



ASSOCIATION OF  
CENTRAL OKLAHOMA  
GOVERNMENTS

# REAP FORMS PACKET

FALL 2023

Association of Central Oklahoma Governments

4205 N. Lincoln Blvd. | Oklahoma City, OK 73105 | 405.234.2264 | [acogok.org](http://acogok.org)



## REAP FILE CHECKLIST

### PROGRAM MANAGEMENT DOCUMENTS

- ☐ Complete Application
  - Typed application
  - Resolution
  - Professional cost estimate
  - Procurement policy
  - Before photos
- ☐ ACOG REAP Award Letter
- ☐ Executed ACOG Contract
- ☐ Contract Extension Request Letter with ACOG Response Letter
- ☐ Request for Advance Funds Form

### OPERATIONAL ACTIVITIES DOCUMENTS

- ☐ Procurement of goods/services documents – Bids/quotes/estimates
- ☐ For Bids – Advertisement and Bid Tabulation documents
- ☐ Minutes approving purchase of goods and/or services (Notice of Awards)
- ☐ Any Engineering or Contractor Agreements
- ☐ Affidavit Certifying REAP Project Completion with Photos
- ☐ Proof Equipment added to Entity Inventory and/or Insurance Policy
- ☐ Closeout Letter and/or De-Obligation Letter

### FINANCIAL MANAGEMENT DOCUMENTS

- ☐ For Each Financial Transaction
  - Signed Reimbursement Form
  - Invoice
  - Purchase Order and/or Minutes
  - Bank Statement Showing Payment Check

# RURAL ECONOMIC ACTION PLAN

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## ACOG REAP MONITORING TOOL

This form is for the closure of an open REAP project. An ACOG representative must initial and sign below. An entity representative from the REAP project must sign below during the REAP site visit with the ACOG representative.

REAP Recipient \_\_\_\_\_

Contract # \_\_\_\_\_

Project Closeout Date \_\_\_\_\_

1. PROGRAM MANAGEMENT	YES	NO	N/A	INITIALS	DATE	COMMENTS
<b>Application Packet:</b> Typed Application, Resolution, Professional Cost Estimate, Procurement Policy, Before Photos						
REAP Award Letter						
Executed ACOG Contract						
Contract Extension Requests/Approval Letters						
Project Modification Requests/Approval Letters						
2. OPERATIONAL MONITORING	YES	NO	N/A	INITIALS	DATE	COMMENTS
Procurement Policy Followed?						
<b>Bid/Solicitation Documentations:</b> Bid Advertisements, Bids or Quotes, Bid Tabulation						
Governing Body Board Minutes of Contract Award						
If Applicable, Engineer Agreement and/or Contractor Agreement						
Preconstruction, Conference, Documentation						
3. CLOSEOUT	YES	NO	N/A	INITIALS	DATE	COMMENTS
<b>Closeout Documentation:</b> Affidavit Certifying REAP Project Completion (Inventory or Infrastructure), Project Complete Minutes, After Photos						
If Applicable, ACOG Field Observation						
REAP Recipient Proof of Inventory Addition						

4. FINANCIAL MANAGEMENT	YES	NO	N/A	INITIALS	DATE	COMMENTS
ACOG Request for Payment Form for each transaction						
Invoices for each transaction						
Purchase Order or Minutes approving each transaction						
Bank Statements: ACOG Check Deposits and Payment Check Cleared						
<b>SUMMARY OF MONITORING ACTIVITY</b>						

ACOG Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Entity Representative: \_\_\_\_\_ Date: \_\_\_\_\_



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## REAP CLOSEOUT DOCUMENT

<b>Grant Recipient Name and Address:</b>	<b>Contract Number:</b>
	<b>Contract Period:</b> <b>From:</b> _____ <b>To:</b> _____
<b>County:</b> _____	
<b>Preparer/Contact Person:</b>	<b>Telephone:</b> _____
	<b>Email:</b> _____

Date project was completed: \_\_\_\_\_

Comments:

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ACOG staff will take photos.

\_\_\_\_\_  
Typed Name and Title of Chief Elected Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Chief Elected Official



# AFFIDAVIT CERTIFYING REAP PROJECT COMPLETION

The **professional engineer or authorized city/county personnel** can sign and certify the project completion. Please fill out and sign the underlined areas and provide a description of the project. **This form must be accompanied by official meeting minutes noting the closure of the REAP project.**

I, \_\_\_\_\_, a registered professional Engineer in the State of Oklahoma, or an Authorized City/County Personnel for City/Town of \_\_\_\_\_ County of \_\_\_\_\_, Oklahoma, **Do Hereby Certify** that REAP funds awarded under contract number \_\_\_\_\_ were used for the project described in our contract with ACOG, And pursuant to all rules and regulations that govern the REAP Program, and pursuant to all applicable Oklahoma laws.

## PROJECT DESCRIPTION

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\_\_\_\_\_ A final field observation of the Project was completed.  
Initials

**I DO HEREBY CERTIFY TO THE COMPLETION OF THE ABOVE REFERRED TO IMPROVEMENTS AND THE COMPLETION OF THIS CONTRACT, AND RECOMMEND APPROVAL TO:**

The \_\_\_\_\_ (Council/Board) Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Respectfully submitted,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name/Title/Entity



# AFFIDAVIT CERTIFYING REAP PROJECT COMPLETION INVENTORY WARRANTY

This form must be submitted with the ACOG REAP Inventory Tracking Form. **This form must also be accompanied by official meeting minutes noting the closure of the REAP project.**

I, \_\_\_\_\_, an Authorized City/County Personnel for City/Town of \_\_\_\_\_ County of \_\_\_\_\_, Oklahoma, **Do Hereby Certify** that REAP funds awarded under contract number \_\_\_\_\_ were used for the project described in our contract with ACOG, And pursuant to all rules and regulations that govern the REAP Program and pursuant to all applicable Oklahoma laws.

## PROJECT DESCRIPTION

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**Do Hereby Certify** that the above referred-to improvements were accomplished according to approved plans and specifications and/or duly authorized change orders, to the best of my knowledge, information and belief. This Certification is also for the benefit of the City/County, listed above, to finalize the project quantities and payment.

\_\_\_\_\_ of \_\_\_\_\_ is the project's prime contractor.

**I DO HEREBY CERTIFY TO THE COMPLETION OF THE ABOVE REFERRED TO  
IMPROVEMENTS AND THE COMPLETION OF THIS CONTRACT, AND DO  
RECOMMEND APPROVAL TO:**

The \_\_\_\_\_ (Council/Board) Dated this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Respectfully submitted,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name/Title/Entity

**Warranty Period** will be for 1 Year to begin on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
\_\_\_\_\_

Accepted: \_\_\_\_\_  
(community) initials

Acknowledged: \_\_\_\_\_  
(vendor) initials

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

By: \_\_\_\_\_  
Signature Typed Name/Title

By: \_\_\_\_\_  
Signature Typed Name/Title





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## ACOG REAP INVENTORY TRACKING - 5 YR PLAN

ENTITY	GRANT #	CLOSEOUT DATE
DESCRIPTION OF EQUIPMENT		ORIGINAL PURCHASE PRICE

	DATE:	INITIAL PURCHASE	1-YEAR	2-YEAR	3-YEAR	4-YEAR	5-YEAR
SERIAL #							
MODEL #							
ID #							
VIN #							
LOCATION							
STATEMENT OF CONDITION							

Initials of Inventory Reviewer:

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Initials of ACOG Staff Reviewer:

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Date:

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Effective 11/21/2019

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## REQUEST FOR ADVANCE FUNDS

### REAP PROJECT CONTRACTS

If ACOG deems necessary, 25% of the awarded REAP grant may be paid in advance. Please use this form to request an advance and the table below to calculate. **Note: Requests must include justification and clarity on the need for an advance, specified in the letter and budget.**

This form must be submitted with the required documents, including a letter from the elected official authorizing REAP grant funds for the described project. Incomplete requests will not be processed.

RECIPIENT	DOCUMENT CHECKLIST
Grant Contract Number: _____	<input type="checkbox"/> Payment of REAP Grant Funds Form
Entity: _____	<input type="checkbox"/> Invoices
Address: _____	<input type="checkbox"/> Project cost sheet or budget
City, State, Zip Code: _____	<input type="checkbox"/> Letter from chief elected official

### ADVANCE REQUEST

\$ \_\_\_\_\_ x \_\_\_\_\_ % = \_\_\_\_\_  
Total amount of grant awarded (Advance Percentage (Max 25%)) Amount requested

1. Total amount of REAP Grant Awarded	\$
2. Payments previously requested	\$
3. Amount now requested	\$
4. Grant balance remaining after request	\$

### CERTIFICATION

*I certify to the best of my knowledge and belief:*

The information above is correct and **all expenditures will be made in accordance with the contract conditions**, or other agreements, and advance payment is only issued once.

**Future grant funds will not be reimbursed until the advance payment has been fully expended** and the appropriate documentation has been submitted to ACOG.

**That no funds will be used to pay any administrative or travel expenses and funds will be used only for expenses incurred during the term specified with the REAP Contract, including any grant extensions.**

\_\_\_\_\_  
Signature of Authorized Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
ACOG CED Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
ACOG Executive Director

\_\_\_\_\_  
Date

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(This form MUST accompany the Request for Payment form)

Grant Number \_\_\_\_\_

[illegible]

Date \_\_\_\_\_