**Better Bike Share Partnership**

**Living Lab Program, 2020-2023**

**Application**

Please note: The Lead Organization is the partner responsible for receiving and disbursing grant funds, and for providing project updates and the final report. The Lead Organization must be a 501(c)3 non-profit organization or a government entity.

**Administrative Information**

Name of Project:

Legal Name of Lead Organization:

Address:

City:

State

Zipcode:

Website:

Contact Person:

Title:

Direct Phone:

E-Mail Address:

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Type of Organization (501(c)3, government, etc.):

State and Year of Incorporation:

Federal Employer Identification Number (EIN):

City population:

Congressional Representative(s) and District(s): Please list all Representatives whose districts will be affected by the shared micromobility system

The Better Bike Share Partnership will provide $200,000 over the course of this 2.5 year grant (January 2021 – June 2023) to each Living Lab city. The grant will be disbursed in multiple payments. BBSP will additionally fund a baseline and follow-up assessment and limited travel stipends to present work at conferences and convenings.

BBSP requires a match of 10%, or $20,000, over the life of the grant. The match may be cash, in-kind, or a combination of both. Your project budget should include the value of in-kind donations of labor, services, materials or other relevant items.

Better Bike Share Award: $200,000

Funding from Other Sources:

Total Project Budget:

Total Organization Budget:

**Mobility Operator Information**

Please provide the following information for every shared mobility device currently operating on your city’s streets. If one company is operating two or more types of device, please list them separately.

* Operator name
* Mobility type
* Number of devices currently operating
* Number of devices planned to be in operation in one year
* Equity program available?
* How long has this device been available in your city?

**Partner Information**

Please list community-based organizations, city or county agencies/departments, or other existing or potential partners *separate from* mobility operators.

Partner Organization Name:

Address (street, city, state, zip):

Website:

Type of Organization:

Contact name and title:

Direct Phone:

Email Address:

Partner Organization Name:

Address (street, city, state, zip):

Website:

Type of Organization:

Contact name and title:

Direct Phone:

Email Address:

(You may add more Partner Organizations as needed)

**Narrative Information**

Please provide the following information in narrative form, maintaining the headings for each section. Please limit the narrative to **seven pages or less.**

Mission and History: Summarize your organization’s mission and history. Pay particular attention to how you are involved in your local shared micromobility program or in community outreach and engagement.

Living Lab Description: Briefly describe the barrier you will address, your work to address it to date, and why your community and/or partnership is well-suited to do a deep dive into this issue or barrier. What would additional financial support help you achieve? What lessons would you hope to share with others in the field after two and a half years?

\*\*Please keep in mind that the focus of the Living Lab program is **not** to support your existing equity efforts as they currently operate, but to support an expansion, refinement, experiment, revised focus with new/different partners, or other strategy or approach from which others can learn and benefit.

Please include the following in your description:

* Community or constituency you are planning to serve
* Barrier to use of shared micromobility that your initiative will address
* Environment for shared micromobility – briefly describe the current state of the mobility network in and adjacent to the community(ies) you will serve or that your constituency will use. Does the area have bike lanes, protected bike lanes, off-street trails, neighborhood greenways, low-stress residential streets, etc.? Does any existing mobility infrastructure connect with destinations such as schools, work centers, health care, or shopping?
* Key strategy and/or program planning

Equity Efforts: Briefly describe your efforts to address diversity, equity and inclusion in your organization and/or partnership and in your work.

Partner Organization Background and Contribution: For each partner, briefly describe the organization’s background, role and investment in the community, history of partnership with your organization, and how they will contribute to the success of this initiative**;** a letter of support from each organization detailing its planned contribution is required.

Evaluation: BBSP will work with each selected Living Lab city to design a measurement and assessment plan for the project. Funding beyond the $200,000 award is available for a baseline assessment at the start of the project and final assessment at its conclusion. We are still interested in understanding your current thinking about what this measurement plan will include and how you will identify and assess outcomes.

1. Measurable Outcomes: How do you define success for this project? Describe what will change as a result of this initiative
2. Measurement: Describe your plans for measuring the success of your project. What will you measure (use of specific stations or devices, ridership demographics, mode shift, etc.) and how?

Required attachments:

1. Partner letters of support detailing their support of the initiative and planned contribution(s)
2. Project budget including other sources of income and whether they are confirmed or pending; a minimum match of 10% (cash or in-kind) is required
3. IRS determination letter for nonprofit organizations (Lead Organization only)
4. Organizational Budget for the current year (Lead Organization only)

**Important Instructions**: Please submit this Full Application via email as a .pdf or Word document. Please title the document with the name of your organization and Full Application (example: Middleville Full Application).

Submit the Letter of Interest, and any questions or concerns, to:

Zoe Kircos

PeopleForBikes Foundation

[zoe@peopleforbikes.org](mailto:zoe@peopleforbikes.org)

720.726.3335