

MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard Baltimore Maryland 21230
(410) 537-3000 1-800-633-6101 http://www.mde.state.md.us

MARYLAND WATER QUALITY FINANCING ADMINISTRATION
State BRF Septic Grant Payment Disbursement Request Form
(Direct Vendor Payment)

Financial Assistance Program: Bay Restoration Fund - Septic Grant: County

Grant FY: _____ OSDS County: _____

Federal ID #: _____

Payment Disbursement Request #: _____

Project Period Covered (This Request): From: _____ To: _____

Grant Recipient Name: _____

Address: _____

City, State, Zip Code: _____

County: _____

Telephone #: _____

Type of Expense	Amount (\$)
1. Equipment	_____
2. Installation	_____
3. Other/Specify _____	_____
4. Other/Specify _____	_____
Total Grant Payment Request	\$ -

Certification

I certify that to the best of my knowledge and belief that the billed costs and this payment disbursement request represents the MDE share due, which has not been previously requested or paid and that an inspection has been performed and all work is in accordance with the terms of the Grant Agreement & Conditions of Financial Assistance Award. I certify that the BAT system installation is complete and authorize the State to make the payment for the Septic System BAT grant directly to the Vendor identified below:

Signature of Authorized Requester / Date

Name of Authorized Requester (please print)

Vendor Name (please print)

Vendor Federal ID: (please print)

Vendor Address (please print)

Enclose all vendor invoices. Also complete the attached spreadsheet providing summary of all BAT installations related to this payment request.

