**Part 4: CERTIFICATION**

***This page must be signed in order for the project to be considered for funding.***

I certify that the information contained in this Bicycle Corridor Improvement Program application, including required attachments, is accurate and that I have read and understood the important information and agree to the assurances on this form.

|  |  |
| --- | --- |
| Signature of Applicant Agency Representative: | Date: |

|  |  |
| --- | --- |
| Printed Name: | Title: |
| Applicant Agency: |

**Part 5: COOPERATIVE AGREEMENT CONCURRENCE**

Project Implementing Agency has reviewed the attached draft Bicycle Corridor Improvement Program cooperate agreement template and has determined that the cooperative agreement is:

[ ] Sufficient and meets the expectations of the Project Implementing Agency. No further changes necessary.

[ ] Sufficient, with the suggested modifications:

|  |
| --- |
|  |

The Bicycle Corridor Improvement Program cooperative agreement will be finalized and executed between Project Implementing Agency and OCTA if the project is selected for funding.