Airport Improvement Program (AIP) Grant Payment and Sponsor Financial Reporting Policy

Office of Airports Federal Aviation Administration August 20, 2012

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Section 1: Applicability

This policy pertains to the requirements for submitting, reviewing, and approving grant payment requests, as well as, financial reporting requirements for sponsors. Unless noted otherwise the requirements within this policy apply uniformly to all grant sponsors, including those States participating in the State Block Grant Program (SBGP). This policy is effective on the date grant payment activities are transitioned into the Delphi elnvoicing system.

Section 2: Payment Request Method

U.S. Department of Transportation (DOT) Electronic Grants Payment System

All sponsors must submit their grant payment requests electronically through the DOT Electronic Grants Payment System, Delphi elnvoicing. All grant sponsor users must complete an e-Authentication process to acquire system access and maintain an active registration in Delphi elnvoicing to ensure timely payment.

U.S. DOT Electronic Grants Payment System Waiver Policy

On a very limited basis the DOT's Office of Financial Management may issue sponsors a system waiver that permits payment requests be submitted by hard copy rather than electronically through Delphi elnvoicing. All sponsors requesting a system waiver must first consult with their Regional Office /Airport District Office (RO/ADO) before submitting their request. All sponsors seeking a system waiver must complete the Waiver Request Form (Appendix A) and follow the instructions on the form for submittal. The FAA will only make waiver recommendations to DOT for sponsors that can clearly demonstrate they are unable to use or access the internet to register and enter payment requests through Delphi elnvoicing. Sponsors must provide a copy of their Waiver Request Form to their RO/ADO before submittal for review. All requests will be reviewed by the DOT's Office of Financial Management and sponsors will receive a written response confirming or denying their request from the DOT.

Sponsors issued a system waiver must submit all payment requests through hard paper copy to their appropriate RO/ADO for review. Payment requests must include the completed SF-271, Outlay Report and Request for Reimbursement for Construction Programs, or for non-construction projects, the SF-270, Request for Advance or Reimbursement. An approved equivalent form may also be used in place of these forms. Sponsors must also include any other required supporting documentation associated with their grant payment risk level, as outlined in Table 2: Grant Payment Supporting Documentation Requirements (Table 2). All sponsors issued a system waiver are still expected to meet the payment frequency requirements outlined in Section 3.

Section 3: Payment Request Frequency

Sponsors must initiate a payment request for project accomplishments in accordance with project progress and receipt of contractor invoices. This will typically be monthly but may vary depending on the type of project. It should be noted that continued grant payment inactivity, defined as no drawdowns over a 12 month period, can be cause for termination of a grant agreement. For further guidance on grant termination policies and procedures please refer to the most current version of FAA Order 5100.38 (Airport Improvement Program) and FAA Order 5190.6B (Airport Compliance Manual).

Section 4: Authorized Payment Requesters

Only those users that have successfully completed the eAuthentication process and have been granted access to Delphi eInvoicing may submit payment requests. Sponsors are not limited in the number of users they designate as authorized to request payments on their behalf. Sponsors may assign a designee to prepare and save payment requests on their behalf in Delphi eInvoicing; however, sponsors must review any designee prepared payment requests for accuracy before the sponsor submits a payment request. It is the responsibility of the sponsor to ensure all payment requests are accurate and meet all grant payment requirements.

Section 5: Payment Request Supporting Documentation Requirements

All sponsors are required to provide supporting documentation for all payment requests. Supporting documentation must be uploaded electronically, as attachments to the payment request, in Delphi elnvoicing. The sponsor's grant payment risk level will be used to determine the supporting documentation required to accompany their payment requests.

Section 5.1 Grant Payment Risk Level

Each sponsor will be assigned a grant payment risk level of nominal, moderate or elevated. A sponsor's grant payment risk level pertains solely to their risk associated with submitting grant payments and may differ than the risk level assigned to the sponsor for other grant administration activities defined in the Revised Guidance to FAA's Risk Based Approach to Grant Oversight of the Airport Improvement Program (AIP). Grant payment risk levels will be determined based on the factors illustrated in Table 1, which are established in accordance with the Revised Guidance to FAA's Risk Based Approach to Grant Oversight of the Airport Improvement Program (AIP). The RO/ADO must complete a Risk Level Determination Form (Appendix B) to document the assignment of a grant payment risk level to each sponsor.

Table 1: Grant Payment Risk Levels

Grant Payment Risk-Level	Risk Level Factors
Nominal Risk Sponsor	Pose minimal risk of improper use of grant funds.
Moderate Risk Sponsor ¹	Has a documented record of deviation from appropriate grant payment processes and documentation; such as, finding of lack of supporting documentation during payment requests; repeated grant draw down irregularities; or Single Audit findings requiring payments to the Federal Government in excess of \$100,000.
Elevated Risk Sponsor	Has a blatant or reckless violation of a grant agreement; Finding of waste, fraud, or abuse; or a repeat of any of the moderate risk factors.

Section 5.2 Supporting Documentation

Supporting documentation must be uploaded electronically to all payment requests in Delphi elnvoicing. The assigned grant payment risk level for each sponsor will determine the supporting documentation that sponsors must provide with each payment request. See Table 2 for the supporting documentation requirements associated for each grant payment risk level. Supporting documentation must be clearly labeled by sponsors to ensure it is identifiable and searchable. States participating in the State Block Grant Program must also meet the supporting documentation requirements in Table 2. All payment requests from states participating in the SBGP must be based on billed invoices and not requests from sub awardees. As a result, invoice summaries down to the worksite level and billed invoice documentation must be provided as required in Table 2.

In cases where sponsors submit a single payment request combining several grants, required supporting documentation as outlined in Table 2 must still be submitted by the sponsor. Sponsors must breakout supporting documentation to clearly illustrate the grant that expenses are associated with in the payment request. For example, an invoice summary document must be broken out and attached for each grant that is associated with the payment request.

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¹ All single grants over \$20 million must be treated as a moderate risk regardless of the sponsors overall payment risk level.

Table 2: Grant Payment Supporting Documentation Requirements

Documentation Requirements	Nominal Risk Sponsor	Moderate Risk Sponsor	Elevated Risk Sponsor
Invoice Summary: A summary document generated by the sponsor that includes the following information for each Pay Application/Invoice: contractor name ² , the date of invoice, invoice number, billed amount, breakout of AIP and Non-AIP participating costs, invoice payment due date, worksite name, and a short summary of services/material billed (See Appendix C For Example).	X	X	X
Contractor Pay Request ² : Each Pay Application/Invoice with Line Item Summary from contractor (See Appendix D for Examples).		Х	Х
Sponsor Certification Letter & Other Supporting Documentation: A letter from the Airport Director/Grant Signer that certifies the billed services meet contract pricing and bill quantity requirements as well as all documentation to support billing; such as, line item details accompanying each pay request, supplier invoices, inspector/observation reports (sponsor or contractor prepared), all associated sponsor/engineer analysis, and labor summary. (See Attachment E for Examples).			X

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 $^{^2}$ The use of contractor here and throughout the document references not just construction contractors but also vendors and any service providers that have billed sponsors for work under the payment request.

Pursuant to 49 U.S.C. 47107, it is the sponsor's responsibility to maintain all original source documentation that supports grant payments from the FAA to the sponsor and payments made by the sponsor for the project. This includes all related documentation for prime as well as sub-contractor payments. These accounting records must be made available upon request to FAA, the DOT's Office of the Inspector General, Government Accountability Office, independent auditors, and any other auditors acting on behalf of those offices or the FAA, DOT and Congress. In accordance with 49 CFR Part 18.42, all original documentation that supports grant payments must be retained for three years after the grantee submits the final expenditure report.

Section 6: Review and Approval of Payment Requests

Section 6.1 Approval Process Overview

The Delphi elnvoicing system will automatically check the grant's available balance in Delphi to verify the availability of funds before a payment request may be successfully submitted by a sponsor. Once a payment request is successfully submitted it will follow the approval process assigned by the RO/ADO. There are two types of approval processes in Delphi elnvoicing, 'auto-approval' and 'manual approval.'

<u>Auto-Approval:</u> This is an approval process whereby payment requests do not require approval by the RO/ADO staff and are processed automatically for payment once successfully submitted. However, all credit memo requests (refunds) and any payment request that would bring the total drawdown request to more than 90 percent of the total grant amount will be re-routed to a manual approval process requiring RO/ADO staff approval (See Sections 6.9 and 7 for more information). Sponsors that are on an auto-approval process are still required to submit supporting documentation as outlined in Table 2 and all such documentation is subject to review and audit.

Manual Approval: This is an approval process whereby every payment request requires the approval by RO/ADO staff before the payment request is processed for payment.

Section 6.2 Assignment of Approval Process

Payment approval processes in Delphi elnvoicing will be assigned on a sponsor level, or in very limited cases, an individual grant level. The RO/ADO will assign each airport sponsor an 'auto-approval' or 'manual approval' process in Delphi elnvoicing based on the sponsor's grant payment risk level. Table 3: Sponsor Approval Process Requirements (Table 3) specifies the approval process to assign for each grant payment risk level. All nominal grant payment risk level sponsors must be assigned an 'auto-approval' review process. Terminal, environmental, land, planning, parking lots, or multi-year projects may need more

oversight but do not always necessarily require it. As a result, only in cases were more oversight is deemed appropriate by the RO/ADO staff are the RO/ADO permitted to assign a manual approval process to these specific projects under nominal sponsors. All other nominal sponsor grants for projects must be assigned an auto-approval process. All moderate and elevated grant payment risk level sponsors must be assigned a manual approval process in Delphi elnvoicing. Any sponsor that has been granted a system waiver by DOT must be assigned a manual approval process regardless of their grant payment risk level.

Table 3: Sponsor Approval Process Assignment Requirements

Grant Payment Risk-Level	Delphi elnvoicing Approval Process ³
	Auto-Approval – No RO/ADO approval required with the exception of payment requests within the final 10 percent of the grant award amount.
Nominal	At the discretion of the RO/ADO, specific grants to nominal risk sponsors for terminal, environmental, land, planning, parking lots, and multi-year projects may be assigned a manual approval process. These projects must still meet nominal risk sponsor documentation requirements.
	Manual Approval - Approval hierarchy must include at least one level of RO/ADO approval.
Moderate	All grants exceeding \$20 million (excluding state block grants) regardless of sponsor risk level must be assigned a manual approval process.
Elevated	Manual Approval – Approval hierarchy must include at least two levels of RO/ADO approval of which one level must be conducted by a RO/ADO manager.

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³ Sponsors that have been granted a system waiver from the U.S. DOT must be assigned a manual approval process in Delphi elnvoicing regardless of their grant payment risk level

Section 6.3 Approval Hierarchy

Approval hierarchies are created to assign approval processes for payment requests. Each grant must be assigned an approval hierarchy by which payment requests are routed to the designated RO/ADO staff for electronic approval. It will be the responsibility of the RO/ADO manager to designate the appropriate staff in Delphi elnvoicing to be approvers for specific sponsors and/or grants. All sponsors will be assigned a default approval hierarchy that was identified during system deployment. This default hierarchy can be changed by submitting the Hierarchy Assignment Form (Appendix F) to the ESC helpdesk to be processed in the system. Whenever a new grant is issued the default hierarchy will automatically be assigned to that grant. If, in accordance with the requirements in Table 3, a different hierarchy, other than the default, needs to be assigned to that particular grant; the RO/ADO must complete a Hierarchy Assignment Form (Appendix F). This form must be sent to the ESC Helpdesk after receiving the Purchase Order (PO) number from the FAA Accounting Technician.

To update, remove, or add FAA approvers to an existing approval hierarchy the RO/ADO manager must complete the Approval Hierarchy Request Form (Appendix G) and send it to the ESC Helpdesk to be processed in the system. This can be done at any time. It is the responsibility of the RO/ADO manager to ensure approval hierarchies in Delphi elnvoicing are current and accurate. In the limited circumstances where a new approval hierarchy needs to be created the RO/ADO must complete the Approval Hierarchy Request Form (Appendix G) and send it to the ESC Helpdesk to be processed in the system. All new approval hierarchies must maintain the same naming convention to be consistent with existing RO/ADO approval hierarchies. All approval hierarchies must be labeled according to the following naming convention "<AIP>-<RO>-<ADO>-<Approval Process Type>-<Number>." For example, a manual approval hierarchy in the Washington ADO would be labeled as AIP-AEA-WAS-MANUAL-1 or an auto-approval hierarchy in the Central Region as AIP-ACE-AUTO-1.

Section 6.4 Review of Payment Requests from Sponsors on Manual Approval

The RO/ADO staff will receive an email notification for all payment requests requiring manual approval. The RO/ADO must review all payment requests electronically in Delphi elnvoicing for those sponsors and/or grants assigned a manual approval payment process. When reviewing the payment request the RO/ADO must ensure that the following criteria are met before approving the payment request:

- The cost is reasonable and allowable:
- All required supporting documentation has been attached to the payment request:
- Work covered by the payment is already completed and in line with the project schedule and/or scope of services; and

 Payment request is consistent with the most recent project progress and financial performance reports provided by the sponsors

A sponsor must only request payment in the amount of allowable project costs that have been incurred by the Sponsor. These are costs that the sponsor has been billed for and paid. However, there are times when advance payments may be necessary. An advance payment is when a sponsor may request payment for services billed but not yet paid by the sponsor. All advance payments must still provide documentation showing that the payment is based upon invoices and billing statements. Please see the most current version of FAA Order 5100.38 (Airport Improvement Program) for more details on advance payment policies.

Section 6.5 Review of Payment Requests from Sponsors Issued a System Waiver

For those sponsors who have been granted a system waiver the process for reviewing payment request will be different because the sponsor must initiate the payment request from outside the system. All sponsors issued a system waiver will submit a hard copy of the payment request to the RO/ADO outside the Delphi elnvoicing system. Once the RO/ADO receives the hard copy payment request they must review it in accordance with the criteria established in Section 6.4. Following the review if the payment request needs to be corrected or cannot be approved than the RO/ADO must contact the sponsor to resubmit a new hard copy payment request with the corrections. Once approved the RO/ADO must forward all payment request materials, including the supporting documentation, to their designated FAA Accounting Technician to be processed manually into Delphi elnvoicing. Once entered into Delphi elnvoicing by the FAA Accounting Technician the RO/ADO staff will be alerted by e-mail notification that a payment request is pending approval action. The RO/ADO must then electronically review and approve the payment request again to ensure the request was processed accurately in Delphi elnvoicing.

Section 6.6 Review of Payment Requests from Sponsors on Auto-Approval

There is no approval action necessary for payment requests submitted by sponsors assigned an auto-approval process. However, the RO/ADO staff must still monitor payments on a quarterly basis to ensure the required supporting documentation is uploaded with each request and the draw downs are consistent with sponsor project progress and financial performance reporting. During this quarterly review the RO/ADOs must select at least one grant to review all payment requests submitted during the quarter. The RO/ADOs must review payment requests for the following:

All required supporting documentation is uploaded with each payment requests;

- Each payment requested amount matches the supporting documentation:
- All work completed in the payment requests are consistent with the quarterly construction progress reports submitted by the sponsor for the project; and
- There are no findings of any obvious unreasonable or unallowable costs.

RO/ADO staff must document this quarterly review by printing each payment request reviewed and initialing it. These documents should then be placed in the project file.

Section 6.7 Approval of Payment Requests

For sponsors on manual approval, the RO/ADO staff will automatically receive e-mail notifications from Delphi elnvoicing when a payment request is submitted by a sponsor and is awaiting action. RO/ADO staff must access Delphi elnvoicing and review payment requests within 30 days of the payment request being made. Upon a successful review, the RO/ADO must approve the payment requests in Delphi elnvoicing. RO/ADO staff must not change the payment request amount or redistribute the accounting line in which the payment amount draws from. All payments will be made on a First-In-First-Out (FIFO) accounting basis. Any changes to the accounting lines will be performed by the designated FAA Accounting Technician. Once all the designated approvers identified in the hierarchy workflow for the sponsor and/or grant have approved the payment request it will be electronically batched in Delphi and sent to the U.S. Treasury for payment. An email will also be sent to the sponsor informing them that their request has been approved and is now pending payment.

For sponsors on auto-approval, no approval action is required and the payment will be electronically batched in Delphi and sent to the U.S. Treasury for payment.

Section 6.8 Rejection of Payment Requests

When the RO/ADO staff determines a requested payment amount is not reasonable, allowable, or justified the entire payment request must be rejected in Delphi elnvoicing. No partial payments will be allowed in Delphi elnvoicing. The RO/ADO staff rejecting the payment must provide the reason the payment request was rejected and the corrective action required in the comments field. All sponsors will be notified by Delphi elnvoicing when their payment request is rejected. Once corrected the sponsor must resubmit a new payment request with the required supporting documentation again in Delphi elnvoicing.

With the exception of final payments (Section 6.9), payment requests from sponsors on auto-approval cannot be rejected in Delphi elnvoicing by the

RO/ADO staff. If there are any errors in payment requests the sponsor must immediately contact their RO/ADO as well as submit a credit memo, as outlined in Section 7, to correct the payment.

Section 6.9 Final Payment Request

As directed in statute, "Payments totaling not more than 90 percent of United States Government's share of the project's estimated allowable cost may be made before the project is completed if the sponsor certifies to the Secretary that the total amount expended from the advance payments at any time will not be more than the cost of the airport development work completed on the project at that time" (49 U.S.C. § 47111). As a result all payment requests within the final 10 percent of grant funds will require RO/ADO approval. Any grants on an auto-approval process will automatically be re-assigned a manual approval process when the total drawdown amount exceeds 90 percent of the grant award amount to enable the required approval by RO/ADO staff for the remaining 10 percent of available grant funds.

The RO/ADO must not approve any payment requests within the final 10 percent of available grant funds until all sponsor financial closeout documentation is received or a project amendment is initiated. If a project amendment is initiated that would increase the award amount, the sponsor may continue to request payment on those additional funds up until the total drawdown amount equals the re-calculated 90 percent threshold. At that point grants will be automatically re-assigned to a manual approval process whereby the RO/ADO must not approve additional payment requests until all sponsor financial closeout documentation is received, and reviewed for accuracy and completeness.

The RO/ADO may exclude block grants from States participating in the State Block Grant Program (SBGP) from the final 10 percent hold. Under such cases the State may drawdown the full 100 percent of the grant award amount prior to submitting financial closeout documentation. However, States are required to follow the final 10 percent hold for all sub grant projects consistent with the statute.

Section 6.10 Holding Payment Requests

If a particular sponsor is determined to be in non-compliance with grant conditions or is indebted to the U.S. Government the RO/ADO staff may put a hold on all payment requests for a particular sponsor in Delphi elnvoicing by contacting their FAA Accounting Technician to suspend the sponsor's Delphi elnvoicing account. All sponsors with a hold on payment requests will not be able to submit payment requests in Delphi elnvoicing. The RO/ADO staff may not withhold payment for approved incurred costs for more than 180 days unless the sponsor has failed to comply with grant conditions, has been notified in writing by the Regional Airports Division Manager, and has been given an opportunity for a hearing. RO/ADO staff must contact the FAA Office of Airports

Compliance, ACO-100, for specific procedures and requirements before attempting to withhold payments for non-compliance.

Section 7: Improper Payments

If a sponsor submits an improper payment they must immediately contact their RO/ADO. If the improper payment has not yet been approved the RO/ADO must reject the payment request in Delphi elnvoicing.

Any improper payments that have already been processed and received by the sponsor require a credit memo (refund) be processed to return the funds. Sponsors must contact their RO/ADO and submit a credit memo in Delphi elnvoicing for the amount of the improper payment received, which may include overpayments or any payments received from the incorrect grant. Sponsors must not deduct the improper payment amount from the next payment amount requested; as a record of the improper payment in the system is required.

Sponsors submitting a credit memo must include supporting documentation, which includes an official letter from the sponsor's authorized representative who accepted the grant explaining the reason for the credit memo. All credit memo requests will require approval by the RO/ADO. Credit memo requests will be automatically assigned a manual approval process in Delphi elnvoicing regardless of the sponsor grant payment risk level. Approved credit memo requests will be held for 29 days in the system until a subsequent payment request is made that will offset the returned amount. If after 29 days no subsequent payment has been made to offset the returned amount, the credit memo will automatically be removed from Delphi elnvoicing and sent to FAA Accounts Receivable for collections processing.

Section 8: Payment

Once payment requests are approved they will be electronically batched in Delphi and sent to the U.S. Treasury for payment to the sponsor's bank through Electronic Funds Transfer (EFT). Approved payment requests are electronically batched daily in Delphi and sponsors should receive their payment within two business days of approval.

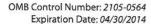
Section 9: Financial Reporting

In accordance with 49 CFR 18.41 sponsors are required to submit certain financial reports to summarize grant expenditures and the status of project funds. These financial reports must be collected outside of the Delphi elnvoicing system. Delphi e-Invoicing is limited to grant payments and does not currently provide the full capabilities to manage financial reporting requirements. All sponsors must prepare and submit the following financial reporting forms to the

appropriate RO/ADO in accordance with the frequency requirements specified below.

- SF 425, Federal Financial Report (Appendix H): This report, or approved equivalent, must be submitted annually for each open grant, due 90 days after the end of each fiscal year, by sponsors to monitor outlays and program income on a cash or accrual basis. In addition, this report must be submitted as a final financial report during closeout in accordance with Title 49 CFR Part 18.41 and 18.50.
- SF 271, Outlay Report and Request for Reimbursement for Construction Program (Appendix I): This report, or approved equivalent, is used for construction projects only and must be submitted annually, due 90 days after the end of each fiscal year, by sponsors to summarize requests for reimbursements. In addition, this report must be submitted as a final financial report during closeout in accordance with Title 49 CFR Part 18.41 and 18.50. Please note that only those sponsors issued Delphi elnvoicing system waivers are required to use this form with each payment request as well as annually.
- SF-270, Request for Advance or Reimbursement (Appendix J): This report, or approved equivalent, is used for non-construction projects only and must be submitted annually, due 90 days after the end of each fiscal year, by sponsors to summarize requests for reimbursements. In addition, this report must be submitted as a final financial report during closeout in accordance with Title 49 CFR Part 18.41 and 18.50. Please note that only those sponsors issued Delphi elnvoicing system waivers are required to use this form with each payment request as well as annually.

Appendix A – System Waiver Request Form





U.S. Department of Transportation Delphi elnvoicing Payment Request System Waiver Request Form - Instructions

General Instructions

Purpose of Form

The DOT and its Operating Administrations (OA's) are modernizing its financial management systems, and as a result there will be changes to the way grant recipients submit payment requests to the Department. Recipients will be required to have electronic internet access to register in DOT's electronic payment system, Delphi elnvoicing.

Under limited conditions, DOT Financial Management officials may allow exceptions to the requirement that grantees register in and submit payment requests through the Delphi elnvoicing system. The enclosed form is used to request a waiver from using the Delphi elnvoicing system.

Applicability

All recipients of grants or cooperative agreements submitting payment requests to the Department of Transportation must be registered in and submit payment requests through DOT's Delphi elnvoicing system.

Note: This process is not applicable to grant recipients currently requesting payment electronically through the National Highway Traffic Safety Administration's Grant Tracking System (GTS), the Federal Highway Administration's Rapid Approval State Payment System (RASPS), or the Federal Transit Administration grant recipients currently requesting payment through the Electronic Clearing House Operating System (ECHO),

Waiver Process

If you are unable to access the internet, or are otherwise unable to use the DOT's Delphi elnvoicing system, your organization must submit and be granted a waiver of compliance. Refer to DOT Form 2770.4 and related instructions for information regarding the waiver process. Recipients may apply for an exemption or waiver by submitting a written waiver request to DOT Office Financial Management. This request must contain the following information:

- 1. Name, address, grantee institution or entity name, phone number and email address.
- 2. Recipients must provide specific reasons as to why they are unable to use or access the internet to register and enter payment requests using the online payment system.

All requests should be sent to Director of the Office of Financial Management, US Department of Transportation, B-30, room W93-322, 1200 New Jersey Avenue SE, Washington DC 20590-0001, DOTElectronicInvoicing@dot.gov. DOT Financial Management representatives will not consider requests that are incomplete.

Note: Concerns over system security are not valid reasons and will not be granted a waiver from DOT Financial Management because the Delphi elnvoicing system is fully secure and meets the latest technical security requirements as proscribed by the Office of Management and Budget and the National Institute of Standards and Technology (NIST).

Once complete and validated by DOT, the Director of the Office of Financial Management will review the request and provide a response approving or denying the request via mail or e-mail to the recipient point of contact. The review process should take approximately thirty (30) days from the time the request is received by the Office of Financial Management.

Mailing Instructions

Mail via certified USPS, UPS, Fedex, etc. to: US Department of Transportation Office of Financial Management, 1200 New Jersey Avenue SE, Room W93-322 Washington DC 20590-0001

Paperwork Reduction Act (44 U.S.C. 3501) Burden Statement: A federal agency may not conduct or sponsor, and a person is not required to respond to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2105-0564. Public reporting for this collection of information is estimated to be approximately 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are required to request grant related payments from the DOT. Send comments regarding this burden estimate or any other aspect of this collection, including suggestions for reducing this burden to: Information Collection Clearance Officer, Department of Transportation, 1200 New Jersey Avenue SW, Washington, DC 20590, S-83.

Privacy Act Statement: Privacy Act Statement (5 U.S.C. § 552a, as amended): AUTHORITY: 31 USC 3512, authorizes DOT to collect this information. PURPOSE(S): DOT will use the information provided to establish your identify prior to your receiving an account within our system, and is intended solely to establish a unique identity and proof thereof. ROUTINE USE(S): In accordance with DOT's system of records notice, DOT/ALL 7 Departmental Accounting and Financial Information System, DAFIS, the information provided may be disclosed to "consumer reporting agencies" as defined in the Fair Credit Reporting Act (15 U.S.C. 1681a(f)) or the Federal Claims Collection Act of 1982 (31 U.S.C. 3701(a)(3)). DISCLOSURE: Provision of the requested information is voluntary; however failure to furnish the requested information may result in an inability of the Department to grant you access to our system.

OMB Control Number: 2105-0564 Expiration Date: 04/30/2014



U.S. Department of Transportation Delphi elnvoicing system Waiver Request Form

	Contact Information:
Recipient Legal Name:	
Doing Buisness As (DBA) Name:	
Point of Contact (POC) Name:	
Phone Number:	
Recipient DUNS Number:	
Recipient Address Line 1:	
Recipient Address Line 2:	
Recipient City/State/Zip Code:	
	Waiver Justification:
rovide a detailed justification provegister and enter payment reques	viding specific reasons as to why the grantee organization is unable to use or access the internet to ts using the online payment system.
Waiver Justification	
Grantee POC Signature	

OMB Control Number: 2105-0564 Expiration Date: 04/30/2014

DOT Response Required for Non-concur:	
OOT Response	
DOT Financial Management Representative Signature	Date
Mail via certified USPS, UPS, Fedex, etc. to: DOT Enterprise Services Center FAA Accounts Payable, AMZ-100 PO Box 25710	

Oklahoma City, OK 73125

Appendix B – Risk Level Documentation From

Currently Under Development

Appendix C – Example of Invoice Summary

Appendix C - Example of Invoice Summary Prepared by Sponsor

Summary of Sponsor Invoice # 15 Grant # 3-00-0000-001-2011

Contractor/Consultant Contractor	Contractor					Non-AIP		
Name	Invoice # Invoi	Invoice Date	Due Date	Due Date Billed Amount AIP Costs		Costs	Worksite Name	Short Summary of Services/Materials Billed
8 & D Associates	7	3/30/2012	4/30/2012	4/30/2012 \$35,400.00	\$31,860.00	\$3,540.00	St. Augusta Regional Airport	300 hours of project assessment and inspection
Point Industries	4	5/3/2012	6/3/2012	\$325,312.00	\$292,780.00	\$32,532.00	St. Augusta Regional Airport	6/3/2012 \$325,312.00 \$292,780.00 \$32,532.00 \$t. Augusta Regional Airport 3,837 tons of crushed aggregate base course and installed 6,243 tons of bituminous binder course.
Total Requested					\$324,640.00			

SAMPLE 1 - INVOICE SUMMARY for DEVELOPMENT PROJECT (Cumulative)

GRANT RECIPIENT INFORMATION

Name: ABC Airport Authority Airport: ABC Municipal Airport

Address: 2222 Airport Road

City/State: Airport City, USA

Grant Number: 3-XX-XXXX-XX

PROJECT INFORMATION

Description: Rehabilitate Taxiway

4 Reimbursement No.:

Federal Share %

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Vendor/Class/Description	(10) Contract	(1c) Previously Payments	- Z	(2) Invoice Number	(3) Invoice Date	(4) Due Date	(5) Invoice Amount	(6) AIP Eligible Costs	(7) Non-Participating Costs	ating	(8) AIP Share	re
Administrative							- \$	*	\$		\$	
Daily Dispatch - RFQ	n/a	20.00		1	10/1/11	11/1/11	\$ 50.00	\$ 50.00	\$ (i	\$	45
Daily Dispatch - IFB	n/a	250.00	-	2	4/1/12	5/1/12	\$ 250.00	\$ 125.00	\$	125.00	\$	113
Fedex - Project Manual	n/a	35.00		1	1/1/12	2/1/12	\$ 35.00	\$ 35.00	\$ (,	\$	32
Fedex - Grant Agreement	n/a	15.00		2	6/1/12	7/1/12	\$ 15.00	\$ 15.00	\$		\$	14
8												
Engineering - Design Services												
AIP Consutants Inc: (2012D127)	\$ 00.000,00\$	55,000.00										
Design, Bid Services			203	2012D127-1	12/1/11	1/1/12	\$ 15,000.00	\$ 15,000.00	\$		\$	13,500
Design, Bid Services			203	2012D127-2	1/1/12	2/1/12	\$ 25,000.00	\$ 23,000.00	\$	2,000.00	\$	20,700
Design, Bid Services			203	2012D127-3	2/1/12	3/1/12	\$ 15,000.00	\$ 15,000.00	\$ (,	\$	13,500
Design, Bid Services			x 201	2012D127-4	4/1/12	5/1/12	\$ 5,000.00	\$ 5,000.00	\$		\$	4,500
Construction Phase Services - Observation and Testing	and Testing											
AIP Consutants Inc: (#2012C157)	\$75,000.00	\$0.00										
Construction Services-March2012		^	x 203	2012C157-1	4/1/12	5/1/12	\$ 2,500.00	\$ 2,500.00	\$,	\$	2,250
Construction Services-April 2012		•	x 203	2012C157-2	5/1/12	6/1/12	\$ 10,257.00	\$ 10,257.00	45		\$	9,231
Construction												
Airport Paving Inc.	\$800,000.00	\$0.00								-		
Construct Taxiway		Î	×	1	6/1/12	7/1/12	\$ 50,000.00 \$	\$ 50,000.00	\$	9	\$	45,000

x= Current Invoice Submmital

108,884

TOTAL \$

60,981

AMOUNT OF THIS REIMBURSEMENT | \$ PREVIOUS REIMBURSEMENTS

- Allows tracking of all invoices submitted under the project to date.

Format Features

- Groups invoices into appropriate cost classifications (e.g. Design)
- Identifies specific invoices addressed under current outlay

Appendix D – Example of Contract Pay Request and Line Item Summary

	TIFICATE FOR PAY	MENT			Page_1_of
Application No. Period from :	6/18/2012	To:	7/16/2012		roge
OWNER:	0102312			NTRACTOR:	
OWNER.					
PROJECT:					
CONTRACT DATE:	Ju	ne 18, 2012	-		
ORIGINAL CONTRA	CT SUM			\$634,153.90	
Ch	ange Order No.				
Ch	ange Order No.				
Ch	ange Order No.				
Net Change by Char CONTRACT SUM TO				\$0.00 \$634,153.90	
	Amount Earned	Retainage	Amount Earned	Less 1% Gross	
Estimate No.	This Estimate	Held This Estimate	Less Retainage	Receipts Tex	Total
One	150,320.00	7,518.00	142,804.00	1,428.04	141,375.96
Totals:	150,320.00	7,516.00	142,804.00	1,428.04	141,375.96
			Less Previous Certific Less Liquidated Dam		0.00
		Cu	ment Payment Due:		141,375.96
Contract Documents, th	salar certifies that the Wor at all amounts have been	paid by him for Work to	r which previous Cartificates	completed in secondance with	hithe
payments received from	the Owner, and that cum	ent payment shown he	nin is due.		
Dated:	very 19, 2010	2 _	. (2	Contractor	
		В	Mail Ba		
NGINEER'S CERTIFIC				10 mg	
	is recommended.	ion) m oo ts the requiren	nents of the Contract Docum	ents and payment of the abov	•
Dated:	21/17/12		i i i	Engineer	

Application and Certification for Payment, containing Contractor's signed Certification is attached. In tabulations below, amounts are stated to the nearest dollar,

Page 2 of 2

Application No.

7/16/2012 Date

(3)	Amount	Earned	This	Estimate		\$30,600,00	\$27,690.00	\$14,700.00	\$0.00	80.00	\$0.00	80.00	\$3,131.96	80.00	80.00	\$0.00	\$38,408,19	\$23,509.57	80.00	\$6,140,14	\$0.00	\$6,140,14	80.00	\$0.00		\$150,320.00	
8		Less	Materials	Installed		,	•						•	•	•								,				
5		Materials	uo	Site		,	,	,	,	,	,	,	\$3,131.96	,	,		\$38,408.19	\$23,509.67	,	\$6,140.14		\$6,140.14	,	,			
8			Total	Cost		0.360 \$30,600.00	,846 \$27,690.00	2,940 \$14,700.00	\$0.00	\$0.00	80.00	\$0.00	\$0.00	\$0.00		944		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			\$72,990.00	
(H)	Total	Quantity	Complete	To Date		0.360	1,846	2,840	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
(6)		Current	Quantity	Completed		0,360	1,846	2,940	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
(F)		Previous	Quantity	Requested		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
(E)			Contract	Price		\$61,115.00	\$55,383.25	\$14,700.35	\$3,733.87	\$18,723.26	\$2,760.96	\$456.57	\$40,265.09	\$2,545,26	\$32,596,74	\$52,154.78	\$152,116.72	\$67,300.20	\$9,807.60	\$22,713.81	\$2,113.65	\$22,713.81	\$68,163.00	\$4,781.00		\$634,153,90	
(a)		Contract	Unit	Price		\$85,000.00	\$15.00	\$5.00	89,00	\$15.00	\$960.00	\$635,00	\$35.00	\$885.00	\$5.00	\$8.00	\$40.00	\$45.00	\$1,100.00	\$30.00	\$1,050.00	\$30.00	\$750.00	\$3,500.00			
(0)			Contract	Quantity		0.719 LS	3,692,883 CY	2.940.070 SY	414,874 CY	1,248,217 CY	2.876 EA	0,719 EA	1,150,431 LF	2.876 EA	6,519,348 SY	6,519,348 SY	3,802,893 CY	1,495,560 CY	8.916 TON	757,127 TON	2.013 TON	757,127 TON	90.884 TON	1.366 ACRE			
(8)				Description of Work	AMPRIBASPIRIO	Mobilization (Shall not exceed 10% of AA#2 Total Price)	Existing Pavement Section Excavation & Stockpiling On-	Dishwartze In-Place Runway Shoulders (12-inches Deep)	Pulverized Asphalt Excavation & Stockpiling On-Site	Unclassified Excavation & Embankment	Can Existing Storm Drain Inlets	Adjust (Lower) Existing Strom Drain Inlets	Edge Drains (4-inch HDPE)	Edge Drain Outfall Connections, Including One Cleanout	Geotextile Separation Fabric, Cl	Triaxial Geogrid	Subbase Course	Crushed Aggregate Base Course	Bituminous Prime Coat (MC-70)	Bituminous Surface Course (2-inches)	Bluminous Tack Coat	Bituminous Surface Course (2-inches)	Bituminous Material, Asphalt Cement (PG64-28) - 6.0%			TOTALS	
3			Item	No.		AA-2-1	AA-2-2	44.2.3	AA-2-4	AA-2-5	AA-2-6	AA-2-7	AA-2-8	AA-2-9	AA-2-10	AA-2-11	AA-2-12	AA-2-13	AA-2-14	AA-2-15	AA-2-16	AA-2-17	AA-2-18	AA-2-19			







Project

526700,0000

July 10, 2012

Involce No:

66768

OBSTRUCTION REMOVAL RUNWAY 9-27 (SURVEY & DESIGN) - EXTEND RUNWAY 9-27 PH 3 (ENVIRONMENTAL COORDINATION)

For engineering services performed in connection with the Public Involvement for Environmental Assessment Phase 3, Benefit Cost Analysis (BCA), and Obstruction Evaluation. In accordance with the Agreement dated July 15, 2011.

Professional Services from June 01, 2012 to June 30, 2012

0101 - ADMINISTRATION

Fee

Billing Phase	Fe	Percent e Complete	Earned	Previous Fee Billing	Current Fee Billing
0101 Administration	7,904.0	0 70.00	5,532.80	5,532.80	0.00
0102 Benefit Cost Analysis	13,300.0	0 100.00	13,300,00	13,300.00	0.00
0103 Safety Phasing	3,066.0	0	0.00	0.00	0.00
0104 Obstruction Design	20,900.0	0 75.00	15,675,00	10,450.00	3.225.00
0105 Utility Coordination	7,866.0	0 90.00	7,079.40	7,079.40	0.00
0106 GIS	2,743.0	0 25.00	685,75	685.75	0.00
0301 Environmental	24,410.0	0 85.00	20,748.50	18,307.50	2,441.00 -TOTA
0401 Survey	14,262.0	0 100.00	14,262.00	13,548.90	713.10
Total Fee	94,451.0	0	77,283,45	68,904.35	8,379.10
	Total Fee			8,379.10	
		Total this	Phase		\$8,379.10
0301 - ENVIRONMENTAL					
Reimbursable Expenses					
Legal Notice			43.41		
Total Reimbursables			43.41	43.41	
		Total thi	Phase		\$43.41 - Fu?
9901 - ADDITIONAL SERVICES					
		Total thi	Phase		\$0.00
9902 - ADDITIONAL SERVICES - AERIAL SUBCON	TRACTOR				
		Total thi	Phase		\$0.00
Billing Limits	Current	Prior	To-Date		
Consultants	0.00	26,674.00	26,674.00		
Limit			30,900.00		
Remaining			4,226.00		

Project	526700.0000	PUBLIC IN	VOLVEMENT EN	VIRONMENTAL PI	HASE 3	Invoice	66768
Expenses			43.41	610.28	653.69		
Limit	t				3,200.00		
Rema	aining				2,546.31	and the same of th	
				Total this I	nvoice	58,422.51	
Billings to Da	te	24	7922 - 25	200 000 to		>	
		Current	Prior	Total		. /	
Fee		8.379.10	68,904.35	77,283.45		V	
Labor		0.00	2,726.50	2,726.50	100000		
Consultan	ıt	0.00	26,674.00	26,674.00			
Expense		43.41	610.28	653.69	ALC: UNKNOWN		
Unit		0.00	490.16	490.16			
Totals		8,422.51	99,405.29	107,827.80	AT ITS ASS		

Thank You,	

Appendix D – Example of Contract Pay Request and Line Item Summary

	TIFICATE FOR PAY	MENT			Page_1_of
Application No. Period from :	6/18/2012	To:	7/16/2012		roge
OWNER:	0102312			NTRACTOR:	
OWNER.					
PROJECT:					
CONTRACT DATE:	Ju	ne 18, 2012	-		
ORIGINAL CONTRA	CT SUM			\$634,153.90	
Ch	ange Order No.				
Ch	ange Order No.				
Ch	ange Order No.				
Net Change by Char CONTRACT SUM TO				\$0.00 \$634,153.90	
	Amount Earned	Retainage	Amount Earned	Less 1% Gross	
Estimate No.	This Estimate	Held This Estimate	Less Retainage	Receipts Tex	Total
One	150,320.00	7,518.00	142,804.00	1,428.04	141,375.96
Totals:	150,320.00	7,516.00	142,804.00	1,428.04	141,375.96
			Less Previous Certific Less Liquidated Dam		0.00
		Cu	ment Payment Due:		141,375.96
Contract Documents, th	salar certifies that the Wor at all amounts have been	paid by him for Work to	r which previous Cartificates	completed in secondance with	hithe
payments received from	the Owner, and that cum	ent payment shown he	nin is due.		
Dated:	very 19, 2010	2 _	. (2	Contractor	
		В	Mail Ba		
NGINEER'S CERTIFIC				10 mg	
	is recommended.	ion) m oo ts the requiren	nents of the Contract Docum	ents and payment of the abov	•
Dated:	21/17/12		i i i	Engineer	

Application and Certification for Payment, containing Contractor's signed Certification is attached. In tabulations below, amounts are stated to the nearest dollar,

Page 2 of 2

Application No.

7/16/2012 Date

(3)	Amount	Earned	This	Estimate		\$30,600,00	\$27,690.00	\$14,700.00	\$0.00	80.00	\$0.00	80.00	\$3,131.96	80.00	80.00	\$0.00	\$38,408,19	\$23,509.57	80.00	\$6,140,14	\$0.00	\$6,140,14	80.00	\$0.00		\$150,320.00	
8		Less	Materials	Installed		,	•						•	•	•								,				
5		Materials	uo	Site		,	,	,	,	,	,	,	\$3,131.96	,	,		\$38,408.19	\$23,509.67	,	\$6,140.14		\$6,140.14	,	,			
8			Total	Cost		0.360 \$30,600.00	,846 \$27,690.00	2,940 \$14,700.00	\$0.00	\$0.00	80.00	\$0.00	\$0.00	\$0.00		944		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			\$72,990.00	
(H)	Total	Quantity	Complete	To Date		0.360	1,846	2,840	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
(6)		Current	Quantity	Completed		0,360	1,846	2,940	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
(F)		Previous	Quantity	Requested		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
(E)			Contract	Price		\$61,115.00	\$55,383.25	\$14,700.35	\$3,733.87	\$18,723.26	\$2,760.96	\$456.57	\$40,265.09	\$2,545,26	\$32,596,74	\$52,154.78	\$152,116.72	\$67,300.20	\$9,807.60	\$22,713.81	\$2,113.65	\$22,713.81	\$68,163.00	\$4,781.00		\$634,153,90	
(a)		Contract	Unit	Price		\$85,000.00	\$15.00	\$5.00	89,00	\$15.00	\$960.00	\$635,00	\$35.00	\$885.00	\$5.00	\$8.00	\$40.00	\$45.00	\$1,100.00	\$30.00	\$1,050.00	\$30.00	\$750.00	\$3,500.00			
(0)			Contract	Quantity		0.719 LS	3,692,883 CY	2.940.070 SY	414,874 CY	1,248,217 CY	2.876 EA	0,719 EA	1,150,431 LF	2.876 EA	6,519,348 SY	6,519,348 SY	3,802,893 CY	1,495,560 CY	8.916 TON	757,127 TON	2.013 TON	757,127 TON	90.884 TON	1.366 ACRE			
(8)				Description of Work	AMPRIBASPIRIO	Mobilization (Shall not exceed 10% of AA#2 Total Price)	Existing Pavement Section Excavation & Stockpiling On-	Dishwartze In-Place Runway Shoulders (12-inches Deep)	Pulverized Asphalt Excavation & Stockpiling On-Site	Unclassified Excavation & Embankment	Can Existing Storm Drain Inlets	Adjust (Lower) Existing Strom Drain Inlets	Edge Drains (4-inch HDPE)	Edge Drain Outfall Connections, Including One Cleanout	Geotextile Separation Fabric, Cl	Triaxial Geogrid	Subbase Course	Crushed Aggregate Base Course	Bituminous Prime Coat (MC-70)	Bituminous Surface Course (2-inches)	Bluminous Tack Coat	Bituminous Surface Course (2-inches)	Bituminous Material, Asphalt Cement (PG64-28) - 6.0%			TOTALS	
3			Item	No.		AA-2-1	AA-2-2	44.2.3	AA-2-4	AA-2-5	AA-2-6	AA-2-7	AA-2-8	AA-2-9	AA-2-10	AA-2-11	AA-2-12	AA-2-13	AA-2-14	AA-2-15	AA-2-16	AA-2-17	AA-2-18	AA-2-19			







Project

526700,0000

July 10, 2012

Involce No:

66768

OBSTRUCTION REMOVAL RUNWAY 9-27 (SURVEY & DESIGN) - EXTEND RUNWAY 9-27 PH 3 (ENVIRONMENTAL COORDINATION)

For engineering services performed in connection with the Public Involvement for Environmental Assessment Phase 3, Benefit Cost Analysis (BCA), and Obstruction Evaluation. In accordance with the Agreement dated July 15, 2011.

Professional Services from June 01, 2012 to June 30, 2012

0101 - ADMINISTRATION

Fee

Billing Phase	Fe	Percent e Complete	Earned	Previous Fee Billing	Current Fee Billing
0101 Administration	7,904.0	0 70.00	5,532.80	5,532.80	0.00
0102 Benefit Cost Analysis	13,300.0	0 100.00	13,300,00	13,300.00	0.00
0103 Safety Phasing	3,066.0	0	0.00	0.00	0.00
0104 Obstruction Design	20,900.0	0 75.00	15,675,00	10,450.00	3.225.00
0105 Utility Coordination	7,866.0	0 90.00	7,079.40	7,079.40	0.00
0106 GIS	2,743.0	0 25.00	685,75	685.75	0.00
0301 Environmental	24,410.0	0 85.00	20,748.50	18,307.50	2,441.00 -TOTA
0401 Survey	14,262.0	0 100.00	14,262.00	13,548.90	713.10
Total Fee	94,451.0	0	77,283,45	68,904.35	8,379.10
	Total Fee			8,379.10	
		Total this	Phase		\$8,379.10
0301 - ENVIRONMENTAL					
Reimbursable Expenses					
Legal Notice			43.41		
Total Reimbursables			43.41	43.41	
		Total thi	Phase		\$43.41 - Fu?
9901 - ADDITIONAL SERVICES					
		Total thi	Phase		\$0.00
9902 - ADDITIONAL SERVICES - AERIAL SUBCON	TRACTOR				
		Total thi	Phase		\$0.00
Billing Limits	Current	Prior	To-Date		
Consultants	0.00	26,674.00	26,674.00		
Limit			30,900.00		
Remaining			4,226.00		

Project	526700.0000	PUBLIC IN	VOLVEMENT EN	VIRONMENTAL PI	HASE 3	Invoice	66768
Expenses			43.41	610.28	653.69		
Limit	t				3,200.00		
Rema	aining				2,546.31	and the same of th	
				Total this I	nvoice	58,422.51	
Billings to Da	te	24	7922 - 25	200 000 to		>	
		Current	Prior	Total		. /	
Fee		8.379.10	68,904.35	77,283.45		V	
Labor		0.00	2,726.50	2,726.50	100000		
Consultan	ıt	0.00	26,674.00	26,674.00			
Expense		43.41	610.28	653.69	ALC: UNKNOWN		
Unit		0.00	490.16	490.16			
Totals		8,422.51	99,405.29	107,827.80	AT ITS ASS		

Thank You,	

Appendix E – Example of Sponsor Certification Letter and Supporting Documentation to Support Pay Requests for Elevated Sponsors

Appendix E - Example of Sponsor Certification Letter

St. Augusta Regional Airport

1234 Airport Road, Juniper, TN 55421

I have reveiwed the payment request for \$324,640 and certify that it is based on invoices where the
billed price is the contract price, the billed quanity agrees with the Authority records, and the
contract requirments have been met.

Authorized Signature

[[Name of Airport Director/Grant Signer]]

Appendix E - Example of Line Item Details

Contractor

Point Industries

CN

175

Project

Rehabilitate Runway 12/30

Item Number: 00034-6-G

Planned Quantity:

280,000

Project Description: Bituminous Binder Course

Units:

Ton

		QTY Currently	QTY Applied to	
Date	Work Location/Description	Applied	Date	Percent Complete
2/12/2012	Phase 1		63,880	1009
2/28/2012	Phase 1A		25,000	1009
3/12/2012	Phase 3		900	1009
3/24/2012	Phase 3A		3,000	1009
3/29/2012	Phase 4		700	100%
4/5/2012	Phase 4B & C	2,000	2,000	99%
4/14/2012	Phase 5	900	900	98%
4/30/2012	Phase 6	3,000	3,000	929
5/1/2012	Phase 8	343	343	91%
	TOTAL	6,243	193,203	69%

Appendix E - Example of Supplier Invoice

Aggregate Concrete	Control No.	734899
5553 Goodie Lane, Timbucktwo, AL 55992		
	Ticket No	2563790

Product Code Sale Type
A1789

Customer Name	Job Name/Directions
	St. Augusta Regional Airport Runway 12/30
Point Industries	St. Augusta Regional Airport
3456 Address Ave	
Cornerstone, FL 22222	Deliver North side access road; add \$4.00 gas surcharge on all cement products
	MAX GROSS WEIGHT 80,000; MAX NET 26.93

Product	Quantity Unit	Price	Amount		Pounds	Tons
	Ton			GROSS	12486000	6243
D.403 Dant Miv Bituminans Davoment	Haul Rate			TARE	26140	13.07
ייטי, יומור ואוא פונמוווווסט רמאפוופור	Tax TN			Net	40320	20.16
	Total Due					
		ARRIVE JOB		DEPART JOB	WAIT TIME	l u
I/we relieve the seller of any liability for personal injury or property damage when delivery is made beyond the curb line. (disclaimer)	ersonal injury or property curb line. (disclaimer)					
		Authorized Signature:	Signature:			
THE PERSON SIGNING THIS DELIVERY TICKE ACCEPT MATERIALS DELIVERED. IN CASE O	IVERY TICKET IS AUTHORIZED TO IN CASE OF EMERGENCY CALL 1-800-					
HELP-MEE		Name/Title	Name/Title (please print)	tt)		

Appendix E - Example of Labor Summary

B&D Associates Labor Summary

Item # 2 - Project Assessment

Project Number	Employee	Week Ending	Hours	Rate	Total	
	Green	3/14/2012	40		118	4720
	Brown	3/9/2012	36	0	118	5900
66-555-0142-02	Jay	3/21/2012	40	0	118	4720
66-555-0142-02	Green	3/30/2012	40	0	118	4720
66-555-0142-02	Green	3/9/2012	25	0	118	5900
66-555-0142-02	Adeal	3/21/2012	40	0	118	4720
66-555-0142-02	Franklin	3/30/2012	40	_	118	4720

35,400

s.

TOTAL:

Appendix F – Hierarchy Assignment Form

Appendix G - Hierarchy Assignment Form

Orders	PO Line Num PO Shipment Num PO Distribution Num								
	PO Shipment Num								
Grant Purchase	PO Line Num								
Hierarchy Assignment to Grant Purchase Orders	Grant Number/PO Number								
	Hierarchy Name								

Appendix G - Hierarchy Assignment Form

Hierarchy Assignment to Grant Purchase Orders							
Hierarchy Name	Vendor Name	Vendor Site Code					

Appendix G – Approval Hierarchy Request Form

Approval Hierarchy Request Form

Section 1 Organization Information

- 1.1 What is the Operating Administration (OA) for this hierarchy?
- 1.2 Who is requesting this approval hierarchy change?
- 1.3 Request date?

Section 2 Basic Hierarchy Information

- 2.1 What is the unique name for this hierarchy?
- 2.2 What is the effective start date for this change? (optional)
- 2.3 What is the effective end date for this change, if any? (optional)
- 2.4 Hierarchy comments (optional)

Section 3 Auto-Approval Information (optional - only for auto-approved hierarchies)

- 3.1 Is this an auto-approval hierarchy (yes/no)?
- **3.2** If the answer to question 3.1 is **YES**, what is the payment request amount, as a percentage of the total grant amount, that will trigger an FYI notification?
- **3.3** Provide the email addresses, one per cell, for the users who should receive an FYI notification when the threshold defined in **3.2** is reached.
- 3.4 If the answer to question 3.1 is YES, what is the expended balance threshold, as a percentage of the total grant amount, that will cause a payment request to require manual approval?

Section 4 Manual Approval Hierarchy Details (required for all hierarchies)

- 4.1 The number of days a payment request will wait for action to be taken before an escalation notification is sent.
 - Tier 1 (required)
- **4.2** Provide the email addresses, one per cell, for the users in **Tier 1** of the manual approval hierarchy.
- 4.3 Provide the email addresses, one per cell, for the users who should receive escalation notifications when the threshold in 4.1 is reached.
 - Tier 2 (optional)
- **4.4** Provide the email addresses, one per cell, for the users in **Tier 2** of the manual approval hierarchy.
- 4.5 Provide the email addresses, one per cell, for the users who should receive escalation notifications when the threshold in 4.1 is reached.
 Tier 3 (optional)
- **4.6** Provide the email addresses, one per cell, for the users in **Tier 3** of the manual approval hierarchy.
- **4.7** Provide the email addresses, one per cell, for the users who should receive escalation notifications when the threshold in **4.1** is reached.
 - Tier 4 (optional)
- **4.8** Provide the email addresses, one per cell, for the users in **Tier 4** of the manual approval hierarchy.
- 4.9 Provide the email addresses, one per cell, for the users who should receive escalation notifications when the threshold in 4.1 is reached.

Appendix H – SF 425 Form

FEDERAL FINANCIAL REPORT

(Follow form instructions)

	ency and Organ eport is Submitte	izational Element ed		Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment)						
Recipient O	rganization (Na	me and complete addre	ess including Zip code)						pages	
4a. DUNS Nui	mber	4b. EIN	2.5		er or Identifying Number s, use FFR Attachment)	n Q n S	eport Type uarterly emi-Annual nnual	7. Basis of Accoun		
8. Project/Gra From: (Mor	nt Period nth, Day, Year)		To: (Month, Da	ay, Year)		9. Reporti	ng Period End D , Day, Year)			
10. Transact	tions					•		Cumulative		
(Use lines a-c	for single or n	nultiple grant reporting	g)							
Federal Cash	(To report m	ultiple grants, also us	e FFR Attachment):							
a. Cash Receipts										
b. Cash Disbursements										
	Hand (line a m									
	for single grai									
		Inobligated Balance:								
d. Total Federal funds authorized e. Federal share of expenditures										
		dated obligations	*************************************				- In			
		m of lines e and f)								
		Federal funds (line d m	ninus g)							
Recipient SI	nare:						**			
i. Total red	cipient share red	quired								
	nt share of expe		00070.0000000000							
		re to be provided (line i	minus j)							
Program Inc	7 × 100 × 10						Т			
	leral program in	7 MA	the deduction alternative	2		100				
			the addition alternative							
		come (line I minus line								
	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount	Charged	f. Federal Share		
11. Indirect										
Expense						-		-		
12 Remarks:	Attach any avn	lanations deemed room	essany or information may	g. Totals:	ral sponsoring agency in c	omnliance :	ith anyomina la	gislation:		
12. Kelliaiks.	Attach any exp	iariauoris deerried riece	ssary or information requ	illed by redel	ar sponsoning agency in o	ompliance w	illi governing le	grsiauori.		
disbursen	nents and cash	receipts are for the		forth in the a	lief that the report is tru award documents. I am a Section 1001)			ranco mana estrança i finalizada de la como		
		Title of Authorized Cer			,	c. Telepho	none (Area code, number and extension)			
						d. Email a	ddress			
b. Signature of	Authorized Cer	rtifying Official				e. Date R	eport Submitted	(Month, Day, Year)		
						14. Agenc	y use only:			
						Stand	ard Form 425 - Rev	rised 6/28/2010		

OMB Approval Number: 0348-0061 Expiration Date: 10/31/2011

Paperwork Burden Statement
According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0061), Washington, DC 20503.

Appendix I – SF 271 Form

FOR CONSTRUCT		OMB APPROVAL NO	O F PAGES					
(See instruction	ons on back)	1.	TYPE OF REQUEST	□ PAR		S OF REQUE	
3. FEDERAL SPONSORING AGENCY AND OR WHICH THIS REPORT IS SUBMITTED	GANIZATIONA	L ELEMENT TO	1	EDERAL GRANT OR OTHER DENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY		5. PAR	TIAL PAYMEN	NT REQUEST NO.
		ACCOUNT NUMBER	L	PERIOD COVE	RED BY T			
NUMBER	OR IDENTIFYIN	IG NUMBER	FRO	DM (Month, day, year)		TO (Ma	nth, day, year,	J.
9. RECIPIENT ORGANIZATION			10.	PAYEE (Where check is to be sent if	different than	item 9)		
Name:			Na	me:				
No. and Street:			No	. and Street:				
City, State and ZIP Code:			ZIF	y, State and P Code:				
11.		PROGRAMS		OF FUNDS FUNCTIONS	AC	TIVITIES		
CLASSIFICATION		(a)		(b)	(c)		Т	OTAL
a. Administrative expense		\$		\$	\$		\$	0.00
b. Preliminary expense							0.00	
c. Land, structures, right-of-way							0.00	
d. Architectural engineering basic fee							0.00	
e. Other architectural engineering fee								0.00
f. Project inspection fees								0.00
g. Land development								0.00
h. Relocation expense i. Relocation payments to individuals								0.00
and businesses							0.00	
j. Demolition and removal				_			0.00	
k. Construction and project improvem							0.00	
I. Equipment			_					0.00
m. Miscellaneous cost n. Total cumulative to date(sum of lin	so a thru m		20	0.00		0.00		0.00
o. Deductions for program income	es a unu m)	0.0	JU	0.00		0.00		0.00
p. Net cumulative to date (line n minu	s line o)	0.0	00	0.00	-	0.00		0.00
g. Federal share to date	20002076			0.00				0.00
r. Rehabilitation grants (100% reimbu	irsement)							0.00
s. Total Federal share (sum of lines q	0.0		0.00		0.00		0.00	
t. Federal payments previously reque							0.00	
u. Amount requested for reimbursement \$				\$	\$		\$	0.00
v. Percentage of physical completion	of project		%	%		%		%
12. CERTIFICATION		a. RECIPIENT		SIGNATURE OF AUTHORIZED CER	DATE REPORT SUBMITTED			
l certify that to the best of my knowled belief the billed costs or disbursem in accordance with the terms of the	ents are e project			TYPED OR PRINTED NAME AND T	ITLE		TELEPHONE (Area code, number, and extension)	
and that the reimbursement repres Federal share due which has n previously requested and that an in	ot been spection	b. REPRESENTATIVE		SIGNATURE OF AUTHORIZED CER	TIFYING OF	FICIAL	DATE SIGN	ED
has been performed and all wo accordance with the terms of the away		CERTIFYING TO LINE 11	1 V	TYPED OR PRINTED NAME AND T	ITLE		TELEPHON and extension	E (Area code, number, on)

INSTRUCTIONS

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0004), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

Please type or print legibly. Items 3, 4, 5, 8, 9, 10, 11s and 11v are self explanatory; specific instructions for other items are as follows:

Item

Item

Entry

- 1 Mark the appropriate box. If the request is final, the amounts billed should represent the final cost of the project.
- 2 Show whether amounts are computed on an accrued expenditure or cash disbursement basis.
- 6 Enter the Employer Identification Number (EIN) assigned by the U.S. Internal Revenue Service or FICE (institution) code if requested by the Federal agency.
- 7 This space is reserved for an account number or other identifying number that may be assigned by the recipient.
- 11 The purpose of vertical columns (a) through (c) is to provide space for separate cost breakdowns when a large project has been planned and budgeted by program, function or activity. If additional columns are needed, use as many additional forms as needed and indicate page number in space provided in upper right; however, the summary totals of all programs, functions, or activities should be shown in the "total" column on the first page. All amounts are reported on a cumulative basis.
- 11a Enter amounts expended for such items as travel, legal fees, rental of vehicles and any other administrative expenses. Include the amount of interest expense when authorized by program legislation. Also show the amount of interest expense on a separate sheet.
- 11b Enter amounts pertaining to the work of locating and designing, making surveys and maps, sinking test holes, and all other work required prior to actual construction.
- 11c Enter all amounts directly associated with the acquisition of land, existing structures and related right-of-way.
- 11d Enter basic fees for services of architectural engineers.
- 11e Enter other architectural engineering services. Do not include any amounts shown on line d.
- 11f Enter inspection and audit fees of construction and related programs.
- 11g Enter all amounts associated with the development of land where the primary purpose of the grant is land improvement. The amount pertaining to land development normally associated with major construction should be excluded from this category and entered on line k.
- 11h Enter the dollar amounts used to provide relocation advisory assistance and net costs of replacement housing (last resort). Do not include amounts needed for relocation administrative expenses; these amounts should be included in amounts shown on line a.
- 11i Enter the amount of relocation payments made by the recipient to displaced persons, farms, business concerns, and nonprofit organizations.

Entry

- 11j Enter gross salaries and wages of employees of the recipient and payments to third party contractors directly engaged in performing demolition or removal of structures from developed land. All proceeds from the sale of salvage or the removal of structures should be credited to this account; thereby reflecting net amounts if required by the Federal agency.
- 11k Enter those amounts associated with the actual construction of, addition to, or restoration of a facility. Also, include in this category, the amounts for project improvements such as sewers, streets, landscaping, and lighting.
- 111 Enter amounts for all equipment, both fixed and movable, exclusive of equipment used for construction. For example, permanently attached laboratory tables, built-in audio visual systems, movable desks, chairs, and laboratory equipment.
- 11m Enter the amounts of all items not specifically mentioned above.
- 11n Enter the total cumulative amount to date which should be the sum of lines a through m.
- 110 Enter the total amount of program income applied to the grant or contract agreement except income included on line j. Identify on a separate sheet of paper the sources and types of the income.
- 11p Enter the net cumulative amount to date which should be the amount shown on line n minus the amount on line o.
- 11g Enter the Federal share of the amount shown on line p.
- 11r Enter the amount of rehabilitation grant payments made to individuals when program legislation provides 100 percent payment by the Federal agency.
- 11t Enter the total amount of Federal payments previously requested, if this form is used for requesting reimbursement.
- 11u Enter the amount now being requested for reimbursement. This amount should be the difference between the amounts shown on lines s and t. If different, explain on a separate sheet.
- 12a To be completed by the official recipient official who is responsible for the operation of the program. The date should be the actual date the form is submitted to the Federal agency.
- 12b To be completed by the official representative who is certifying to the percent of project completion as provided for in the terms of the grant or agreement.

Appendix J – SF 270 Form

			OMB APPROV	AL NO.		PAGE		OF
				0348-00	004		1	PAGES
100.00.00.00.00.00.00.00.00	ST FOR ADV			a. "X" one or both box	res	2. BASIS	OF REQUES	ST .
OR RE	IMBURSEM	ENT	1. TYPE OF	ADVANCE	REIMBURSE- MENT		CASH	
(See	instructions on bac	k)	PAYMENT REQUESTED	b. "X" the applicable b	PARTIAL		ACCRU	-000
3. FEDERAL SPONSORING AGENC WHICH THIS REPORT IS SUBMI		AL ELEMENT TO		RANT OR OTHER S NUMBER ASSIGNED L AGENCY		100000000000000000000000000000000000000	AL PAYMEN	
6. EMPLOYER IDENTIFICATION	7. RECIPIENT'S	ACCOUNT NUMBER	8.	PERIOD COVER	RED BY THIS REQU	EST		
NUMBER	OR IDENTIFY	NG NUMBER	FROM (month,	day, year)		TO (mon	th, day, year)	
9. RECIPIENT ORGANIZATION			10. PAYEE (V	Where check is to be se	ent if different than item	9)		
Name:			Name:					
Number and Street:			Number and Street:					
City, State and ZIP Code:			City, State and ZIP Cod	de:				
11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED								
PROGRAMS/FUNCTIONS/ACTIVITIES (a)			(b)		(c)		Т	OTAL
a. Total program (As of date) outlays to date			\$		\$		\$	0.00
b. Less: Cumulative program	n income							0.00
c. Net program outlays (Line line b)		0.0	00	0.00		0.00		0.00
d. Estimated net cash outlay period							0.00	
e. Total (Sum of lines c & d)		0.0	00	0.00		0.00		0.00
f. Non-Federal share of amo	unt on line e							0.00
g. Federal share of amount on line e								0.00
h. Federal payments previously requested								0.00
i. Federal share now requested (Line g minus line h)			00	0.00		0.00		0.00
j. Advances required by month, when requested	1st month							0.00
by Federal grantor agency for use in making	2nd month							0.00
prescheduled advances	3rd month							0.00
12.		ALTERNATE COMP	UTATION	FOR ADVANCES	SUNLY			
a. Estimated Federal cash o					12 8.7 4 0		\$	
b. Less: Estimated balance		hand as of beginning of a	dvance period	1			\$	0.00
c. Amount requested (Line a minus line b) AUTHORIZED FOR LOCAL DEPROPRIETON (Continued on Payerre) STANDARD FORM 270 (Pay 7								0.00

13.	CERTIFICATION	
I sortify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays	SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL	DATE REQUEST SUBMITTED August 7, 2012
were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.	TYPED OR PRINTED NAME AND TITLE	TELEPHONE (AREA CODE, NUMBER, EXTENSION)

This space for agency use

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0004), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET, SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

INSTRUCTIONS

Please type or print legibly. Items 1, 3, 5, 9, 10, 11e, 11f, 11g, 11i, 12 and 13 are self-explanatory; specific instructions for other items are as follows:

Item

Entry

<u>Item</u>

- 2 Indicate whether request is prepared on cash or accrued expenditure basis. All requests for advances shall be prepared on a cash basis.
- 4 Enter the Federal grant number, or other identifying number assigned by the Federal sponsoring agency. If the advance or reimbursement is for more than one grant or other agreement, insert N/A; then, show the aggregate amounts. On a separate sheet, list each grant or agreement number and the Federal share of outlays made against the grant or agreement.
- 6 Enter the employer identification number assigned by the U.S. Internal Revenue Service, or the FICE (institution) code if requested by the Federal agency.
- 7 This space is reserved for an account number or other identifying number that may be assigned by the recipient.
- 8 Enter the month, day, and year for the beginning and ending of the period covered in this request. If the request is for an advance or for both an advance and reimbursement, show the period that the advance will cover. If the request is for reimbursement, show the period for which the reimbursement is requested.
- Note: The Federal sponsoring agencies have the option of requiring recipients to complete items 11 or 12, but not both. Item 12 should be used when only a minimum amount of information is needed to make an advance and outlay information contained in item 11 can be obtained in a timely manner from other reports.
 - 11 The purpose of the vertical columns (a), (b), and (c) is to provide space for separate cost breakdowns when a project has been planned and budgeted by program, function, or

activity. If additional columns are needed, use as many additional forms as needed and indicate page number in space provided in upper right; however, the summary totals of all programs, functions, or activities should be shown in the "total" column on the first page.

Entry

- 11a Enter in "as of date," the month, day, and year of the ending of the accounting period to which this amount applies. Enter program outlays to date (net of refunds, rebates, and discounts), in the appropriate columns. For requests prepared on a cash basis, outlays are the sum of actual cash disbursements for goods and services, the amount of indirect expenses charged, the value of inkind contributions applied, and the amount of cash advances and payments made to subcontractors and subrecipients. For requests prepared on an accrued expenditure basis, outlays are the sum of the actual cash disbursements, the amount of indirect expenses incurred, and the net increase (or decrease) in the amounts owed by the recipient for goods and other property received and for services performed by employees, contracts, subgrantees and other payees.
- 11b Enter the cumulative cash income received to date, if requests are prepared on a cash basis. For requests prepared on an accrued expenditure basis, enter the cumulative income earned to date. Under either basis, enter only the amount applicable to program income that was required to be used for the project or program by the terms of the grant or other agreement.
- 11d Only when making requests for advance payments, enter the total estimated amount of cash outlays that will be made during the period covered by the advance.
- 13 Complete the certification before submitting this request.

STANDARD FORM 270 (Rev. 7-97) Back