

**Cape Cod Commission Bicycle Rack Program: Reimbursement Eligibility Form**

All reimbursement requests must be submitted to the Cape Cod Commission by **December 31, 2022**.

To receive reimbursement, please complete this form and submit, along with the additional required information listed as follows:

1. Take a digital photograph of each location **before** and **after** installation.
2. Sign a **Reimbursement Eligibility Form (Form #3)** attesting that equipment and locations are eligible.
3. Complete the **Bicycle Equipment Reimbursement Form (Form #4)** and the **Bicycle Equipment Installation Location Form (Form #5)** and include copies of all vendor invoices, highlighting those items for which you seek reimbursement.
4. Submit **Form #3, Form #4, and Form #5, before and after photographs, and proof of payment** by mail or by e-mail to the Cape Cod Commission. Please submit documents & photographs to Maria McCauley, Finance and Administration Manager, at [mmccauley@capecodcommission.org](mailto:mmccauley@capecodcommission.org) or mail to Cape Cod Commission, 3225 Main Street, Barnstable, MA 02630.
5. The Cape Cod Commission will process reimbursement requests for all approved items within 60 days.

Name of the Entity: \_\_\_\_\_

Name of the Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

I hereby certify that the items for which we seek reimbursement:

- Were acquired through the Cape Cod Commission Bicycle Rack Program from one of the approved vendors;
- Are items eligible for reimbursement under the guidelines of the program;
- Were installed on publicly controlled land in a location with permanent public access;
- Were installed in an appropriate location, as described in the program guidelines and according to the manufacturer’s installation instructions.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_