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| **Part f – certification** |

Before certifying the accuracy of this application, please review the program guidance and all required documentation and narrative information below. Ensure all required submittals have been completed prior to emailing or mailing your submission to [vwsettlement@iowadot.us](mailto:vwsettlement@iowadot.us) by **February 17, 2020, by 5:00 p.m. CST**.

**Required Documentation and Narrative Information**

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| A. | An **APPLICATION FORM** (in Word format) with all parts completed:   * Part A – Applicant Information * Part B – Project Category, Application Priority, and Detail * Part C – Project Costs * Part D – Project Timeline * Part E – Narrative Questions |
| B. | This **CERTIFICATION** (in PDF format) signed by an official authorized to represent the applying organization. |
| C. | A completed **FLEET DESCRIPTION FORM** (in Excel format) which identifies all vehicles, engines, or equipment to be replaced or repowered under this application. |
| D. | A completed **PROJECT COSTS FORM** (in Excel format) which lists all cost items to be considered for reimbursement under this application. |
| E. | A completed **MINORITY IMPACT STATEMENT** (in PDF format) as required by Iowa Code section 8.11. |

The undersigned is an official authorized to represent the applying organization. The person signing this document must have the authority to contractually bind the organization or be the designated fiscal agent.

**Certification**

I certify that all proposed activities will be carried out; that all grant money received will be utilized solely for the purposes for which it is intended; that records documenting the planning process and implementation will be maintained and submitted when requested, and the Iowa Department of Transportation is hereby granted access to inspect project sites and/or records.

To the best of my knowledge and belief, all information included in this application is true and accurate, including the commitment of all physical and financial resources. This application has been duly authorized by the applying organization. I understand that intentionally providing false information in this application may result in criminal prosecution under Iowa Code § 714.8(3).

If funding assistance is approved for the project described in this application, I understand that an executed contract between the applicant and the Iowa DOT is required before the project can be started, costs incurred, or such funding assistance authorized for use in implementing the project.

I certify under penalty of perjury and pursuant to the laws of the state of Iowa that the preceding is true and correct.

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| **Printed Name** |  | **Title** |  |

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| **Signature** |  | **Date** |  |