



Delaware Land & Water Conservation Trust Fund (DTF)

RF-2

Construction/Development Reimbursement Request Form*

Project Name:	DTF Project No:
DTF Grant Amount:	Billing No:
Total Sponsor Match (Cash):	() Progress OR () Final
Total Sponsor Match (In-kind):	In-kind Match this Billing (RF-5):
Total Sponsor Match (Other):	

Billing Categories						
Architectural /Engineering Fees	Construction & Improvements	Equipment Costs	Other Costs	Total Cash Expenditures This Billing (RF-4)	Requested DTF Reimbursement This Billing	DTF Grant Balance
	+		+		=	

I certify that to the best of my knowledge and belief that billed costs of disbursement are in accordance with the terms of the Project Agreement, that the reimbursement represents the State's 50% share which has not been previously requested, that an inspection has been performed, and all work is in accordance with the terms of the Project Agreement. I further certify, that the Project Sponsor is not involved in any court litigation or law suits wherein it is alleged by private parties or public entities that persons were, on the grounds of race, color, religion, sex, or national origin, excluded from participation in, denied benefits of, or otherwise subject to discrimination in the outdoor recreation programs or facilities of the managed and operated by the Project Sponsor.

Typed Name:	Title/Agency:
Signature:	Date:

*Cash Expenditure Form (RF-4) must accompany this Form and (RF-5) if In-Kind services were provided.