

City of Worcester-CMRPC Bicycle Parking Program: Reimbursement Eligibility Form

All reimbursement requests must be submitted by: 12/31/2016

Reimbursement funding for this program is generously provided by the Federal Highway Administration (FHWA) and the Massachusetts Department of Transportation (MassDOT).

To receive reimbursement, please complete this form and submit, along with the additional required information listed as follows:

1. Take a digital photograph of each rack location **before** and **after** installation.
2. Sign a **Reimbursement Eligibility Form (#5)** attesting that racks and locations are eligible.
3. Complete the **Bike Rack Reimbursement Form (#6)** and the **Bike Rack Installation Location (#7)** forms and include copies of all vendor invoices, highlighting those items for which you seek reimbursement.
4. Submit the **Reimbursement Eligibility Form (#5)**, **Bike Rack Reimbursement Form (#6)**, **Bike Rack Installation Location (#7)** form, and proof of installation by email to CMRPC. Documents & Photographs may be submitted by email (preferred) or mail to Dan Daniska, Transportation Planner at CMRPC, ddaniska@cmrpc.org, or 2 Washington Sq., Suite 201, Worcester, MA 01604.
5. The City of Worcester will reimburse you directly for all approved items on a monthly basis.

Date: _____

Name: _____

Title: _____

Community: _____

Address: _____

Phone: _____

Email: _____

I hereby certify that the items for which we seek reimbursement:

- Were acquired through the City of Worcester-CMRPC Bicycle Parking Program group purchase contract, from one of the approved vendors;
- Are items eligible for reimbursement under the guidelines of the program;
- Were installed on publicly controlled land in a location with permanent public access;
- Were installed in an appropriate location, as described in the program guidelines and according to the manufacturer's installation instructions.

Signed: _____