Employer Annual Report & Program Description



Washington State's Commute Trip Reduction (CTR) law requires employers to implement programs that encourage alternatives to drive-alone commuting to their worksites. Reducing commute trips helps improve air quality, reduce traffic congestion, and decrease the use of petroleum fuels.

Employers affected by the CTR law must submit an *Employer Annual Report & Program Description* form for each affected worksite. The information is used by your jurisdiction and the Washington State Department of Transportation (WSDOT) to help develop and maintain effective CTR programs.

Before your program can be considered complete, please attach a copy of your current the Program Summary described in Questions 29 & 30.

Please complete the following report as carefully and completely as you can. Specific instructions are available in the online version at URL...If, after filing the report for this reporting period, your organization is unable to completely implement its CTR program, contact your local jurisdiction to amend your program. If you have any questions on how to fill out this form, please call the CTR Representative in your local jurisdiction.

Worksite Description

18 Program manager e-mail address

Program Due Date (Mo/Yr):	E82438	
(MO/11).	1 Worksite CTR ID numl	per (if known)
North Seattle Community College	North Seattle Co	mmunity College
2 Organization name	3 Worksite/branch	
9600 college way n		
4 worksite physical address		
seattle	wa	98103
5 City	6 State	7 Zip code
Darryl JOhnson	Transportation Coordina	(206) 934-3646
8 ETC name	9 Title	10 Phone
9600 College way N Seattle, WA 98103		
9600 College way N Seattle, WA 9810311 ETC mailing address (if different from above)		
11 ETC mailing address (if different from above)		13 ETC fax
11 ETC mailing address (if different from above) daryl.johnson@seattlecolleges.edu	Security Director	13 ETC fax (206) 934-3646
 11 ETC mailing address (if different from above) daryl.johnson@seattlecolleges.edu 12 ETC e-mail address 	Security Director	
 11 ETC mailing address (if different from above) daryl.johnson@seattlecolleges.edu 12 ETC e-mail address Darryl Johnson 		(206) 934-3646

Employee Information

19 Total number of employees: 449 20 Total number of CTR-affected employees: 142
21 Is your CTR program offered to all employees?
22 Is your CTR program subject to collective bargaining? $ig imes$ Yes $ig \ imes$ No
23 Does this worksite have multiple shifts? Xes No
Custodial work 10pm-6am; Security works various shifts from 5am- 11:30pm; Admin support
also works various shifts depending on department need
Required Element: State law requires your organization to appoint an employee transportation coordinator (ETC), prominently post the ETC's name, location and phone number for your employees, distribute information at least once a year to employees regarding alternatives to single-occupant-vehicle commuting, and implement a set of measures designed to achieve Commute Trip Reduction goals. Some local ordinances may have additional requirements.
ETC Information
24 Is the ETC's name, location and telephone number prominently displayed at this worksite? □ No
where: In the Security Office, the TMP information board by the cafeteria, and the TMP info rack b
25 Has the ETC completed a program developer/ETC basic training course? 🛛 Yes 🗌 No
26 Has the ETC completed a survey course?
27 What month and year did this person begin serving as an ETC? $\frac{4}{\text{month}} / \frac{2013}{\text{year}}$
28 Does the ETC serve as ETC for more than this worksite? \Box Yes $igtarrow$ No
If yes, how many CTR-affected worksites in Washington?
29 On average, how many hours per week does the ETC spend on CTR activities for all CTR-affected worksites in Washington?
30 Does the ETC have an active worksite committee to assist with the CTR program? 🛛 Yes 🗌 No
Program Information and Promotion
All ordinances require that information about your CTR program be distributed in the following two ways:
31 When did you last distribute a summary of your worksite's CTR program to all employees?
32 Do you distribute information about the worksite CTR program to all new hires during new employee orientations and/or in hiring packets?

Program Information and Promotion (continued)

Which of the following do you do to promote your program? Do you do this?				
33 Provide information via a commuter information boards or kiosk?	🖂 Yes	No		
34 Post CTR promotional materials for employees?	imes Yes	No		
35 Give CTR presentations to managers?	imes Yes	🗌 No		
36 Give CTR presentations to employees, in addition to new hire orientations?	imes Yes	No		
37 Conduct transportation events/fairs and/or participate in county/state CTR promotions/campaigns?	🗙 Yes	🗌 No		
38 Send electronic mail messages to employees about the CTR program?	🗙 Yes	🗌 No		
39 Publish CTR articles in employee newsletters?	imes Yes	No		
40 Distribute CTR information with employee paychecks?	Yes	🔀 No		
41 Publish and update an employee CTR website?	imes Yes	No		
42 What changes to program information and/or promotions, if any, are anticipated in the next 12 months?				
None				

Worksite Characteristics

43 What is the primary business at this worksite	e?			
Agriculture, forestry, fishing, mining	Manufac	cturing	Transpo	ortation
Finance, insurance, real estate	Health c	are	Govern	ment
Info. services/software/technical	Public u	tilities	🔀 Educati	on
Professional/personal services	Military		Other	
Retail/trade	Constru	ction		
44 Is this employer a government or non-profit	organization?	⊠ Yes	🗌 No	
Are any of the following facilities located or 3 blocks of this worksite and accessible to		n No	Onsite	Within 3 blocks
45 Bus stop(s)			\times	
a) If bus stops are onsite or within 3 blocks, list the 5 route numbers most frequently used by employees:		345 346 316	6 40 16	
46 Ferry terminal				
		\times		
47 Bike trail or lane				
-				
47 Bike trail or lane				
47 Bike trail or lane48 Sidewalks or pedestrian trails				
47 Bike trail or lane48 Sidewalks or pedestrian trails49 Train (rail) station				
 47 Bike trail or lane 48 Sidewalks or pedestrian trails 49 Train (rail) station 50 Shopping 				

Worksite Parking Information and Parking Management

Parking costs include items such as leasing costs, security, maintenal	nce and signage.	
54 When your employees drive alone to work, do they pay for parking ⊠ Yes they pay	g?	
─ No they don't pay		
Some employees pay. Please explain who pays		
55 When your employees carpool to work, do they pay for parking? ⊠ Yes they pay		
─ No they don't pay		
Some employees pay. Please explain who pays		
56 When your employees vanpool to work, do they pay for parking? ⊠ Yes they pay		
─ No they don't pay		
Some employees pay. Please explain who pays		
Employer Owned Parking	On site Parking	Off site Parking
57 How many parking spaces does your organization own for employee usage?	#_1551	#_0
58 How many of the total parking spaces listed above in 57 are reserved for HOV parking?	#_88	#
Leased Parking	On site Parking	Off site Parking
59 How many parking spaces does your organization lease, or have included in your property lease, for employee usage?	#_0	#_0
60 How much does your organization pay per month per leased parking space?	\$_0	\$_0
61 How many of the total parking spaces listed above in 59 are reserved for HOV parking?	#_0	#
How much are employees charged per month for:	On site	Off site
62 carpool parking?	\$ <u>22</u>	\$_0
63 vanpool parking?	\$ <u>22</u>	\$_0
64 drive-alone (SOV) parking?	\$_40	\$_0
65 Are other free parking spaces available within 3 blocks of the work	ksite? 🛛 🖂	Yes 🗌 No
66 Are other paid parking spaces available within 3 blocks of the wor	rksite?	Yes 🛛 🗙 No
How much is the average charge per m	nonth? \$	
67 If you charge employees for parking, do any of the proceeds from your parking charges go to your CTR program?	,	Yes 🗌 No
68 How many employer-owned or -leased SOV spaces were eliminate in the past 12 months?	ed # 7	0

Worksite Parking Information and Parking Management (continued)

69 Briefly explain how you manage and monitor your worksite parking program below:

North Seattle College operates under the direction of a Board of Trustees that sets fees, fines and procedures for the college. On this campus, parking enforcement with reduced fees for carpoolers, subsidized ORCA passes, vanpool subsidy, and use of Zipcar by Commute Trip Reduction participant

70 What changes to parking information and management, if any, are anticipated in the next 12 months?

s in

Financial Subsidies (Employer-provided financial contribution to Employee that directly lowers cost of employee commute)

Identify the monthly s	ubsidies the em	ployer pays per l	participating employee.	
71 Do you offer to employee (including ORCA Pass, Pu	•			
No, skip to question 72	on next page)		
⊠ Yes				
Ave. # employees rece	ving each mo	onth # 150		
Maximum face (trip) va	lue on pass	\$_4.75	OR Maximum monthly value of pas	s \$
a) How much of the en	nployee pass	cost is paid b	y the employer per month? \$	OR % 82.7
In addition to bus fare,	does the pas	s apply towar	d:	
b) train (rail) fare?	⊠ Yes	No		
c) vanpool fare?	Yes	imes No		
d) vanshare fare?	☐ Yes	× No		

Financial Subsidies (continued)

Do	you offer to employees:	Yes	No	Average # employees receiving each month	Maximum monthly subsidy paid per employee	
72	Bus subsidy (if not given in the form of a pass as described above but rather as tickets,vouchers, reimbursement, etc.)?		X	#	\$	
73	Vanpool subsidy (if not given in the form of a pass as described above but rather as tickets,vouchers, reimbursement, etc.)?	X		#_0	\$_58	
74	Ferry subsidy	\times		#_0	\$_58	
75	Train (rail) subsidy (if not given in the form of a pass as described above but rather as tickets,vouchers, reimbursement, etc.)?		\times	#	\$	
76	Vanshare subsidy (if not given in the form of a pass as described above but rather as tickets,vouchers, reimbursement, etc.)?		\times	#	\$	
77	Carpool subsidy	\times		#_10	\$ 22	
78	Walking subsidy		\times	#	\$	
79	Bicycling subsidy		\times	#	\$	
80	Other transportation allowance/stipend? Explain:		\times	#	\$	
81	Are you aware that employers can received a ta	x credit	or gra	int for ridesharing sub	sidies?	
	─ No, skip to question 83 below ─ Yes					
82	82 Has this employer received a tax credit or grant for ridesharing subsidies?					

Yes

No No

- 83 Are you aware that employers may allow employees to set aside a portion of their pre-tax income for the purpose of purchasing a transit or vanpool pass?
 - ─ No, skip to question 85 below
 - × Yes
- 84 Does this employer allow employees to set aside a portion of their pre-tax income for transit or vanpool fare?

imes Yes

🗌 No

85 What changes to subsidy programs, if any, are anticipated in the next 12 months?

none

Financial Incentives (Employer-provided reward other than direct, regular financial assistance to employee)

86	Do you offer any other opportunity for CTR participants to receive
	cash or prizes, paid leave, other incentives?

Yes, describe
 ZIPCAR - up to 4 hours use per working day per participating employee TWO
 REE PARKING DAYS per week ANNUAL PARKING PERMIT CHECK-OUT for access to sister-college parking lots CTR SURVEY - prize drawings for participants QUARTERLY DRAWINGS if funds are available WHEEL OPT

Site Amenities

Do you offer				
87 Covered spaces, cages, racks, or lockers for bicycles?	🔀 Yes	🗌 No		
88 Uncovered spaces or racks for bicycles?	⊠ Yes	🗌 No		
89 Clothes lockers?	⊠ Yes	🗌 No		
90 Showers?	⊠ Yes	🗌 No		
91 On-site loading/unloading zones or shelters for non-SOVs?	⊠ Yes	🗌 No		
92 What changes in site amenities, if any, are anticipated in the nex	t 12 months?			
none				

Work Schedules and Schedule Changes

93 Does your organization offer compressed work week schedules used to support your CTR program?

Schedule (days/hours)		
3/36	Yes	🔀 No
4/40	imes Yes	No
9/80	imes Yes	No No
Other	Yes	imes No
lf other, ple	ease explain	

- 94 Does your organization offer flex time (allow employees to vary their start and end times)?
 - imes Yes
 - No
- 95 Does your organization allow employees to eliminate a commute trip by working at home, a telework center, or satellite office?
 - Yes
 - × No

Work Schedules and Schedule Changes (continued)

96	Do you have a	plan to increase participation in telework in the c	oming year?
	🗌 Yes, describ	e	
	🗙 No		
97	between 6 and	nization modified work schedules so that some of 9 a.m. are now scheduled to begin work outside When did the shift change(s) occur?	
	No H	low many employees' schedules were changed?	35
98	Was the shift c	hange identified as an element of the worksite's	approved CTR program for a previous year?
	\Box Yes \longrightarrow V	Vhat year(s) was this a CTR program element?	
	🔀 No		
99	Did the shift ch	nange occur because of impacts directly associat	ed with the Growth Management Act of 1990
	🗌 Yes, explain		

imes No

100 Do you plan to modify some or all employees' work schedules within the next 12 months?

imes Yes, describe	Flextime offering will be expanded for the Summer months only.
No No	

Other Programs

101 Does your organization offer employer provided vehicles for any of these purposes?

a Guaranteed/emergency ride home	⊠ Yes	🗌 No
b Vanpooling	Yes	imes No
c Carpooling	⊠ Yes	🗌 No
d Work-related business trips	imes Yes	🗌 No
e Non-work-related errands	× Yes	No

102 Are the following services available at your worksite?

a Employer-provided shuttle or custom bus or van from transit station/stop or park& ride lots to worksite	🔀 Yes	🗌 No
b Employer-provided internal circulator system	Yes	imes No
c Guaranteed/emergency ride home program	⊠ Yes	🗌 No
d Employer-provided bicycles	Yes	imes No
e Internal ridematch service conducted for employees	⊠ Yes	🗌 No
f Statewide or regional ridematch service information to employees (such as RideshareOnline.com or NWCarpool.org)	🖂 Yes	🗌 No
g ZipCar or other shared car program	⊠ Yes	No No

103 What changes to other programs, if any, are anticipated in the next 12 months?

none

104	If your organization conducts or plans to conduct other CTR activities
	that are not covered in this report, please describe these activities below.

n/a

105 Are you participating in any public, private or grant funded programs not covered in this report?



CTR Program Costs

The Washington State Legislature requires the Department of Transportation to report on how much employers spend on complying with the state's Commute Trip Reduction (CTR) program and working toward the program's objectives. WSDOT does this by surveying employers to determine how much they spend on various activities related to the program, and how much is from other sources.

The Legislature is interested in totals and general types of costs – not in details. The categories we provide in this survey are designed to help you organize information. Use your best judgment when determining the appropriate categories for various expenses

106 For each activity in the table below, we would like to know how much cost your organization has incurred for supporting and overseeing your CTR program. Please give us an estimate of your monetary costs and in-kind costs during the past 12-months as described on the previous pages of this report.



Monetary Cost Estimate: This is the value of goods and services that your organization contributed in order to administer your CTR Program. Examples of monetary costs include the time your organization's staff spent administering the CTR Program, including any dues paid to local Transportation Management Associations (TMAs). It could also include financial incentives to encourage the use of alternative modes.

In-Kind Cost Estimate: This is the value of goods and services that you received from sources outside of your organization. Examples of this type of cost include donated gift certificates, staff time from local bike shops for workshops held at your organization, and any donated merchandise.

Please **do not include** contributions from local governments or transit agencies. We already have this information from the local governments and transit agencies.

(Only record those activities that occurred during the 12-month evaluation period)		
Type of Activity	Yearly Monetary Cost Estimate	Yearly In-Kind Cost Estimate
a Promoting the CTR Program to employees (including ETC time, supplies, etc.), helping employees with transportation questions, arranging carpools and vanpools, providing transportation services to employees, and program overhead (time spent processing incentive payments, in meetings, etc.).	\$_11628	\$
b Conducting surveys, completing the Employer Program Report reports, etc.	\$_7650	\$
c Financial incentives and subsidies paid to employees.	\$_0	\$
d Facilities such as bike racks, bus shelters lockers, etc.	\$_0	\$
e Any other costs that are not covered in the categories above. Please describe these costs in the box provided below	\$_0	\$

12-Month Cost Evaluation Period

Report Preparation

107 Identify the individual(s) responsible for completing this Employer Annual Report & Program Description

Employee transportation coordinator

 \boxtimes Other, please provide the following information:

Darryl Johnson		Transportatin Coordinat
108 Name		109 Title
North Seattle Colleg	e	
110 Organization		
(206) 934-3646		
111 Phone	112 Fax	
darryl.johnsoon@se	attlecolleges.edu	
113 E-mail		

Employer Commitment

I understand that our worksite is required by the City/County of _________ to submit an Employer Annual Report and Program Description and to implement the program it describes. These actions comply with Washington State's Commute Trip Reduction (CTR) Law.

I am aware that the goal of this program is to reduce our employees' drive-alone travel to this worksite. I am also aware that our worksite is required to make a good faith effort to achieve the single occupant vehicle (SOV) and vehicle miles traveled (VMT) reduction goals. The CTR Law defines a good faith effort as one that includes meeting the minimum requirements outlined in the law and local ordinance, working collaboratively with the jurisdiction CTR representative, and continuing an existing CTR program or making program modifications likely to result in improvements over an agreed upon length of time.

I have reviewed the referenced document and I commit to the implementation of all the elements listed and submitted for your approval. I will ensure that the jurisdiction is notified if information in the document changes.

Signature of CEO or highest ranking official at the worksite	Date				
Warren Brown					
114 Name					
Prresident					
115 Title					
9600 College Way N Seattle, WA 98103					

116 Mailing address of person who signed this form

(206) 934-3601

(206) 934-3606

Phone

Fax

warren.brown@seattlecolleges.edu

E-mail



Print this page and get the signature of your CEO or highest ranking official and submit to your local CTR representative.