If you require assistance accessing this information or require it in an alternative format, contact the Michigan Department of Transportation's (MDOT) Americans with Disabilities Act (ADA) coordinator at www.Michigan.gov/MDOT-ADA.

Michigan Department
of Transportation
3078 (12/2025)

FY 2027 RESOLUTION OF INTENT

The approved resolution of intent to apply for state formula operating assistance for fiscal year 2027 under Act 51 of the Public Acts of 1951, as amended.
INSTRUCTIONS: Complete and return it to the Michigan Department of Transportation.

WHEREAS, pursuant to Act 51 of the Public Acts of 1951, as amended (Act 51), it is necessary for the Beaver Island Transportation Authority (Name of Applicant (Legal organization name)), (hereby known as THE APPLICANT) established under Act 196 to provide a local transportation program for the state fiscal year of 2027 and, therefore, apply for state financial assistance under provisions of Act 51; and

WHEREAS, it is necessary for the governing body to name an official representative for all public transportation matters, who is authorized to provide such information as deemed necessary by the State Transportation Commission or department for its administration of Act 51; and

WHEREAS, it is necessary to certify that no changes in eligibility documentation have occurred during the past state fiscal year; and

WHEREAS, the performance indicators have been reviewed and approved by the governing body.

WHEREAS, THE APPLICATION, has reviewed and approved the proposed balance (surplus) budget, and funding sources of estimated federal funds $0.00, estimated state funds $437,574.00, estimated local funds $437,575.00, estimated fare box $0.00, estimated other funds $0.00, with total estimated expenses of $875,149.00.

NOW THEREFORE, be it resolved that THE APPLICANT hereby makes its intentions known to provide public transportation services and to apply for state financial assistance with this annual plan, in accordance with Act 51; and

HEREBY, appoints M.Cook R Welke M Green C Peirano as the Transportation Coordinator, for all public transportation matters, who is authorized to provide such information as deemed necessary by the State Transportation Commission or department for its administration of Act 51 for 2027.

I, Craig Peirano (Name), Secretary (Secretary/Clerk) of

THE APPLICANT, having custody of the records and proceedings of THE APPLICANT, does hereby certify that I have compared this resolution adopted by THE APPLICANT at the meeting of January 13, 2026, with the original minutes now on file and of record in the office and that this resolution is true and correct.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed seal of said Notary, this 21st day of January A.D. 2026.

SIGNATURE

HEATHER ROBINSON-SLEUSER
NOTARY PUBLIC, STATE OF MICHIGAN
COUNTY OF CHARLEVOIX
My Commission Expires September 21, 2027
Acting in the County of Charlevoix

FY27 Operational

501 - Labor

Code	Item	Mode	Value	Comments
50101	Operators Salaries and Wages	Ferryboat (FB)		
50102	Other Salaries and Wages	Ferryboat (FB)	$68,670.00	
50103	Dispatchers' Salaries and Wages	Ferryboat (FB)		

502 - Fringe Benefits

Code	Item	Mode	Value	Comments
50200	Fringe Benefits	Ferryboat (FB)	$24,454.00	
50210	DC Pensions	Ferryboat (FB)		
50220	DB Pensions	Ferryboat (FB)		
50240	DC Other Post Employment Benefit	Ferryboat (FB)		
50250	DB Other Post Employment Benefit	Ferryboat (FB)		

503 - Services

Code	Item	Mode	Value	Comments
50302	Advertising Fees	Ferryboat (FB)	$500.00	
50305	Audit Costs	Ferryboat (FB)	$22,000.00	

503 - Services

Code	Item	Mode	Value	Comments
50399	Other Services	Ferryboat (FB)	$22,200.00	bank fees/cleaning/freight/con

504 - Materials and Supplies

Code	Item	Mode	Value	Comments
50401	Fuel and Lubricants	Ferryboat (FB)	$548,600.00	fuel/lubricants
50402	Tires and Tubes	Ferryboat (FB)		
50404	Major Purposes (Explain in Comments Field)	Ferryboat (FB)	$58,000.00	vessel 50,000 maintenance 4,000 operations 4,000
50499	Other Materials and Supplies	Ferryboat (FB)	$5,700.00	office supplies/postage

505 - Utilities

Code	Item	Mode	Value	Comments
50500	Utilities	Ferryboat (FB)	$42,550.00	trash/sewer/electrical/phone/Wi-Fi/heat

506 - Insurance

Code	Item	Mode	Value	Comments
50603	Liability Insurance	Ferryboat (FB)	$77,900.00	general liability/hull
50699	Other Insurance	Ferryboat (FB)		

507 - Taxes and Fees

Code	Item	Mode	Value	Comments
50700	Taxes and Fees	Ferryboat (FB)		

508 - Purchased Transportation Services

Code	Item	Mode	Value	Comments
50800	Purchased Transportation Services	Ferryboat (FB)		

509 - Miscellaneous Expenses

Code	Item	Mode	Value	Comments
50902	Travel, Meetings and Training	Ferryboat (FB)	$4,500.00	
50903	Association Dues and Subscriptions	Ferryboat (FB)	$75.00	
50907	Lobbying	Ferryboat (FB)		
50909	Loss on Disposal of Assets	Ferryboat (FB)		
50960	SBITA Amortization	Ferryboat (FB)		
50999	Other Misc. Expenses (Explain in Comment Field)	Ferryboat (FB)		

510 - Pass Through Expense

Code	Item	Mode	Value	Comments
51000	Pass-Through Expense	Ferryboat (FB)		

407 - Non Transportation Revenues

Code	Item	Mode	Value	Comments
40799	Other Non Transportation Revenue	Ferryboat (FB)		

408 - Local Revenue

Code	Item	Mode	Value	Comments
40800	Taxes Levied Directly for/by Transit Agency	Ferryboat (FB)		

409 - Local Revenue

Code	Item	Mode	Value	Comments
40910	Local Operating Assistance	Ferryboat (FB)	$437,575.00	
40930	Local Service Contracts	Ferryboat (FB)		
40980	Local Service Contract/Competitive Bid	Ferryboat (FB)		
40999	Other Local Contracts and Reimbursements (Explain in Comment Field)	Ferryboat (FB)		

411 - State Formula and Contracts

Code	Item	Mode	Value	Comments
41101	State Operating Assistance	Ferryboat (FB)	$437,574.00	
41110	Line Item Municipal Credit	Ferryboat (FB)		
41111	Preventive Maintenance	Ferryboat (FB)		

440 - Refunds and Credits				
Code	**Item**	**Mode**	**Value**	**Comments**
44000	Refunds and Credits (Explain in Comments Field)	Ferryboat (FB)		

Ferryboat (FB)

Total Ferryboat (FB) Expenses:	**$875,149.00**
Total Ineligible Ferryboat (FB) Expenses:	**$0.00**
Total Eligible Ferryboat (FB) Expenses:	**$875,149.00**
Total Ferryboat (FB) Revenue:	**$875,149.00**

Total Expenses:	**$875,149.00**
Total Ineligible Expenses:	**$0.00**
Total Eligible Expenses:	**$875,149.00**
Total Revenue:	**$875,149.00**

Funding Breakdown

+ Add new record

Funding Type	Source	Amount	Percent	Actions

If you require assistance accessing this information or require it in an alternative format, contact the Michigan Department of Transportation's (MDOT) Americans with Disabilities Act (ADA) coordinator at www.Michigan.gov/MDOT-ADA.

Michigan Department of Transportation
3175 (08/2022)

FY 2027 ADA COMPLAINT INFORMATION

You must retain copies of complaints for at least one year and a summary of all complaints for at least five years.

NAME OF APPLICANT (Legal organization name)
Beaver Island Transportation Authority

Has the agency been named in any lawsuits or complaints in the last year which allege an individual was discriminated against or denied full participation in transportation based on disability.

☐ Yes ☒ No

Include a brief description of the complaint and status.

In the last year, have you had ADA compliance review conducted on your transportation program as part of an overall FTA or MDOT Compliance Review?

☐ Yes ☒ No

Provide a summary including the purpose or reason for the review, the name of the agency or organization that performed the review, the findings and recommendations of the review, and a report on the status and/or disposition of such findings and recommendations.

Have any changes been made to your ADA Complaint Policy?

☐ Yes ☒ No

Please provide an explanation of changes.

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

* Equivalent service means that all riders, including wheelchair users, must be provided with the same level of service.

☒ Yes ☐ No

Please provide an explanation why equivalent service is not offered to riders.

If you require assistance accessing this information or require it in an alternative format, contact the Michigan Department of Transportation's (MDOT) Americans with Disabilities Act (ADA) coordinator at www.Michigan.gov/MDOT-ADA.

Michigan Department of Transportation
3067 (11/17)

FY 2027 TITLE VI INFORMATION

INSTRUCTIONS: Complete and return this form to the Michigan Department of Transportation.

NAME OF APPLICANT (legal organization name)

Beaver Island Transportation Authority

All FTA funds recipients, except for urban agencies that receive all of their FTA funds directly from FTA, must submit the following information that covers the period since your last MDOT application. First-time applicants should submit information for the previous fiscal year.

1. List any active lawsuits or complaints naming the applicant that allege discrimination based on race, color or national origin **with respect to service or other transit benefits.** The list should include: the date lawsuit or complaint was filed; a summary of the allegation, and the status of the lawsuit or complaint, including whether the parties to the lawsuit have entered into a consent decree.
   If none, so state.
   RESPONSE:
   None

2. Summarize all Title VI compliance review activties conducted **with regard to your transportation program, including triennial compliance reviews conducted by FTA and/or MDOT.** The summary should include: the purpose or reason for the review; the name of the agency or organization that performed the review; the findings and recommendations of the review; and a report on the status and/or disposition of such finding and recommendations.
   If none, so state.
   RESPONSE:
   None

3. When was your last Title VI Program approved by MDOT or FTA? 08/16/23

4. Has your Title VI Coordinator/EEO Officer changed during the reporting period or since your last Title VI Plan was approved?
☒ NO ☐ YES If yes, please provide the name and contact information for the new coordinator/EEO Officer.

5. Has your organization had any projects and/or service change that have Title VI, Limited English Proficiency (LEP), or Environmental Justice (EJ) impacts? Service change includes service expansion/ reduction, route and/or hour changes, etc. If yes, please complete the following items: ☒ NO ☐ YES

a. Provide a brief description of these projects/service changes.

b. What did you do to ensure that populations affected by the project and/or service change had meaningful access to and involvement in the development process?

c. What is the number or percentage of LEP or EJ populations affected by the project and/or service change?

6. During this reporting period, how were your employees educated about Title VI and their responsibility to ensure non-discrimination in any of your programs, services, or activities?
Employees are given copies of policies and procedures. Employees sign a form stating they have received.

If you require assistance accessing this information or require it in an alternative format, contact the Michigan Department of Transportation's (MDOT) Americans with Disabilities Act (ADA) coordinator at www.Michigan.gov/MDOT-ADA.

Michigan Department
of Transportation
3076 (11/2025)

FY 2027 FTA MASTER AGREEMENT PROVISIONS

INSTRUCTIONS: Complete, sign and return it to the Michigan Department of Transportation.

I acknowledge that I have reviewed a copy of the FTA Master Agreement Provisions. I understand that the nature of the project will determine which requirements of the FTA Master Agreement Provisions apply and I will comply with all applicable provisions for all FTA-funded contracts for the application year and future master agreement versions in amended grants through the completion of all funded projects.

NAME OF PERSON AUTHORIZED TO SIGN A CONTRACT OR PROJECT AUTHORIZATION Mary Cook		
BOARD OF CHAIR INFORMATION: NAME Roberta Welke		
PHONE NUMBER (231) 448-3049	E-MAIL ADDRESS welkebobbi1@gmail.com	
LEGAL ORGANIZATION NAME * Beaver Island Transportation Authority		
TITLE OF AUTHORIZED SIGNER Executive Director		
SIGNATURE OF AUTHORIZED SIGNER ** Mary Cook Digitally signed by Mary Cook Date: 2026.01.09 14:53:35 -05'00'		DATE

* If the organization has a master agreement with MDOT, the organization name must match the name as it appears on the master agreement. Organizations with multiple master agreements must submit multiple contract clauses certifications.

** If the organization has a master agreement with MDOT, the signature must be the same as the authorized signer of the master agreement or an individual with legal authority to sign a project authorization for the organization. Your agency can change, add or remove an authorized signer at any time by completing a signature resolution.

DRAFT