

## Documentation Requirements for Water Quality Management Projects (2/25/04)

A signed and dated State Aid/Standard Voucher, an Expenditure Reporting Form and a signed and dated Self-Certification Form are required with **all** payment requests. In addition, the following documentation is required on the first payment request or when the total life-to-date expenditures claimed on a payment request reaches or exceeds 25%, 50%, 75% or 100% of the total eligible contract amount, as specified in the contract.

**NOTE: If project costs include both eligible and ineligible costs, a breakdown of those costs, a description of their relation to the project as well as an explanation of the cost share determination must be included. Please note source of funds used for local match and verify that these funds are not other state or federal dollars. All documentation associated with this project must be maintained for a period of six years beyond the end of this contract term or three years beyond the close out of any federal grant under which these costs are claimed by NYSDEC, whichever is greater.**

### 1. Construction Costs

Signed and dated work-in-place estimates, including all approved amendments to the plans and specifications for each contract. If a partial payment is requested for a construction contract, the latest work-in-place estimate will be sufficient. Final work-in-place estimates will be required for each construction contract upon completion.

Signed and dated copies of payment vouchers, invoices with check numbers and date issued or copies of canceled checks for each contract must be submitted.

### 2. Personal Services (Municipal Personnel Payroll, Fringe Benefits and Indirect Costs)

Submit daily time and activity records for each individual employee, signed by the appropriate supervisor **OR** a completed, signed and certified summary of all personal service costs claimed (see attached sample). The records must include the employee's name and/or title, hourly rate, relation of tasks performed to the contract, including the dates and numbers of hours worked each day and total costs claimed for each individual (hourly rate times the number of hours worked).

In most cases, time spent on the project by elected officials is not eligible for reimbursement. However, when prior approval is received by the project manager, time spent by an elected official in lieu of hiring additional staff may be eligible. Even when approved by the project manager, the cost will only be reimbursed at the local prevailing wage rate of the routine title used to perform the task, not at their official salary.

### 3. Non-Personal Services

#### a. Travel

Signed and dated receipts for all travel expenditures **OR** a completed, signed and certified summary of those costs (see attached sample) must be included. Travel receipts must include the traveler's name and/or title; the date, origin and destination of travel, the relation of the trip to the project, the method of travel and the method of calculating mileage (i.e., rate per mile), if it is claimed.

b. Equipment and Supplies & Materials

Signed and dated copies of payment vouchers, invoices with check numbers and date issued or copies of canceled checks must be submitted **OR** a completed, signed and certified summary of those costs (see attached sample) must be included. Vouchers or invoices should include payee, description of item, amount and its relation to the project.

c. Contractual Services (Engineering, Design or Other (please specify))

For each individual contract, signed and dated copies of payment vouchers, invoices with check numbers or canceled checks detailing the cost of services, including a description of the tasks performed **OR** a completed, signed and certified summary of those costs (see attached sample) must be included

d. Land Acquisition

Signed and dated copies of payment vouchers, invoices with check numbers or canceled checks.

Copy of deed.

e. Other (please specify)

Signed and dated copies of payment vouchers, invoices with check numbers and date issued or copies of canceled checks must be submitted. Vouchers or invoices should include payee, description of item, amount and its relation to the project.

If indirect costs are claimed on something other than personnel services above, indicate the current rate, costs included in that rate and what to which amount the indirect rate is applied.

**EXPENDITURE REPORTING FORM**  
**Water Quality Management Projects** (revised 3/30/07)

Contract No.: \_\_\_\_\_  
 Contract Name: \_\_\_\_\_  
 Reporting Period for Costs Claimed On This Voucher : \_\_\_\_\_

**A. List Total Eligible Costs for this reporting period only:**

**Construction Costs** \$ \_\_\_\_\_

**Personal Service Cost**

Salaries and/or Wages \$ \_\_\_\_\_  
 Fringe Benefits \$ \_\_\_\_\_  
 Indirect Cost Rate \_\_\_\_\_% \$ \_\_\_\_\_

**Non-personal Service Cost**

Travel \$ \_\_\_\_\_  
 Equipment \$ \_\_\_\_\_  
 Supplies & Materials \$ \_\_\_\_\_  
 Contractual Services \$ \_\_\_\_\_  
 Land Acquisition \$ \_\_\_\_\_  
 Other (please specify) \$ \_\_\_\_\_

**Total Expenses for this reporting period only:** \$ \_\_\_\_\_

**B. Expenses Life-To-Date (including this reporting period):**

**Construction Costs** \$ \_\_\_\_\_

**Personal Service Cost**

Salaries and/or Wages \$ \_\_\_\_\_  
 Fringe Benefits \$ \_\_\_\_\_  
 Indirect Cost Rate \_\_\_\_\_% \$ \_\_\_\_\_

**Non-personal Service Cost**

Travel \$ \_\_\_\_\_  
 Equipment \$ \_\_\_\_\_  
 Supplies & Materials \$ \_\_\_\_\_  
 Contractual Services \$ \_\_\_\_\_  
 Land Acquisition \$ \_\_\_\_\_  
 Other (please specify) \$ \_\_\_\_\_

**Total Life-To-Date Expenses:** \$ \_\_\_\_\_

**C. List Cumulative Total Eligible Costs claimed from the beginning of contract:**

Total Life-to-Date Expenses \$ \_\_\_\_\_  
 Contract Match Requirement X %  
 Total Life-to-Date Reimbursable Contract Amount \$ \_\_\_\_\_  
 (Limit to contract cap if this figure exceeds cap.)

Total Life-to-Date Retainage Withheld X 90%  
 Total Life-to-Date Amount Due Contractor \$ \_\_\_\_\_

Less Previous Advances and Payments Processed ( \_\_\_\_\_ )  
**Total amount due Contractor now:** \$ \_\_\_\_\_

Personal Services Summary

<u>Date(s)</u>	<u>Name and/or Title</u>	<u>Hourly Rate</u>	<u>Related Contract Task</u>	<u>Number of Hours Claimed</u>	<u>Total Amount Claimed</u>
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**NOTE:** If daily time and activity records for each individual employee, signed by the appropriate supervisor(s), which document the above summarized personal services performed in relation to the project are not attached, the following certification must be signed prior to reimbursement of those costs.

I hereby certify that daily time and activity records for each individual detailing the specific hours devoted solely to this project which are distinguishable from work done on other projects during the same time frame, maintained in accordance with all applicable federal, state and general municipal accounting practices and procedures are available in our files for inspection. Furthermore, these files will be maintained for a period of six years beyond the end of this contract term or three years beyond the close out of any federal grant under which these costs are claimed by NYSDEC, whichever is greater.

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Chief Fiscal Officer

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Authorized Representative

Travel Expenditure Summary

<u>Date</u>	<u>Name and/or Title</u>	<u>To/From Destination</u>	<u>Related Contract Task</u>	<u>Type of Cost (Per Diem, Lodging, Air, Mileage)</u>	<u>Total Amt. Claimed</u>
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**NOTE:** If travel records for each individual employee, signed by the appropriate supervisor(s), which document the above summarized travel costs performed in relation to the project are not attached, the following certification must be signed prior to reimbursement of those costs.

I hereby certify that travel reimbursement records for each individual detailing the specific travel costs devoted solely to this project which are distinguishable from work done on other projects during the same time frame, maintained in accordance with all applicable federal, state and general municipal accounting practices and procedures are available in our files for inspection. Furthermore, these files will be maintained for a period of six years beyond the end of this contract term or three years beyond the close out of any federal grant under which these costs are claimed by NYSDEC, whichever is greater.

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Chief Fiscal Officer

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Authorized Representative

Equipment Summary

<u>Date</u>	<u>Payee</u>	<u>Voucher/ Check No.</u>	<u>Item Description</u>	<u>Related Contract Task</u>	<u>Total Amt. Claimed</u>
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**NOTE:** If Equipment records which document the above summarized Equipment costs performed in relation to the project are not attached, the following certification must be signed prior to reimbursement of those costs.

I hereby certify that Equipment reimbursement records detailing the specific Equipment costs devoted solely to this project which are distinguishable from work done on other projects during the same time frame, maintained in accordance with all applicable federal, state and general municipal accounting practices and procedures are available in our files for inspection. Furthermore, these files will be maintained for a period of six years beyond the end of this contract term or three years beyond the close out of any federal grant under which these costs are claimed by NYSDEC, whichever is greater.

\_\_\_\_\_  
Chief Fiscal Officer

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Authorized Representative

Supplies and Materials Summary

<u>Date</u>	<u>Payee</u>	<u>Voucher/ Check No.</u>	<u>Item Description</u>	<u>Related Contract Task</u>	<u>Total Amt. Claimed</u>
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**NOTE:** If Supplies and Materials records which document the above summarized Supplies and Materials costs performed in relation to the project are not attached, the following certification must be signed prior to reimbursement of those costs.

I hereby certify that Supplies and Materials reimbursement records detailing the specific Supplies and Materials costs devoted solely to this project which are distinguishable from work done on other projects during the same time frame, maintained in accordance with all applicable federal, state and general municipal accounting practices and procedures are available in our files for inspection. Furthermore, these files will be maintained for a period of six years beyond the end of this contract term or three years beyond the close out of any federal grant under which these costs are claimed by NYSDEC, whichever is greater.

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Chief Fiscal Officer

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Authorized Representative

Contractual Services Summary

(Engineering, Design **or** if Other Contractual Services, please specify in description)

<u>Date</u>	<u>Payee</u>	<u>Voucher/ Check No.</u>	<u>Task Description</u>	<u>Total Amount Claimed</u>
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**NOTE:** If Contractual Services records which document the above summarized Contractual Services costs performed in relation to the project are not attached, the following certification must be signed prior to reimbursement of those costs.

I hereby certify that Contractual Services reimbursement records detailing the specific Contractual Services costs devoted solely to this project which are distinguishable from work done on other projects during the same time frame, maintained in accordance with all applicable federal, state and general municipal accounting practices and procedures are available in our files for inspection. Furthermore, these files will be maintained for a period of six years beyond the end of this contract term or three years beyond the close out of any federal grant under which these costs are claimed by NYSDEC, whichever is greater.

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Chief Fiscal Officer

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Authorized Representative