Closing Assurance & Certification of Program Compliance

State Aid for Library Construction Program

Library Name Building Name Project Title		ry Name					
		ding Name					
		ect Title					
ı	Libra	ry System				Project Number	
			e following o	=	-	compliance with	all State Aid for Library
Α.	Ge	neral Requ	irements:				
	1) This project has been completed in accordance with all regulations and stipulations outlined for the project by the State Historic Preservation Office (SHPO).						
		☐ Yes	s □ No	□ N/A		ject does not involve per NYSED/NYSPRHP	nan 50 years old at the time of ground disturbance; and/or c) Memorandum of
	2) If a Certificate of Occupancy (CO) was marked as required on the original project application, the CO has been obtained and uploaded to the attachments section of this project in the Construction Porta						
		□ Yes	s □ No	□ N/A	from the local municip required. If it has been etc. that neither a CO I library Director on libra	ality explaining why determined by the p nor CC is required, a ary letterhead is req nments section of th	red in place of a CO, a letter a CO will not be issued is project architect, contractor, letter of explanation from the uired. These documents must be is project in the Construction ng your project.
	3) This project's Match expenses were paid for using public funds (federal, state or local) or private funds only. SAM (State and Municipal Facilities Program) grants were not used to fund this project.						
		☐ Yes	i □ No				
В.	3. Final Scope of Project:						
	1)	This project was completed exactly as outlined in the original State approved project narratives, which can be found in the Library Construction Application in the NYSED Online Application System (also referred to as the Construction Portal or LDGrants).					
		☐ Yes	s □ No				

Library Nam		ry Name				Project Number	
	2)	Narrative	s were share	ed with the D	Division of Library	Development (DLD	iginal approved Project) and reported on an has received approval.
		☐ Ye	s 🗌 No	□ N/A		<u></u>	n <u>@nysed.gov</u> to request an ing this form & closing your
c.	Bu	dget – Fin	al Expenses:				
	1)	-		_			nended Project Narratives, if of the Construction Portal.
		☐ Ye	s 🗆 No		•		ct, both award and match funds, he original total cost of project.
	2)			_	al approved Project the correct budge		ended Project Narratives, if
		☐ Ye	s 🗆 No		For additional det Your Application		he Budget section of our <u>Preparing</u>
	3)				e Budget – Final E g the final 10% pa	•	the full award amount
		☐ Ye	s 🗆 No				
	4)	The total project cost reflected in the Budget – Final Expenses meets or exceeds the original approved total cost of project (award + match funds).					
		☐ Ye	s 🗆 No				
5) The Check/Journal Entry No accurately reflects the expe					Budget – Final Expenses Ifficial fiscal documentation.		
		☐ Ye	s 🗆 No		should be listed or	n two separate lines. entries. The check a	een award and match funds, it You must ensure the check date is mount does not need to be split
	6)			_		s Award were for ex ibrary system and	xpenses paid on or after July 1 of DLD.
		☐ Ye	s 🗆 No				he Project Cycles and Timelines imeframes webpage.

Library Name		Project Number	
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D. Closing Assurance:

I hereby assure that all information contained herein is accurate and complete. I acknowledge that failure to report completely and accurately may result in adverse action should this project be audited by New York State. Should an audit occur, the library will be prepared to submit all requested project documentation within the stipulated time period. This includes copies of all financial documents such as contracts, change orders, purchase orders, invoices and checks, as well as all other project documentation as requested. All documentation will be retained by the library for the required minimum of six years after final project approval.

I acknowledge that submission of this document does not guarantee immediate closing of the project and that further review by the Division of Library Development (DLD) will be completed. Should DLD require additional information or documentation to process the closing of this project, the construction project manager listed below or the library director will be prepared to assist.

I understand that the final 10% of award funds will only be disbursed after DLD has received and approved the required FS-10-F forms sent to the library upon approval of the final report and that the timeframe of payment is dependent upon NYSED's processing times and the payment method specified by the library in the Statewide Financial System (SFS). I also understand that DLD staff cannot provide payment status updates and to check on payment status, I must log into my library's SFS account.

Signature of President of the Board of Trustees					
Name of President (type or print)	Date				
Project Manager Details:					
Project Manager Name (type or print)					
Email Address	Phone Number				