

**DEPARTMENT OF ENVIRONMENTAL PROTECTION  
STAN MAYFIELD WORKING WATERFRONTS CAPITAL OUTLAY GRANT PROGRAM  
DEP AGREEMENT #: SMW- \_\_\_\_\_**

**EXHIBIT A**

**PAYMENT REQUEST SUMMARY FORM**

Grantee: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

DEP Agreement No.: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Payment Request No.: \_\_\_\_\_ Performance Period: \_\_\_\_\_

Task/Deliverable Amount Requested: \_\_\_\_\_

CATEGORY OF EXPENDITURE	AMOUNT OF THIS REQUEST
Permits	_____
Construction	_____
Equipment	_____
Equipment Installation	_____
Total Project Cost	\$ _____

I attest that documentation has been and will be maintained as required by this Agreement to support the amounts reported above and is available for audit upon request. I attest that all expenditures prior to this request have been made and are true and accurate and are only for the purposes as described in Stan Mayfield Working Waterfronts Capital Outlay Grant Program Project No. egia- \_\_\_\_\_. I further attest that \_\_\_\_\_ (Grantee) complied with the terms and conditions of this agreement.

\_\_\_\_\_  
Signature of Grantee

\_\_\_\_\_  
Date