



GREATER NASHUA REGIONAL COORDINATION COUNCIL FOR COMMUNITY TRANSPORTATION - REGION 7 (RCC7)

MEMORANDUM OF UNDERSTANDING

New Hampshire envisions an integrated system of safe, reliable, and sustainable transportation options that allow residents to maintain independence and participate in work and community life no matter their age or ability. To that end, the mission of the Greater Nashua Regional Coordination Council is to improve the coordination, capacity, accessibility, quality, and sustainability of mobility options in its region and to collaborate with other regions in an effort to fulfill the statewide vision.

WHEREAS there are older adults, persons with disabilities, persons with low income, human service agency clients and others who rely on or desire to use community transportation services;

WHEREAS there are several community transportation programs currently providing service within the region, there are also significant gaps of service and significant unmet mobility needs;

WHEREAS these service gaps and unmet needs are anticipated to grow and change over time due to demographic trends in this region;

WHEREAS the coordination of community transportation service has been shown to address these service gaps and unmet needs by providing opportunities to expand service through improved cost efficiency, elimination of duplication, and access to additional funding; and

WHEREAS there is a need and an opportunity to create a balanced network of diverse transportation services and options by coordinating community transportation in this region,

BE IT KNOWN THAT _____ intends to participate in the work and functioning of the Greater Nashua Regional Coordination Council for Community Transportation (hereinafter called the Council or RCC7). This Memorandum of Understanding (MOU) documents this intent and the organization's commitment to the primary mission of the Council.

The Greater Nashua Region 7 includes Amherst, Brookline, Hollis, Hudson, Litchfield, Lyndeborough, Mason, Merrimack, Milford, Mont Vernon, Nashua, Pelham and Wilton New Hampshire.

The role of the Council is to:

- To help develop, implement, and provide guidance for the coordination of community transportation services and information within the region so that people can access local and regional transportation services to get to locations within region and between regions;
- To recommend, guide, and monitor a Regional Mobility Manager, and entity that will be responsible for the provision of mobility management services/options and the coordination of community transportation services and information in the region;
- To advise the community, including governmental officials, philanthropic organizations and business and community leaders on the need for funding of these mobility management and coordination efforts;

- To seek additional public and private funding sources to support these mobility management and coordination efforts, as well as;
- To advise the State Coordinating Council for Community Transportation on existing and future policies affecting transportation services.

As an Organizational Member: In signifying this intention and commitment, _____ pledges to:

- Designate one representative, and may designate up to two alternate representatives, to the Council.
- Ensure that the representative attends regularly scheduled meetings of the Council and is active in the functioning of the Council and Committees.
- Provide meeting space for the Council and/or Committees, as needed.

As an Individual Member: In signifying this intention and commitment, _____ pledges to:

- Regularly attend scheduled meetings of the Council and remain active in the functioning of the Council and Committees.

Signing this Memorandum of Understanding does not signify a commitment of funding for either party.

Either party may cancel this Memorandum of Understanding with thirty (30) days written notice.

IN WITNESS WHEREOF, indicates its support and intent:

Name: _____

Signature: _____

Title: _____

Organization: _____

Date: _____

ACCEPTANCE BY RCC7:

Name: _____

Signature: _____

Title: _____

Organization: _____

Date: _____



CONFLICT OF INTEREST POLICY

Greater Nashua Regional Coordination Council for Community Transportation

Any potential conflict of interest (e.g., Board Membership, Professional Affiliation, Personal Business or Family Relationships) on the part of any member agency, or its representative, shall be disclosed in writing to the Greater Nashua Regional Coordination Council (RCC7) Officers. This conflict includes membership in any organization with which the RCC7 has, or might reasonably in the future enter into, a relationship or transaction in which the member agency would have conflicting interests.

At such time as any matter comes before members regarding future planning or involving any issue of which a member might be a beneficiary, the affected member agency's representative shall make known the potential conflict, whether disclosed by his/her written statement or not. The membership may ask questions of the member with a potential conflict and, if the membership reaches a consensus, by a 2/3 majority, that a conflict is present, may ask the affected member to withdraw from the meeting. If the member with a potential conflict has significant knowledge or expertise in a topic up for discussion and the membership would like to be able to ask him/her questions, the affected member may be asked to recuse him/herself from the discussion but remain in the room to be available to provide information if asked. A recused member shall only answer questions directed at him/her. If a member with a potential conflict does not make that conflict known, any other member may bring the potential conflict to the group's attention. The group will then discuss the potential conflict and decide whether or not a conflict is present by reaching a consensus of 2/3 majority of members present.

The minutes of meetings in which a potential conflict has arisen shall specifically reflect that a disclosure was made, if any questions were asked of the affected member, if the membership reached a consensus that a conflict was present, and if the affected member was allowed to remain part of the discussion, withdrew from the meeting and any voting on the issue, or recused him/herself from the discussion but was available to answer questions directed at him/her. Every new member will be advised of this policy upon entering the Alliance and shall sign a statement acknowledging understanding of, and agreement to this policy. All continuing members will review and sign this document annually.

Please list below any potential conflicts of interest (e.g., Board Memberships, Professional Affiliations, Personal Business or Family Relationships):

(continue on reverse side if necessary)

By signing this, I agree that I have read and understand this Policy, and will comply with its provisions.

Member Agency Name

Member Agency Rep's Signature

Date

Printed Name of Agency Rep



**GREATER NASHUA REGIONAL COORDINATION COUNCIL
FOR COMMUNITY TRANSPORTATION - REGION 7 (RCC7)**

INDIVIDUAL VOTING MEMBER ~ CONTACT INFORMATION

INDIVIDUAL VOTING MEMBER

NAME:	
PREFERRED ADDRESSES:	
MAILING	
EMAIL	
TELEPHONE NUMBERS:	
OFFICE	
MOBILE	
FAX	

FOR RRC7 USE - Has the signed Conflict of Interest form been received and placed on
file? Yes___ No___

ALTERNATE REPRESENTATIVE (1)

NAME:	
ORGANIZATION:	
TITLE:	
PREFERRED ADDRESSES:	
MAILING	
EMAIL	
TELEPHONE NUMBERS:	
OFFICE	
MOBILE	
FAX	

FOR RRC7 USE - Has the signed Conflict of Interest form been received and placed on file? Yes___ No___

ALTERNATE REPRESENTATIVE (2)

NAME:	
ORGANIZATION:	
TITLE:	
PREFERRED ADDRESSES:	
MAILING	
EMAIL	
TELEPHONE NUMBERS:	
OFFICE	
MOBILE	
FAX	

FOR RRC7 USE - Has the signed Conflict of Interest form been received and placed on file? Yes___ No___



**GREATER NASHUA REGIONAL COORDINATION COUNCIL
FOR COMMUNITY TRANSPORTATION - REGION 7 (RCC7)**

**ORGANIZATION VOTING MEMBER ~ CONTACT INFORMATION
DESIGNATED REPRESENTATIVE (1) AND ALTERNATE REPRESENTATIVE (up to two)**

THE ORGANIZATION

NAME OF ORGANIZATION:	
NAME OF EXECUTIVE OFFICER:	
TITLE:	
PREFERRED ADDRESSES:	
MAILING	
EMAIL	
TELEPHONE NUMBERS:	
OFFICE	
MOBILE	
FAX	

DESIGNATED REPRESENTATIVE

NAME:	
ORGANIZATION:	
TITLE:	
PREFERRED ADDRESSES:	
MAILING	
EMAIL	
TELEPHONE NUMBERS:	
OFFICE	
MOBILE	
FAX	

FOR RCC7 USE - Has the signed Conflict of Interest form been received and placed on file? Yes___ No___