

# OVERALL WORK PROGRAM AGREEMENT (OWPA) for

MFTA #: \_\_\_\_\_

AGENCY DUNS #: \_\_\_\_\_

CFDA for Federal Funds 20.505\*

FY: \_\_\_\_\_ OWP Board Approval Date: \_\_\_\_\_ Amendment #: \_\_\_\_\_

1. The undersigned signatory hereby commits to complete this Fiscal Year (FY) the Annual Overall Work Program (OWP), which has been approved by the Department of Transportation (Caltrans), Federal Highway Administration (FHWA) and Federal Transit Administration (FTA) and is attached as part of this OWPA.

2. All of the obligations, duties, terms and conditions set forth in the Master Fund Transfer Agreements (MFTA) that was executed January 1, 2015 through December 31, 2024 with Caltrans are incorporated by reference as part of this OWPA for this FY.

3. Match amounts, sources, and eligibility for Regional Transportation Planning Funds listed below, must be in compliance with Federal, State, or contractually agreed upon requirements.

4. Subject to the availability of funds this FY OWPA funds encumbered by Caltrans include, but may not exceed, the following:

Funding Source	MIN Required Match %	CURRENT FY Allocated Programmed Amount	CARRYOVER Programmed Amount	Toll Credit Match	Local/In-Kind Match	TOTAL Estimated Expenditures
FHWA PL (Toll Credit)	11.47%					
FHWA PL (Local/In-kind Match)	11.47%					
FTA 5303 (Toll Credit Match)	11.47%					
FTA 5303 (Local/In-kind Match)	11.47%					
FTA 5304	11.47%					
FHWA SPR	20.00%					
RPA	0.00%					
RPA Grants	0.00%					
SHA Grants	11.47%					
SB1 Formula & Competitive	11.47%					
PTA Adaptation	11.47%					
<b>Total Programmed Amount</b>						

## Agency Certification of Programmed Funds

The Agency certifies that programmed amounts are representative of eligible and approved activities. Any expenses in excess of available and programmed funds will be borne solely by the agency.

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

## District Approval of Programmed Funds

The District has reviewed and approves the OWPA as submitted. Programmed amounts are representative of eligible and approved activities and is consistent with all obligations as approved in the OWP.

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

## (HQ Department of Transportation Use Only)

The total amount of all funds encumbered by this document are: \$ \_\_\_\_\_

Fund Title: \_\_\_\_\_ Item: \_\_\_\_\_ Chapter Statute: \_\_\_\_\_ Fiscal Year: \_\_\_\_\_

[Encumbrance Details:](#)

Acct Line #	Project ID#	Amount	Encumbrance Doc (Contract) Number

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and expenditure purpose stated above.

Signature of Department of Transportation Resources/Accounting Officer \_\_\_\_\_

Date \_\_\_\_\_