

**FINAL DESIGN SUBMISSION DOCUMENTATION**

Final Design Submission is hereby made by the \_\_\_\_\_ of \_\_\_\_\_  
for funding under the guidelines of the LOTCIP for the following project:

Project Title: \_\_\_\_\_

Project Location: \_\_\_\_\_

**Engineer of Record (CT Professional Engineer Responsible for Project Design):**

Name: \_\_\_\_\_

Firm: \_\_\_\_\_

License No.: \_\_\_\_\_ Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Municipal Administrator (Employee Responsible for Construction Administration  
See Construction – Municipal Staffing):**

Name & Title of Official Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**COG Information:**

Name & Title of Official Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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**Project Schedule:**

Final Design (Accepted by Municipality) \_\_\_\_\_

Rights of way (Acquisition Complete) \_\_\_\_\_

Utilities (Coordination Completion)	_____
Public Involvement/Meeting (Completed)	_____
Anticipated Construction Advertising	_____
Anticipated Construction Contract Award	_____
Anticipated Construction Start	_____
Anticipated Construction Completion	_____

**Items to be submitted as part of the final package**

- Plans
- Specifications
- Contract Documents
- Engineer's Final Estimates
- General Municipal Certification
- Certification of Engineer of Record
- COG Endorsement

**Project Cost Data Summary**

	<b><u>Commitment to Fund</u></b>	<b><u>Final Submission</u></b>
Rights of way Cost (If Applicable)	\$ _____	\$ _____
Estimated Construction Costs (Include Detailed Estimate)	\$ _____	\$ _____
Incidentals (10% of Construction Costs Only)	\$ _____	\$ _____
Contingencies (10% of Construction Costs Only)	\$ _____	\$ _____
Eligible Utility Relocation Costs (If Applicable)	\$ _____	\$ _____
Total Estimated Project Cost	\$ _____	\$ _____