



## Certifications and Assurances of the MPO's and RTPA's

General Information:			
Regional Agency Name:		Contact Person:	
Contact Email:		Contact Phone:	
Name of Subrecipient:		Project Description:	

Project Amount and Fund Type:	
Regional Apportionment 5311 or 5311(f)	Total Project Cost

Federal Transportation Improvement Program - Metropolitan Planning Organizations and Regional Transportation Planning Agency		
Document (or Amendment) Number	Document (or Amendment) Year	FHWA/FTA Federally Approved TIP (Date)



**Check all that apply below:**

	<b>Some combination of state, local, or private funding sources have been or will be committed to provide the required local share.</b>
	<b>The subrecipient has coordinated with other transportation providers and users in the region, including social service agencies capable of purchasing service.</b>
	<b>The amount requested does not exceed the Federal funds provided to this agency in the approved Federal TIP or Federal Statewide TIP(FSTIP)</b>
	<b>The regional agency or TPA has approved, by resolution, the programming of funds for this Project and Project has met all Statewide Transportation Improvement Program (STIP) requirements.</b>

**Certifying Representative:**

**By signing below, I have read and acknowledge that my agency is in compliance with certifications and assurances as stated above.**

<b>Name:</b>		<b>Title:</b>	
<b>Signature:</b>		<b>Sign Date:</b>	

**\*Please sign above in BLUE ink\***  
**\*Due to COVID-19 we will be accepting both wet and electronic signatures\***