



**ALASKA CLEAN WATER &
DRINKING WATER FUND
REIMBURSEMENT REQUEST**

Tracking Number: _____
(Internal Use Only)

Payment Number: _____ Loan Number: _____

Loan Recipient Name: _____ Payee Name: _____

Recipient Address _____ City _____ State _____ Zip _____

Payee Address (if different from above) _____ City _____ State _____ Zip _____

SUMMARY OF COSTS

Final Pay Request, please deobligate remaining funds

COST CLASSIFICATION	Total Loan Amount	Previous Payments	Amount of this Request	Total Payments
1. Administration:				
2. Engineering/Design:				
3. Inspection/Surveying:				
4. Construction:				
5. Equipment:				
6. Other: (_____)				
7. Totals				

8. Total Loan Amount:	
9. Previous Payments:	
10. This Payment:	
11. Balance Remaining:	

I certify to the best of my knowledge and belief that the amount of funds I am requesting is in accordance with the terms of the loan offer and this request for payment represents the correct loan share due which has not been previously paid. Labor costs are compliant with federal standards in accordance with the Davis-Bacon Act and Related Acts. The project is now approximately _____ % complete.

Typed or printed name Title Date

All hard-copy loan applications, pay requests, or other forms may be sent electronically to DEC.Water.MGL.MAT@alaska.gov or mailed to:

Signature

State of Alaska
DEC/Division of Water
Municipal Grants and Loans
P.O. Box 111800
Juneau, AK 99811
Attn.: MAT (Municipal Administration Team)