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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 your submission to scott.flagg@iowadot.us by **May 17, 2021, by 5:00 p.m. CST**.

**Required Documentation and Narrative Information**

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| [ ]  1. | An **APPLICATION FORM** (Word format) with all parts completed. |
| [ ]  2. | This **CERTIFICATION** (scanned PDF format) signed by an official authorized to represent the applying organization. |
| [ ]  3. | A **DETAILED MAP** identifying the location of the project.  |
| [ ]  4. | A **SKETCH PLAN** of the project, including cross section for bicycle or pedestrian facilities.  |
| [ ]  5. | **DIGITAL PHOTOGRAPHS** (limited to five) that will help to explain the existing site conditions of the proposed trail.  |
| [ ]  6. | **AN ITEMIZED BREAKDOWN OF TOTAL PROJECT COSTS** that shows the method by which the cost estimate was prepared and enable a reviewer to determine if the cost estimate is reasonable. |
| [ ]  7. | **AN OFFICIAL ENDORSEMENT (RESOLUTION)** of the project from the authority to be responsible for the project’s maintenance and operation. For cities, counties, or other political subdivisions, this should be in the form of a fully executed resolution by the elected body or board, as applicable.  |
| [ ]  8. | **AN IOWA DOT DISTRICT OFFICE LETTER OF SUPPORT** if the project will include construction within Iowa DOT right-of-way. |
| [ ]  9. | **MINORITY IMPACT STATEMENT**  |

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 agreement between the applicant and the Iowa DOT is required before the project can be started, costs incurred, or such funding assistance authorize with the Federal Highway Administration (FHWA) 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** |       |