



Florida Department of Environmental Protection

Florida Recreation Development Assistance Program Commencement Certification

Required Signatures: Adobe Signature

Grantee: _____

Project Number: _____

Project Name: _____

A list identifying the quantity and type of primary outdoor recreation areas and facilities and support facilities to be constructed, and cost estimate for each item. (50% of total costs must be in primary facilities)

Primary Facilities/Areas:

Estimated Cost:

Table with 2 columns: Primary Facilities/Areas, Estimated Cost. Multiple empty rows for data entry.

Support Facilities/Areas:

Estimated Cost:

Table with 2 columns: Support Facilities/Areas, Estimated Cost. Multiple empty rows for data entry.

Total Project Cost

\$

The GRANTEE certifies that all final plans and specifications (i.e.; site, architectural, engineering) to be used in conjunction with the above referenced project will be prepared and certified by an insured, registered architect, engineer, or landscape architect (as appropriate) and will meet all applicable federal, state and local codes, and current engineering practices; that health, safety, durability and economy will be considered and incorporated in these plans consistent with the scope and objectives of the project; that equal access pursuant to the requirements of Federal law and Chapter 553 Florida Statutes, is incorporated in the design of all facilities for individuals with disabilities; that the proposed development is compatible with its surrounding environment; and that provisions have been made to insure adequate supervision of construction by competent personnel.

Date

Project Liaison Agent