**STATE AID REIMBURSABLE PROGRAMS - PROJECT REQUEST**  updated 12/17

**\*2 Original Signed Project Request Forms are to be submitted**.

**CONTRACT #**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROGRAM TYPE:** Chapter 90 [ ]  Muni Bridge [ ]  Complete Streets [ ]  Other [ ]

|  |  |  |  |
| --- | --- | --- | --- |
| Project Name: |       |  |       |
| Primary Road: |       |  |       |
| Local Road: |       |  |       |
| Bridge #: |       |  |       |

|  |  |
| --- | --- |
| City/Town: |       |
| Location(s) |       |
|  |  | Length: |       | feet |  | Width: |       | feet |  |
| **PROJECT TYPE** |  |  |  |  |  |  |  |  |  |  |  |
| Construction: | [ ]  |  | Resurfacing: | [ ]  | Engineering: | [ ]  | Equipment:  | [ ]  |
| Other: |       |

|  |
| --- |
| **TYPICAL SECTION DETAILS:** Indicate depths, special treatments, etc… Also please include sketch for Construction/Improvement Projects. |
| Surface: |       |  |
| Base Course: |       |  |
| Foundation: |       |  |
| Shoulders/Sidewalks: |       |  |

**SCOPE OF WORK:**

|  |
| --- |
|       |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **WORK TO BE DONE:** |  |  |  |  |
| Force Account: | [ ]  | Advertised Contract: | [ ]  | Other: |       |

|  |  |  |
| --- | --- | --- |
| Estimated Cost (Please attach estimate and list funding source(s)): | $ |       |
| \*\*These funds will pay 100% of Local Road Project costs to the limit of this assignment\*\* |

**CERTIFICATION**

The design, engineering, construction, and future performance of the project, including maintenance, is the responsibility of the Municipality. The proposed work will conform to recognized engineering and construction methods. I/We herby certify under penalty of perjury the following: that the project is on a public way, and any necessary takings have been made; that all materials will comply with approved established specifications; that all weights and quantities will be accurate; that equipment rental rates are those established by MassDOT Highway or the advertised low bid; that all documentation will be checked for accuracy, and will be endorsed in accordance with municipal procedures for accountability.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Reviewed by:** |  | **Signed:** |  |  |
|  |  |  |   | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_ |
| Signed: |  |  |  |  |  |
|  |       |  |       |  |   | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_ |
|  | State Aid Engineer |  | Date |  |  Highway Official’s Title | Date |
|  |  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Road Classification Verified: |       |  |  |  |  |
|  |  |  |  |  |   | Accounting Official’s Title  | Date  |
| Approved for  | $       | @ 100% |  |  |  |  |
|       |  |       |  |  |  |  |
| District Highway Director |  | Date |  | Date |  |  Duly Authorized Municipal Officials  |