

# PAG 12.6% HURF FUND DRAWDOWN REQUEST

## PART A

(to be completed by the project sponsor)

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

Project Sponsor: \_\_\_\_\_

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

Project Description: \_\_\_\_\_

TIP ID:

Sponsor  
ID:

ADOT  
TRACS:

FED ID:

**NOTE TO SPONSORS:** PAG's 12.6% funds are generally made available on a reimbursement basis. Requests for drawdown of funds should be prepared after expenses have been incurred and the funds can be applied quickly. Requests for advance drawdowns will be reviewed on a case by case basis under extenuating circumstances. Project costs shown in the following section should be accompanied by adequate documentation.

	Programmed/Budgeted	Expenditures
Total, all fund sources		
Total HURF 12.6%		
HURF 12.6%, Current Fiscal Year		

Amount of this 12.6% Request: \_\_\_\_\_

For Work Performed from: \_\_\_\_\_ to \_\_\_\_\_

Current status of project development:  
(Mark all that apply)

Studies are \_\_\_\_\_ % complete  
 Plans are \_\_\_\_\_ % complete  
 Right of Way is \_\_\_\_\_ % complete  
 Utility relocation is \_\_\_\_\_ % complete  
 Construction is \_\_\_\_\_ % complete

This payment request is for:  
(Mark all that apply)

\_\_\_\_\_ In house personnel costs  
 \_\_\_\_\_ Consultant/Contractor costs  
 \_\_\_\_\_ Studies/PDAF  
 \_\_\_\_\_ Plans  
 \_\_\_\_\_ Right of way  
 \_\_\_\_\_ Utilities  
 \_\_\_\_\_ Construction

payment should be mailed to:

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

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

City/State/Zip: \_\_\_\_\_

Attention: \_\_\_\_\_

Reference invoice or ID number: \_\_\_\_\_

I certify that the foregoing accurately represents the expenditures and status of the foregoing project as contained in the sponsor's records.

Signature: \_\_\_\_\_

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

**PART B**

(to be completed by PAG)

Yes    No

- Funds are available in the current year's program consistent with this request
- Project funding has been authorized in the amounts requested in the current TIP.
- Adequate documentation regarding project costs has been provided.

Amount Programmed in the Current TIP \_\_\_\_\_

Amount of previous requests this year \_\_\_\_\_

Approved for PAG by:

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

**PART C**

(To be completed by ADOT)

Approved for ADOT by:

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

*To the Sponsor:*

*Upon completion of **PART A**, please forward this form along with supporting documentation (invoices, payroll summaries, etc.) to:*

Pima Association of Governments  
1 E. Broadway, Suite 401  
Tucson AZ 85701  
Attn: Transportation Programming Manager  
Phone: 520.792.1093    FAX: 520.792.9151