FINAL REPORT

CERTIFICATE OF COMPLIANCE

Recipient:		
Project Name:		
Grant Number:		
Grant Amount:		
I, the undersigned, I	ing duly qualified, respectfully, of the(Recipient Nam	е),
in	County, State of Montana, do hereby certify that the above-named proje	ect
is in full compliance	vith all of the covenants and conditions set forth in the Agreement identified above betwe	en
the	(Recipient Name) and the State of Montana, Department	of
Natural Resources	nd Conservation. I understand that any money remaining after the final payment will	be
returned to the appr	priate accounts at DNRC.	

Authorized Recipient Signature

Date

STATEMENT OF COMPLETION

Recipient:		
Project Name:		
Grant Number:		
Grant Amount:		
I,	, (Proj	ect Engineer) a Registered Professional Engineer
in the State of Montana, license n	umber	_, do hereby state that the above-named project
was completed according to the	approved plans and specific	cations. I further state that the record ("as-built")
drawings for this project are a true	e and accurate representation	of the completed construction.
Name		P.E. Number
Signature		Date
Name of Firm		
Address of Firm		

Please consult the DNRC Liaison to verify if this form is required for your project.