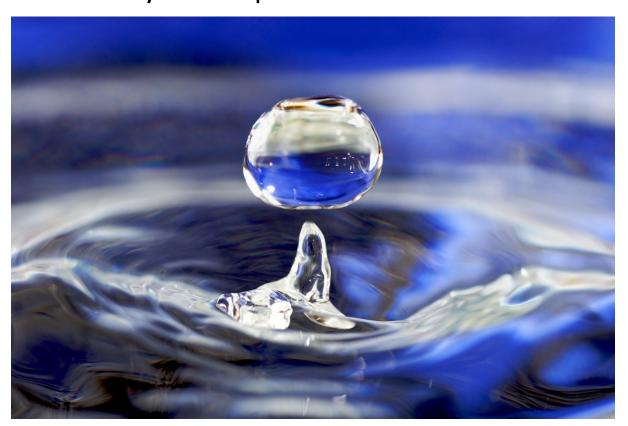
## Water Sector Program Request for Payment Process

Division of Administration

Office of Community Development – Local Government Assistance





#### GENERAL PRESENTATION INFORMATION

Webinar is being recorded and will posted on the our website.

Questions can be entered into the Q & A.

#### IMPORTANT DATES



- June 10, 2024 Grantees received notification of the changes to the payment process.
- June 10, 2024 OCD-LGA begins accepting revised WSP Request for Payment form.
- July 31, 2024 Last day OCD-LGA will accept old WSP Request for Payment form.
- December 31, 2026 All funds must be expended by this date.

#### ELIGIBLE ACTIVITIES



The "Authorization to Incur Costs and Grant Conditions" letter included the activities that are funded in your grant.

The system has been allowed WSP funds as follows:

\$ 2,060,000 Construction and contingencies

120,000 Professional Services Costs

\$ 2,180,000 Total

OCD-LGA cannot approve reimbursement for activities that are not included in the grant.

### Updated WSP RFP form.

	WATER	SECTOR PROGRAM (WSP)	REQUEST FOR	PAYMENT (RFP	)	
Name, Address, and Telephone Number of Grantee				B. Date of Request		
, Subrecipient Number	D. Federal Employer ID	E, UEI Number			F. Request#	
				ADD FY 1:		
Actual Delivery Date (A.D	D.) • The most recent date	of delivery of services for each Sta	te fiscal year.	A,D,D, FY 2:		
	H, Statu	s of Matching Funds		AUGU, FT Z.	Am	ount
Amount of match funds to be						
Amount of match funds expen	ded and documentation previou	sly submitted to OCD-LGA.				
Amount of match funds remain	ning to be expended and docum	ented by OCD-LGA				
Amount of match funds expen	ded since previous submission	(Attach documentation)				
Remaining matching fund to b	e sport (Subtract Line 4 from Li	ne 3)				
	I. Stat	us of WSP Funds			Am	ount
WSP Grant Amount						
WSP Funds Received to Date						
Subtotal (Subtract Line B from						
	t of Work Completed fo	rthis Request	A.D.D. FY 1	A.D.D. FY 2:	Am	ount
Public Works, Facilities, Site In	mprovements					
Sewer						\$ 0.00
Water						\$ 0.00
Professional Services						
Engineering Fees						\$ 0.00
Administrative Fees						\$ 0.00
Acquisition						\$ 0.00
Other						\$ 0.00
Total			\$ 0.00	\$ 0.00		\$ 0.00
drawer at the drawer's bank. invoices that equal or exce	I also certify that the data reported the amount are attached.	cordance with the terms and conditions ted above is correct and that the amou	of the agreement for int of the Request for	Payment is not in ex	e emount for which drawn coss of ourrent needs App	is proper for payment to th roved and detailed
Date	Signature			Title		
		L. Approval (Sta	te Use Only)			
Amo	unt of WSP funds approved fo	or this request	To	otal	WSP Funds	Matching Funds
Public Works, Feelities, Site I	mprovements					
Seuser				\$ 0.00		
			\$ 0.00			
Water						
Professional Services				\$ 0.00		
Engineering Fees		\$ 0.00				
Administrative Fees			\$ 0.00			
Acquisition			\$ 0.00			
Other				\$ 0.00	\$ 0.00	\$ 0.00
10131	Expendits	re of of match funds verified		4 5		ount
Expensiture of of match funds verified  Amount of match fund expenditures documented previously					~	
	penditures documented prev					
Total amount of match fund expenditures documented to date Reviewed by Signature and Date			10. Approved by	Signature and Date		\$ 0.00
P	AYMENTS CAN BE VER	IFIED ONLINE AT: https://ww	wcfprd.doa.lou	isiana.gov/vend	search/index2,cfm	

# Instructions for updated RFP form.

Complete form electronically. Cells highlighted in yellow are to be completed by grantee.  LINE:  A Enter name, address, including zip code, and telephone number of the Grantee.  Enter the date this request is being submitted.  C Enter the Subrecipient Number.  D Enter the Grantee's Federal Employer ID Number.  Enter the Grantee's Federal Employer ID Number.  Enter the Grantee's Vinique Entity Identifier Number from sam gov.  Enter number of the request. Requests for Payment (RFP) are numbered sequentially. Your first request is #1, your second is #2, etc. If, for some reason, a request is returned to you for correction and resubmission, the resubmission would have the same number with an A after it; 2A. A second resubmission would be 2B.  G Enter the most recent date of delivery or in the case of services rendered, a beginning and ending date. Any services that cover 2 fiscal years must be in separate invoices for each State fiscal year covered in the invoices for this RFP. Each invoice must have the date of delivery or in the case of services rendered, a beginning and ending date. Any services that cover 2 fiscal years must be in separate invoices for each State fiscal year must be indicated Ex. FY1 May 5, 2010 to June 30, 2010 \$2,040, FY2 July 1, 2010 to August 5, 2010 \$1,920. Enter only the dollar amounts in each FY column and for each applicable activity.  H This section to be completed by Grantee.  Enter the amount of match funds the Grantee committed to the grant.  Enter the amount of match funds that have been expended and previously documented to OCD-LGA.  Subtract Line 2 from Line 3.  This section to be completed by Grantee.  Enter amount of WSP finds expended that Grantee is documenting with this request. All match expenditure documentation must be provided with final payment request.  Subtract Line 4 from Line 3.  This section to be completed by Grantee.  Enter the amount of WSP finds being requested with this submission for sewer grants in the appropriate FY column(s).  This section to be completed		
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Checklist used by OCD-LGA Staff to review RFPs for processing.

Reviewed By	Select One
Application #  Grantee: Subrecipient #:  General Information  Was the RFP emailed from system employee or system's designee?	
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General Information  Was the RFP emailed from system employee or system's designee?	
Was the RFP emailed from system employee or system's designee?	
Was the RFP emailed from system employee or system's designee?	
Is the requestor presently on the LLA non-compliance list?	
	Select On
If WSP funds requested, are UEI(s) active for all entities, expiration date(s):	Select On
Ensure request involves only federal or state funds, cannot be mixed.	Select On
For state engineering requests, write PO number in item A.	Select On
For projects including LDH/DEQ revolving funds, did LDH/DEQ review and approve?	Select On
RFP Entries	
A-E Are items completed by grantee?	Select On
F Is the RFP form sequentially numbered?	Select On
G Is the RFP Actual Delivery Date ("ADD") correct?	Select On
According to the invoice dates should it be two fiscal years?	Select On
H Are amounts for items 1-5 correct?	Select On
I Are amounts for items 1-3 correct?	Select On
J Are amounts entered under the correct activity?	Select On
Are funds entered in the correct ADD column?	Select On
Are requested amounts within the budgeted amount?	Select On
Are requested amounts supported by invoices?	Select On
Do all requested amounts add up and agree with invoice totals?	Select On
K Is the RFP signed?	Select On
L Are approved amounts entered in correct columns?	Select On
Did you sign and date the RFP on the Reviewed By line?	Select On
Email the RFP, invoices, this checklist and invoice tracker to approver.	Select On
Invoice Tracker	Select On
Are amounts on Invoice Tracker correct and entered under correct activity?	Select On
Are the grant expenditures on schedule?	Select On
Has the Invoice Tracker file been saved onto the "G" drive?	Select On
Did you put a printed copy of the updated invoice tracker in the RFP file?	Select On

#### ADDITIONAL PROGRAM REQUIREMENTS

- All grantees must have UEI number actively registered in <u>www.SAM.gov</u>.
- All engineers, consultants, and prime contractors must have UEI number actively registered in www.SAM.gov.
- Requests can only include reimbursement from either state or federal funds. Do not include both on one RFP form.
- Requests for any projects that include LDH/DEQ revolving funds must have the agency approval before OCD-LGA can process.
- Enroll vendor number for electronic funds transfer with the Office of Statewide Reporting and Accounting Policy. If you cannot do so, you must contact Traci Watts or Heather Paul in OCD-LGA.



#### Documenting Match Funds

- In order to document match funds, the system must include the invoices and the cancelled checks.
- We will take into account any match that is listed on the RFP form when calculating the WSP payment; however, the funds will not be identified as documented unless we have the required documents.
- All match funds must be documented with the final RFP to enable OCD-LGA to complete a reconciliation of expenditures to ensure the match commitment has been met. Adjustments will be made on the final RFP, if necessary.



#### RESOURCES

OCD – LGA Website

https://www.doa.la.gov/doa/ocd-lga/american-rescue-plan-act/

Office of Statewide Reporting and Accounting Policy

https://www.doa.la.gov/doa/osrap/

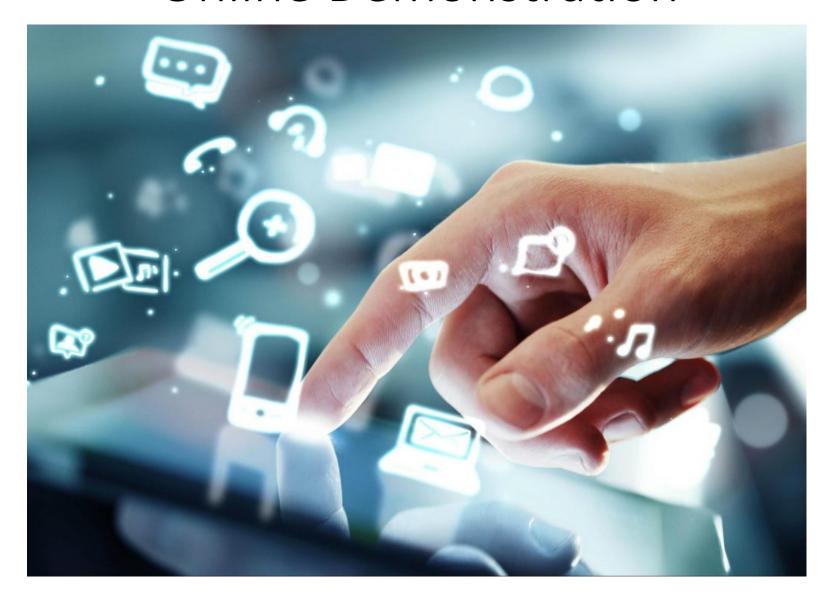
US Treasury – Coronavirus State and Local Fiscal Recovery Funds

https://home.treasury.gov/policy-issues/coronavirus/assistance-for-state-local-and-tribal-governments/state-and-local-fiscal-recovery-funds

Adobe Acrobat Reader - Free

https://get.adobe.com/reader/

#### Online Demonstration



#### Reminders

- Email your completed RFP to the OCD-LGA.
- Make sure you email the documents to OCDLGA.PaymentRequests@LA.GOV

We are here to help!



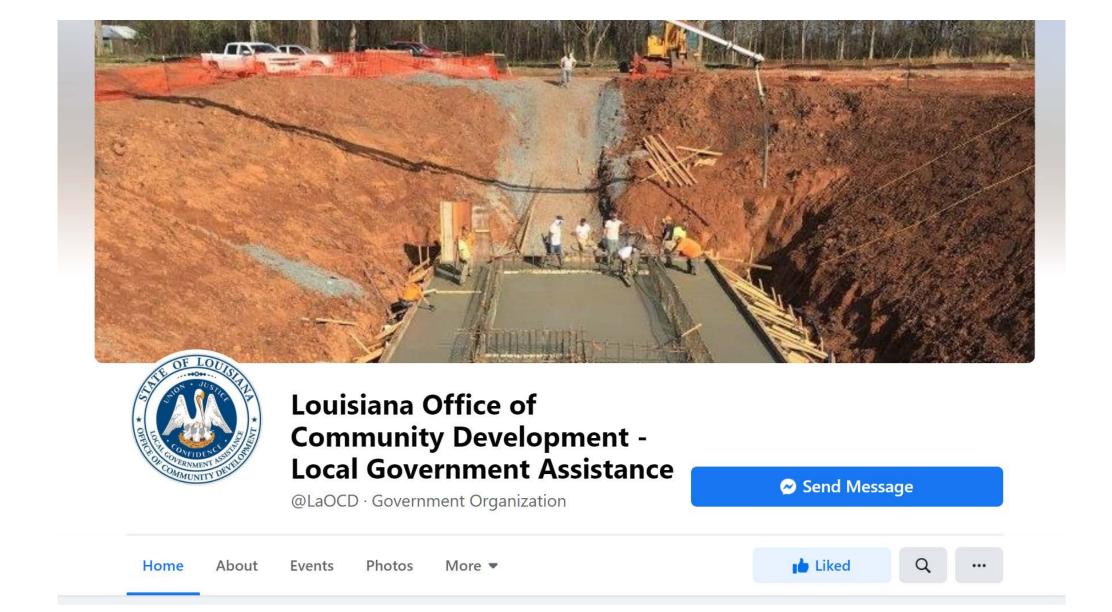


### Questions

#### **Contact Information**

#### • OCD – LGA

•	Traci Watts, Director	traci.watts@la.gov	225-342-0148
•	Heather Paul, Assistant Director	heather.paul@la.gov	225-342-7418
•	Gwen Scott, OCD-LGA staff	gwen.scott@la.gov	225-342-7412
•	Gwendolyn Thomas, OCD-LGA staff	gwendolyn.thomas@la.gov	225-219-0804
•	Suzanne Bentley-Smith, OCD-LGA staff	suzanne.bentlev-smith@la.gov	225-219-0805



Follow us on Facebook to receive reminders and notifications about programs!

