**Port and Freight Infrastructure Program (PFIP) - Finance Letter**

**Department of Transportation Accounting Services Center Local Programs Accounting Branch**

**Caltrans District**:              **Date**:

**Agency Receiving Funds**:

**Advantage ID**:   **Assembly District(s):**

**PPNO: Senate District(s):**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Component /Phase** | **Programed Fiscal Year** | **Total Project Cost**  ($1,000) | **PFIP Funds\*** ($1,000) | **PFIP SHA/HPGS Funds\***  ($1,000) | **TCEP/ other SB-1 Funds**  ($1,000) | **Sec 190 Grade Sep** ($1,000) | **Federal Funds\*\*** ($1,000) | **Local Funds** ($1,000) | **Other Funds** ($1,000) | **Other Funds** ($1,000) |
| **Environmental and Permits (E&P) / (PA&ED)** |  |  |  |  |  |  |  |  |  |  |
| **Design (PS&E)** |  |  |  |  |  |  |  |  |  |  |
| **Right of Way (RW)** |  |  |  |  |  |  |  |  |  |  |
| **Construction Support** |  |  |  |  |  |  |  |  |  |  |
| **Construction** |  |  |  |  |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |  |  |

\*Use either PFIP SHA or PFIP HPGS as title based on programed funding for the project. If project is approved to use PFIP non-proportional funding, then attach a spending plan showing percentage of funds to be used in each year. PFIP Non-proportional funding Request Approval Date: \_\_\_\_\_\_\_\_\_

\*\*Please specify type(s) of federal funds being used: \_\_\_\_\_\_\_\_\_\_

Remarks:

Questions regarding this Finance Letter should be directed to:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_