

**Transportation Fund for Clean Air (TFCA) Regional Fund
PERMANENT GRANT PROJECT FILE CHECKLIST
FY 2008-09**

PROJECT NUMBER _____

APPLICANT NAME _____

APPLICATION TYPE _____

Lettered items below are from bottom to top; i.e., "a." is on the bottom.

	<u>Item Present</u>	<u>N/A</u>	<u>Signature/Date</u>
1. <u>Miscellaneous/Notes/Checklist</u>			
a. Any notes on the Project during Project Life, including Change Forms and this checklist	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. <u>Grant Application</u>			
a. Grant Application	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Notification of Missing or Inadequate Information	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Additional information received from Applicant	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Cost-effectiveness worksheet	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Grant Application Checklist	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Technical staff has verified that the required application documents are present	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. <u>Funding Agreement, or Contract</u>			
a. Board Agenda	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Board Minutes Showing Approval	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. List of Approved Projects	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Award Letter	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Executed Funding Agreement	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Insurance Documentation	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. <u>Fiscal</u>			
a. Copies of Invoices	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Purchase/Payment Form	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Authorization to Release Funds	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Copy of Check	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. <u>Reports</u>			
a. Quarterly Reports	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Final Report	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Inspection Reports (if any)	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. <u>Correspondence</u>			
a. Any correspondence w/ Sponsor after Application complete	<input type="checkbox"/>	<input type="checkbox"/>	_____

Project File Prepared by: _____ **Date:** _____

Project File Reviewed by: _____ **Date:** _____