



Kentucky Transportation Cabinet
Division of Right of Way & Utilities
UTILITY/RAIL AGREEMENT STATEMENT OF CHARGES

TC 69-008
Page 1 of 2
Rev. 7/10/2024

INSTRUCTIONS

- Company shall fully complete this form.
Submit form, Company invoice and documentation of charges electronically in KURTS.
Partial Invoices may be submitted once per month.
Final invoices shall be submitted within 1 year of completion of work to be viable for payment, per agreement and statute.
Records of invoiced work shall be retained and are subject to audit, as defined in the referenced agreement.
If you do not have access to KURTS, MAIL TO: Utilities: Highway Chief District Engineer ATTN: District Utility Agent
(find at: http://transportation.ky.gov/district.htm)
Rails: Rail Coordinator, KYTC, Division of Right of Way and Utilities, 200 Mero St., Frankfort, KY 40622

GENERAL ROAD PROJECT INFORMATION (This section is as defined in the Agreement as executed)

Location / Description:

County (if more than one, use page 2):
Route/Road Name:
Project Description:

Fiscal:

Federal Number:
State Number:
Item or DOT Number:

COMPANY INFORMATION

Company Name:
Company Contact Name:
Company Address (as identified in the Agreement):

Remit to:

Same as agreement (replace if different)

Company Invoice Number (if applicable):

DATE INVOICED WORK BEGAN (not to precede State Letter date):

DATE INVOICED WORK COMPLETED:

INVOICING INFORMATION:

PARTIAL FINAL BILL NO.
AMOUNT OF THIS BILL
TOTAL AMOUNT OF PREVIOUS BILLS
TOTAL BILLS TO DATE

Agreement Start Date:
Agreement/DO Number:
Statute/Agreement Type:
Agreement/DO Amount:
Change Order Total:
TOTAL:

COMPANY CERTIFICATION

I certify, to the extent applicable: the attached invoice is a true statement of costs incurred by our Company in constructing the most economical type of facilities in the new location as will satisfactorily meet the same service requirements as the old facilities in the old location on subject project; all materials for which we seek reimbursement adhere to federal Buy America provisions as required; and all costs listed are eligible for payment by KYTC.

Signature:

Date:

FOR CABINET USE ONLY:

Checked: District Utility Agent/Rail Coordinator Date

Recommended/Approved: Chief District Engineer/ Utilities Branch Manager Date

Approved: Director, Division of Right of Way & Utilities Date



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NOTE: If the amount of this bill applies to more than one county the correct distribution **MUST** be shown on the following lines.

| COUNTY: | ACTUAL | PERCENTAGE |
|---------|---------|------------------|
| | AMOUNT: | (if applicable): |

**** This section is only needed if any information is entered on page 2 ****

COMPANY VALIDATION:

I accept the certification terms on page 1 in reference to the work performed as defined on page 1.

Signature:

Date: