

# Four Counties Transportation Services Committee

## Agenda

October 30, 2024, 8:30 a.m.

Council Chambers

160 Main Street

West Lorne

This meeting will be held electronically via Zoom and posted at [www.westelgin.net](http://www.westelgin.net) (pending any technical difficulties). Please contact the Clerk's Department if you require an alternate format or accessible communication support or wish to receive the link to this meeting at 519-785-0560 or by email at [clerk@westelgin.net](mailto:clerk@westelgin.net).

Pages

1. **Call to Order**

2. **Adoption of Agenda**

Recommendation:

That the Four Counties Transportation Services Committee adopt the agenda of October 21, 2024, as presented.

3. **Disclosure of Pecuniary Interest**

4. **Minutes**

1

Recommendation:

That Four Counties Transportation Services Committee hereby adopt the Minutes of September 9, 2024, as presented.

5. **Business Arising from Minutes**

6. **Financial Information**

4

Recommendation:

That the Four Counties Transit Committee hereby accept the Financials as of September 30, 2024.

7. **Reports**

**7.1 M. Badura - Transit procedures**

6

Recommendation:

That Four Counties Transit Committee hereby approve the updated transit procedures and specialized transit application form, as presented.

**7.2 Draft Budget - 2025**

13

Recommendation:

That Four Counties Transit Committee approves the 2025 budget, as presented.

**8. Appoint Chair and Vice-Chair for 2025**

Current Chair: Mark McGill

Current Vice-Chair: Vacant (Previously Michelle Navackas)

**9. 2025 Schedule for Information Only**

Four Counties Transit Committee proposed quarterly meeting schedule for 2025.

- January 20
- April 14
- July 21
- October 20

**10. Additional New Business**

**11. Adjournment**

Recommendation:

That the Four Counties Transportation Services Committee hereby adjourn at \_\_\_\_\_ a.m. to meet again at 8:30am, on Monday, January 20, 2025, or at the call of the chair.

# Four Counties Transportation Services Committee

## Minutes

September 9, 2024, 8:30 a.m.  
Electronic Participation Meeting via Zoom

**Present:** John Wright, Chatham-Kent  
Mark McGill, Southwest Middlesex  
Don McCallum, Southwest Middlesex  
Ryan Statham, West Elgin  
Kristina Pringle, West Elgin Community Health Centre  
Linda Dunn, Adult Day Program  
Richard Leatham, West Elgin

**Regrets:** Clyde Harris, Newbury

**Staff Present:** Magda Badura, CAO/Treasurer, West Elgin  
Terri Towstiuć, Recording Secretary/Clerk, West Elgin

**Staff Absent:** Jan Metcalfe, Chatham-Kent  
Cathy Case, Clerk/Treasurer, Newbury

**1. Call to Order**

Chair Mark McGill called the meeting to order at 8:33am.

**2. Adoption of Agenda**

**Resolution No. FCTC 2024- 16**

**Moved:** Don McCallum, Southwest Middlesex

**Seconded:** Ryan Statham, West Elgin

That the Four Counties Transportation Services Committee adopt the agenda of September 9, 2024, as presented.

**Carried**

**3. Disclosure of Pecuniary Interest**

No disclosures

**4. Minutes**

**Resolution No. FCTC 2024- 17**

**Moved:** Ryan Statham, West Elgin

**Seconded:** John Wright, Chatham-Kent

That Four Counties Transportation Services Committee hereby adopt the Minutes of July 22, 2024, as presented.

**Carried**

**5. Business Arising from Minutes**

None.

**6. Financial Information**

**Resolution No. FCTC 2024- 18**

**Moved:** Don McCallum, Southwest Middlesex

**Seconded:** Ryan Statham, West Elgin

That the Four Counties Transit Committee hereby accept the Financials as of August 31, 2024.

**Carried**

**7. Reports**

**7.1 Draft Four Counties Transit Procedures**

The policy will be brought back as a final draft, at the next scheduled meeting.

**Resolution No. FCTC 2024- 19**

**Moved:** Ryan Statham, West Elgin

**Seconded:** John Wright, Chatham-Kent

That the Four Counties Transit Committee hereby receives the report from M. Badura, CAO/Treasurer re: Draft Four Counties Transit Procedures for information and comments.

**Carried**

**8. New Business**

None presented.

**9. Adjournment**

**Resolution No. FCTC 2024- 20**

**Moved:** Ryan Statham, West Elgin

**Seconded:** Richard Leatham, West Elgin

That the Four Counties Transportation Services Committee hereby adjourn at 9:09am, to meet again at 8:30am, on Monday, October 21, 2024, or at the call of the chair.

**Carried**

---

Mark McGill, Vice-Chair

---

Terri Towstiuic, Recording Secretary

# Four Counties Transit

## Income Statement

As of September 30, 2024

	<b>2024 Actuals</b>	<b>2024 Budget</b>
<b>Revenue</b>		
01-7280-6202 GRANTS FROM OTHER MUNICIPALITIES	-	(34,736.80)
01-7280-6212 GRANT - PROVINCIAL GAS TAX	-	(35,867.00)
01-7280-6214 GRANT - SAFE RESTART	6,838.00	6,838.00
01-7280-6353 Gain/Loss on Assest Disposal	(2,704.25)	-
01-7280-6355 BUS TRIP FEES	(9,273.00)	(12,112.00)
01-7280-6356 SPECIAL TRIP & MILEAGE BUS FEES	(4,708.00)	(3,000.00)
<b>Operating Expenses</b>		
01-7280-7400 WAGES	32,385.35	50,000.00
01-7280-7401 CPP EXPENSE	1,641.66	2,000.00
01-7280-7402 EI EXPENSE	752.62	1,000.00
01-7280-7403 EHT EXPENSE	631.53	1,000.00
01-7280-7404 WSIB	1,053.17	1,500.00
01-7280-7407 OMERS	1,484.72	4,500.00
01-7280-7415 Training	122.11	1,000.00
01-7280-7510 INSURANCE	6,750.04	5,000.00
01-7280-7601 PHONE & INTERNET	928.08	1,400.00
01-7280-7651 POSTAGE & COURIER	103.60	200.00
01-7280-7652 ADVERTISING	-	500.00
01-7280-7660 OTHER SUPPLIES	133.98	300.00
01-7280-7675 LEGAL	-	1,000.00
01-7280-7701 FUEL - GAS	13,458.58	15,000.00
01-7280-7705 REPAIRS & MAINTENANCE	2,496.99	5,000.00
01-7280-7777 BAD DEBT EXPENSE	35.08	-
01-7280-7900 TRANSFER TO RESERVES	-	5,000.00
<b>Net Deficit</b>	<b>\$ 52,130.26</b>	<b>\$ 15,522.20</b>

### Share of Deficit

Municipality of Chatham-Kent	103.00	18%
Village of Newbury	55.50	10%
Municipality of Southwest Middlesex	304.00	52%
Municipality of West Elgin	119.00	20%
	581.50	

FOUR COUNTIES TRANSIT SUMMARY OF RIDERS - 2024													2024	2023	2022	
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL			
<b>CHATHAM-KENT</b>																
HIGHGATE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0				0.0			
BOTHWELL	0.0	1.0	0.0	0.0	3.5	2.0	0.0	1.0	0.0				7.5			
RIDGETOWN	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0				0.0			
MORPETH	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0				0.0			
THAMESVILLE	-	0.5	2	5.0	14	16.5	6.5	15.5	14				73.5			
DUART	-	-	4	4	4	4	4	2					22			
<b>SUB-TOTAL</b>	<b>0.00</b>	<b>1.50</b>	<b>6.00</b>	<b>9.00</b>	<b>21.50</b>	<b>22.50</b>	<b>10.50</b>	<b>18.50</b>	<b>13.50</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>103.00</b>	<b>18%</b>	<b>51</b>	<b>50</b>
<b>NEWBURY</b>																
Villa Apts.	5.0	6.0	5.0	6.0	6.5	4.5	13.5	4.0	5.0				55.5			
<b>SUB-TOTAL</b>	<b>5.00</b>	<b>6.00</b>	<b>5.00</b>	<b>6.00</b>	<b>6.50</b>	<b>4.50</b>	<b>13.50</b>	<b>4.00</b>	<b>5.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>55.50</b>	<b>10%</b>	<b>63</b>	<b>45</b>
<b>S.W. MIDDLESEX</b>																
GLENCOE	17.0	30.5	14.5	16.5	19.0	17.0	19.0	23.0	21.0				177.5			
APPIN	5.0	10.0	7.0	8.0	10.0	3.0	0.0	0.0	0.0				43.0			
WARDSVILLE	7.0	12.0	7.0	10.0	15.0	9.0	8.0	8.0	7.5				83.5			
MELBOURNE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0				0.0			
<b>SUB-TOTAL</b>	<b>29.0</b>	<b>52.5</b>	<b>28.5</b>	<b>34.5</b>	<b>44.0</b>	<b>29.0</b>	<b>27.0</b>	<b>31.0</b>	<b>28.5</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>304.0</b>	<b>52%</b>	<b>523</b>	<b>298</b>
<b>WEST ELGIN</b>																
West Elgin	5.5	16.5	14.0	13.0	13.5	13.5	14.0	18.0	11.0				119.0			
<b>SUB-TOTAL</b>	<b>5.5</b>	<b>16.5</b>	<b>14.0</b>	<b>13.0</b>	<b>13.5</b>	<b>13.5</b>	<b>14.0</b>	<b>18.0</b>	<b>11.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>119.0</b>	<b>20%</b>	<b>153</b>	<b>120</b>
<b>GRAND TOTAL</b>	<b>39.5</b>	<b>76.5</b>	<b>53.5</b>	<b>62.5</b>	<b>85.5</b>	<b>69.5</b>	<b>65.0</b>	<b>71.5</b>	<b>58.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>581.5</b>	<b>100%</b>	<b>789</b>	<b>513</b>
<b>RIDER</b>																
<b>SPECIAL TRIPS</b>																
Mun of SWM		1											1			
Babcock				1		2	2	1	1				7			
Ridgetown-Village								1					1			
WECHC																
Beattie																
Adult Centre																
FCHS																
H Logan									1							
J Johnson									1				1			
<b>Total Trips</b>	<b>-</b>	<b>1</b>	<b>-</b>	<b>1</b>	<b>-</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>11</b>			



## Four Counties Transit Procedures

### 1.0 Overview

Four Counties specialized transit service is a shared ride, door-to-door service for residents with disabilities that prevent them from using conventional transit. The service operates Monday to Friday from 8:00 a.m. to 5:00 p.m.

Trips are pre-booked, not guaranteed, and subject to policy and procedure amendments.

### 2.0 Registration Requirements

Application Submission:

Available at **Four Counties Health Services**  
1824 Concession Drive  
RR#3 Newbury, ON. N0L 1Z0  
Phone: 519-693-8604 or 1-800-724-3401  
Fax: 519-693-7084

**Municipality of West Elgin**  
22413 Hoskins Line  
Rodney, ON N0L 2C0  
Phone: 519-785-0560  
Fax: 519-785-0644

### 3.0 Trip Booking

#### 3.1 Booking Procedure:

- Clients are required to book a trip up to 2 weeks in advance.
- Trips are scheduled on a "first come, first served" basis.

Personal trips should be scheduled during non-peak days – Mondays, Tuesdays and Fridays.

#### 3.2 Service Limits:

- Each trip is limited to up to 2 destinations and not to exceed 2 hours of wait time. Return trips must be arranged for no later than 4 p.m.





- Any pick-ups scheduled after 5 p.m. will be considered special trips and will incur additional fees in accordance with fees and charges by-law.

## 3.0 Cancellations

### 3.3.1 Advance Cancellation

- Trips must be cancelled as far in advance as possible.
- Trips cancelled less than 3 hours before the scheduled pick-up will be recorded as a late cancellation.
- Trips cancelled less than one-half hour before the scheduled pick-up will be recorded as a no-show and fee will be charged.

### 3.3.2 Consequences of Late Cancellations/No-Shows:

- Excessive late cancellations or no-shows may result in suspension of registration.

## 4.0 Companions and Support Persons

### 4.1 Companions:

- Allowed if space is available.
- Must pay the same fare as the customer.
- Limit the number of companions to a reasonable number.

### 4.2 Support Person

- Travels for free with confirmed eligibility.
- Complete the application form and follow submission instructions.

## 5.0 Groceries and Parcels

- Allowed on the transit service.
- Drivers do not assist in carrying groceries or similar packages.
- Arrange for assistance if needed.

These procedures ensure that specialized transportation services are provided effectively and safely to residents in need.

## **SPECIALIZED TRANSIT SERVICES APPLICATION**

This form is for use by persons who wish to apply for the Four Counties Specialized Transit Service. This service is intended for persons with disabilities, either permanent or temporary, which prevent them from being able to access standard fixed route transit service.

**The information obtained in this certification process will be used by the Four Counties Transit only to assess the applicant's eligibility for some form of Specialized Transit Service. All information contained in this application will be kept confidential.**

If you have any questions or need assistance to complete this application form, please call the Municipal Office at 519-785-0560 and a customer service representative will assist you.

### **HOW TO APPLY FOR SPECIALIZED TRANSIT SERVICES**

- 1. Carefully read Part A of this application.**
- 2. Fill out Parts B and C of this application.**
- 3. Have your health care professional review parts B and C and then complete Part D.**

**Failure to completely fill out parts B, C and D of the application will delay the application process.**

Your application will be assessed by the Four Counties Transit. You may be requested for additional information, to participate in an interview (by phone or in person), and/or participate in a functional assessment. Four Counties Transit's health care professional will advise accordingly.

If you are denied eligibility, you will have the right to appeal. For information on the appeals process please call 519-785-0560.

**The completed application (all parts) are to be returned to:**

**Municipality of West Elgin**

**22413 Hoskins Line,**

**Rodney, Ontario**

**NOL 2C0**

**Attention: Specialized Transit Services**

## **PART A** INTRODUCTION AND ELIGIBILITY FOR SPECIALIZED TRANSIT SERVICES

### **SPECIALIZED TRANSIT SERVICES**

Four Counties Transit's Specialized Transit Service encompasses five service delivery options:

- **Community Bus** is an accessible fixed-route service that connects community origins and destinations, such as seniors' homes and community centres. Passengers can request to deviate from the standard route for a desired destination.
- **Paratransit** is a shared ride, door to door service for passengers that require a lift-equipped vehicle for travel. Trips are not guaranteed and the service is operated in accordance with policy and procedures.

### **ELIGIBILITY**

There are three categories of eligibility to qualify for Four Counties Transit Services.

- **Unconditional**- All trips require specialized services, i.e for a permanent disability.
- **Temporary**- All trips require specialized services for a limited duration i.e for a temporary disability such as during recovery from a hip/knee surgery.
- **Conditional**- Trips taken by a person with disabilities who require specialized services under certain circumstances, such as with extreme weather or variable environmental barriers.

Eligibility for the above mentioned services will be determined based upon, in part by the responses in parts C and D of this Application. Eligibility **will not** be based upon the following:

- The age of the applicant
- The income of the applicant
- The applicant's travel requirements as set out in part B of this application

### **WHO CAN CERTIFY**

If your disability prevents you from using Four Counties Transit regular fixed-route service, one of the following health care professionals, as appropriate to your case, may complete part D of this application form:

- Licensed physician
- Licenced physiotherapist
- Licenced optometrist/ophthalmologist/eye physician
- Registered occupational therapist/physiotherapist
- Certified psychologist/psychiatrist
- Registered Nurse Practitioner/Registered Nurse

**The above mentioned services are not intended to replace a person's private automobile, or to replace Four Counties' fixed-route service when service is limited, not operating, or not convenient.**

**PART B** APPLICANT INFORMATION AND TRAVEL REQUIREMENTS (APPLICANT TO COMPLETE)

1) Name: \_\_\_\_\_  
(Last) (First) (Middle)

2) Date of Birth: \_\_\_\_\_  
(Year/Month/Day)

3) Address: \_\_\_\_\_  
(Number) (Apt) (Street)  
\_\_\_\_\_  
(City) (Postal Code)

**4) Contact Information**

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_\_) \_\_\_\_\_

TTY/TDD Number: (\_\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

**5) In case of an emergency, please indicate the name and number of someone in the area who should be notified (family, friend, neighbor, case worker, etc)**

Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Telephone Number(s): (\_\_\_\_\_) \_\_\_\_\_

**6) Travel Requirements**

The information in this section **will not** be used to determine eligibility, but rather to assist with service planning, that is to match service need with appropriate service options.

- Medical Appointments
- Outpatient /Rehabilitation Therapy
- Workshops / Day Programs
- Employment
- School / Training
- Other: \_\_\_\_\_

**PART C** APPLICANT SELF-EVALUATION (APPLICANT TO COMPLETE)

**1) Check off and specify, if appropriate, the medical classification of the diagnosis or condition in terms of functional impairment that affects your ability to access regular public transit.**

- Intellectual Disability: \_\_\_\_\_
- Respiratory Deficiency: \_\_\_\_\_
- Cardiac Deficiency: \_\_\_\_\_
- Traumatic Brain Injury: \_\_\_\_\_
- End Stage Renal Failure: \_\_\_\_\_
- Mental Health: \_\_\_\_\_
- Orthopedic Injury: \_\_\_\_\_
- Other(s): \_\_\_\_\_

**PART C** APPLICANT SELF-EVALUATION (APPLICANT TO COMPLETE) CONTINUED

**2) Check the box(es) that best applies to you:**

I can usually get to and from a regular transit bus stop:

- independently
- with an attendant accompanying me
- with travel training
- when the path is free from ice and snow
- other: \_\_\_\_\_

**3) Check the one box that best applies to your ability to ride a conventional public transit bus:**

- I can usually ride on a public transit bus
- I can ride on a public transit bus if I have an attendant with me
- I cannot ride on a public transit bus

Explain why: \_\_\_\_\_

**4) Will you require a Personal Care Attendant to be with you every time you use specialized transit services?** If the answer is yes, London Transit will only provide service when an attendant is travelling with you.

- Yes  No

**5) Please check the item(s) that you will usually have with you when you ride on specialized transit:**

- Manual wheelchair  Service animal
- Powered wheelchair  Cane
- Powered 3/4 wheel scooter  White cane
- Walker  Oxygen bottle
- Crutches  Other: \_\_\_\_\_

**APPLICANT DECLARATION**

**I hereby certify that to the best of my knowledge, the information provided in this application is correct.** I authorize the release of medical information to the Four Counties Transit. I consent to having the Four Counties Transit authority discuss the contents of my application and eligibility for Specialized Transit Services with the health care professional that completed part D of this application.

Signature of Applicant or Designate: \_\_\_\_\_ Date: \_\_\_\_\_

**If you are not the applicant but have completed this application on the applicant's behalf, you must provide the following information:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Daytime Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

**I certify that to the best of my knowledge the information in this application is correct.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please attach any additional information that would be helpful when considering your application, such as information from your family, caregiver, support workers or service providers

**PART D** PROFESSIONAL CERTIFICATION (COMPLETED BY A HEALTH CARE PROFESSIONAL)

You are being asked by the applicant to provide information regarding his/her ability to use Four Counties' transit services. Please review Part A of the application form as well as the applicant's answers in Parts B and C prior to filling out this section. The information you provide will allow us to evaluate the request and to provide the appropriate service. If you have any questions, please call the Municipal office at 519-785-0560.

**1) Please indicate applicant's disability/medical condition which is affecting his/her ability to use regular, fixed-route transit:**

---

**2) Is the applicant able to:**

- Walk to a bus stop?  Yes  No
- Get on/off a bus?  Yes  No
- Is the applicant able to ride a conventional bus if the driver assisted them with priority seating and securing any mobility aid/aids?  Yes  No
- Does the applicant have a visual impairment that may prevent them from safely accessing regular bus services?  Yes  No
- Does the applicant have any cognitive limitations that may limit him/her from completing any part of the bus journey? (i.e. notifying the driver about his/her correct stop)  Yes  No

**4) If the applicant qualifies for Specialized Transit Services, it is my professional opinion that they will require service for:**

- Less than 6 months (indicate length of time service is required) \_\_\_\_\_
- 6 months
- 12 months or more (Indicate length of time service is required) \_\_\_\_\_
- Unconditional (e.g. for permanent disabilities)
- Seasonal specific: \_\_\_\_\_
- Other: \_\_\_\_\_

**5) Please detail any further information that might be of assistance in processing this application:**

---

Signature of Health Care Professional \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Profession: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_ Postal Code: \_\_\_\_\_

# Municipality of West Elgin

		2025 Budget Proposed	2024 Actual (Forecast)	2024 YTD	2024 Budget	2023 Actuals	2023 Budget	2022 Actuals	2022 Budget
<b>Four Counties Transit</b>									
01-7280-6121	DONATIONS/MISC REVENUE	0	0	0	0	-200	0	0	0
01-7280-6202	GRANTS FROM OTHER MUNICIPALITIES	-43,520	-35,338	0	-34,737	-52,794	-24,751	-21,432	-23,956
01-7280-6212	GRANT - PROVINCIAL GAS TAX	-32,000	-31,172	0	-35,867	-35,454	-35,867	-30,867	-30,563
01-7280-6213	GRANTS - PUBLIC TRANSIT STREAM	0	0	0	0	-45,188	-45,188	0	0
01-7280-6214	GRANT - SAFE RESTART	0	6,838	6,838	6,838	0	0	0	0
01-7280-6353	Gain/Loss on Asset Disposal	0	-2,704	-2,704	0	0	0	0	0
01-7280-6355	BUS TRIP FEES	-12,500	-12,460	-9,345	-12,112	-10,744	-7,000	-6,096	-10,000
01-7280-6356	SPECIAL TRIP & MILEAGE BUS FEES	-4,000	-5,000	-4,708	-3,000	-3,065	-1,000	-1,193	-5,000
	<b>Total Revenue</b>	<b>-92,020</b>	<b>-79,836</b>	<b>-9,919</b>	<b>-78,878</b>	<b>-147,445</b>	<b>-113,806</b>	<b>-59,587</b>	<b>-69,519</b>
01-7280-7400	WAGES	51,000	47,419	35,564	50,000	58,493	38,682	37,195	42,884
01-7280-7401	CPP EXPENSE	2,600	2,398	1,799	2,000	2,372	1,934	1,915	2,444
01-7280-7402	EI EXPENSE	1,200	1,102	827	1,000	1,053	774	823	909
01-7280-7403	EHT EXPENSE	1,000	925	694	1,000	1,159	580	719	858
01-7280-7404	WSIB	1,600	1,542	1,156	1,500	1,430	1,160	711	1,287
01-7280-7407	OMERS	2,200	2,163	1,622	4,500	1,543	0	0	0
01-7280-7415	Training	750	200	122	1,000	499	200	173	200
01-7280-7510	INSURANCE	7,250	6,750	6,750	5,000	4,534	4,534	4,764	2,500
01-7280-7601	PHONE & INTERNET	1,300	1,262	946	1,400	1,152	1,400	1,198	1,200
01-7280-7651	POSTAGE & COURIER	200	125	104	200	173	200	112	300
01-7280-7652	ADVERTISING	500		0	500	0	500	387	500
01-7280-7660	OTHER SUPPLIES	300	250	134	300	322	300	239	200
01-7280-7675	LEGAL	1,000	0	0	1,000	11,894	2,000	0	2,000
01-7280-7701	FUEL - GAS	17,000	16,000	14,409	15,000	11,736	15,000	10,690	15,000
01-7280-7705	REPAIRS & MAINTENANCE	5,000	3,500	2,497	5,000	13,555	5,000	7,300	5,000
01-7280-7777	BAD DEBT EXPENSE	0	35	35	0	0	0	0	0
01-7280-7900	TRANSFER TO RESERVES	10,000	5,000	0	5,000	5,000	5,000	0	5,000
01-7280-7901	Transfer from Reserves	0	0	0	0	-99,043	-93,812	0	-80,000
01-7280-8000	CAPITAL - TRANSIT BUS	0	0	0	0	144,232	139,000	0	80,000
	<b>Total Expense</b>	<b>\$102,900</b>	<b>\$88,671</b>	<b>\$66,659</b>	<b>\$94,400</b>	<b>\$160,104</b>	<b>\$122,453</b>	<b>\$66,227</b>	<b>\$80,282</b>
	<b>Net (Revenue)/Expense</b>	<b>\$10,880</b>	<b>\$8,835</b>	<b>\$56,740</b>	<b>\$15,522</b>	<b>\$12,659</b>	<b>\$8,647</b>	<b>\$6,639</b>	<b>\$10,763</b>

<b>Ridership Breakdown</b>	<b>2025 Budget</b>	<b>2024 YTD</b>	<b>2023</b>	<b>2022</b>
Chatham-Kent	9,792	18%	7%	10%
Newbury	4,896	9%	8%	9%
Southwest Middlesex	28,832	53%	66%	58%
<b>Other Total</b>	<b>43,520</b>	<b>80%</b>	<b>81%</b>	<b>77%</b>
West Elgin	10,880	20%	19%	23%
<b>Total</b>	<b>54,400</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

<b>Transit Reserve Forecast</b>	<b>2025</b>	<b>2026</b>	<b>2027</b>	<b>2028</b>	<b>2029</b>	<b>2030</b>	<b>2031</b>	<b>2032</b>	<b>2033</b>	<b>2034</b>
Opening Balance	\$26,306	\$36,306	\$46,306	\$56,306	\$66,306	\$76,306	\$86,306	\$96,306	\$106,306	\$116,306
To/(From) Reserve	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
<b>Closing Balance</b>	<b>\$36,306</b>	<b>\$46,306</b>	<b>\$56,306</b>	<b>\$66,306</b>	<b>\$76,306</b>	<b>\$86,306</b>	<b>\$96,306</b>	<b>\$106,306</b>	<b>\$116,306</b>	<b>\$126,306</b>

<b>Transit 10 Year Capital Forecast</b>	<b>2025</b>	<b>2026</b>	<b>2027</b>	<b>2028</b>	<b>2029</b>	<b>2030</b>	<b>2031</b>	<b>2032</b>	<b>2033</b>	<b>2034</b>
Bus Replacement	\$0	\$0	\$0	\$0	\$150,000	\$0	\$0	\$0	\$0	\$0





MUNICIPALITY OF  
**West Elgin**

Four Counties Transit		2022 Fee	2023 Fees	2024 Fees	2025 Fees	Increase \$	Increase %
<b>Trips within Service Area</b>							
Mileage (per km)	\$	0.70	\$ 0.80	\$ 1.50	\$ 2.00	\$ 0.50	33%
One way Trip	\$	6.00	\$ 7.00	\$ 8.00	\$ 9.00	\$ 1.00	13%
Round Trip (per person)	\$	12.00	\$ 14.00	\$ 16.00	\$ 18.00	\$ 2.00	13%
<b>Trips outside Service Area</b>							
Round Trip (per person) + Mileage	\$	35.00	\$ 40.00	\$ 50.00	\$ 60.00	\$ 10.00	20%
<b>Special trips</b>							
During normal hours (per hour) + mileage	\$	35.00	\$ 40.00	\$ 50.00	\$ 60.00	\$ 10.00	20%
Outside normal hours (per hour)+ mileage	\$	50.00	\$ 60.00	\$ 70.00	\$ 80.00	\$ 10.00	14%