



February 17, 2026

AGENDA ITEM 5 E
**CITIZENS MULTIMODAL ADVISORY COMMITTEE
APPOINTMENT**

TYPE OF ITEM: Consent

STATEMENT OF ISSUE

This item seeks board approval of the appointment of Justin Baldwin to serve on the [CRTPA's Citizens Multimodal Advisory Committee \(CMAC\)](#). The application of Mr. Baldwin is provided as **Attachment 1**.

RECOMMENDED ACTION

Option 1: Approve the appointment of Justin Baldwin to serve as a member of the CRTPA's Citizens Multimodal Advisory Committee.

BACKGROUND

The CMAC is an advisory committee to the CRTPA composed of volunteers who dedicate their time to the CRTPA on issues pertaining to transportation planning within the region. In addition to the CMAC, the CRTPA is advised by the Technical Advisory Committee (TAC), which is composed of local and state planners and engineers with expertise in the area of transportation.

Pursuant to Article III, Section 2 of the CMAC Bylaws, the CMAC may consist of a maximum of fifteen (15) voting representatives from the four (4) county CRTPA region. Currently, the CMAC is comprised of fourteen (14) members, and with the appointment of Mr. Baldwin, the CMAC will be at full membership.

ATTACHMENT

Attachment 1: Application of Justin Baldwin

Capital Region Transportation Planning Agency CITIZEN'S MULTIMODAL ADVISORY COMMITTEE (CMAC) APPLICATION

Please return to:

Capital Region Transportation
Planning Agency
300 S. Adams St., 3rd Floor
Tallahassee, Florida 32301

Or:

Email:
yulonda.mitchell@crtpa.org



This application will remain in active files for two years.

Please contact the CRTPA to advise of any changes regarding the information on this application.

Email: yulonda.mitchell@crtpa.org

PHONE: 850-891-8628

Name: Justin Baldwin

Date: 10/29/25

Phone: (518) 307-6048

Email: baldjm78@gmail.com

Please list your specific employer/occupation if employed by a State, Federal, or local government:

Employer: Florida Department of Environmental Protection.

Please provide your home and work address (if applicable). Please check that box of your preferred mailing address.

Home Address:

City/State/Zip: 1549 Yancey Street, Tallahassee FL 32303

Work Address:

City/State/Zip:

The Capital Region Transportation Planning Agency strives to ensure that its citizens multimodal advisory committee is representative of the community's demographic makeup. To assist in this endeavor, please provide the following information (voluntary).

Please also note if you are physically challenged Yes No

Race: American Indian or Alaskan Native Black Other Female
 Asian or Pacific Islander Hispanic White Gender: Male

Please identify any potential conflicts. Such conflicts may include pursuit of CRTPA consultant work related to the provision of professional services:

Do you ride the bus? No
 Do you drive a car? No

Do you bicycle to work/shopping? Yes No
 Do you bicycle for recreation? Yes No
 Do you walk to work/shopping? Yes No
 Do you walk for recreation? Yes No

Please circle your age bracket
 18 - 25 / 26 - 35 / 36 - 49 /
 50 and over

Can you serve a multi-year term? Yes No

Can you regularly attend meetings? Yes No
 Conflicts:

Please circle any special population interests you may represent:

Road Cyclists, Off-Road Cyclists, Transit Users, Transportation Disadvantaged

Child, Youth, or Senior Pedestrian Advocates, Students, Seniors, Persons with Disabilities

CITIZEN'S MULTIMODAL ADVISORY COMMITTEE APPLICATION

Please tell us something about yourself. This information will help us create an advisory board that is reflective of a broad spectrum of the community. If you have any interests, hobbies, community activities, previous experience on committees, or anything else you would like us to know in consideration of your application please write it here. You may also attach this information.

I previously worked with FDEP's office of Greenways + Trails from 2019 to 2024. During this time I served on the CRTPA TCC. I commute by bike to work everyday and to other events around Tallahassee and the surrounding communities. I have a master's degree in planning and I am AICP certified.

All statements and information provided in this application are true to the best of my knowledge.

Signature: _____

If you have a disability requiring accommodations, or need assistance filling out this application, please contact the Capital Region Transportation Planning Agency at 850-891-8630.

The telephone number for the Florida Relay TDD Service is 711 or 1-800-955-8771.