



Request for State Fund Reimbursement

Instructions

- Complete Parts 1 through 3. Make sure to:
 - Provide the grant expiration date in Part 1
 - Provide the state and federal project numbers in Part 1
 - Provide an original signature in Part 3
- Provide summary sheet; contractor pay requests; and invoices for engineering, inspection, testing, security, maintenance, etc.
- Provide a copy of FAA Form 271 if the project is an AIP project.
- Mail the request with all supporting documents to the Airport Services Division of the Virginia Department of Aviation at the address above.

Part 1: Project Information

Name of Airport: _____ Grant Expiration Date: _____

Project Description: _____

State Project Number: _____ Pay Request Number: _____

AIP Project Number: _____ Type of Request: Partial

State Grant Amount: _____ Final

Part 2: Payment Information

a. Net Eligible Project Cost to Date \$ _____

b. State Share of Project Cost to Date \$ _____
 (item a multiplied by the percent participation)

c. Total State Payments Previously Received \$ _____

d. Amount of this Request \$ _____
 (item b minus item c)

Part 3: Reimbursement Certification

I hereby certify that the above expenses have been authorized by the airport sponsor and have been incurred in accordance with the terms of the project as approved by the Virginia Department of Aviation. I also certify that the amount requested for reimbursement represents the state share due and has not been previously requested.

_____ Original Signature _____ Title _____

_____ Date _____ Phone Number _____

Part 4: Virginia Department of Aviation Action (agency use only)

This request is being: approved Amount Approved: _____

approved as noted below

disapproved ** Reviewed & Approved: _____

Comments: _____ Date: _____

_____ Manager Approved: _____

_____ Date: _____

**Prepare DOAV ASD01-4 with reason for disapproval and send to sponsor.