

## Ready For Reuse Loan and Grant Program Payment Claim and Worksheet

Form 4400-243 (R 1/10)

**Notice:** Information requested on this form is required by the Department for any payment claim filed pursuant to s.292.72, Wis. Stats. The Department will not consider your payment claim unless you submit complete information. Personally identifiable information requested on this form is not intended to be used for any other purpose, but may be provided to requesters as required by Wisconsin's Open Records law [ss. 19.31-19.39, Wis. Stats.].

Borrower / Grantee	File Number	Type of Request <input type="radio"/> Partial <input type="radio"/> Final
Project Name	County	Region

Grant/Loan Information	Loan / Grant	Match
Amount listed in Loan/Grant Agreement	\$	\$
Total Paid from previous claims (if applicable)	\$	\$
Remaining Available Funds	\$	\$

Current Claim Expenditures	10% Change?	Loan / Grant	Match	Match Source
1. Preparation/Finalization of RAP	<input type="checkbox"/>	\$	\$	
2. Public Participation costs	<input type="checkbox"/>	\$	\$	
3. Soil Excavation	<input type="checkbox"/>	\$	\$	
4. Soil Transportation & Disposal	<input type="checkbox"/>	\$	\$	
5. Soil Treatment	<input type="checkbox"/>	\$	\$	
6. Soils Confirmation Testing	<input type="checkbox"/>	\$	\$	
7. Groundwater Remediation Capital Cost	<input type="checkbox"/>	\$	\$	
8. Groundwater Remediation Operation and Maintenance	<input type="checkbox"/>	\$	\$	
9. Post-Remedial Groundwater Monitoring	<input type="checkbox"/>	\$	\$	
10. Remediation Oversight	<input type="checkbox"/>	\$	\$	
11. Site Security Monitoring	<input type="checkbox"/>	\$	\$	
12. Health & Safety Site Monitoring	<input type="checkbox"/>	\$	\$	
13. DNR fees	<input type="checkbox"/>	\$	\$	
14. Demolition	<input type="checkbox"/>	\$	\$	
15. Asbestos Abatement Associated with Demolition	<input type="checkbox"/>	\$	\$	
16. Hazardous Substance Storage Tank Removal and Disposal	<input type="checkbox"/>	\$	\$	
17. Petroleum Product Storage Tank Removal and Disposal	<input type="checkbox"/>	\$	\$	
18. Other Eligible Costs: _____	<input type="checkbox"/>	\$	\$	
19. Total Current Request and Match		\$	\$	

**Certification**

I certify that to the best of my knowledge and belief the billed costs are based on actual work completed, payments of record, have not been previously requested, and are in accordance with the financial agreement and all eligible cost and payment provisions associated with the Ready for Reuse Loan and Grant Program.

Authorized Representative Printed Name	Signature of Authorized Representative	Date Signed
--	--	-------------

