

**FY 2025 VEHICLE ACCESSIBILITY PLAN UPDATE**

**NOTICE: The Local Advisory Council(LAC) must review and be given the opportunity to comment on this Vehicle Accessibility Plan (VAP). Please attach the signed minutes of the LAC meeting at which this VAP was discussed and approved.**

**Name Of Applicant (legal organization name)**

Roscommon County Transportation Authority

**1. Total D-R Fleet anticipated for application year (including locally funded vehicles)**

31

**2.Total Anticipated D-R Fleet Accessible or lift-equipped (including locally funded vehicles)**

31

**2a. If your agency is operating inaccessible revenue vehicles, is equivalent service being offered to riders?**

Yes

**3. Has the agency made any changes in vehicle inventory described in No. 1 and No. 2 above since the last accessibility plan update was submitted?**

**(If "yes" explain changes and reasons for those changes below.)**

Yes

**Explain changes and reasons for those changes**

Added an additional van to service the community.

**4. Has the agency made any changes in the following since the last accessibility plan update was submitted?**

**A. Fare structure** No

**B. Service area information** No

**C. Service availability information** No

**D. Service Hours/days of operation** No

**E. Local advisory council membership** Yes

Deb Looney replaced Mary Fry as representative for Commission on Aging

**5. Has the agency made any other changes in its vehicle accessibility plan since last submission of an accessibility plan or annual update?**

No

**6. How frequently does the agency's LAC meet?**

Quarterly

**7. LAC MEMBER LIST (List below the members of your agency LAC. Attach a separate page of additional names if necessary.)**

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**NOTE: MDOT Administrative Rule 202 requires that the applicant agency shall establish a LAC composed of a minimum of three members. No LAC member shall be a staff or board member of the applicant agency. The applicant agency shall ensure all of the following:**

**1) 50% of the LAC membership represents persons who are 65 years of age or older and persons who have disabilities within the service area;**

**2) the LAC membership includes people who have diverse disabilities and the elderly who are users of public transportation; and**

**3) the applicant agency has approved at least one member, or 12% of the membership, jointly with the area agency on aging.**

**Does the list of members reflect the membership in the minutes?**

Yes

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**1. CHAIRPERSON'S NAME** Deb Looney

**Affiliation (Name of organization, if any)** Roscommon County Commission on Aging

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**This member represents**

Persons 65 years and older

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**This member is**

Jointly appointed by an area agency on aging  
Age 65 or older

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**2. NAME** David Martin

**Affiliation (Name of organization, if any)**

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**This member represents**

Persons with Disabilities

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**This member is**

Age 65 or older  
A user of public transportation  
A Person with Disabilities

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**3. NAME** Mary Frederick

**Affiliation (Name of organization, if any)**

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**This member represents**

Persons with Disabilities

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**This member is**

A user of public transportation  
A Person with Disabilities

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**4. NAME** Brenda Lownsberry

**Affiliation (Name of organization, if any)**

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**This member represents**

Persons 65 years and older

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**This member is**

Age 65 or older  
A user of public transportation

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