#### PROJECT COMPLETION REPORT & CERTIFICATION

**State of Wisconsin Flexible Facilites Program (FFP)**

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| **PART 1: GRANTEE INFORMATION** | | |
| **A.** | **NAME OF GRANTEE:** |  |
| **B.** | **FFP GRANT AGREEMENT #:** |  |
| **C.** | **NAME OF SUBRECIPIENT ORGANIZATION:** |  |

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| **D.**  **REPORTING PERIOD:** *(check one and enter year)*  January 1, 20 to March 31, 20 .  April 1, 20 to June 30, 20 .  July 1, 20 to September 30, 20 .  October 1, 20 to December 31, 20 . |  |

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| **PART 2: CERTIFICATION OF PROJECT COMPLETION REPORT** | | | | |
| **A. DOCUMENTS SUBMISSION:** | | | | |
| ***DOCUMENTS:*** | ***ATTACHED:*** | ***SEPARATE SUBMISSION:*** | ***DATE(S) OF SEPARATE SUBMISSION:*** | ***N/A:*** |
| 1. Project Completion Report |  |  |  |  |
| 1. Final Quarterly Report and Supporting Documents |  |  |  |  |
| 1. Single Audit Statement *(most recent year-end)* |  |  |  |  |
| 1. Single Audit Report record of FAC submission *(if due)* |  |  |  |  |
| 1. Final Grant Payment Request & Supporting Documents |  |  |  |  |
| 1. Cash Control Register for Final Payment Request |  |  |  |  |
| 1. Disbursements Journal for Final Payment Request |  |  |  |  |
| 1. Matching Funds Journal for Final Payment Request |  |  |  |  |

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| **B. SUBSTANTIAL COMPLETION VERIFICATION:** | | |
| ***VERIFICATIONS:*** | ***CHECK HERE TO CONFIRM COMPLETE:*** | ***DATE(S) OF SEPARATE SUBMISSION:*** |
| 1. FFP facility space(s) construction or renovation/expansion is complete. |  |  |
| 1. Facility is open to the public and operational, offering services/programs described in the grantee’s application. |  |  |

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| **C. PROJECT COMPLETION REPORT CERTIFICATION BY GRANTEE:** | | | | |
| (1) Preparer Full Name and Title | | (2) Preparer Company/Organization | | (3) Preparer Email Address: |
| *As the Chief Elected Official (CEO) of the grantee (local or tribal government), I approve the submission of this Project Completion Report to DEHCR and certify that, to the best of my knowledge, the activities undertaken for the project have been carried out and completed in accordance with the grant agreement, and the information provided in Parts 1-4 of this Project Completion Report is accurate:* | | | | |
| (4) Date Certified/Signed | (5) Typed/Printed Name & Title of Chief Elected Official (CEO)  CEO Name:  CEO Title: | | (6) Signature of Grantee’s CEO | |

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| **D. PROJECT COMPLETION REPORT CERTIFICATION BY DEHCR:** | | |
| 1. Date Certified/Signed | 1. Name and Title of Authorized DEHCR FFP Representative       Division of Energy, Housing and Community Resources | 1. Signature of Authorized DEHCR FFP Rep. |

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| **PART 3. COMPLETION REPORT ATTACHMENTS** | |
| 1. **ATTACHMENTS INCLUDED WITH THIS PROJECT COMPLETION REPORT:** | |
|  | *Check the box(es) on the left for each documentation item that is included with this Report:*  Photos showing Facility Construction/Renovation Completed and Open Operations *(attach if not previously provided with Quarterly Reports; limit to no more than 8 photos)*  Other Supporting Documents ***excluding*** those already listed on page 1 of this *Report (list below if included)* |
|  | *Documents Attached to/with this Report* *– If documents are attached to the same email transmitted with this Report, then check the box on the left and list each document attached to/with this Report below (or delete the numbering below and replace it with an entry of “None” if no documents are attached)*:  (1)  (2)  (3)  (4)  (5) |

| **PART 4: SCOPE OF WORK COMPLETION CERTIFICATION** |
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| *Check the appropriate box in this section to indicate whether the project has construction in the Scope of Work. If construction is in the scope, then click the entry field to select the dates for the Start Date Deadline and Completion Date Deadline and the Construction Completion Date. Add comments as applicable.* |
| 1. CONSTRUCTION COMPLETION DATE DEADLINE (AS LISTED IN GRANT AGREEMENT TIMETABLE): |
| 1. CONSTRUCTION COMPLETION DATE: |
| 1. DESCRIPTION OF SCOPE OF WORK COMPLETED IN ACCORDANCE WITH THE FFP GRANT AGREEMENT   *(List accomplishments pertaining to the scope of work in Attachment A of the FFP grant agreement.)*  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  (11)  (12)  (14)  (15) |

#### PROJECT COMPLETION REPORT (INSTRUCTIONS)

1. **PART 1: GRANTEE INFORMATION:**
   1. NAME OF GRANTEE:

Enter the name of the grantee (local or tribal government) as listed in the grant agreement, e.g., Village of Yourtown.

* 1. DEHCR GRANT AGREEMENT/CONTRACT #:

Enter the FFP grant agreement/contract number assigned by DEHCR, e.g., FFP 24-40.

* 1. NAME OF SUBRECIPIENT ORGANIZATION:

Enter the Name of the subrecipient organization, if applicable, or enter “N/A” if there is no subrecipient for the project. This field only applies for a grantee that applied for the FFP funds on behalf a non-profit organization that is separate from and not an entity or department of the local or tribal government, and the non-profit organization implemented the project.

* 1. REPORTING PERIOD:

The reporting period refers to the current quarterly reporting period for which the Project Completion Report and final Quarterly Report (and supporting documents) are being submitted. Check the box next to the applicable reporting year and enter the last two digits of the reporting period year in the fields provided.

1. **PART 2: CERTIFICATION OF PROJECT COMPLETION REPORT**
2. DOCUMENTS SUBMISSION:

For items listed, check the boxes in the appropriate columns to indicate which documents are attached with the Project Completion Report, submitted separately or not applicable. Enter the submission date if the document listed was or is being submitted separately. Refer to the timetable in Attachment A of the grantee’s FFP grant agreement and the [*FFP Implementation Handbook*](https://energyandhousing.wi.gov/Pages/AgencyResources/FFP-Implementation-Resources.aspx) (Chapter 8: *Financial Management*, *Chapter 9: Reporting*, and Chapter 10: *Project Completion*) for additional guidance on the documentation that is due, as needed.

1. FFP STANDARDS OF SUBSTANTIAL COMPLETION CERTIFICATION

Check the boxes provided and dates completed in the spaces provided. The criteria listed are required to be completed, with construction being completed and the facility being open and operational no later than the dates listed in the timetable in Attachment A of the grantee’s FFP grant agreement.

1. PROJECT COMPLETION CERTIFICATION BY GRANTEE:

For items (1) – (6), enter the Preparer and Chief Elected Official (CEO) information and date of CEO approval/certification. The Certification must be signed by the CEO either through handwritten signature or using a formal electronic signature software such as DocuSign, the Adobe signature tool, or similar.

1. PROJECT COMPLETION CERTIFICATION BY DEHCR:

DEHCR will complete items (1) – (3) in this section upon receiving and approving the *Project Completion Report* (Attachment FFP-10-01) and supporting documents; and the *Final Financial Certification of Completion* (Attachment FFP-10-02) and supporting documents that are due within **30 days** of the grantee receiving the final grant payment from DEHCR. This signed certification from DEHCR will be emailed to the grantee with the Project Completion letter.

**PAGE 2 HEADER:**

Click on the header on the page and enter the grantee’s name and grant agreement number in the spaces provided.

1. **PART 3: COMPLETION REPORT ATTACHMENTS**
2. ATTACHMENTS INCLUDED WITH THIS PROJECT COMPLETION REPORT:

Check the appropriate boxes and list the Attachments that are being submitted as supporting documentation for the *Project Completion Report.* Limit photos to no more than eight (8). These may be submitted separately due to file size, as needed. Only include photos if not previously submitted.

1. **PART 4: scope of work completion certification**

Provide the details requested regarding the accomplishments pertaining to the scope of work in Attachment A in the grant agreement. Include construction activities completed for the new facility construction or existing facility renovation/expansion; purchases and installation completed pertaining to digital connectivity equipment, devices, and broadband/high-speed internet, and creation/installation of spaces for work, education, and health monitoring, etc.

Any construction costs incurred after the construction completion deadline date listed in the timetable in Attachment A of the grantee’s grant agreementare ineligible costs for the FFP grant and non-completion of construction or other activities in the scope may result in all or a portion of the project costs being deemed ineligible and the FFP grant award being rescinded. Contact the assigned DEHCR Project Representative *immediately* regarding any delays pertaining to the construction timeline. Extensions would require an amendment to the grant agreement, for which a request must be submitted no later than 30 days prior to the end of the grant period. DEHCR does not anticipate flexibility pertaining to timeline extensions due to timeline restrictions set by the U.S. Department of Treasury in accordance with American Rescue Plan Act (ARPA) regulations for the Capital Project Fund (CPF).

**REPORT SUBMISSION**

Submit the completed, signed *Project Completion Report* and supporting documents within **30 days of completing construction on the project** ***or* on or before the due date listed in the timetable in Attachment A of the grant agreement**, **whichever date is *earlier***. Submission must be via email to the assigned DEHCR Project Representative or to [*FlexibleFacilitiesProgram@wisconsin.gov*](mailto:FlexibleFacilitiesProgram@wisconsin.gov). The final grant *Payment Request Form* and supporting financial documentation are to be submitted *separately* to [*DOADEHCRFiscal@wisconsin.gov*](mailto:DOADEHCRFiscal@wisconsin.gov) (copy/‘cc’ the assigned DEHCR Project Representative on the email submission). Retain the documents in the grantee’s FFP project files.

REMINDER: The *Financial Certification of Completion* (Attachment FFP-10-02) and supporting documents are due to DEHCR within **30 days** of receiving the final payment from DEHCR.