State of Wisconsin
Department of Natural Resources
Bureau of Community Financial Assistance
EC-SDC Grant Program
101 S. Webster St., PO Box 7921
Madison, WI 53707-7921
dnr.wi.gov

Project Completion CertificationBIL EC-SDC Grant Program for

BIL EC-SDC Grant Program fo Municipal Systems Form 8700-040 (12/2024)

Grant Project Information	
Municipality	Grant #
Project Name	
,	
Final Payment Certification and Project Completion	
I certify the following:	
The Grantee has completed the Project as described in the Grant Agreement.	
 During construction and operation of the Project, the Grantee has complied with all applicable local, state, and federal laws and permits. 	
receipts with vendor contract for all supplies and servi payment will be retained in the Grantee's project files made available to the Department upon request. The	I "paid in full," canceled checks with vendor contract, or written ices provided by contractors for this project. These proofs of final for a minimum of 4 years after receipt of final payment and will be expenditures are based on actual payment of record and are in the payment reimbursement request represents the grant share
 The project complied with the federal requirements applicable to activities supported with federal funds. 	
document submitted to satisfy the same requirement. Signature of Municipality's Authorized Representative	Date Signed
Printed Name of Authorized Representative	Title of Authorized Representative
Send completed form to your DNR Project Manager.	
For DNR Use Only DNR Review Determination	
☐ Project passed the final DNR inspection.	
Date	
Initials:	