

Act 101 Section 901 Municipal Planning Grant Disbursement Workshop

Part A Planning & Part B HHW Education

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT




pennsylvania
DEPARTMENT OF ENVIRONMENTAL
PROTECTION

ACT 101, SECTION 901
MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

(2500-FM-BWM0034 Rev. 4/2017)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
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ACT 101, SECTION 901
MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

[HOUSEHOLD HAZARDOUS WASTE (HHW)]

(2500-FM-BWM0034 Rev. 4/2017)



Data Management Committee
July 26, 2017

Welcome and Introductions

Moderator:

Amy Mazzella di Bosco – PROP Data Management Chair

Workshop Panel:

Stacey Dill – PA DEP

John Lundsted – PA DEP

Mark Vottero – PA DEP

Our goal for today is to provide you with helpful tips and valuable troubleshooting information so that your disbursement requests are processed as efficiently as possible to avoid any returns or delays!


We encourage participation and welcome any questions!

Thank you for attending today's workshop!

Act 101 Section 901 Municipal Planning Grant Disbursement Workshop

Part A Planning

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT



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ACT 101, SECTION 901
MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

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Data Management Committee
July 26, 2017

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

COMMONWEALTH OF PENNSYLVANIA
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ACT 101, SECTION 901
MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

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Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction

2. Cover Page

3. Part A: Itemized Expenditure Pages

- Budget Category A County Personnel Costs
- Budget Category B Benefits
- Budget Category C Supplies/Printing
- Budget Category D Travel
- Budget Category E Consultants & Subcontracts
- Budget Category F In-Kind Services

4. Part B: Fiscal Summary

5. Part C: Progress Report

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction

First and foremost, read the directions included with the disbursement forms. There is a lot of helpful information included to help you put together a seamless disbursement request.

INSTRUCTIONS FOR COMPLETING THE DISBURSEMENT REQUEST FORM FOR ACT 101, SECTION 901 MUNICIPAL WASTE PLANNING GRANTS

Please read all instructions carefully before completing this form. Failure to provide the required information and supporting documentation will delay reimbursement.

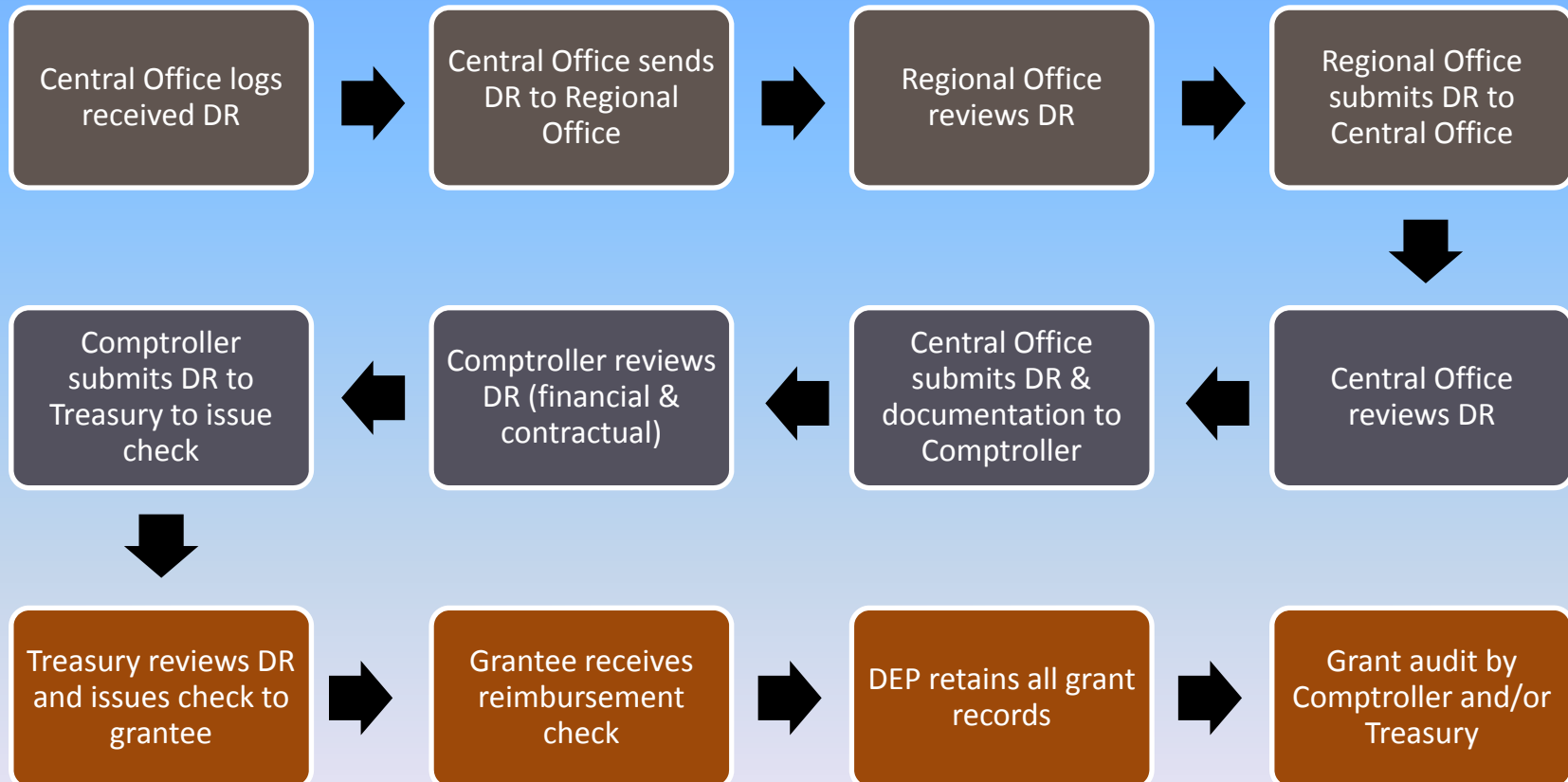
Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction

- **Act 101 Section 901 Municipal Waste Planning Grant – Part A Planning**
- **Eligible to Counties ONLY for the Planning of Waste Management**
- **Grant cannot exceed 80% of the total approved project cost**
- **A County may receive up to \$75,000 per calendar year**
- **Any costs associated with a County Recycling Coordinator applying for a 903 Grant is NOT eligible under the 901 Grant Program.**

1. Introduction

What happens to my **Disbursement Request (DR)** after submission?



Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction

2. Cover Page

3. Part A: Itemized Expenditure Pages

- Budget Category A County Personnel Costs
- Budget Category B Benefits
- Budget Category C Supplies/Printing
- Budget Category D Travel
- Budget Category E Consultants & Subcontracts
- Budget Category F In-Kind Services

4. Part B: Fiscal Summary

5. Part C: Progress Report

2. COVER PAGE

- No action needed.
- Do not write on this page.

ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

DEPARTMENT USE ONLY					
					INVOICE DATE: _____
1.	PAYEE:				
2.	ADDRESS:				
3.	FEDERAL I.D. NUMBER:				
4.	VENDOR I.D. NUMBER:				
5.	AGREEMENT NUMBER: SAP Document #				
6.	INVOICE NUMBER:				
DISBURSEMENT REQUEST #:			AMOUNT:		
eFACTS check performed on _____, Contractor has no outstanding compliance issues.					
DATE					
APPROVED FOR PAYMENT:					

DATE					
Budget Period	SAP Fund	Gen. Led.	Cost Center	Int. Order	Amount
	2009300000	6600400	3522509000	35250000 --	\$
	2009300000	6600400	3522509000	35250000 --	\$

DO NOT WRITE ON THIS PAGE

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction

2. Cover Page

3. Part A: Itemized Expenditure Pages

- **Budget Category A County Personnel Costs**
- **Budget Category B Benefits**
- **Budget Category C Supplies/Printing**
- **Budget Category D Travel**
- **Budget Category E Consultants & Subcontracts**
- **Budget Category F In-Kind Services**

4. Part B: Fiscal Summary

5. Part C: Progress Report

Documentation Requirements

3. Part A: Itemized Expenditure Pages

- **Budget Category A County Personnel Costs**

Time sheets for each county employee claimed must include the following: dates, tasks performed (in detail), employee performing each task, number of hours (broken out in 15 minute increments), pay rate of each employee and a signature of a County Official verifying time sheets are accurate.

- **Budget Category B Benefits**

Hourly Benefit Rate (\$) for each employee working on the project, along with the hours worked on the project, must be provided. Documentation for benefits must be on County Letterhead and include the signature of a County Official verifying the information.

- **Budget Category C Supplies/Printing**

Dated invoice that shows county costs associated with the production of reports, plans, materials, surveys, investigations, etc. Documentation for any in-house costs under Supplies/Printing must be on County Letterhead and include a signature of a County Official verifying the information.

Documentation Requirements

3. Part A: Itemized Expenditure Pages

- **Budget Category D Travel**

Dated invoice showing the expenditures (mileage, hotel lodging) incurred by county personnel and/or those under contract to the county in the performance of work tasks associated with the project. Include a copy of the DEP pre-approved Travel Form if applicable. (Contact your Regional DEP Office for Out of State).

- **Budget Category E Consultants & Subcontracts**

Dated invoice showing expenditures incurred and tasks performed by the consultant/subcontractor with the rate of each employee and their job title. Invoice needs to include a detailed breakout of tasks performed by each employee. Direct/Indirect costs need to be verified and broken out in detail, which includes documentation to show that no indirect costs are being charged to the grant.

- **Budget Category F In-Kind Services**

Volunteer hours for attending Solid Waste Advisory Meetings must have: a copy of the sign-in sheet for the meeting noting which members are being counted toward in-kind hours; a copy of the minutes with the date of meeting; a list of attendees, start and end time; and the reimbursement rate for volunteers.

Documentation & Examples for

3. Part A: Itemized Expenditure Pages



Eligible invoices contain the following information:

- Vendor Name, Address, and Phone Number
- Invoice date
- Work Completion Date(s)
- Cost Breakdown (item unit price and total)
- Quantity Ordered
- Item/Work Description
- Freight/Shipping costs
- Applied Discounts
- Proof of Payment



Ineligible documentation:

- Price Quotes or Bid Documents
- Internal/External Purchase Orders
- Estimates
- Proposals
- Statements
- Invoice without Proof of Payment

Documentation & Examples for 3. Part A: Itemized Expenditure Pages

BAD EXAMPLE

PRICE QUOTE



Environmental Consultants

22 Denver Road
Suite E
Denver, PA 17517

610 382-3050

www.scsengineers.com

SCS ENGINEERS

QUOTATION

Proposal for Services:

Financial Analysis to Support Update to the Greater Lebanon Refuse
Authority (GLRA) Municipal Waste Management Plan

Fee Estimate for Services

		Labor Category Assignment Rate, \$/hr	Principal Gardner 215	Project Manager Wessels 165	Project Professional Smith 125	Totals
Task No.	Tasks					
PERSONNEL, HOURS						
	Pro Forma Model		144	96	64	304
1.0	Background Review		32	24	12	68
1.1	Develop information request		2	2		4
1.2	Review background documents		16	8	8	32
1.3	Meet with GLRA		8	8		16
1.4a	Prepare Task 1 draft memorandum		4	4	2	10
1.4b	Prepare Task 1 final memorandum		2	2	2	6
2.0	Develop Pro Forma Model		112	72	52	236
2.1	Develop Pro Forma Model in Excel		40	16	16	72
2.2	Review Model with GLRA		8	8	8	24
2.3	Run the Pro Forma Model		24	16	8	48
2.4	Meet with GLRA to discuss Pro Forma Model findings		8	8	8	24
2.5a	Prepare Task 2 draft memorandum		24	16	8	48
2.5b	Prepare Task 2 final memorandum		8	8	4	20
TOTAL FEE ESTIMATE			\$33,794	\$16,317	\$8,282	\$58,393
PERSONNEL, \$			\$30,960	\$15,840	\$8,000	\$54,800
1.0	Background Review		\$6,880	\$3,960	\$1,500	\$12,340
2.0	Develop Pro Forma Model		\$24,080	\$11,880	\$6,500	\$42,460
REIMBURSABLES w/10% profit			\$2,834	\$477	\$282	\$3,593
Profit on Reimbursables, 10%			\$258	\$43	\$26	\$327
Transportation			\$2,000	\$50		\$2,050
Computer/CAD			\$576	\$384	\$256	\$1,216

Documentation & Examples for 3. Part A: Itemized Expenditure Pages

GOOD EXAMPLE

PAID INVOICE



Environmental Consultants

22 Denver Road
Suite E
Denver, PA 17517

610 382-3050
www.scsengineers.com

SCS ENGINEERS

INVOICE# 0127

Date: July 1, 2017

Only Direct Costs for Services Completed From January 1, 2017 to
June 30, 2017 for Financial Analysis to Support Update to
the Greater Lebanon Refuse Authority (GLRA)
Municipal Solid Waste Management Plan

Task No.	Tasks	Labor Category Assignment Rate, \$/hr	Principal Gardner 215	Project Manager Wessels 165	Project Professional Smith 125	Totals
PERSONNEL, HOURS						
	Pro Forma Model		144	96	64	304
1.0	Background Review		32	24	12	68
1.1	Develop information request 1/15, 1/16, 1/17		2	2		4
1.2	Review background documents 1/22, 1/23, 1/24, 1/25, 1/26		16	8	8	32
1.3	Meet with GLRA 2/15		8	8		16
1.4a	Prepare Task 1 draft memorandum 3/2, 3/3		4	4	2	10
1.4b	Prepare Task 1 final memorandum 3/12		2	2	2	6
2.0	Develop Pro Forma Model		112	72	52	236
2.1	Develop Pro Forma Model in Excel - April 3,4,5,6,8,9,10,12,15		40	16	16	72
2.2	Review Model with GLRA 4/22		8	8	8	24
2.3	Run the Pro Forma Model 4/26, 4/27, 4/28, 4/29		24	16	8	48
2.4	Meet with GLRA to discuss Pro Forma Model findings 5/10		8	8	8	24
2.5a	Prepare Task 2 draft memorandum 6/4, 6/5, 6/6, 6/9, 6/10		24	16	8	48
2.5b	Prepare Task 2 final memorandum 6/20, 6/21		8	8	4	20
TOTAL FEES FOR WORK COMPLETED 1/1/17 to 6/30/17:			\$33,794	\$16,317	\$8,282	\$58,393
PAID IN FULL						

Denise Wessels

Denise Wessels, P.E.
Project Manager
SCS ENGINEERS

R.B. Gardner

Robert B. Gardner, PE, BCEE
Senior Vice President
SCS ENGINEERS

Documentation & Examples for

3. Part A: Itemized Expenditure Pages

INVOICE
BAD EXAMPLE



ABC Consultants
123 Sustainability Circle
Greening, PA 12345
Phone 123-456-7890

INVOICE

INVOICE #100
DATE: 9/30/2016

TO:
John Doe
Somewhere County
400 Courthouse Square
Open Road, PA 09876
987-654-3210

FOR:
SOMEWHERE COUNTY PLAN DEVELOPMENT

DESCRIPTION	AMOUNT
Somewhere County Plan Consulting Fees	4,300.00
TOTAL	\$4,300.00

Make all checks payable to ABC Consultants.
Total due in 30 days. Overdue accounts subject to a service charge of 1% per month.

THANK YOU FOR YOUR BUSINESS!

Documentation & Examples for

3. Part A: Itemized Expenditure Pages

INVOICE
GOOD EXAMPLE



**WORK
COMPLETED
MUST BE
WITHIN THE
CONTRACT
PERIOD**

ABC Consultants
123 Sustainability Circle
Greening, PA 12345
Phone 123-456-7890



INVOICE

INVOICE #100
DATE: 9/30/2017

TO:
John Doe
Somewhere County
400 Courthouse Square
Open Road, PA 09876
987-654-3210

FOR:
DIRECT COSTS ONLY FOR
SOMEWHERE COUNTY PLAN
DEVELOPMENT P.O. # 422

DESCRIPTION	HOURS	RATE	AMOUNT
Larry Barry - Project Engineer - Site Visits to 4 Landfill Facilities - Aug 1,2,5,7, 2017	8	100.00	800.00
Todd Snodd - Lead Consultant - Researching Landfill Capacity – Aug 12, 13, 2017	4	100.00	400.00
John John - Staff Attorney - Reviewing Ordinances – Aug 15, 16, 17, 18, 19, 2017	25	100.00	2,500.00
Mark Spark - Lead Consultant - Revising and Editing First Draft – Sept 9, 10, 2017	6	100.00	600.00
TOTAL			\$4,300.00

Make all checks payable to ABC Consultants.
Total due in 30 days. Overdue accounts subject to a service charge of 1% per month.
THANK YOU FOR YOUR BUSINESS!

Documentation & Examples for

3. Part A: Itemized Expenditure Pages

In-house eligible documentation contains the following information:

- County letterhead
- Staff name(s), title(s), and wage rate(s)
- Description of work completed
 - per day, per person
- Date(s) work completed
- Cost breakdown
 - Item unit price and total
- Quantity
- Total cost
- Signature of County Official



GOOD EXAMPLE

Nowhere County

Nowhere County, 123 Ghost Road, Nowhere, PA 91125
717.800.1234

To whom it may concern: Nov. 1, 2017

The following table corresponds to itemized expenditures in Budget Category F, Consultants & Subcontracts, expenditures.

Ima Goodman, County Planner, Level 1 @ \$13.48 per hour				
Date	Hours	Total		Description
7/14/17	4	\$ 53.92		Editing Intro Summary of SWMP
10/20/17	8	\$ 107.84		Updating Sustainability Section of SWMP
2/18/17	8	\$ 107.84		Updating Figures in Recycling and Waste Tables of SWMP
Total	20	\$ 269.60		

Sincerely,

Nowhere County Manager

123 Ghost Road, Nowhere, PA 91125
www.nowherecounty.com

Documentation & Examples for 3. Part A: Itemized Expenditure Pages

Remember!

- Items not specified in the Scope of Work are ineligible for reimbursement.
- Make sure you list only the invoices that apply to the Budget Category listed at the top of the PART A form. A separate PART A must be completed for the expenditures in the other approved budget categories.

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction

2. Cover Page

3. Part A: Itemized Expenditure Page(s)

4. Part B: Fiscal Summary

5. Part C: Progress Report

3. PART A: ITEMIZED EXPENDITURE LIST

Verify ALL invoice submissions align with the Scope of Work and Budget Category from your contract narrative and/or letter of mutual consent.

Organizing invoices in the same order they are listed on this page will ensure a complete submission and reduce processing time.

NOTES:

- Do NOT list invoice line items separately
- DO list one invoice per line
- COST column should reflect total eligible invoice amount (e.g. subtract sales tax)

ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT DISBURSEMENT REQUEST FORM

PART A: ITEMIZED EXPENDITURE LIST

FOR BUDGET CATEGORY:

	APPROVED COSTS	DEP SHARE	MATCH
BUDGET	\$	\$	\$

SCOPE OF WORK

	VENDOR NAME	INVOICE NUMBER	DESCRIPTION OF ITEM(S)/SERVICE(S)	DATE ITEM OR SERVICE RECEIVED	COST
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

CURRENT EXPENDITURES CLAIMED _____
AMOUNT IN EXCESS OF BUDGET _____
CURRENT ELIGIBLE EXPENDITURES _____

PLEASE ATTACH ALL INVOICES IN THE ORDER LISTED

ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT
 DISBURSEMENT REQUEST FORM

PART A: ITEMIZED EXPENDITURE LIST

FOR BUDGET CATEGORY:

	APPROVED COSTS	DEP SHARE	MATCH
BUDGET	\$	\$	\$

SCOPE OF WORK

VENDOR NAME	INVOICE NUMBER	DESCRIPTION OF ITEM(S)/SERVICE(S)	DATE ITEM OR SERVICE RECEIVED	COST
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

CURRENT EXPENDITURES CLAIMED _____
 AMOUNT IN EXCESS OF BUDGET _____
 CURRENT ELIGIBLE EXPENDITURES _____

PLEASE ATTACH ALL INVOICES IN THE ORDER LISTED

3. PART A: ITEMIZED EXPENDITURE LIST

Use one of the following:

1. Date item received
2. Date service/work completed
3. Date of attached invoice

DO NOT USE THE DATE PAID

NOTE:

If the work was or will be
 completed after the
 contract termination date,
 it is **INELIGIBLE** to claim.

[illegible]

	APPROVED COSTS	DEP SHARE	MATCH
BUDGET	20,000	\$16,000	4,000

SCOPE OF WORK Under this category, the County will claim expenditures incurred and tasks performed by the consultant/subcontractor for direct costs associated with the development and preparation of the Plan revision.

	VENDOR NAME	INVOICE NUMBER	DESCRIPTION OF ITEM(S)/SERVICE(S)	DATE ITEM OR SERVICE RECEIVED	COST
1.	Ecoville Consultants	123	Phase I Plan Revisions	1/1/17 - 4/30/17	6000.00
2.	PIE Engineers	456	Phase 1 Solid Waste Models	1/1/17 - 3/1/17	4000.00
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

CURRENT EXPENDITURES CLAIMED	\$10,000
AMOUNT IN EXCESS OF BUDGET	\$2,000
CURRENT ELIGIBLE EXPENDITURES	\$8,000

Example Disbursement Request DR #2

“Current expenditures claimed”

DR #2 "Current Eligible Expenditures" calculations:

Total = \$22,000

Therefore, Excess = \$2,000

Current Eligible Expenditures for DR #2 = \$8,000.00

[illegible]



ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

PART A: ITEMIZED EXPENDITURE LIST

FOR BUDGET CATEGORY: 3. Printing/Supplies

	APPROVED COSTS	DEP SHARE	MATCH
BUDGET	5,000	4,000	1,000

SCOPE OF WORK Under this Category the County will have the completed solid waste management plans printed and published.

VENDOR NAME	INVOICE NUMBER	DESCRIPTION OF ITEM(S)/SERVICE(S)	DATE ITEM OR SERVICE RECEIVED	COST
1. Colortech Inc.	01423	Printing/Publishing Plan	9/20/2017	\$5,695
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

CURRENT EXPENDITURES CLAIMED \$5,695.00
 AMOUNT IN EXCESS OF BUDGET \$ 695.00
 CURRENT ELIGIBLE EXPENDITURES \$ 5,000.00

PLEASE ATTACH ALL INVOICES IN THE ORDER LISTED

3. PART A: ITEMIZED EXPENDITURE LIST

Second Example DR #1

Budget Category	APPROVED COSTS				
	Approved Costs	Current Expenditures	Previous Expenditures	Total Expends To-Date	Balance
1. County Personnel Costs	\$10,000				
2. Benefits	\$2,500				
3. Supplies/ Printing	\$5,000	5,000	0	5,000	0
4. Travel	\$1,000				
5. Consultants & Subcontracts	\$20,000				
6. In-Kind Services	\$2,500				
TOTAL:	\$41,000				
WITHHOLDING:					
APPROVED PAYMENT:					

CURRENT EXPENDITURES CLAIMED \$5,695
 AMOUNT IN EXCESS OF BUDGET \$ 695
 CURRENT ELIGIBLE EXPENDITURES \$5,000

Even if the actual invoice is \$5,695---use the APPROVED COST for the CURRENT EXPENDITURE

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction
2. Cover Page
3. Part A: Itemized Expenditure Page(s)
- 4. Part B: Fiscal Summary**
5. Part C: Progress Report

4. Part B: Fiscal Summary

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ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT DISBURSEMENT REQUEST FORM

PART B: FISCAL SUMMARY

GRANTEE:

SAP DOCUMENT #:

DISBURSEMENT REQUEST # : _____

Is this a final request: ☐ Yes ☐ No

Budget Category	APPROVED COSTS					DEP SHARE						MATCH				
	Approved Costs	Current Expenditures	Previous Expenditures	Total Expenditures To-Date	Balance	% To Be Paid	Total DEP Share	Current DEP Share	Previous DEP Share	Total DEP Share To-Date	Balance DEP Share	Total Match	Current Match	Previous Match	Total Match To-Date	Balance Match
1. County Personnel Costs	\$10,000															
2. Benefits	\$2,500															
3. Supplies/ Printing	\$5,000															
4. Travel	\$1,000															
5. Consultants & Subcontracts	\$20,000															
6. In-Kind Services	\$2,500															
TOTAL:	\$41,000															
WITHHOLDING:																
APPROVED PAYMENT:																

Comments: _____

I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE FISCAL SUMMARY LISTED ABOVE IS CORRECT AND COMPLETE AND ALL EXPENDITURES, INCLUDING ALL DONATIONS AND IN-KIND SERVICES, ARE FOR THE PURPOSES SET FORTH IN THE GRANT AGREEMENT.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL: _____

DATE: _____

TYPED OR PRINTED NAME & TITLE _____

TELEPHONE NUMBER: _____

4. Part B: Fiscal Summary

Total Expenditures
To-Date
SHOULD NEVER
EXCEED
Approved Costs

NEGATIVE (-) NUMBERS
SHOULD NEVER BE ON
THE FISCAL SUMMARY

2500-FM-

ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT DISBURSEMENT REQUEST FORM

PART B: FISCAL SUMMARY

GRANTEE:

SAP DOCUMENT #:

DISBURSEMENT REQUEST # : _____

Is this a final request: ☐ Yes ☐ No

Budget Category	APPROVED COSTS					DEP SHARE						MATCH				
	Approved Costs	Current Expenditures	Previous Expenditures	Total Expenditures To-Date	Balance	% To Be Paid	Total DEP Share	Current DEP Share	Previous DEP Share	Total DEP Share To-Date	Balance DEP Share	Total Match	Current Match	Previous Match	Total Match To-Date	Balance Match
1. County Personnel Costs	\$10,000															
2. Benefits	\$2,500															
3. Supplies/ Printing	\$5,000															
4. Travel	\$1,000															
5. Consultants & Subcontracts	\$20,000															
6. In-Kind Services	\$2,500															
TOTAL:	\$41,000															
WITHHOLDING:																
APPROVED PAYMENT:																

Comments: _____

I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE FISCAL SUMMARY LISTED ABOVE IS CORRECT AND COMPLETE AND ALL EXPENDITURES, INCLUDING ALL DONATIONS AND IN-KIND SERVICES, ARE FOR THE PURPOSES SET FORTH IN THE GRANT AGREEMENT.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL: _____

DATE: _____

TYPED OR PRINTED NAME & TITLE _____

TELEPHONE NUMBER: _____

% To Be Paid
column works IF
and ONLY IF
ALL total
approved costs
are spent

4. Part B: Fiscal Summary

**NEGATIVE (-) NUMBERS
SHOULD NEVER BE ON
THE FISCAL SUMMARY**

2500-P

CT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

PART B: FISCAL SUMMARY

RE:

REQUEST #:

SAP DOCUMENT #:

Is this a final request: ☐ Yes ☐ No

Budget Category	APPROVED COSTS					DEP SHARE						MATCH				
	Approved Costs	Current Expendi- tures	Previous Expenditures	Total Expendi- To-Date	Balance	% To Be Paid	Total DEP Share	Current DEP Share	Previous DEP Share	Total DEP Share To-Date	Balance DEP Share	Total Match	Current Match	Previous Match	Total Match To-Date	Balance Match
1. County Personnel Costs	\$10,000					1.000	\$10,000					\$0				
2. Benefits	\$2,500					.8000	\$2,000					\$500				
3. Supplies/ Printing	\$5,000					.8000	\$4,000					\$1,000				
4. Travel	\$1,000					.8000	\$800					\$200				
5. Consultants & Subcontracts	\$20,000					.8000	\$16,000					\$4,000				
6. In-Kind Services	\$2,500					.0000	\$0					\$2,500				
TOTAL:	\$41,000					.8000	\$32,800					\$8,200				
WITHHOLDING:																
APPROVED PAYMENT:																

Comments:

I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE FISCAL SUMMARY
AND IN-KIND SERVICES, ARE FOR THE PURPOSES SET FORTH IN THE GRANT AGREEMENT

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL:

DATE:

**NOTE: The grant will
ALWAYS pay out at 80% of
eligible costs, regardless of
line item percentages.**

INCLUDING ALL DONATIONS

TELEPHONE NUMBER:

**NEGATIVE (-) NUMBERS
SHOULD NEVER BE ON
THE FISCAL SUMMARY**

4. Part B: Fiscal Summary

ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT
DISBURSEMENT REQUEST FORM

PART B: FISCAL SUMMARY

GRANTEE:

SAP DOCUMENT #:

DISBURSEMENT REQUEST #: _____

Is this a final request: ☐ Yes ☐ No

Budget Category	APPROVED COSTS					DEP SHARE						MATCH				
	Approved Costs	Current Expenditures	Previous Expenditures	Total Expenditures To-Date	Balance	% To Be Paid	Total DEP Share	Current DEP Share	Previous DEP Share	Total DEP Share To-Date	Balance DEP Share	Total Match	Current Match	Previous Match	Total Match To-Date	Balance Match
1. County Personnel Costs	\$10,000					1.000	\$10,000					\$0				
2. Benefits	\$2,500					.8000	\$2,000					\$500				
3. Supplies/ Printing	\$5,000					.8000	\$4,000					\$1,000				
4. Travel	\$1,000					.8000	\$800					\$200				
5. Consultants & Subcontracts	\$20,000					.8000	\$16,000					\$4,000				
6. In-Kind Services	\$2,500					.0000	\$0					\$2,500				
TOTAL:	\$41,000					.8000	\$32,800					\$8,200				
WITHHOLDING:																
APPROVED PAYMENT:																

Total Match To-Date
SHOULD NEVER
exceed Total Match

DEP can withhold 20% of funds to meet grant requirements.

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

THINGS TO REMEMBER!

PLAN AHEAD!

- ❖ Only items in your application and those discussed at your pre-app meeting can be included in your grant agreement.
- ❖ A one time 3-month grant agreement extension may be permitted if requested in advance through your DEP Regional Contact.

TERRIFIC TIPS!

- ❖ If you overspend in one category and underspend in another category, talk to your DEP Regional Contact. If necessary, funds can be shifted between categories via a Letter Of Mutual Consent (LOMC).
- ❖ Postage is an eligible cost in 901 Grants ONLY.
- ❖ Total required match can be submitted on first DR or at any time during the grant period.

Act 101 Section 901 Municipal Planning Grant Disbursement Request – Part A Planning

1. Introduction
2. Cover Page
3. Part A: Itemized Expenditure Page(s)
4. Part B: Fiscal Summary/Disclosure Statement
- 5. Part C: Progress Report**

5. PART C: PROGRESS REPORT

INSTRUCTIONS FOR COMPLETING THE PART C – PROGRESS REPORT

Each disbursement request is to be accompanied by a report that details the progress you are making in completing the project as outlined in the grant agreement. The report should cover the period for which you are seeking reimbursement under this request. When writing the report, you should utilize the following outline on the form provided:

1. Provide a general summary of the work completed thus far, keeping in mind the desired outcome of your project and the timetable established for completion in the grant agreement. Describe any setbacks, delays, successes and surprises experienced.
2. For each Approved Budget Category of your grant agreement, provide a detailed description of the work performed during the time period covered by this report.
3. Provide copies of materials or documents developed for the project during the time period of the report.

At a minimum, progress reports, whether or not accompanied by a disbursement request, shall be submitted on a semi annual basis commencing six (6) months after the execution of the grant agreement. A final project report must be submitted within two (2) months after the termination date of the grant agreement.

ACT 101, SECTION 901, MUNICIPAL WASTE PLANNING GRANT DISBURSEMENT REQUEST FORM PART C: PROGRESS REPORT

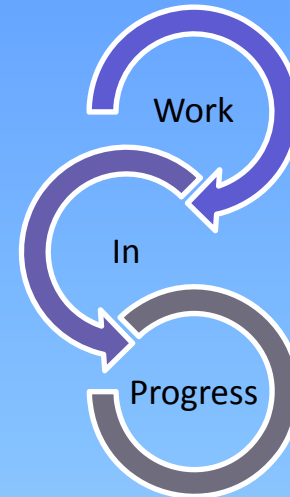
GRANTEE: _____ AGREEMENT NUMBER: _____

TIME PERIOD COVERED BY THIS REPORT: FROM _____ TO _____.
Month/Year Month/Year

5. PART C: PROGRESS REPORT

Progress Reports should:

- ✓ Accompany every DR
- ✓ Cover progress of project from last report to date
- ✓ Highlight successes & failures



A Final Report should be submitted within 2 months after the termination date of the grant agreement and accomplish the following:

- ✓ Summarize work completed to date
- ✓ Highlight overall successes & failures
- ✓ Assess goal achievement
- ✓ Discuss future goals

The workshop panel will conclude with questions and answers at this time:

Stacey Dill – PA DEP stdill@pa.gov

John Lundsted – PA DEP jlundsted@pa.gov

Mark Vottero – PA DEP mvottero@pa.gov

Thank you for participating in today's workshop!