

APPLICATION FOR REIMBURSEMENT AND EXPENDITURE REPORT

EMERGENCY REPAIR PROGRAM

SAB 61-03 (NEW-01/05REV.02/05)

GENERAL INFORMATION

An Local Educational Agency (LEA) may use this form to apply for reimbursement of Emergency Facilities Needs repairs under the Emergency Repair Program (ERP) at eligible school sites as defined by Section 1859.321. For purposes of this apportionment the following documentation must be submitted with this form:

Part A

- Documentation that sufficiently substantiates the health and safety threat, which may include but is not limited to the following:
 - Photos showing the condition of the project prior to the repair work being performed
 - Signed copy of the Interim Evaluation Instrument (IEI) identifying the health and safety hazard
 - Copies of complaints made by parents, students, or staff referencing the problem
 - Inspection report by qualified individual(s) or firm(s)
- A cost comparison(s) prepared pursuant to Section 1859.323.1 (if applicable).
- Division of the State Architect (DSA) approved specifications and plans (if applicable). The plans must clearly delineate the scope of eligible ERP work in the project.

Part B

- Copy of all construction contracts and schedule of values
- Copy of all change orders (if applicable)
- Copy of all purchase orders or purchase agreements (if applicable)
- Copy of architect agreement and schedule of fees

The closeout audit will be performed after the final apportionment is made by the Board in accordance with Regulation Section 1859.326. For audit purposes, additional documentation may be requested at a later date.

SPECIFIC INSTRUCTIONS

Part A. Project Information

1. **Type of Health and Safety Project:** Check the appropriate box to indicate if the LEA had to repair or replace the building system or component to mitigate the health and/or safety threat.
2. **Type of Project:** Check the box indicating the type of building system or structural component the application is addressing. The LEA may check only one building system or structural component project per application. Multiple applications may be submitted per school site.
3. **Type of Facility:** Check the box(es) that identify the location(s) where the repair work was performed.
4. **School Construction Date:** Indicate the year of construction for the original buildings on campus. The year of construction shall be considered the date the Notice of Completion was filed with the county recorder, if available. If the Notice of Completion is not available, the LEA may use the year of occupancy as evidenced by historical record.
NOTE: The LEA may not submit a Form SAB 61-03 for a school site which was newly constructed on or after January 1, 2000.
5. **Facilities/Site – Owned or Leased:** Please indicate whether the facilities and site are owned or leased by the LEA submitting this application.
6. **Statement of Condition:** Provide a concise statement of the conditions that posed a threat to the health and safety of the students and staff at the school site.

7. **Description of Work/Scope of Project:** Provide a detailed narrative of the repairs that were required to mitigate the threat to the health and safety of students and staff as defined by Sections 1859.323 and 1859.323.1.
8. **Project Costs:** Provide a breakdown of eligible project cost information based on the LEAs actual expenditures. The total should match the total amount of expenditures listed in Part B of the form. This must include only costs directly related to and necessary for the eligible project as defined by Sections 1859.323, 1859.323.1, and 1859.323.2.

Part B. Expenditure Report

List the total expenditures for the project.

1. Planning

- **School Site:** enter the school site.
- **LEA:** enter the LEA.
- **County:** enter the county.
- **Application Number:** enter the application number.
- **Date:** enter the date.
- **Payee:** enter the payee.
- **Warrant Number:** enter the warrant number.
- **Architect/Engineering Fees:** enter the fees as negotiated in the architect's agreement to design and engineer the construction project.
- **DSA Fees:** enter the fees as determined by the DSA as required by law.
- **Inspections:** enter the amount paid for inspection services provided.
- **Other Costs:** enter any other planning costs.
- **Description/Purpose:** enter the description/purpose.

2. Construction

- **School Site:** enter the school site.
- **LEA:** enter the LEA.
- **County:** enter the county.
- **Application Number:** enter the application number.
- **Date:** enter the date.
- **Payee:** enter the payee.
- **Warrant Number:** enter the warrant number.
- **Main Construction:** enter the amount paid to the main building contractor.
- **Construction Management:** enter the amount paid to the construction manager of the project to supervise the building construction.
- **Demolition:** enter any costs associated with the demolition of existing buildings in preparation for construction.
- **Other Construction:** enter any construction costs not included in the main construction contract.
- **Hazardous Waste Removal:** enter the costs to remove hazardous material from the school site including Department of Toxic Substances Control (DTSC) fees, California Department of Education (CDE) fees, preliminary endangerment assessment costs, phase one environmental site assessment costs, and the response/removal action plan costs as required by DTSC.
- **Description/Purpose:** enter the description/purpose.

Certifications

The LEA representative must complete this section.

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LOCAL EDUCATIONAL AGENCY (LEA)	APPLICATION NUMBER
SCHOOL NAME	FIVE-DIGIT DISTRICT CODE (SEE CALIFORNIA PUBLIC SCHOOL DIRECTORY)
COUNTY	SEVEN-DIGIT SITE CODE (SEE CALIFORNIA PUBLIC SCHOOL DIRECTORY)

Part A. Project Information

1. Type of Health and Safety Project (check one)

- Repair Replacement

2. Type of Project (check one)

- Sewer Gas HVAC Other _____
 Water Electrical Fire/Life Safety

3. Type of Facility (check all that apply)

- Classrooms/Instructional Dining Space Multi-Purpose Subsidiary Facilities
 Counseling Area Library Accessibility Restrooms
 Administrative Space Gymnasium

4. School Construction Date

Year of original construction: _____

5. Facilities/Site – Owned or Leased

- Facilities Owned Facilities Leased Site Owned Site Leased

6. Statement of Condition

7. Description of Work/Scope of Project

8. Project Costs

- I. Planning Cost: \$ _____
 II. Repair/Replacement Cost: \$ _____
 III. Testing: \$ _____
 IV. Inspection: \$ _____
 IV. Total Project Reimbursement: \$ _____

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Certifications

I certify, as the LEA Representative, that the information reported on this form is true and correct and that:

- I am designated as an authorized representative by the governing board of the LEA; and,
- The repairs in this project were necessary to mitigate conditions that posed a threat to the health and safety of pupils or staff while at school; and,
- The LEA has complied with all laws pertaining to the repair of its school facilities;
- The LEA has complied with the Public Contract Code; and,
- The LEA has satisfied the supplement, not supplant requirement as defined in Section 1859.328; and,
- ~~These funds will supplement, not supplant existing maintenance funds pursuant to EC Section 17592.72(b)(2); and,~~
- The contracts for services or work in this project were not entered into prior to September 29, 2004; and,

- The LEA understands that expenditures occurring after the submittal of this application are ineligible for reimbursement; and,
- The grant amount provided by the SAB shall be deemed full and final apportionment; and,
- The LEA understands that some or all of the funding for the project may be returned to the State as a result of an audit pursuant to Regulation Section 1859.326;
- The LEA has obtained the Division of State Architect's approval of the plans and specifications, if required; and,
- This form is an exact duplicate (verbatim) of the form provided by the Office of Public School Construction. In the event a conflict should exist, then the language in the OPSC form will prevail.

I certify under penalty of perjury under the laws of the State of California that the statements in this application and supporting documents are true and correct.

NAME OF LEA REPRESENTATIVE (PRINTED OR TYPED)	TITLE
SIGNATURE OF LEA REPRESENTATIVE	DATE

