

**To: ODOT Rail & Public Transit Division – Capital Program Manager**  
**Regarding: Vehicle Grant Agreement # \_\_\_\_\_**

### **Certification of Equivalent Service**

\_\_\_\_\_ (name of agency) certifies that its demand responsive service offered to individuals with disabilities (as defined in 49 CFR 37.3), including individuals who use wheelchairs, is equivalent to the level and quality of service offered to individuals without disabilities. Such service, when viewed in its entirety, is provided in the most integrated setting feasible and is equivalent with respect to:

- 1) Response time;
- 2) Fares;
- 3) Geographic service area;
- 4) Hours and days of service;
- 5) Restrictions or priorities based on trip purpose;
- 6) Availability of information and reservation capability; and,
- 7) Constraints on capacity or service availability.

**Public Demand Responsive Agencies:** In accordance with 49 CFR 37.77, public funded entities operating demand responsive systems for the general public which receive financial assistance under section 18 of the Federal Transit Act must file this certification with the appropriate state program office before procuring any inaccessible vehicle. Public entities receiving FTA funds under any other section of the FTA Act must file the certification with the appropriate FTA regional office. **This certification is valid for no longer than one year from its date of filing.**

**All Other Grant Recipients:** ODOT Rail and Public Transit Division requires all participants to certify equivalent service when requesting to purchase non-ADA accessible vehicles. By signing this certification, the above-named agency is certifying that it has a mechanism in place to provide rides to individuals with disabilities. The ride must be provided in a manner equivalent to the service provided by the above-named agency to individuals without disabilities.

**All Agencies:** Attach a description of how you provide rides to individuals with disabilities.

\_\_\_\_\_  
(PRINTED name of authorized official)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

Please return this form to:

ODOT Rail & Public Transit Division  
Attn: Capital Program Manager  
555 - 13th Street NE Suite 3  
Salem, OR 97301