

FY 20__ CONTRACT CLAUSES CERTIFICATION

INSTRUCTIONS: Complete, sign and return it to the Michigan Department of Transportation.

I acknowledge that I have reviewed a copy of the [Contract Clauses](#). I understand that the nature of the project will determine which requirements of the contract clauses apply and I will comply with all applicable clauses for all FTA-funded contracts for the application year.

NAME OF PERSON AUTHORIZED TO SIGN A CONTRACT OR PROJECT AUTHORIZATION

BOARD OF CHAIR INFORMATION:
NAME

PHONE NO.

E-MAIL ADDRESS

LEGAL ORGANIZATION NAME *

TITLE OF AUTHORIZED SIGNER

SIGNATURE OF AUTHORIZED SIGNER **

DATE

* If the organization has a master agreement with MDOT, **the organization name must match the name as it appears on the master agreement**. Organizations with multiple master agreements must submit multiple contract clauses certifications.

** If the organization has a master agreement with MDOT, the signature must be the same as the authorized signer of the master agreement or an individual with legal authority to sign a project authorization for the organization. Your agency can change, add or remove an authorized signer at any time by completing a signature resolution.