

CLAIM REQUEST

State of Good Repair (SGR)

Claimant: _____
Address: _____
Contact Person: _____
Title: _____
Phone: _____
E-mail: _____

The _____ hereby requests that the SGR claim be approved in the amount of \$ _____ for fiscal year _____. These monies are to be drawn from the SGR fund held at the County of Humboldt for the purposes and amounts shown in the attached "Annual Project and Financial Plan."

When approved, the claim will be submitted to the Humboldt County Auditor Controller for payment. Approval of the claim and payment by the County Auditor to this applicant is subject to such monies being on hand and available for distribution, and to the provisions that such monies will be used only in accordance with the terms of the approved annual financial plan.

The claimant certifies that the use of SGR funds will conform with the State of Good Repair Guidelines.

Authorized representative of claimant:

By: _____ Title: Enter text here.
(print name)

Signature: _____ Submittal date: Enter text here.

APPROVED:

By: _____ Date: _____
Beth Burks
Executive Director, Humboldt County Association of Governments

ANNUAL PROJECT AND FINANCIAL PLAN
State of Good Repair (SGR)

SGR funds are available for capital projects that maintain the public transit system in a state of good repair. Statutes list the projects eligible for SGR funding, which are:

- (i) transit capital projects or services to maintain or repair a transit operator's existing transit vehicle fleet or transit facilities, including the rehabilitation or modernization of the existing vehicles or facilities.
- (ii) the design, acquisition and construction of new vehicles or facilities that improve existing transit services.
- (iii) transit services that complement local efforts for repair and improvement of local transportation infrastructure.

Claimant: _____

Fiscal Year: _____

| PROJECT (Project number, title, & brief description) | SGR \$ amount | Total Amount Requested | Other | Remaining Balance |
|---|---------------|------------------------|----------|-------------------|
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| | \$ - | \$ - | | \$ - |
| TOTAL | \$ - | \$ - | - | \$ - |

Note: The SGR Program is a transit capital program. Transit operations, transit agency administration, and program management are not allowable (refer to the SGR Program Guidelines for further details)

Attach a copy of transit revenues and expenditures for the last full fiscal year.

