MASSDOT PROCESS FOR COMPLETE STREETS FUNDING PROGRAM REIMBURSEMENT

To receive reimbursement for approved items and work tasks associated with the Ch 90I Complete Streets Funding Program, the City/Town submits the following forms to document expenditures for reimbursement. These forms apply to both Tier 2 Technical Assistance and Tier 3 Construction Project reimbursements. The following form is submitted with the Chapter 90 List of Materials HED-454 Form, and copies of invoices to your District State Aid Engineer.

The form Reimbursement Request [562KB]) and List of Materials (454 Form) [121KB] can be found at https://www.massdot.state.ma.us/highway/DoingBusinessWithUs/LocalAidPrograms/Chapter90Program/Chapter90Forms.aspx.
CHAPTER 90 – REIMBURSEMENT REQUEST

City/Town: ________________________________       Project: ________________________________

Project request was approved on ___________________________ for $ ________________________
at 100% Reimbursement Rate = $ ____________________________.

1) Attached are forms which document payment of approved expenditures totaling $ ____________________________ for which we are requesting $ ____________________________ at the approved reimbursement rate of 100%.

2) The amount expended to date on this project is $ ____________________________.

3) Is this request for a FINAL payment on this project?  ☐ Yes  ☐ No

4) Remarks:

CERTIFICATION

A. I hereby certify under penalties of perjury that the charges for labor, materials, equipment, and services itemized and summarized on the attached forms are true and correct, and were incurred on this project in conformance with the MassDOT Highway Division Policies and established Municipal Standards that were approved for this project.

            (Signed)   (Municipal Highway Official Title)   (Date)

B. I/we certify under penalties of perjury that the items as listed or summarized on the attached forms were examined; that they are in conformity with our existing wage schedule, equipment rates, and all applicable statutes and regulations; that they are properly chargeable to the appropriation(s) designated for this work; and that Executive Order No. 195, dated April 27, 1981 and Chapter 11, Section 12 is acknowledged as applicable.

REVIEWED AND APPROVED FOR TRANSMITTAL

by ________________________________  Signed: ________________________________

__________________________________________  ________________________________

(Accounting Officer’s Title)  (Duly Authorized)

DATE ________________________________