EXHIBIT 13-A SHORT FORM RIGHT OF WAY CERTIFICATION LOCAL ASSISTANCE PROJECT

(Off-State Highway System Project)

	NAME OF THE LOCAL PUBL	IC AGENCY
NOTE: This form is intended for projects R/W acquisition, relocation assistinvolvement, and the ONLY Utili involvement is limited to utility contains the contain	ance, have NO railroad ity Relocation	Project ID
For each item below, except Item option most suitable to your proje option directs you to use Exhibit 1 Short Form is not applicable to you	ct. If the chosen 13-B, please stop. This	Project Location
		General Description
Right of way has been a acquisition of real prop	of way is required. All proposed acquired in accordance with appli	work is within existing right of way. icable policy and procedure covering the possession, right to enter, and required permits.
·	OPERATING RAILROAD FA	ACILITIES
Right of Way but does	not require the adjustment of rails	d the proposed work, which is within their road facilities. The necessary clauses will be hecked, please use Exhibit 13-B.
of railroad facilities. The and/or equipment to adj	work, which is within the railroade railroad, or its contract forces,	eded, the Public Utilities Commission) has d right of way and does require the adjustment will provide the necessary labor, materials v clauses will be placed in the contract special 3-B.
3. MATERIAL SITE(S)		
None required.		
Material site(s) required	d. If this box is checked, please	use Exhibit 13-B.

4.	DISPOSAL SITE(S)					
	None required.					
	Disposal site(s) required. If this box is checked, please use Exhibit 13-B.					
5.	STATUS OF REQUIRED UTILITY RELOCATION (Check all that apply)					
	No relocation required, therefore Buy America requirements do not apply. Existing utilities located within project limits are shown on Project Plan.					
	Project is not covered by NEPA document; therefore, Buy America requirements do not apply.					
	Utility Agreements are not required on this project; therefore, Buy America requirements do not apply.					
	Utility involvement is limited to adjusting UTILITY COVERS (manhole cover, water valve cover, and box lids) to grade and said work is compliant with all terms and conditions under MAP-21 including Buy America requirements. If this box is checked, please complete page 5 of this form entitled "Utility Cover Adjustment Summary" and provide a copy of the Specific Authorization if federally participating.					
	All utility work (other than the adjustment of utility covers) has been completed. If this box is checked, please use Exhibit 13-B.					
	All utility work (other than the adjustment of utility covers) will be completed by a stated date prior to award of the contract. If this box is checked, please use Exhibit 13-B.					
	All necessary arrangements have been made for the completion of all remaining utility work (other than the adjustment of utility covers) required to be coordinated with project construction. Arrangements have been made with the owners of all utility encroachments which will remain within the right of way of the project so that adequate control of the right of way will be achieved. If this box is checked, please use Exhibit 13-B.					
	Utility facilities (other than the adjustment of utility covers) will be relocated by the Project's Contractor under bid items. If this box is checked, please use Exhibit 13-B.					
6.	RIGHT OF WAY CLEARANCE					
	There are no improvements or obstructions located within the limits of this project.					
	All right of way clearance work has been completed and there are no improvements or obstructions remaining within the right of way area required for construction. If this box is checked, please use Exhibit 13-B.					
	All necessary arrangements have been made for remaining right of way clearance work to be undertaken and completed as required for proper coordination with the construction schedule. If this box is checked, please use Exhibit 13-B.					
7.	AIRSPACE AGREEMENTS					
	There are no airspace lease properties within the limits of this project.					
	All necessary arrangements have been made with airspace lessee(s) and/or in Contract Provisions to minimize conflicts between lessee's activities and contractor's operations. If this box is checked, please use Exhibit 13-B.					
	Airspace lease has been cancelled. If this box is checked, please use Exhibit 13-B.					
	Other (If this box is checked, please use Exhibit 13-B)					

8.	COMPLIANCE WITH RELOCATION ASSISTANCE PROGRAM REQUIREMENTS				
	Compliance was not required as there were no displacements for this project.				
	Occupants who have not yet moved from the right of way will be protected against unnecessary inconvenience and disproportionate injury or any action coercive in nature. If this box is checked, please use Exhibit 13-B.				
	LPA has complied with all the steps relative to the relocation advisory assistance and payments as required by applicable policy and procedure, and no person has been required to relocate without at least a 90 day written notice. If residential relocation was involved, all individuals and/or families have been relocated to decent, safe and sanitary housing, or the LPA has made replacement housing available to the displacees. If this box is checked, please use Exhibit 13-B.				
9.	COOPERATIVE AGREEMENTS				
	None Required.				
	Agency Agreement No. (If checked, please attach a copy)				
10.	ENVIRONMENTAL MITIGATION				
	No environmental mitigation parcels are required for this project.				
	All environmental mitigation parcels on this project have been acquired. If this box is checked, please use Exhibit 13-B.				
	Acquisition of environmental mitigation parcels is ongoing. If this box is checked, please use Exhibit 13-B.				

11. CERTIFICATION

I hereby certify the right of way on this project as conforming to 23 CFR 635.309(c)(1) and all terms and conditions under MAP-21, including Buy America requirements. The project may be advertised with contract award being made at any time.

12. INDEMNIFICATION BY LOCAL AGENCY

This Local Public Agency agrees to indemnify, defend, and hold harmless the Department of Transportation (Caltrans) from any and all liabilities which may result in the event the right of way for this project is not clear as certified. LPA shall pay from its own non-matching funds, any costs which arise out of delays to the construction of the project because utility facilities have not been removed or relocated, or because rights of way have not been made available to LPA for the orderly performance of the project work.

LOCAL PUBLIC AGENCY	CALTRANS ACCEPTANCE
Project ID:	The undersigned Caltrans Official has reviewed this Right of Way Certification as
Authorized Resolution No.:	to form and content. Based on the review of
Dated:	the documents submitted, the Certificate is accepted on behalf of the local public agency. It remains the sole responsibility of the local public agency to ensure compliance with the Uniform Act.
	Accepted as to form and content:
Ву:	By:
Title:	Title:
Date:	Date:

Distribution:

- 1) Local agency completes this form, signs and sends it to the DLAE.
- 1) DLAE sends a copy to District Right of Way Local Programs Coordinator, keeps a copy for his/her files, and sends the signed original back to the local agency.

UTILITY COVER ADJUSTMENT SUMMARY

Items to be disclosed on this summary include: Covers of utility facilities, either **publicly owned** (by City/County and other public agencies, including the project sponsoring agency) or **privately owned** that services the general population. Utility covers of facility that directly services the street/roadway operation (such as an electric pull box, which services streetlight and traffic signals) do not require disclosure on this form.

a) PHYSICAL COVER ADJUSTMENTS PERFORMED BY OWNER

Notice # & Notice Date	Utility Agreement Date	Owner	Liability % Owner/LPA	Type of Facility	Encroachment Permit #	Federal Participation Yes (Y)* No (N)

^{*}Include copy of Specific Authorization

b) UTILITY COVER ADJUSTMENTS WILL BE PERFORMED BY PROJECT CONTRACTOR

Bid Item#	Notice # & Notice Date	Utility Agreement Date	Owner	Liability % Owner/LPA	Type of Facility	Federal Participation Yes (Y)* No (N)

^{*}Include copy of Specific Authorization

c) FEDERAL PARTICIPATION

Yes	□ No	The adjustments comply with the 23 CFR 645.119 and the R/W Utility Relocation process in Chapter 14 of the Local Assistance Procedures Manual (LAPM)
Yes	□ No	These adjustments are required as the direct result of the proposed construction activities and the local agency is legally liable to pay for the adjustment
Yes	□ No	Adjustments specified for Federal participation have received FHWA Specific Authorization (Exhibit 14-C, LAPM) approval? If "no", not federally participating.

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