

Flood Recovery Fund (FRF)  
Project Closeout Checklist

- Closeout Request Letter**
  - Project Name Buffalo Elm Street Basin
  - Project Number 2019-FRF-0008
  - Recipient Name City of Buffalo
  - De-Obligation FRF: \$ 54,722.05 non-FRF: \$ 9,656.78
  - Request/Reallocation Request \$54,722.05
  
- Final Expenditure Report (certified by the subapplicant)**
  - Total Approved Project Cost \$ 248,260.00
  - Final/Actual Project Cost \$ 183,881.17
  - Approved FRF Share \$ 211,021.00
  - Final/Actual FRF Share \$ 156,298.95
  - Approved Non-FRF Share \$ 37,239.00
  - Final/Actual Non-FRF Share \$ 27,582.22
  - Duplication of Benefits, if any None
  
- ~~Recipient Administrative Costs, if applicable~~ N/A
- ~~Total Project Cost Overrun or Underrun (If applicable, include dollar amount)~~ \$64,378.83
- Project Completion Date 09/14/2020
- Final Virtual Site Visit Date 01/20/2021
- List of Person(s) who completed Final Virtual Site Visit Carol Tomb 01/20/2021
- ~~Written certification that all Environmental/Historic conditions were met and all required permits were obtained.~~ N/A
- Include Engineer final site visit certification, with date of completion, that the project scope of work is completed to applicable codes and standards. 08/30/2020
- Statement indicating that all reimbursements have been made to the recipient, if applicable. 01/20/2021
- Photo of each project site after project completion (include location, line segment, etc) 09/14/2020
  
- Coordinates in decimal degrees longitude and latitude with 6 decimal places and include a minus (-) to show west longitude. Same as application location: 41.457420, -90.734360



**STATE OF IOWA  
FLOOD MITIGATION PROGRAM  
FLOOD RECOVERY FUND PROGRESS REPORT**

PERIOD COVERED BY THIS REPORT: 5/1/2020 to 10/31/2020  
 LOCAL CONTACT NAME: Tanna Leonard  
 GOVERNMENTAL ENTITY: City of Buffalo  
 ADDRESS: 329 Dodge Street  
 Buffalo, IA 52728  
 TELEPHONE NUMBER: 563-381-2226  
 PROJECT TITLE: Elm Street Basin Flood Mitigation  
 AGREEMENT NUMBER: 2019-FRF-0008  
 ACTIVITY COMPLETION TIMEFRAME: 2/14/2020 to 12/31/2020

	FEDERAL	STATE-FRF	LOCAL	TOTAL
TOTAL FUNDS APPROVED:	\$ -	\$ 211,021	\$ 37,239	\$ 248,260
TOTAL FUNDS EXPENDED TO DATE:	\$ -	\$ 156,299	\$ 27,582	\$ 183,881
<b>PROJECT OVERRUN/ (UNDERRUN):</b>	\$ -	\$ (54,722)	\$ (9,657)	\$ (64,379)
The percentage of actual work that has been completed at the end of the reporting period (not a % of funds expended)				<b>100%</b>
The estimated cost of the project at completion (which may even exceed the awarded amount)				<b>\$ 183,881</b>

Type of Expense & Funding Source	Budget (from Application)	Federal/ Local/ State-FRF	Total Expended to Date	Remaining Balance
<b>Engineering/Contractual Services:</b>	\$ 23,700			
		State-FRF	\$ 6,855	
		Local	\$ 1,210	
TOTAL			\$ 8,065	\$ 15,635
<b>Construction</b>	\$ 224,500			
		State-FRF	\$ 149,444	
		Local	\$ 26,372	
TOTAL			\$ 175,816	\$ 48,684
<b>Total Project Budget Summary</b>	<b>\$ 248,200</b>		<b>\$ 183,881</b>	<b>\$ 64,319</b>

FUNDING SOURCE:				Total Expended to Date
Flood Recovery Fund				\$ 156,298.95
City of Buffalo				\$ 27,582.22
				\$ -
				\$ -
				\$ -
<b>Total Project Funding Source</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 183,881.17</b>

Project Status- entire project (Check One)	Description of significant activities this <b>bi-annual term</b> . Include comparison of actual accomplishments to the objectives identified in your application. Attach pictures and a narrative. Status changes or delays, please explain reason.
<input type="checkbox"/> On Schedule <input type="checkbox"/> Delayed <input type="checkbox"/> Canceled <input checked="" type="checkbox"/> Completed <input type="checkbox"/> Suspended	The construction of the project is completed.

Application Work Schedule (Milestones)			Milestone Status
#	Description:	Submitted Completion Date:	Actual Completion Date:
1	Notice of Grant Award	2/14/2020	2/17/2020
2	Engineering & Design	3/31/2020	3/2/2020
3	Permitting	4/30/2020	4/15/2020
4	Construction contractor procurement, selection, & Contract	5/31/2020	5/18/2020
5	Construction	7/31/2020	7/28/2020
6	Project Acceptance	8/31/2020	9/14/2020
7	Project Closeout	09/31/2020	
8			
9			
14			

Person Completing this Report: Tanna Leonard

Date: 11/15/2020

I, the undersigned, hereby certify that the above information is accurate and true, and in accordance with the approved project plan and state and federal regulations and policies governing this award.

Signature on file

Signature of Authorized Representative or Governmental Entity

Tanna Leonard, City Clerk

Name of Authorized Representative or Governmental Entity

<b>Instructions to complete this form</b>	
Areas shaded <span style="background-color: #d9ead3; width: 15px; height: 15px; display: inline-block; vertical-align: middle;"></span>	are to be completed by State HSEMD Personnel.
Areas shaded <span style="background-color: #d9ead3; width: 15px; height: 15px; display: inline-block; vertical-align: middle;"></span>	are to be completed by the governmental entity or authorized administrator.