

ANNUAL CLAIM FOR LOCAL TRANSPORTATION FUND (LTF) FUNDS

To: TAHOE REGIONAL PLANNING AGENCY
P.O. Box 5310
Stateline, NV 89449-5310

From: APPLICANT: _____

ADDRESS: _____

CONTACT: _____ PHONE: _____

The _____ hereby requests, in accordance with Chapter 1400, Statutes of 1971, as amended, and applicable rules and regulations that its annual claim for (FY____) Local Transportation Funds under Article ____ (specify Article 4 or Article 8) be approved by TRPA, in the amount of \$_____, to be drawn from the Local Transportation Fund of the County of _____.

When approved by TRPA, this claim will be transmitted to the County Auditor-Controller of the County of _____ for payment. Action on this claim and payment by the County Auditor-Controller to the applicant is subject to such monies being on hand and available for distribution, and is subject to the provision that such monies will be used only in accordance with the terms of the approved annual financial plan.

(Attach resolution by local legislative body approving claim and authorizing its submittal by designated official).

CLAIMANT: _____

BY: _____

TITLE: _____

DATE: _____