

**S2 (SRF/SWQIF) GRANT PROGRAM
Instructions for Completing a
Request for Disbursement of Funds**

DOCUMENTATION TO SUPPORT THE INCURRED COSTS MUST BE INCLUDED WITH EACH REQUEST.

- A. Fill in the project number that was assigned by the Michigan Department of Environmental Quality (DEQ).
- B. Fill in the number of this disbursement request.
- C. Fill in the calendar period covered by this disbursement request.
- D. Fill in whether this is a partial or the final disbursement request.
- E. Fill in the grantee's federal employer identification number (EIN).
- F. Fill in the grant amount as shown in the Grant Agreement.
- G. Fill in the grantee's name, address, and telephone number. This information must match data on file with the DEQ; if changes have occurred, please inform your DEQ project manager in a separate letter accompanying this request.
- H. Fill in your bank's name, address, telephone number, ABA identifying number, the account name and number, and any special instructions for the wire transfer to that account. This information must match data on file with the DEQ; if changes have occurred, please inform your DEQ project manager in a separate letter accompanying this request.
- I. Recap approved eligible costs incurred to date for each budget item. Show the amount (include dollars and cents) requested for the period covered by this request, and then the cumulative amount to date from project inception.
If costs have been incurred for a budget item that was not shown in the Grant Agreement, please inform your project manager in a separate letter accompanying this request.
 - 1. Fill in the costs invoiced and/or paid for planning.
 - 2. Fill in the costs invoiced and/or paid for services directly associated with the development and enactment of the municipality's revenue system development and any related ordinances.
 - 3. Fill in the costs invoiced and/or paid for project design work required to produce plans and specifications suitable for bidding.
 - 4. Fill in the sum of the amounts shown in Column 1 (Approved Amount Incurred for Request Period).
 - 5. Fill in the sum of the amounts shown in Column 2 including amounts from Column 1 (Approved Amount Incurred to Date).
 - 6. Fill in the match amount (10% of the Total Cumulative Amount – Line 5).
 - 7. Fill in the total amount of funds previously paid (Line 7 on the previous disbursement request).
 - 8. Subtract Lines 6 and 7 from Line 5 to arrive at the Amount Requested for Disbursement.
- J. For each request, provide a brief description of the work completed to date based on the approved project scope identified in Exhibit A of the Grant Agreement. If the scope of work will exceed the grant period, request a grant period extension from your DEQ project manager prior to incurring the costs.

PLEASE NOTE: ONLY ONE REQUEST FOR DISBURSEMENT WILL BE PROCESSED EACH CALENDAR MONTH. A SIGNED ORIGINAL (NO SIGNATURE STAMP) OF REQUEST #1 AND THE FINAL REQUEST MUST BE HAND-DELIVERED OR SUBMITTED BY MAIL (A FACSIMILE WILL NOT BE ACCEPTED).

REMEMBER TO INCLUDE DOCUMENTATION TO SUPPORT THE INCURRED COSTS WITH EACH SUBMITTED FORM. DOCUMENTATION INCLUDES PROOF OF BILLING (i.e., AN INVOICE) OR PROOF OF PAYMENT (CANCELLED CHECK OR LEDGER ENTRY).

Mail or fax this *Request for Disbursement of Funds*, with the required documentation to:

**REVOLVING LOAN AND OPERATOR CERTIFICATION SECTION
WATER BUREAU
MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
PO BOX 30273
LANSING MI 48909-7773
Telephone: 517-373-2161
Fax: 517-335-0743**