

Office of Land Survey
Department of Licensing and Regulatory Affairs
P.O. Box 30254, Lansing, MI 48909

2015 PROGRESS REPORT/COMPLETION REPORT INSTRUCTIONS

General Information

Documentation Required:

1. A **PROGRESS REPORT** must be accompanied by:
 - a. Invoices for all expenditures submitted
 - b. 245 general ledger report
 - c. Peer review group meeting minutes

NOTE: Land corner recordation certificates are **NOT** to be submitted at this time

2. The **COMPLETION REPORT** must be accompanied by all of the items above, as well as:
 - a. All land corner recordation certificates
 - b. Corner database records

Due Dates:

1. Progress Reports may be submitted anytime from July 1, 2015 through September 30, 2015.
2. Completion Reports may be submitted any time after July 1, 2015 and must be submitted by the last day of February 2016. Original signature pages are required to be submitted.

Narrative Report:

Compare the line items on the approved grant application with the line items on the progress or completion report and provide a narrative report explaining any deviations noted. The grantee must also provide a copy of the notification of change sent to the Department as required by MCL 54.275(1), Section 1.2 and Section 2.1 of the grant agreement.

Payments:

1. Progress payments are limited to 45 percent of the State Grant awarded.
2. A 245 general ledger report detailing the transaction history within the county's restricted Re-monumentation grant account/line item must be submitted with the

Progress and Completion reports. The county's 245 general ledger report must reflect all transaction, i.e., revenue deposits, expenses/payments, journal transfers, overhead/indirect costs and identify payees by name and invoice.

3. Supporting documentation for each transaction must be submitted with the 245 general ledger report.
 - a. For internal county costs, supporting documentation must identify the purpose of the expenditure and the dollar amount and for salary/wage and fringe benefits the employee must be identified.
 - b. Subcontractor invoices must be itemized to identify each corner by town/range and corner code.
 - c. If there are payables at the time the Completion Report is submitted, a narrative must be attached to an invoice itemizing the costs and explaining the circumstances.

Peer Review Group:

1. A copy of the County Board of Commissioners proof of appointment, i.e., certified meeting minutes or resolution, for any peer review group members appointed during the year.
2. Peer review group meeting minutes and a company affiliation list for each participating peer review group member.

NOTE: All grant administrator and county representative costs must be included in Items E. and F. **NO REIMBURSEMENTS** for attending peer review group meetings will be made for these roles unless they are accounted for in these line items.

Signatures:

Both the Progress and Completion Reports require an **ORIGINAL SIGNATURE** of the County Grant Administrator.

Completion of Form

The form is designed **TO BE COMPLETED ELECTRONICALLY** and make all necessary calculations.

Page 1:

1. Complete the **Grantee** and **Federal ID** blanks in the upper right corner.
2. Complete the **State Grant Award** blank and the **Reimbursement for Expedited Expenditures** blank, if applicable.

NOTE: The remaining lines in this column will calculate and autofill after completion of the page 2 financial information

3. After the page 2 financial information is entered, review and verify the calculations on page 1.
4. Complete the **Payment Requested** blank.
5. Sign, date, and submit the form with supporting documentation to the Department.

Page 2 – Itemized Expenditures:

1. For a **PROGRESS REPORT**, enter the data required in:
 - a. the **Progress Report Expenditures** column
 - b. The **Approved Budget** column

The **Total Actual Expenditures** column and the **Difference Between Approved Budget and Actual Expenditures** column will calculate and autofill.

NOTE: The **Completion Report Expenditures** column may be left blank or zero's entered

2. For a **COMPLETION REPORT**, enter the data required in:
 - a. The **Progress Report Expenditures** column, if a Progress Report was previously filed
 - b. The **Completion Report Expenditures** column
 - c. The **Approved Budget** column

The **Total Actual Expenditures** column and the **Difference Between Approved Budget and Actual Expenditures** column will calculate and autofill.

NOTE: The **Progress Report Expenditures** column may be left blank or zero's entered

3. The page 2 totals will calculate and autofill the appropriate blanks on page 1.
4. Compare the line items on the approved grant application with the line items on the progress or completion report and provide a narrative report explaining any deviations noted. The grantee must also provide a copy of the notification of change sent to the Department as required by MCL 54.275(1), Section 1.2 and Section 2.1 of the grant agreement.

Page 3 – Work Program/Corner Data:

1. Is only required to be submitted with the **COMPLETION REPORT**.
2. Compare the line items on the approved grant application with the line items on the completion report and provide a narrative report explaining any deviations noted. The grantee must also provide a copy of the notification of change sent to the Department as required by MCL 54.275(1), Section 1.2 and Section 2.1 of the grant agreement.

If you have any questions, please contact our office at (517) 241-6321 or email bccolsr@michigan.gov.

Submit all materials to the Department via:

U.S. Postal Service

Department of Licensing and Regulatory Affairs
c/o Office of Land Survey and Remonumentation
Lansing, MI 48909
P.O. Box 30254

Courier Other Than U.S. Postal Service

Department of Licensing and Regulatory Affairs
c/o Office of Land Survey and Remonumentation
611 West Ottawa
Ottawa Building, 1st Floor
Lansing, MI 48933

Survey and Remonumentation Progress/Completion Report Checklist	
Enclosed/Completed	✓
Original signatures	
Peer review group meeting minutes	
Peer review group member company affiliation list	
Peer review group members proof of appointment by Board of Commissioners (if changed during year)	
Salary/wage/fringe printout (county employees)	
245 general ledger report detailing the transaction history of the county's Remonumentation grant restricted account	
Invoice/supporting documentation for each expenditure	
Written narrative to explain any deviation from approved grant agreement, including: <ul style="list-style-type: none"> • Itemize ALL corners removed/not completed from the approved grant agreement and explain the reason for not completing. • Itemize ALL corners added/completed NOT in the approved grant agreement and explain the reason for adding corners. • Itemize and justify all differences between the approved budget amount and the expenditures presented. 	
Completion Report All above items, plus the following.	
Land Corner Recordation Certificates (LCRC): <ol style="list-style-type: none"> a. One provided for each corner submitted b. Sorted by survey township c. Total number submitted should equal total number of database records submitted For multi-page documents, double-sided copies ARE acceptable	
Corner record and geodetic coordinate data entered and submitted to State for each LCRC	

SURVEY AND REMONUMENTATION PROGRESS/COMPLETION REPORT

Michigan Department of Licensing and Regulatory Affairs
 Bureau of Construction Codes
 Office of Land Survey and Remonumentation
 PO Box 30254, Lansing, MI 48909
 1st Floor Ottawa Bldg., 611 W. Ottawa, Lansing, MI 48933
 Phone 517-241-6321 / Fax 517-241-6301
 E-Mail: bccolr@michigan.gov
www.michigan.gov/bcc

GRANTEE:
 Federal ID #
 Grant #: BCC 15 -
 MAIN Mail Code:

- \$ _____ State Grant Award
- \$ _____ Reimbursement for Expedited Expenditures (MCL 600.2567a(4))
- \$ _____ Total Annual Budget
- \$ _____ Start-Up Payment (40% of State Grant)
- \$ _____ 85% of State Grant
- \$ _____ Maximum Progress Payment Allowable (Equal to 45% of State Grant)
- \$ _____ Minimum Grant Balance (Must remain in the Fund if Progress Payment requested)
- \$ _____ Total Progress Report Expenditures
- \$ _____ Progress Payment (Submit prior to September 30, 2015)
- \$ _____ State Grant Balance (Remaining in the Fund if Progress Payment requested)
- \$ _____ Total Completion Report Expenditures
- \$ _____ Total Grant Expenditures
- \$ _____ Earned Amount
- \$ _____ Final Payment
- \$ _____ Final Grant Balance (Remaining in the Fund)

I certify to the best of my knowledge and belief that this report is correct and complete, and all expenditures are for the purposes set forth in and comply with the annual grant. We request the following payment at this time:

Payment Requested: \$ _____

 County Grant Administrator (Original Signature Required)

 Date

County Must Provide: Account 245 printout (detailed transaction history of all grant activity), S&W/Fringe Benefits/Overhead, detailed breakdown of all internal county costs, itemized invoices, peer group meeting minutes, and narrative for all differences in approved work program or budget.

Payment Authorized: \$ _____ P.O.#: _____
 Grant Balance: \$ _____

 Chris Beland, P.S., Director
 Office of Land Survey and Remonumentation

 Date

Work Program Expenditures by Line Item	2015 Progress Report Expenditures	2015 Completion Report Expenditures	2015 Total Actual Expenditures	2015 Approved Budget (Grant Application)	Difference Between Approved Budget and Actual Expenditures
Item A Remonumentation Services					
Item B Monument Maintenance Services					
Item C Remonumentation Supplies and Materials					
Item D Geodetic Control Maintenance and Operations					
Item E Grant Administrator Fees/Wages					
Item F County Representative Fees/Wages					
Item G Additional Administrative Staff Fees/Wages					
Item H Peer Group					
Item I Administrative Supplies and Indirect Costs					
Totals					+ underspent (-) overspent

Item A - Remonumentation Services Completed

Includes all requirements under MCL 54.268(2)a, i.e., monumentation or remonumentation plan, includes the filing of a land corner recordation certificate with latitude and longitude and associated database records.

Column A	Column B	Column C	Column D	Total Corners Item A
No. of Original and Protracted PLSS Corners Completed by Grantee	No. of Original and Protracted PLSS Corners Completed by Others	No. of Original and Protracted PLSS Corners Revisited	No. of Property Controlling Corners under MCL 54.262(h)(ii)	

Please attach a report for the work completed. The report must include a corner list for the work completed under Item A itemizing each column by Town, Range and Corner Code; do NOT list corners by municipality. For all corners, identify when a corner/monument location has more than one corner code associated with it, i.e., **common corner codes**, and identify all corner codes filed for that corner/monument location. For **Column B**, identify who completed the work, and for **Column C**, identify why the corners were revisited. Attach additional pages as necessary.

Total No. of Corner Records submitted (A+B+C+D+common corner codes identified on the attached corner list): _____

Note: One land corner recordation certificate and One database record must be submitted for each corner code submitted.

Item A - Remonumentation Services Inventory

	No. of Corner Codes Remonumented in 2015	TOTAL No. of Corner Codes Remonumented thru 2015	TOTAL No. of Corner Codes in County Plan	REMAINING No. of Corner Codes in County Plan to be Remonumented
Original and Protracted PLSS Corner Codes				
Property Controlling Corner Codes under MCL 54.262(h)(ii)				
TOTAL No. of Corner Codes				

Item B - Monument Maintenance Services Completed

Includes all requirements under MCL 54.268(2)d, i.e., perpetual monument maintenance plan, includes the filing of a land corner recordation certificate with latitude and longitude and associated database records.

Column A	Column B	Column C	Column D	Total Corners Item A
No. of Original and Protracted PLSS Corners Completed by Grantee	No. of Original and Protracted PLSS Corners Completed by Others	No. of Original and Protracted PLSS Corners Revisited	No. of Property Controlling Corners under MCL 54.262(h)(ii)	

Please attach a report for the work completed. The report must include a corner list for the work completed under Item B itemizing each column by Town, Range and Corner Code; do NOT list corners by municipality. For all corners, identify when a corner/monument location has more than one corner code associated with it, i.e., **common corner codes**, and identify all corner codes filed for that corner/monument location. For **Column B**, identify who completed the work, and for **Column C**, identify why the corners were revisited. Attach additional pages as necessary.

Total No. of Corner Records submitted (A+B+C+D+common corner codes identified on the attached corner list): _____

Note: One land corner recordation certificate and One database record must be submitted for each corner code submitted.

Item B - Monument Maintenance Services Inventory

	No. of Corner Codes Maintained in 2015	TOTAL No. of Corner Codes Maintained thru 2015	TOTAL No. of Corner Codes in County Plan	REMAINING No. of Corner Codes in County Plan to be Maintained
Original and Protracted PLSS Corner Codes				
Property Controlling Corner Codes under MCL 54.262(h)(ii)				
TOTAL No. of Corner Codes				