



# SUBGRANT CLOSEOUT CERTIFICATION

## Applicant Information

Applicant's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Federal Declaration No. \_\_\_\_\_ Public Assistance ID Number: \_\_\_\_\_

## Certification

The applicant certifies the following:

1. All work was completed and all grant funds were expended in accordance with the scope of work identified on each project worksheet. All costs claimed have been paid in full.
2. For declarations made before November 13, 2007, all administrative allowance funds will be used to reimburse applicant expenses for requesting, obtaining, and administering their subgrant in accordance with 44 CFR 206.228. Administrative allowance funds provided in excess of actual eligible administrative expenses will be returned to the Illinois Emergency Management Agency. For declarations made on or after November 13, 2007, any costs my organization incurred to manage our Public Assistance subgrant are being submitted with this certification. If costs are claimed, a completed Subgrantee Management Cost Request form is being submitted, along with actual documentation to support the costs being claimed.
3. All work was completed within the required time periods or time extension requests were submitted and approved by the Illinois Emergency Management Agency and the work was completed during the approved time extension period.
4. All work has been completed in accordance with Federal, State and local laws and regulations.
5. The applicant has administered the subgrant in accordance with the grant conditions contained in the *Public Assistance Grant Agreement* and *Public Assistance Program Applicant Handbook*.
6. The applicant has complied with the requirements of the Single Audit Act of 1984 (as amended) and Office of Management and Budget (OMB) Circular A-133 or 2 CFR, Part 200, Subpart F (as applicable).

Applicant's Agent: \_\_\_\_\_  
Signature Title Date

## Notes

1. Category A and B projects must be completed within six (6) months from the declaration date. Category C, D, E, F and G projects must be completed within 18 months from the declaration date.
2. For fiscal years beginning before December 26, 2014, non-Federal organizations which expend \$500,000 or more in Federal funds (from all sources) during their fiscal year are required to have an audit performed in accordance with the Single Audit Act of 1984 (as amended) and Office of Management and Budget (OMB) Circular A-133. For fiscal years beginning on or after December 26, 2014, non-Federal organizations which expend \$750,000 or more in Federal funds (from all sources) during their fiscal year are required to have an audit performed in accordance with 2 CFR, Part 200, Subpart F.

## For IEMA Use Only

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

## **Instructions for completing the IEMA Subgrant Closeout Certification Form**

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***Purpose***                The purpose of this form is for applicants to certify compliance with certain criteria to close their Public Assistance subgrant.

***General***                All items on the form must be completed by the Applicant and returned to the Illinois Emergency Management Agency (IEMA). Incomplete forms will be returned to the Applicant.

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### ***Applicant Information***

Applicant's Name                Enter the name of the Applicant organization or jurisdiction.

Street Address                Enter the Applicant organization or jurisdiction street mailing address. This address should include any P.O. Box numbers necessary.

City, State, Zip Code                Enter the City, State and Zip Code for the Applicant organization or jurisdiction.

Federal Declaration No.                Enter the four-digit Federal Declaration Number. This number is assigned by FEMA once the disaster or emergency has been declared by the President. This number is included on the Declaration the Fact Sheet.

Public Assistance ID No.                Enter the Applicant's Public Assistance ID Number. This number was provided to the applicant on the application forms and will usually be in the XXX-YYYYY-ZZ format.

### ***Certification***

Applicant's Agent                The Applicant's Agent for the Applicant must sign and certify closeout of the subgrant.

### ***Notes***

This section provides supplemental information not specifically stated in the subgrant certification criteria. The Applicant is responsible for evaluating all the subgrant certification criteria, including the supplemental information.