

REIMBURSEMENT CLAIM REQUEST

WHEN TO USE:

Use when requesting a Reimbursement for Eligible Work. Please note:

- Estimates must have already been approved by NCDOT
- Signed contracts must be on file in EBS

STEPS FOR SUBMITTING A REQUEST FOR REIMBURSEMENT CLAIM

1. From the Home Screen, click on **New Reimbursement Claim**
2. Search Project by **TIP No**
3. Select **Claim Form** from the Results List
4. Complete Claim Form

Many fields will be pre-populated based on Project information from Agreement. Please complete all blue-shaded fields.

- **UNIQUE INVOICE NUMBER:** *assigned by the LGA to the Reimbursement Request (see page 3).*
- **INVOICE PERIOD:** *the period of time for which the LGA is requesting reimbursement.*
- **DBE/MBE/WBE subcontractor payments made:** *indicate yes or no and attach DBE- IS form, even if no subcontractors are paid.*
- **FINAL INVOICE:** *indicate yes or no*

REIMBURSEMENT TABLE

- **TOTAL EXPENSES:** *Total expenses incurred by the LGA.*
- **INELIGIBLE EXPENSES:** *any work that is not a reimbursable expense (ex. Sales tax, extra work by consultant/contractor)*
- **ELIGIBLE EXPENSES:** *Calculated based on the two previous entries.*
- **REIMBURSABLE:** *Percent amount of Eligible Expenses to be reimbursed, per agreement.*

5. When Form is completed, hit **SAVE** or **SUBMIT**:

- **SAVE**

A Claim Form with number is generated. Use this if additional information or attachments need to be collected.

To SUBMIT the saved form, use "EDIT REIMBURSEMENT CLAIM" from the main menu (see directions on page 6)

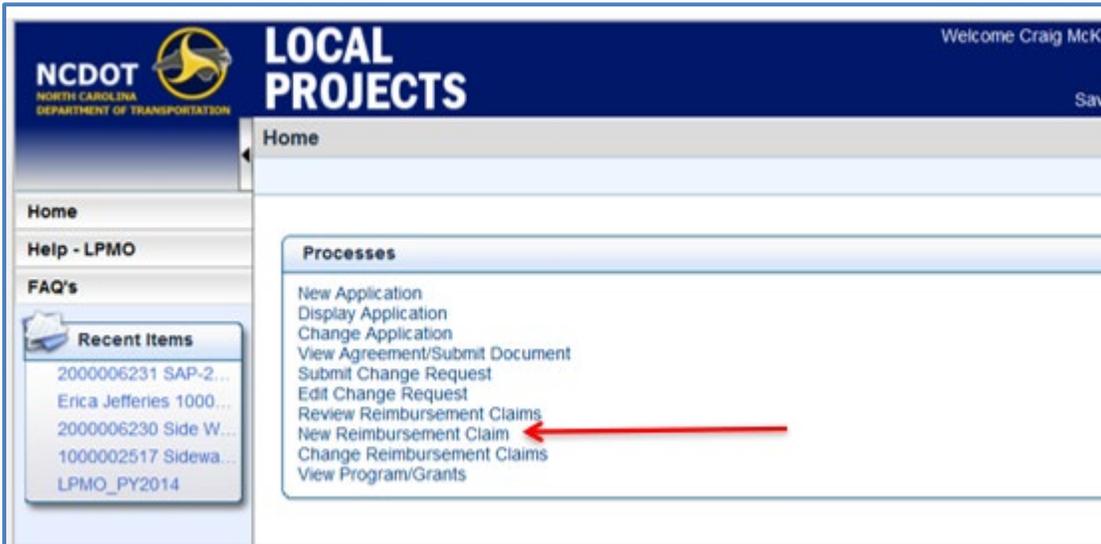
- **SUBMIT**

Once submitted, attach **documentation** to support reimbursement claim.

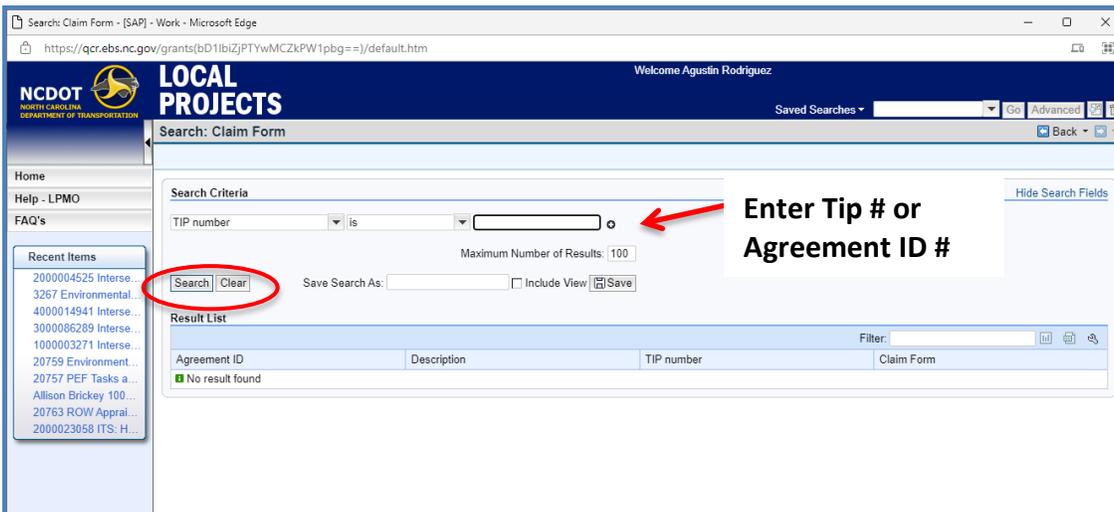
- a. Request for Reimbursement Cover Letter
- b. Copies of invoices and/or pay applications
- c. Evidence of payment made (cancelled check, EFT transaction, bank statement)
- d. DBE-IS Form (write N/A or NONE across form if no payments made)

6. A workflow task is initiated and goes to NCDOT for review.

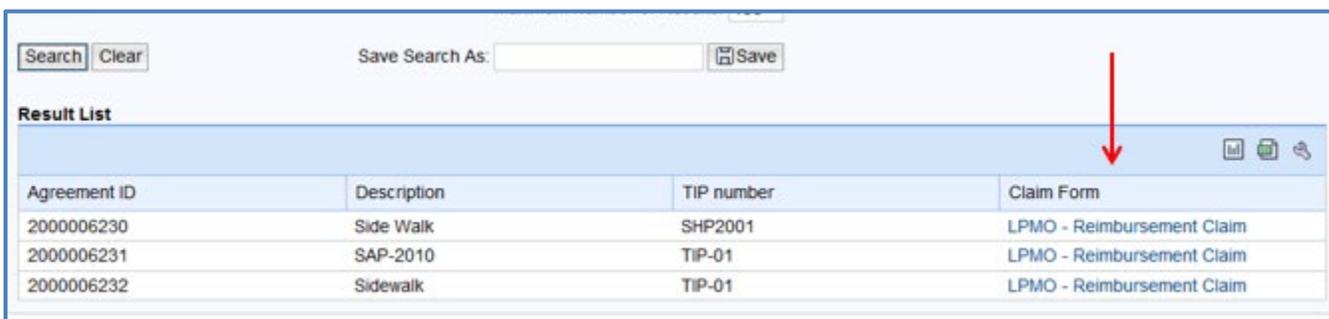
1. Select New Reimbursement Claim to submit invoices:



2. Enter TIP# or if resubmitting, change the search criteria to search on Claim #. Click Search:



3. Select CLAIM FORM from Results List:



4. Complete Claim Form (Blue Fields)

- **UNIQUE INVOICE NUMBER:** assigned by the LGA to the Reimbursement Request (*see note below*)
- **INVOICE PERIOD:** the period of time for which the LGA is requesting reimbursement.
- **DBE/MBE/WBE subcontractor payments made:** Indicate yes or no and attach DBE- IS form, even if no subcontractors are paid.
- **FINAL INVOICE:** indicate yes or no

NOTE: EACH CLAIM MUST HAVE A UNIQUE INVOICE NUMBER

CREATING A UNIQUE INVOICE NUMBER:

The LGA will need to create a Unique Invoice Number (UIN) for each claim form. Forms can no longer have just 1, 2, 3 etc. as a number.

If the LGA does not already have a unique number for the claim, use the date of the cover letter in YYYYMMDD format with no punctuation. For additional tracking, use the TIP Number and/or Letters/Numbers.

EXAMPLE:

Claim submitted January 30, 2021 for Project C-4685, and it is the second claim submitted for the project. The invoice number could read: 20210130C468502

Do not add spaces or special character between the numbers.

Complete Claim Form (continued)

REIMBURSEMENT TABLE

DBE/MBE/WBE sub-contractor vendor payments made during this invoice period?* Yes No Final Invoice:* Yes No

Code	WBS	Description	Start Date	Authorized To Date (\$)	Reimbursements To Date (\$)	Total Expenses This Period (\$)	Ineligible Expenses This Period (\$)	Eligible Expenses This Period (\$)	Reimbursable This Period (\$)	Remaining Budget (\$)
L002	51008.2.1	ROW – Right of Way	09/26/2017	\$529,600.01	\$392,987.20			\$0.00		\$136,612.
L003	51008.3.1	CON – Construction	10/21/2019	\$2,620,400.	\$0.00			\$0.00		\$2,620.40
Total				\$3,150,000.	\$392,987.20	\$0.00	\$0.00	\$0.00	\$0.00	\$2,757.01

- **TOTAL EXPENSES:** Total expenses incurred by the LGA
- **INELIGIBLE EXPENSES:** any work that is not a reimbursable expense (ex. Sales tax, extra work by consultant/contractor)
- **ELIGIBLE EXPENSES:** Calculated based on the two previous entries
- **REIMBURSABLE:** Percent amount of Eligible Expenses to be reimbursed, per the agreement.

Example: The contractor was paid \$50,000, which includes \$2,000 in sales taxes.

- **TOTAL EXPENSES:** \$50,000
- **INELIGIBLE EXPENSES:** \$2,000
- **ELIGIBLE EXPENSES:** \$48,000
- **REIMBURSABLE:** \$38,400 (\$48,000 x 80%)

DBE/MBE/WBE sub-contractor vendor payments made during this invoice period?* Yes No Final Invoice:* Yes No

Code	WBS	Description	Start Date	Authorized To Date (\$)	Reimbursements To Date (\$)	Total Expenses This Period (\$)	Ineligible Expenses This Period (\$)	Eligible Expenses This Period (\$)	Reimbursable This Period (\$)	Remaining Budget (\$)
L002	51008.2.1	ROW – Right of Way	09/26/2017	\$529,600.01	\$392,987.20			\$0.00		\$136,612.
L003	51008.3.1	CON – Construction	10/21/2019	\$2,620,400.	\$0.00			\$0.00		\$2,620.40
Total				\$3,150,000.	\$392,987.20	\$0.00	\$0.00	\$0.00	\$0.00	\$2,757.01

AUTHORIZING SUB-RECIPIENT SIGNATURE

The information supplied in this claim is true to the best of my knowledge, and conforms with the terms and conditions of this agreement.

Name:* Date: (mm/dd/yyyy)*

5. When Form is complete, click SAVE or SUBMIT.

Check box for Agency Authorization and type name and date.

SAVE OR SUBMIT

DBE/MBE/WBE subcontractor vendor payments made during this invoice period? Yes No

Final Invoice: Yes No

Code	WBS	Description	Start Date	Authorized To Date (\$)	Reimbursements To Date (\$)	Total Expense This Period (\$)	Ineligible Expenses This Period (\$)	Eligible Expenses This Period (\$)	Reimbursable This Period (\$)	Remaining Budget (\$)
L002	51005.2.1	ROW – Right of Way	09/26/2017	\$529,600.00	\$392,987.20			\$0.00		\$136,612.80
L003	51008.3.1	CON – Construction	10/21/2019	\$2,620,400.00	\$0.00			\$0.00		\$2,620,400.00
Total				\$3,150,000.00	\$392,987.20	\$0.00	\$0.00	\$0.00	\$0.00	\$2,757,012.80

AUTHORIZING SUB-RECIPIENT SIGNATURE

The information supplied in this claim is true to the best of my knowledge, and conforms with the terms and conditions of this agreement.

Name: Date: (mm/dd/yyyy)

SAVE allows edits to reimbursement claim if additional information or documentation needs to be collected.

- A Claim Form with a number (300xxxxxx) is generated
- Print or save the Claim form as a PDF

Confirmation

Your Claim has been **Saved** successfully. - **Reimbursement ID - 3000267518**

Please click browse to upload files as attachments No file chosen

- Attach documents by selecting “CHOOSE FILE” and navigating to your hard drive.
 If SAVE is selected, use **EDIT REIMBURSEMENT CLAIM** from MAIN MENU to SUBMIT

MENU

- New Agreement Application
- Edit Agreement Application
- View Agreement Application
- Submit Document/View Agreement
- Display Documents
- New Change Request
- Edit Change Request
- New Reimbursement Claim
- Edit Reimbursement Claims ← **Edit Reimbursement Claim**
- View Reimbursement Claims
- View Program/Grants

EBS QUICK GUIDE

SUBMIT if all information is correct and backup documentation is ready to be attached

- Same options above are available
- Attachments for backup documentation
 - a. Request for Reimbursement Cover Letter (see link) must accompany claim, unique invoice number must appear on cover letter, along with remittance address ([Local Projects Administration \(ncdot.gov\)](http://ncdot.gov))
 - b. Copies of invoices and/or pay applications.
 - c. Evidence of payment made (cancelled check, EFT transaction, bank statement)
 - d. DBE-IS Form (write N/A or NONE across form if no payments made)

NOTE: Documents can be attached individually with appropriate names, or documents may be combined into one file and attached.

6. CLAIM Workflow is generated and reviewed by NCDOT

Once Submitted, a Workflow Task is generated and the Claim goes to LPMO for initial review

- Check TRANSACTION HISTORY on Agreement to confirm Claim Status:

Transaction History					
Transaction ID	Description	Document Type	Created On	Created By	Status
3000267518	Hope Mills Lake Park Multi-Use Path	CRM Grantor Claim	09/11/2023	Stephen Kessinger	In Process by LGA

- If Claim shows “in process by LGA”, then it is not submitted. Go back to Edit Reimbursement Claim and follow steps above to submit claim.

Transaction History					
Transaction ID	Description	Document Type	Created On	Created By	Status
3000267518	Hope Mills Lake Park Multi-Use Path	CRM Grantor Claim	09/11/2023	Stephen Kessinger	Submitted

- If Claim shows “Submitted”, then you have successfully submitted the workflow. At this point, if you still need to attach documentation, click on the Transaction ID, add attachments and save when complete.

When NCDOT reviews, the following three options will occur:

- a. REJECTED – If NCDOT rejects the claim, a reason will be provided. The LGA cannot re-submit the same claim. A new claim will need to be created.
- b. RETURNED – If NCDOT returns the claim, LGA will use “edit reimbursement claim” to make changes, provide additional information, and re-submit.
- c. APPROVE – if NCDOT approves the Claim, the requester will be notified via e-mail.

NOTE: If a “Change Request” (request for funding authorization or supplemental agreement), is active in the EBS Portal the system will not accept the “New Reimbursement Claim”. It will be necessary to wait until that activity has cleared the EBS Portal.