Maryland Department of Natural Resources Local Parks and Playgrounds Infrastructure Program

Request for Reimbursement Acquisition Projects

PROJECT#	REIMBURSEMENT#	Is this a final reimbursement?	Yes □ No □
	If this is a final reimbursement requ	est, when was the project completed	?
	\$	Shall LAP revert any remaining funds	? Yes □ No □
PROJECT TITLE:			
PAYABLE TO:		FEDERAL ID#	
ADDRESS: Street Address:			
City/Town, State, Zip Code:			
PROJECT COORDINATOR:	Name, Title:		
Pho	ne, Fax, Email:		

Acquisition Documentation Required:

- A: Supply one (1) copy of each item:
 - 1. Deed to each parcel acquired. Similar to Program Open Space (POS) Local grants, the deed must contain the covenant provided by Natural Resources Article §5-906(e)(7) and (8) that protects the land from a conversion of use from outdoor public recreation or open space use to any other use.
 - 2. Evidence of title for each parcel acquired. (Letter from County or City Legal Officer, or certificate from the Title Guaranty Company.)
 - 3. Settlement sheet for each parcel acquired.
 - 4. Invoice for any incidental costs which are not reflected on the settlement sheet (i.e., appraisals, surveys, etc.) Note that prepaid taxes refunded to the seller is not an eligible incidental cost.
 - 5. Canceled checks for land purchases and incidental costs.
- B: Breakdown for each parcel acquired. Attach supplemental pages if needed.

Section I - Land Cost:

Parcel Number	Acres Acquired	Date Acquisition Costs Incurred	Land Record Liber/Folio	Actual Total Land Costs	Amount of Reimbursement Requested
#1				\$	\$
#2				\$	\$
#3				\$	\$
Section I Totals:				\$	\$

Section II - Incidental Costs:

Parcel #1	Actual Cost	Amount Requested
Appraisal Fees	\$	\$
Title Search	\$	\$
Surveys	\$	\$
Legal Fees	\$	\$
Settlement Fees	\$	\$
Other – Describe:	\$	\$
Other – Describe:	\$	\$
Parcel #1 Totals:	\$	\$

Parcel #2	Actual Cost	Amount Requested
Appraisal Fees	\$	\$
Title Search	\$	\$
Surveys	\$	\$
Legal Fees	\$	\$
Settlement Fees	\$	\$
Other – Describe:	\$	\$
Other – Describe:	\$	\$
Parcel #2 Totals:	\$	\$

Parcel #3	Actual Cost	Amount Requested
Appraisal Fees	\$	\$
Title Search	\$	\$
Surveys	\$	\$
Legal Fees	\$	\$
Settlement Fees	\$	\$
Other – Describe:	\$	\$
Other – Describe:	\$	\$
Parcel #3 Totals:	\$	\$

Section II – All Parcels Totals:	\$ \$

Combined State Reimbursement Requested:

Total Land Costs

Section I.

Section II.	Total Incidental Costs	\$_		
	Total Reimbursement Requested	\$		
its have been mad	tion: I hereby certify that the costs submitted for rede to all persons, vendors and contractors engaged in	this pro	ject in accordance with local government	

Payment Certification: I hereby certify that the costs submitted for reimbursement are true and correct, and that all payments have been made to all persons, vendors and contractors engaged in this project in accordance with local government procurement procedures, all applicable Local, State and Federal statutes and regulations, and the Local Parks and Playgrounds Infrastructure Grant Application and Project Agreement and attachments.

(Signature of Local Government Fiscal Authority or of Local Project Coordinator)

(Title) (Date)

Please email a copy of the completed form with the requisite attachments to the program administrator for your county.

Program Administrator Approval		
	(Signature)	(Date)
Fiscal Administrator Approval		
	(Signature)	(Date)

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