

Transportation Disadvantaged Trip & Equipment Grant Service Rates

| Name of Grant Recipient | Brevard Board County Commissioners d/b/a Space Coast Area Transit |
|--------------------------------|--|
| Project Location [County(ies)] | Brevard |
| Service Rate Effective Date | July 1, 2025 |

| Grant Agreement Service Rates | | | |
|-------------------------------------|---|------------------|--|
| Type of Service Transportation Mode | Unit of Measure (Trip or Passenger Mile) | Cost Per Unit | |
| * Ambulatory | Mile | 2.87 | |
| * Wheel Chair | Mile | 4.91 | |
| * Stretcher | | | |
| Bus Pass – Daily | Pass | | |
| Bus Pass – Weekly | Pass | | |
| Bus Pass – Monthly | Pass | | |
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^{*} Ambulatory, Wheel Chair and Stretcher must all use the <u>same Unit of Measure</u> either Trip or Passenger Mile; Cannot mix, all must be the same regardless of Transportation Mode.