

Texas Mitigation Quarterly Report

Phase I <input type="checkbox"/> Phase II <i>(if applicable)</i> <input type="checkbox"/> FINAL <input type="checkbox"/> DATE: _____										
Sub-grantee Name:			Approval Date:							
Funding Source:			Period of Performance Date:			Year				
Disaster Number:			Project Primary POC:							
Project Number:			Title:							
Total Project Cost:			Phone:							
Federal Cost :			Email:							
Sub-Grantee Cost:			Secondary POC:							
Phase I Appr Date:			Title:							
Amount:			Phone:							
<i>If your project officers change please notify the State by resubmitting a primary project officer designation form. Form # TDEM-613</i>			Email:							
Project Description										
Delays? (Extension needed? # _____ h \ h - ")										
Cost Overrun / Under-run?		Jurisdiction has funds available for an overrun		Submit request to state in writing on letterhead		Revised BCA Needed?		State Approval Letter Received?		
Original Total		Total Increase		Revised Total						
Original Federal		Federal Increase		Revised Federal						
Original Sub-Grantee		Sub-Grantee Increase		Revised Sub-Grantee						
SOW Change?		Attach a description of original SOW Measures and the revised SOW measures.		<input type="checkbox"/> Attach a Revised Cost Breakdown.		<input type="checkbox"/> Attach a Revised BCA if required.		<input type="checkbox"/> State Approval received?		
SOW Notes:										
Objectives Completed This Quarter (2 required) be concise: _____ h #										
1.										
2.										
3.										
4.										
Reimbursement Request:			Reimbursement Request:			Period of Performance Extension:				
Request Date:		Request Date:		Send State a request on jurisdictional letterhead with authorizing signature requesting an extension, include reason.						
Amount:		Amount:								
Received:		Received:		Letter to State:						
Federal Funds Paid to Date:				State Confirmation:						
				Approved?						
For Acquisitions only, record the number of structures....					Withdrawal					
Already Acquired		Already Demolished		Send State a request on jurisdictional letterhead with authorizing signature requesting to withdraw the project.						
To be purchased		To be demolished								
					Letter to State:					
CLOSE OUT PROCESS					CONTINUE to submit quarterly reports until you have received final payment					
Submit Reimbursement Request for final payment.					Forms were included in your approval packet. Contact Mildred Reno for any financial questions at (512) 424 -2428 / mildred.reno@dps.texas.gov					
Once final payment is received submit the Certificate of Completion.										
The State will contact you in order to set up program/finance audit.										