RECREATIONAL TRAILS PROGRAM
Final Inspection

SELF-CERTIFICATION

This self-certification inspection is to compare and evaluate the development actually accomplished with that specified in the project documentation.

Project Name:	Number:
Grantee:	
Location:	
Liaison:	Telephone:

Project Description:

1. Were the elements developed in accordance with the project agreement? If not, why?

2. Are the facilities accessible to both the general public and to people with disabilities? If not, list obvious discrepancies.

3. Is the Program Acknowledgement Sign displayed? Where?

4. Provide comments on the maintenance and safety of the project site.

5. List the hours the park/trail is open.

6. Were photographs taken? If so, please attach.

7. Specify any corrective action needed:

8. Indicate whether the inspection is satisfactory for release of the final payment:

   Yes: ◯ No: ◯

Signature of Grantee/Inspector

Date Inspected

Print Name and Title of Grantee/Inspector

Attachments:

Prior Inspection Report(s)
List of Final Project Elements
As Built Site Plan
Driving Instructions/Map