

**FINAL SUBMISSION DOCUMENTATION**

Final Submission is hereby made by the \_\_\_\_\_ of \_\_\_\_\_  
for funding under the guidelines of the LOTCIP for the following project:

LOTCIP Project Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

Project Location: \_\_\_\_\_

**Engineer of Record (CT Professional Engineer Responsible for Project Design):**

Name: \_\_\_\_\_

Firm: \_\_\_\_\_

License No.: \_\_\_\_\_ Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Municipal Administrator (Employee Responsible for Construction Administration  
See Construction – Municipal Staffing):**

Name & Title of Official Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**COG Information:**

Name & Title of Official Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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**Project Schedule**

Final Design (Accepted by Municipality)	_____
Rights of Way (Acquisition Complete)	_____
Utilities (Coordination Completion)	_____
Public Involvement/Meeting (Completed)	_____
Anticipated Construction Advertising	_____
Anticipated Construction Contract Award	_____
Anticipated Construction Start	_____
Anticipated Construction Completion	_____

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**Items to be submitted as part of the final package**

_____	Plans
_____	Specifications
_____	Contract Documents
_____	Engineer's Final Estimates
_____	Structural Load Ratings – if applicable
_____	Scour Analysis Reports – if applicable
_____	General Municipal Certification
_____	Certification of Engineer of Record
_____	COG Endorsement
_____	District Acceptance Letter (Encroachment Review) – if applicable
_____	State Historic Preservation Office Determination Letter

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**Project Cost Data Summary**

	<b><u>Commitment to Fund</u></b>	<b><u>Final Submission</u></b>
Rights of Way Cost (If Applicable)	\$ _____	\$ _____
Estimated Construction Costs (Include Detailed Estimate)	\$ _____	\$ _____
Incidentals (10% of Construction Costs Only)	\$ _____	\$ _____
Contingencies (10% of Construction Costs Only)	\$ _____	\$ _____
Eligible Utility Relocation Costs	\$ _____	\$ _____
Total Estimated Project Cost	\$ _____	\$ _____

## Local Transportation Capital Improvement Program

### GENERAL MUNICIPAL CERTIFICATION

LOTICIP Project Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

I, \_\_\_\_\_, duly authorized

*name*

by the (Town, City, Borough) of \_\_\_\_\_ do certify and attest to the following:

1. That the project plans, specifications, and estimates have been approved and accepted. Any design exceptions from established local, AASHTO, the Department's Highway Design Manual, and/or the Department's Bridge Design Manual, as applicable, have been authorized by the Municipality and are documented and retained in the project records.
2. That the Municipality owns or has the responsibility for maintaining the facility for which funding is sought and will be responsible for all future maintenance of the facility.
3. That all public and private utility relocations have been addressed.
4. That all permits required from Federal, State, and local agencies have been obtained, and all applicable permits, permit conditions, and regulations will be complied with.
5. That the public involvement process has been completed, the concerns of the residents have been considered, the project is in the best interest of the general public.
6. That the project complies with Connecticut Environmental Policy Act as applicable.
7. That the project is consistent with the local conservation and development plan.
8. The Municipality has coordinated with the Department's Office of Maintenance during the design phase and the design has been deemed acceptable for issuance of an encroachment permit for all work within the State right of way.

9. Rights of Way (select one)

- There are no right of way acquisition activities required as part of the proposed project.
- All right of way activities associated with the project have been completed, as evidenced by submission of the required documentation described in the Rights of Way section of the Local Transportation Capital Improvement Program guidelines.

The purchase price for all property rights being acquired represents the fair market value of such property rights, as established by a certified appraiser.

For all property rights that were acquired by donation, a Waiver of Compensation and Appraisal Form has been properly executed.

Any relocations were completed in conformance with the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

- Right of way acquisitions are required. Acquisition activities were performed by the State.

10. Plans and specifications are complete and signed and sealed by the Engineer of Record.

11. That separate accounts have been established specifically for this project and all additions or disbursements will be made therefrom.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

*Municipal Seal*

**Local Transportation Capital Improvement Program**  
**CERTIFICATION BY ENGINEER OF RECORD**

LOTICIP Project Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

I, \_\_\_\_\_, do hereby certify:

*name*

1. That the project is designed to provide an approximate service life of:
  - Not Applicable (Pavement Preservation Projects Only)
  - 15 Years (Pavement Rehabilitation Projects Only)
  - 20 Years (All Other Projects)
2. That the design complies with Americans with Disabilities Act of 1990, as applicable.
3. That the design complies with the established local standards, AASHTO, the Department's Highway Design Manual, and/or the Department's Bridge Design Manual and the Department's Bridge Load Rating Manual, as applicable. Any design exceptions from the above standards are based on sound engineering judgment, have been authorized by the Municipality, and are documented and retained in the project records.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Conn. P. E. Registration: \_\_\_\_\_

*(Stamp)*

**Local Transportation Capital Improvement Program**

**COG ENDORSEMENT**

LOTICIP Project Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

I, \_\_\_\_\_, duly authorized

*name*

by the \_\_\_\_\_

*name of COG*

do certify and attest to the following:

1. That the final submission package for the project is complete.
2. That the COG has selected this project as a regional priority and has authorized the use of the COG's LOTICIP funds for construction activities.
3. That based on the information contained in the final submission package and by virtue of this endorsement, the COG hereby fully supports the proposed project.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

(Executive Director)