**Attachment D**

**Certification of Project Derived from a Locally Developed, Coordinated Public Transit-Human Services Transportation Plan**

(print, complete, and scan this page to upload with your application on funding.oki.org)

I, (name of authorized authority) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, do hereby certify that the project named (project name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is derived from the [Locally Developed, Coordinated Public Transit-Human Services Transportation Plan for the OKI Region](https://www.oki.org/wp-content/uploads/2020/09/2020-OKI-Coordinated-Plan.pdf), prepared and lead by the Ohio-Kentucky-Indiana Regional Council of Governments and adopted on September 10, 2020 by the OKI Executive Committee. The plan was developed through a process that included representatives of public, private, and non-profit transportation and human services providers and participation by members of the public.

This project, derived from Transportation Gaps and Needs identified in [Chapter 3](https://www.oki.org/wp-content/uploads/2020/09/2020-OKI-Coordinated-Plan.pdf#page=21) of the plan does address one or more of the identified gaps between current services and needs.

🞏 Yes

🞏 No

This project does fulfill one or more of the plan’s Strategies to Improve Transportation identified in [Chapter 4](https://www.oki.org/wp-content/uploads/2020/09/2020-OKI-Coordinated-Plan.pdf#page=36) of the plan.

🞏 Yes

🞏 No

Authorizing Signature:

Printed Name:

Title:

Organization:

Date: