



VTrans Grants in Aid: Municipal Invoicing Spreadsheet

Municipality: _____ Date: _____

Contact Name: _____ Phone Number: _____

Email: _____

Grant Agreement Number: GA _____

Grant Award: \$ _____ # of Segments Brought into Full MRGP Compliance _____

Written Authorization for Construction was Received from VTrans on (Date): _____

Copies of All Invoices and Receipts are Included? _____ YES _____ NO _____

1 photo of Each Complete Segment (Post Construction) are Included? _____ YES _____ NO _____

You must complete the Post Construction Road Segment Assessment in the MRGP Inventory Portal for each Road Segment Brought into Full MRGP Compliance.

Post Construction Assessments Updated in MRGP Portal? _____ YES _____ NO _____

Fill out sections below which apply to your project, use additional pages if needed.

LABOR (Employee Name)	Date Range	Rate	# Hours	Total (Hourly Rate x Hours)
LABOR TOTAL				

EQUIPMENT	Date Range	Rate	# Hours (or Days)	Total (Rate x Hours)
EQUIPMENT TOTAL				

MATERIALS	Rate	Amount	Total (Rate x Amount)
MATERIALS TOTAL			

MISCELLANEOUS	Rate	Amount	Total (Rate x Amount)
MISCELLANEOUS TOTAL			

GRAND TOTAL \$ _____

LOCAL MATCH \$ _____

LOCAL MATCH is the GRAND TOTAL minus GRANT AWARD.

LOCAL MATCH must be at least 20% of the GRAND TOTAL to receive full amount of GRANT AWARD. If LOCAL MATCH is less than 20% of GRAND TOTAL, your grant reimbursement will be reduced.

By signing this reimbursement request, I certify that all the information provided is accurate, to the best of my knowledge.

We have complied with all the requirements of this grant award including a commitment to the future maintenance of this grant funded work and repair as necessary. We will make our books available for audit if required.

By Signing below, we certify that the Road Segment ID's repaired with these funds are fully compliant with the MRGP at the conclusion of the project and the assessments in the MRGP Portal are updated and current.

Signature: _____

Title: _____
(Must be **Selectboard Chair, Town Clerk, or Administrator**)

Required attachments:

- Copy of written authorization for Construction from VTrans
- Copies of Invoices and Receipts for all expenses documented
- 1 Picture of each Road Segment after project is completed

Please submit to:

Grants in Aid Program
Agency of Transportation, Municipal Assistance Section

Via Email:

GrantsInAid@vermont.gov