

RESOLUTION # \_\_\_\_\_

A RESOLUTION OF THE BOARD OF DIRECTORS OF THE  
\_\_\_\_\_  
AUTHORIZING THE EXECUTION OF THE CERTIFICATION  
TO SERVE AS THE LOCAL ACCESS FUND ADMINISTRATOR (LAFA)  
FOR THE ACCESS FOR ALL PROGRAM FOR THE COUNTY OF

WHEREAS, the \_\_\_\_\_ is an eligible \_\_\_\_\_ and may receive state funding from the Access For All Program to administer a funding program for local Access Providers for on-demand wheelchair accessible vehicle (WAV) transportation projects; and

WHEREAS, the statutes related to state-funded transit projects require a local or regional administering agency to abide by various regulations; and

WHEREAS, Senate Bill 1376 (2018) designated the California Public Utilities Commission (Commission) as the administrative agency for the Access For All Program; and

WHEREAS, the Commission has developed the Access for All Program Overview & Requirements for Access Fund Administrators (AFAs), for the purpose of selecting Local AFAs (LAFAs), and administering and distributing Access Funds to eligible local Access Providers of on-demand WAV transportation; and

WHEREAS, the \_\_\_\_\_ authorizes \_\_\_\_\_, to execute required documents and any amendments thereto.

WHEREAS, the \_\_\_\_\_ wishes to serve as the LAFA for the county of \_\_\_\_\_

**NOW, THEREFORE, BE IT RESOLVED** by the Board of Directors of the \_\_\_\_\_ that as the Access Fund recipient agrees to comply with all conditions and requirements set forth in the Certification document and applicable statutes, regulations, and Program Requirements for the Access for All Program.

**NOW, THEREFORE, BE IT FURTHER RESOLVED** that \_\_\_\_\_ be authorized to execute all required documents of the Program and any amendments thereto with the Commission.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of Directors of the \_\_\_\_\_ that it hereby authorizes the \_\_\_\_\_ to serve as the LAFA of the Access for All Program for the county(ies) of \_\_\_\_\_

**PASSED AND ADOPTED BY** the governing board of the \_\_\_\_\_ on this \_\_\_ day of \_\_\_\_\_ 20\_.

\_\_\_\_\_, Board Chair  
(Print Name)

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

Attest:

\_\_\_\_\_, Director  
(Print Name)

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