costs incurred to date (or anticipated to be incurred) prior to award.
- (4) A narrative description of the tasks already completed (or anticipated to be completed).
- (5) A compelling justification explaining why it was (or is) necessary to start earlier than the anticipated award date.

Applicant Name: _____

Authorized Signature: _____ Date: _____

Printed Name and Title: _____

Pre-Award Authority Administrative Process



STATE OF HAWAII
DEPARTMENT OF TRANSPORTATION
STATEWIDE TRANSPORTATION PLANNING OFFICE
200 RODGERS BOULEVARD
HONOLULU, HAWAII 96819-1812

Pre-Award Authority Administrative Process

Pre-award costs may only be considered where costs are incurred prior to the award, but after program authority has been enacted and the appropriation becomes available. If pre-award costs are incurred before the funding becomes available, but after program authority exists, pre-award costs may be awarded on a case-by-case basis, depending on statutory language, legislative history, or other particular factors, such as applicable program regulations.

Pre-award costs incurred before both program authority and funding are available may generally not be funded retroactively. Questions about availability of appropriations for pre-award costs should be directed to the Program Manager for your Federal Transit Administration (FTA) grant recipient authorized through the State of Hawaii Statewide Transportation Planning Office (STPO) with the Hawaii Department of Transportation (HDOT).

Approval of pre-award costs should be kept to a minimum. Generally, the period for such costs should not exceed ninety (90) days prior to the start of the project period.

When a request for approval of pre-award costs is required, an applicant should provide a written request to the HDOT STPO Program Manager at the earliest possible time.

The request should contain the following information:

- Pre-award time period,
- Line-item budget for the time period,
- Costs incurred to date or anticipated to be incurred prior to award,
- Narrative description of the tasks already completed or anticipated to be completed, and;
- A compelling justification explaining why it was necessary to start earlier than the anticipated award date.

The Program Manager will review the request and provide a recommendation to FTA for approval. FTA will review the recommendation and the applicant's request. If the pre-award request is disapproved, FTA will notify the recipient (HDOT) in writing. If the request is approved, notice will be incorporated into the grant award document.

***Note:** See 15 CFR § 14.25(e) for prior written approval requirements for pre-award costs, including the requirements for research awards.*