U.S. DEPARTMENT OF TRANSPORTATION

GRANT AGREEMENT UNDER THE
FISCAL YEAR 2021 RAISE GRANT PROGRAM

This agreement is between the United States Department of Transportation (the “**USDOT**”), [insert name of State DOT] (the “**Recipient**”), and the [insert full name of applicant] (the “**First-Tier** **Subrecipient**”).

This agreement reflects the selection of the Recipient to receive a RAISE Grant for the [insert project name].

The parties want the First-Tier Subrecipient to carry out the project with the Recipient’s assistance and oversight.

The parties therefore agree to the following:

1. General Terms and Conditions

General Terms and Conditions.

(a) In this agreement, “**General Terms and Conditions**” means the content of the document titled “General Terms and Conditions Under The Fiscal Year 2021 Rebuilding American Infrastructure with Sustainability and Equity (RAISE) Grant Program:
FHWA Projects,” dated April 23, 2025, which is available at https://www.transportation.gov/BUILDgrants/grant-agreements. Articles 8–31 are in the General Terms and Conditions. The General Terms and Conditions are part of this agreement.

(b) The Recipient states that it has knowledge of the General Terms and Conditions.

(c) The Recipient acknowledges that the General Terms and Conditions impose obligations on the Recipient and that the Recipient’s non-compliance with the General Terms and Conditions may result in remedial action, terminating of the RAISE Grant, disallowing costs incurred for the Project, requiring the Recipient to refund to the USDOT the RAISE Grant, and reporting the non-compliance in the Federal-government-wide integrity and performance system.

1. Application, Project, and Award

Application.

Application Title: [insert full title of submitted application]

Application Date: [insert the date in box 3 of the SF-424]

Award Amount.

RAISE Grant Amount: [$XXX]

**[If all funds are being obligated at once:]**

Federal Obligation Type: Single

**[If funds are to be obligated in project phases or by component:]**

Federal Obligation Type: Multiple

| RAISE Grant Allocation Table |
| --- |
| Portion of the Project | Allocation from RAISE Grant |
| [insert name of first phase (*e.g*., “Base phase”) or component (*e.g.,* “Component 1”)] | [$XXX] |
| [insert name of second phase (*e.g*., “Option phase 1”) or component (*e.g.,* “Component 2”)] | [$XXX] |

| Future Obligation Conditions Table |
| --- |
| Portion of the Project | Condition |
| [insert name of second phase (*e.g*., “Option phase 1”) or component (*e.g.,* “Component 2”)] | [USDOT will describe the conditions] |

Award Dates.

Budget Period End Date: [insert date]

Urban or Rural Designation.

Urban-Rural Designation: [Urban] [Rural]

* 1. Capital or Planning Designation.

Capital-Planning Designation: Capital

* 1. Federal Award Identification Number.

 The Federal Award Identification Number will be generated when the FHWA Division authorizes the project in FMIS. The Recipient acknowledges that it has access to FMIS and can retrieve the FAIN from FMIS

1. Summary Project Information

Summary of Project’s Statement of Work.

**[****See drafting instructions.]**

Project’s Estimated Schedule.

| Milestone | Schedule Date |
| --- | --- |
| Planned NEPA Completion Date: | [insert date] |
| Planned Right-of-Way Certification Date: | [insert date] |
| Planned Construction Substantial Completion and Open to Traffic Date: | [insert date] |

Project’s Estimated Budget.

|  |
| --- |
| Eligible Project Costs |
| RAISE Grant Amount: | [$XXX] |
| Other Federal Funds: | [$XXX] |
| Non-Federal Funds: | [$XXX] |
| Total Eligible Project Cost: | [$XXX] |

1. Critical Milestone Deadlines

Critical Milestone Deadlines.

[If the only critical dates are substantial completion dates, then use the following:]

**None.** The parties have not identified any project-specific critical milestone deadlines for this award. The Recipient acknowledges the USDOT may terminate this award under section 17.1(a) on some conditions related to the Project’s estimated schedule, as listed in section 3.2.

[If there are additional critical dates, use this table and insert a row for each date. The milestone must be described in enough detail that there is no ambiguity about when it is met:]

| Milestone | Deadline Date |
| --- | --- |
| [Insert milestone] | [insert date] |

1. Party Information

Recipient’s Unique Entity Identifier.

Recipient’s Unique Entity Identifier: [insert Recipient UEI]

Recipient Contact(s).

Name

Title

Agency

Mailing Address

Phone Number

Email Address

Recipient Key Personnel.

None. The parties have not identified any individuals as key personnel for this award.

USDOT Project Contact(s).

Name

Title

Agency

Mailing Address

Phone Number

Email Address

1. USDOT Administrative Information

Payment System.

USDOT Payment System: FMIS

Office for Subaward and Contract Authorization.

USDOT Office for Subaward and Contract Authorization: FHWA Division

1. Special Grant Terms
	1. Subaward to First-Tier Subrecipient.

(a) The Recipient hereby awards a subaward to the First-Tier Subrecipient for the purpose described in section 8.1.

(b) The Recipient and the First-Tier Subrecipient may enter into a separate agreement, to which the USDOT is not a party, assigning responsibilities, including administrative and oversight responsibilities, among the Recipient and the First-Tier Subrecipient.

(c) For the purpose of 2 CFR parts 200 and 1201, the Recipient is a pass-through entity.

* 1. First-Tier Subrecipient Statements and Responsibilities.

(a) The First-Tier Subrecipient affirms all statements and acknowledgments that are attributed to the Recipient under sections 10.1 and 10.2.

(b) The First-Tier Subrecipient assumes the Recipient’s reporting obligations under articles 14 and 15.

* 1. State Oversight Responsibilities.

 For the purpose of 23 U.S.C. 106(g), the Recipient shall act as if funds under this award are Federal funds under title 23, United States Code.

Attachment A
Statement of Work

**instructions FOR COMPLETING ATTACHMENT a:** This attachment must describe the project that DOT agreed to fund, which is typically the project that was described in the application or a reduced-scope version of that project. If the project will be completed in segments or phases, describe each segment or phase. If the project has separate functional or geographic components, describe each component.

Attachment B
Estimated Project Budget

1. Supplementary Fund Source Table(s)

[ If this section will contain any information: ]

The following tables supplement the budget information in section 3.3.

[**Non-RAISE Previously Incurred Costs:** If the Total Eligible Project Cost is less than the project cost estimate in the application because some costs have already been incurred and those costs are not eligible pre-award costs listed in attachment E, add this table and describe the previously incurred activities in attachment D. Otherwise remove this table]

|  |
| --- |
| Non-RAISE Previously Incurred Costs |
| Other Federal Funds: | [$XXX] |
| Non-Federal Funds: | [$XXX] |
| Total: | [$XXX] |

[**Eligible Costs:** If the project will be completed in separate segments, phases, or components, use the following table with a separate column for each segment or phase. Any segment, phase, or component identified here must be described in attachment A. If phases or components are identified for separate obligations in section 2.2, those phases or components must be listed here. The total column must match the table in section 3.3.

If the Recipient’s costs are not separable by component (e.g., if all activities are invoiced under a single contract), then do not use this table; section 3.3 is sufficient.

Rows with $0 should be removed, except that the RAISE Funds row should always be present. ]

|  | Eligible Costs |
| --- | --- |
|  | [Component 1] | [Component 2] | Total |
| RAISE Funds: | [$XXX] | [$XXX] | [$XXX] |
| Other Federal Funds: | [$XXX] | [$XXX] | [$XXX] |
| Non-Federal Funds: | [$XXX] | [$XXX] | [$XXX] |
| Total: | [$XXX] | [$XXX] | [$XXX] |

[ If neither of the tables above is necessary, then the following should be the only content in Attachment B, section 1: ]

Reserved. This attachment B does not contain any supplementary fund source tables.

2. Cost Classification Table

**[**If no costs are anticipated in a category, remove the row from the table. If there are identifiable costs that do not fit within the four classes listed below, then add an appropriate row for those costs, using the classes in the SF-424C as a model. ]

| Cost Classification | Total Costs | Non-RAISE Previously Incurred Costs | Eligible Costs |
| --- | --- | --- | --- |
| Preliminary engineering |  |  |  |
| Right-of-way acquisition |  |  |  |
| Construction |  |  |  |
| Contingency |  |  |  |
| Project Total |  |  |  |

Attachment C
Performance Measurement Information

**Study Area:** [Insert description of area to be studied]

**Baseline Measurement Date:** [insert date]

**Baseline Report Date:** [insert date]

Table 1: Performance Measure Table

| Measure | Category and Description | Measurement Frequency |
| --- | --- | --- |
| [Insert Performance Measure] | [Performance Measure Category][Performance Measure Description] | [quarterly *or*annual] |
| [Insert Performance Measure] | [Performance Measure Category][Performance Measure Description] | [quarterly *or*annual] |

Attachment D
Changes from Application

**Instructions for completing attachment D:** Describe all material differences between the scope, schedule, and budget described in the application and the scope, schedule, budget described in article 3 and attachments A–B. The purpose of this attachment D is to clearly and accurately document the differences in scope, schedule, and budget to establish the parties’ knowledge and acceptance of those differences. See section 10.1.

**Scope**:

**Schedule**:

**Budget**:

The table below provides a summary comparison of the project budget.

| **Fund Source** | **Application** | **Section 3.3 and Attachment B** |
| --- | --- | --- |
| $ | % | $ | % |
| **Previously Incurred Costs** |  |  |  |  |
| Federal Funds |  |  |  |  |
| Non-Federal Funds |  |  |  |  |
| Total Previously Incurred Costs |  |  |  |  |
| **Future Eligible Project Costs** |  |  |  |  |
| RAISE Funds |  |  |  |  |
| Other Federal Funds |  |  |  |  |
| Non-Federal Funds |  |  |  |  |
| Total Future Eligible Project Costs |  |  |  |  |
| Total Project Costs |  |  |  |  |

Attachment E
Approved Pre-award Costs

[**If FHWA did not approve A/C:**]

**None.** The USDOT has not approved under this award any costs incurred under an advanced construction authorization (23 U.S.C. 115), any costs incurred prior to authorization (23 CFR 1.9(b)), or any pre-award costs under 2 CFR 200.458.

[**If FHWA approved A/C:**]

On [insert date], [Recipient] sent a written request to the FHWA [State] Division for advance construction (23 U.S.C. 115) authorization to [insert activity]. [Recipient] requested advance construction for $XXX in RAISE Grant funds. The Division authorized advance construction on [insert date].

Activities under that authorization are approved pre-award costs under 2 CFR 200.458.

RECIPIENT SIGNATURE PAGE

The Recipient, intending to be legally bound, is signing this agreement on the date stated opposite that party’s signature.

|  |  |
| --- | --- |
|  | [insert full name of Recipient’s organization] |
| Date | By: | Signature of Recipient’s Authorized Representative[insert name]Name[insert title]Title |

FIRST-TIER SUBRECIPIENT SIGNATURE PAGE

The First-Tier Subrecipient, intending to be legally bound, is signing this agreement on the date stated opposite that party’s signature.

|  |  |
| --- | --- |
|  | [insert full name of First-Tier Subrecipient’s organization] |
| Date | By: | Signature of First-Tier Subrecipient’s Authorized Representative[insert name]Name[insert title]Title |

USDOT SIGNATURE PAGE

The USDOT, intending to be legally bound, is signing this agreement on the date stated opposite that party’s signature.

|  |  |
| --- | --- |
|  | UNITED STATES DEPARTMENT OF TRANSPORTATION |
| Date | By: | Signature of USDOT’s Authorized Representative[insert name]NameFHWA [insert state] Division AdministratorTitle |