

EXHIBIT D
LOCAL PUBLIC AGENCY
MONTHLY STATUS REPORT

Send to:
South Carolina Department of Transportation
Attn: Local Public Agency Administration Office
Post Office Box 191
Columbia, South Carolina 29202

Date: _____ Status Report No. _____ Interim Final

Name of SUBRECIPIENT:

Contract No. - _____ (LPA, IGA, etc.) File No. (Project ID No.) _____

Project Name:

Percent of Project Design Complete (i.e. 10%, 45%, N/A etc.) _____ % Attach Status Summary

Comments:

Right of Ways Acquisitions Complete (if applicable) _____ % Right of Ways Certification Approved
 Yes No

Comments:

Construction – _____ % Time Complete _____ % Contract Complete

Construction:

Have bids been received on the project?	Yes	No
Has the project been awarded?	Yes	No
Date construction began		
Anticipated construction completion date		
Percentage of construction complete		

Comments:

**No Construction Activities may begin until the Environmental Document for the Project has been approved and a statement concerning wetland permits has been submitted.