# FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES

## FEDERAL FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES FOR FEDERAL TRANSIT ADMINISTRATION ASSISTANCE PROGRAMS

(Signature pages alternative to providing Certifications and Assurances in TrAMS)

**Name of Applicant:** _____

**The Applicant agrees to comply with applicable provisions of (Categories 01 – 23.** _____

**OR**

**The Applicant agrees to comply with applicable provisions of the Categories it has selected:**

| Category | Description | |
|---|---|---|
| 01. | Required Certifications and Assurances for Each Applicant. | _____ |
| 02. | Lobbying. | _____ |
| 03. | Procurement and Procurement Systems. | _____ |
| 04. | Private Sector Protections. | _____ |
| 05. | Rolling Stock Reviews and Bus Testing. | _____ |
| 06. | Demand Responsive Service. | _____ |
| 07. | Intelligent Transportation Systems. | _____ |
| 08. | Interest and Financing Costs and Acquisition of Capital Assets by Lease. | _____ |
| 09. | Transit Asset Management Plan, Public Transportation Safety Program, and State Safety Oversight Requirements. | _____ |
| 10. | Alcohol and Controlled Substances Testing. | _____ |
| 11. | Fixed Guideway Capital Investment Grants Program (New Starts, Small Starts, and Core Capacity Improvement). | _____ |
| 12. | State of Good Repair Program. | _____ |
| 13. | Grants for Buses and Bus Facilities and Low or No Emission Vehicle Deployment Grant Programs. | _____ |
| 14. | Urbanized Area Formula Grants Programs and Passenger Ferry Grant Program. | _____ |
| 15. | Enhanced Mobility of Seniors and Individuals with Disabilities Programs. | _____ |
| 16. | Rural Areas and Appalachian Development Programs. | _____ |
| 17. | Tribal Transit Programs (Public Transportation on Indian Reservations Programs). | _____ |
| 18. | State Safety Oversight Grant Program. | _____ |
| 19. | Public Transportation Emergency Relief Program. | _____ |
| 20. | Expedited Project Delivery Pilot Program. | _____ |
| 21. | Infrastructure Finance Programs. | _____ |
| 22. | Paul S. Sarbanes Transit in Parks Program. | _____ |
| 23. | Construction Hiring Preferences. | _____ |

# FTA FISCAL YEAR 2017 CERTIFICATIONS AND ASSURANCES

**FEDERAL FISCAL YEAR 2017 FTA CERTIFICATIONS AND ASSURANCES SIGNATURE PAGE**
(Required of all Applicants for federal assistance to be awarded by FTA and all FTA Grantees with an active Capital or Formula Award)

**AFFIRMATION OF APPLICANT**

Name of the Applicant: _____

Name and Relationship of the Authorized Representative: _____

BY SIGNING BELOW, on behalf of the Applicant, I declare that it has duly authorized me to make these Certifications and Assurances and bind its compliance. Thus, it agrees to comply with all federal laws, regulations, and requirements, follow applicable federal guidance, and comply with the Certifications and Assurances as indicated on the foregoing page applicable to each application its Authorized Representative makes to the Federal Transit Administration (FTA) in federal fiscal year 2017, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent it.

FTA intends that the Certifications and Assurances the Applicant selects on the other side of this document should apply to each Award for which it now seeks, or may later seek federal assistance to be awarded during federal fiscal year 2017.

The Applicant affirms the truthfulness and accuracy of the Certifications and Assurances it has selected in the statements submitted with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. § 3801 *et seq.*, and implementing U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31, apply to any certification, assurance or submission made to FTA. The criminal provisions of 18 U.S.C. § 1001 apply to any certification, assurance, or submission made in connection with a federal public transportation program authorized by 49 U.S.C. chapter 53 or any other statute

In signing this document, I declare under penalties of perjury that the foregoing Certifications and Assurances, and any other statements made by me on behalf of the Applicant are true and accurate.

Signature_____ Date: _____

Name_____
Authorized Representative of Applicant

AFFIRMATION OF APPLICANT'S ATTORNEY

For (Name of Applicant): _____

As the undersigned Attorney for the above named Applicant, I hereby affirm to the Applicant that it has authority under state, local, or tribal government law, as applicable, to make and comply with the Certifications and Assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the Certifications and Assurances have been legally made and constitute legal and binding obligations on it.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these Certifications and Assurances, or of the performance of its FTA assisted Award.

Signature_____ Date: _____

Name_____
Attorney for Applicant

*Each Applicant for federal assistance to be awarded by FTA and each FTA Recipient with an active Capital or Formula Project or Award must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its electronic signature in lieu of the Attorney's signature within FTA's electronic award and management system, provided the Applicant has on file and uploaded to FTA's electronic award and management system this hard-copy Affirmation, signed by the attorney and dated this federal fiscal year.*