MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard ▪ Baltimore Maryland 21230

(410) 537-3000 ▪ 1-800-633-6101 ▪ http://www.mde.state.md.us

**MARYLAND WATER INFRASTRUCTURE FINANCING ADMINISTRATION**

## State Grant or Loan Payment Disbursement Request Form

**\* (Use a separate form for each financial assistance program)** \*

**Financial Assistance Program (Select One Only)**

|  |  |
| --- | --- |
| Water Quality Revolving Loan Fund |[ ]  Drinking Water Revolving Loan Fund |[ ]
| Bay Restoration Fund - WW Grant |[ ]   |  |
| Biological Nutrient Removal Grant (NR)Drinking Water Supply Grant (WSG/DWG)Supplemental (Sewerage) Grant (SWQH) | [ ] [ ] [ ]  | Energy Water Infrastructure Program (EWIP)Other:  | [ ] [ ]  |

Loan or Grant #:

Project Title:

Payment Disbursement Request #:

Federal ID #:

Project Period Covered (This Request): From: To:

Project Completion (Through This Request Period): % (Project Construction)

***Internal Use:***

|  |
| --- |
| Mail Code: |
| Payment #: |

Applicant Name:

Address:

City:

State: Zip Code:

Telephone #:

|  |  |  |
| --- | --- | --- |
| Type of Expense | Amount ($) | Invoice/Reference #s(or indicate separate schedule attached) |
| 1. Administration |  |  |
| 2. A/E - Planning/Design |  |  |
| 3. Construction |  |  |
| 4. A/E - Inspection |  |  |
| 5. A/E – Contract Management |  |  |
| 6. Other/Specify: |  |  |
| Total Expenses (This Request Period) |  |  |
| Grant/Loan Share Percentage | x % |  |
| Grant/Loan Payment Request  |  |  |

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**Overall Project Sources of Funding**

|  |  |  |  |
| --- | --- | --- | --- |
| Funding Source | Total Funding ($) | This Claim ($) | Paid To Date ($) |
| A. MDE – Revolving Loan Funds |  |  |  |
| B. MDE – Grant (1) #: |  |  |  |
| C. MDE – Grant (2) #: |  |  |  |
| D. MDE – Grant (3) #: |  |  |  |
| E. USDA Rural Development  |  |  |  |
| F. Community Development Block Grant  |  |  |  |
| G. Other: |  |  |  |
| H. Other: |  |  |  |
| I. Local Share |  |  |  |
|  |  |  |  |
| **TOTAL** |  |  |  |

**M/WBE Reporting with this Payment Disbursement Request**

*The Recipient must provide M/WBE payment information (gathered from Prime Contractor and A/E Firm)*

 *with each payment disbursement request in the format below or as a separate attachment:*

 M/WBE participation is not applicable to this project

 M/WBE participation is summarized below (or is being provided as a separate attachment)

|  |  |  |  |
| --- | --- | --- | --- |
| M/WBE Subcontractor Name | M/WBE Work Type | Under This Claim ($) | Cumulative To-Date ($) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

# Certification

I certify to the best of my knowledge and belief that the billed costs and this payment disbursement request represents the MDE share due, which has not been previously requested or paid and that an inspection has

been performed and all work is in accordance with the terms of the Revolving Loan Fund Agreement or in accordance with the terms of the Grant Agreement & Conditions of MDE Grant Award.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Requester Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Authorized Requester Title

Telephone # of Authorized Requester

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**ATTACHMENT A - REQUIRED IF REQUEST IS MADE FOR CONSTRUCTION COSTS**

**Self-Certification Checklist of Work Progress and Program Compliance**

Prime Contractor Estimate # End Date of Estimate % Contract Complete %

PLEASE RESPOND TO ALL QUESTIONS

This estimate of work complete (i.e. percentage of contract value complete) was verified by the owner or his/her agent by:

Yes [ ]  No [ ]  1. Evaluating work in place and based on review of daily logs and test reports of resident inspector.

Yes [ ]  No [ ]  2. Work is in accordance with approved contract documents.

Yes [ ]  No [ ]  3. All change orders have been submitted to MDE for their approval.

For projects where Davis-Bacon or State Wage Rates are applicable:

Yes [ ]  No [ ]  4. Weekly payrolls filed by prime contractor and all sub-contractors are on file with the owner.

Yes [ ]  No [ ]  5. Review of weekly payrolls for compliance with wage rates was undertaken for this payment.

 # of Employee Wages Verified Payroll Date Last Checked

Yes [ ]  No [ ]  6. Were any employees interviewed (DOL Form 1445)?

 # of Employee Interviews Dates Interviewed

Yes [ ]  No [ ]  7. Apprentice and trainee registrations were reviewed to ensure these employees are part of an official state or DOL-approved program # of Registrations Verified \_\_\_\_\_\_

Yes [ ]  No [ ]  8. Checked ratios to ensure contractors and subcontractors are not using disproportionate numbers of

 trainees and apprentices. Date Last Checked \_\_\_\_\_\_\_\_\_\_\_

For projects where use of American Iron and Steel is applicable:

Yes [ ]  No [ ]  9. Evidence of use of American Iron and Steel in the construction is on file.

List of Minority/Women’s Business Enterprise (MBE/WBE) subcontractors at the site during this reporting period: (Please enter NONE or List Subcontractors)

Status of unresolved deficiencies/significant issues: (Please enter N/A or List Issues)

Comments:

**Certification**

I certify to the best of my knowledge and belief that the work-in-place being billed on the attached contractor estimate is supported by documentation on file, and that documentation is available for inspection by MDE or its authorized representative at any time.

Signature of Owner’s Representative or A/E Consultant Date

Name of Owner’s Representative or A/E Consultant Title

Telephone # of Owner’s Representative or A/E Consultant

#### MARYLAND DEPARTMENT OF THE ENVIRONMENT

# INSTRUCTIONS FOR PREPARING, COMPLETING, AND SUBMITTING

# THE PAYMENT DISBURSEMENT REQUEST PACKET

1. Please type or print in ink. If you have any questions, please call 410-537-4481.
2. A Transmittal Letter, on official letterhead, must accompany all Payment Disbursement Request Forms and should summarize all items included in the submittal packet.
3. A separate Payment Disbursement Request Form must be submitted for each type of financial assistance requested (e.g., BNR, ENR, SWQH, Water Quality Revolving Loan, etc.) for this project. The form must be signed by one of the authorized requestors based on the Applicant’s prior instructions on file with the Maryland Water Infrastructure Financing Administration (MWIFA).
4. M/WBE reporting by the Applicant is applicable to projects that involve M/WBE subcontract(s). The Applicant should gather the M/WBE payment information from Prime Contractors including A/E firms.
5. One original Attachment A (Self-Certification Checklist) must accompany any Payment Disbursement Requests that include construction costs being submitted.
6. One copy of all invoices supporting all costs claimed should be submitted with evidence of corresponding payments made to vendors (copies of checks, check numbers, or fund wire summary). Vendors should be requested to include a statement of payments they have received to-date as part of each invoice submitted. The Applicant is responsible to keep original documents on file pending the need for an audit of their records.
7. Disbursements will be made by wire transfer or by check based on the Applicant’s instructions on file with the MWIFA. The MWIFA makes payment disbursements through the Maryland State Comptroller and through its Trustee Bank.
8. To submit the completed packet, place items in order as listed in these instructions and mail the completed packet to:

Leslie Mitchell, Internal and Quality Control Manager

Maryland Water Infrastructure Financing Administration

Maryland Department of the Environment

Montgomery Park Business Center

1800 Washington Boulevard, STE 515

Baltimore MD 21230-1718