**Vermont Agency of Transportation**

**Municipal Assistance Bureau**

 **Grant Recipient**

 **Project Commitments Form (PCF)**

Grant Recipient (*Grantee*):

Project Name

Name of full-time Municipal employee in *Responsible Charge* of this project regardless of any additional contracted management services: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing at the bottom of this document, the *Grantee* agrees to the following:

* 1. We acknowledge that we are responsible for providing the local share of the project funding and commit to doing so.
	2. We are ready to move forward with this project and will sign the grant agreement within one month of receiving it from the State of Vermont Agency of Transportation (VTrans).
	3. Within 2 months of receiving a fully executed grant agreement from VTrans, we will begin the procurement process for contracted services (i.e. project management and/or engineering.)  If both of these services will be procured, the RFP/RFQ for design services must be advertised within one month of the selection of the Municipal Project Manager (MPM).
	4. The *Grantee* shall obtain a detailed proposed schedule from the design consultant, which indicates the time duration for key steps which advance the project to contract plans and bid documents within 1 month of the design contract being executed. Municipal Assistance Bureau staff members will review and verify that adequate timeframes are included for VTrans reviews and required project milestones.  We agree to work with VTrans to develop a mutually-agreeable initial baseline project schedule, against which project progress will be evaluated.
	5. We will submit reports at least quarterly that detail project progress, as compared to the baseline schedule. We will notify the VTrans project supervisor of any proposed changes to the baseline schedule in a timely manner. These will be discussed and reviewed. Impacts to key milestones resulting from an approved schedule change will be identified and discussed.
	6. Project invoices requesting reimbursement for eligible expenses will be submitted at least quarterly, but may be submitted monthly.
	7. We understand that a copy of this PCF will be appended to the grant agreement.

Authorized municipal official (Name and Signature) Date