## **FINAL REPORT**

## **CERTIFICATE OF COMPLIANCE**

Recipient:		
Project Name:		
Grant Number:		
Grant Amount:		
I, the undersigned, I	being duly qualified, respectfully, of the	(Recipient Name),
in	County, State of Montana, do	hereby certify that the above-named project
is in full compliance	with all of the covenants and conditions set forth i	n the Agreement identified above between
the	(Recipient Name) ar	nd the State of Montana, Department of
Natural Resources	and Conservation. I understand that any money	remaining after the final payment will be
returned to the appr	ropriate accounts at DNRC.	
Authorized Recipie	ent Signature	Date
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## **STATEMENT OF COMPLETION**

Recipient:	
Project Name:	
Grant Number:	
Grant Amount:	
l,	, (Project Engineer) a Registered Professional Enginee
in the State of Montana, license number	, do hereby state that the above-named projec
was completed according to the approved plans	s and specifications. I further state that the record ("as-built"
drawings for this project are a true and accurate re	epresentation of the completed construction.
Name	P.E. Number
Signature	Date
Name of Firm	
Address of Firm	-
City, State Zip of Firm	

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