

## FY2026 DLT - Application Checklist

Section	Description	Complete	Schedule
A	Completed Standard Form 424	<input type="checkbox"/>	
B	Site Worksheet	<input type="checkbox"/>	
C	Executive Summary of the Project, including Publicly Releasable Project Description	<input type="checkbox"/>	
D	Scoring Criteria Documentation D-1 Rurality D-2 Economic Need D-3 Service Needs and Benefits	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
E	Matching Requirements	<input type="checkbox"/>	
F	Scope of Work 1 - Specific Activities to be performed 2 - Who will carry out activities 3 - Timeframes for accomplishing objectives 4 - Budget for all capital expenditures	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
G	Financial Information and Sustainability	<input type="checkbox"/>	
H	Statement of Experience	<input type="checkbox"/>	
I	Telecommunications Systems Plan 1 - Capabilities & Description of Telecommunications Equipment 2 - Complete Listing of all Telecommunications Equipment 3 - Description of the consultations with telecommunications carriers 4 - A diagram or map of the project's service area displaying an overlay of the proposed distance learning or telemedicine system 5 - Sites (hub, hub/end-users, or end-users that will participate in the project and where equipment is located). Note: Any non-tribal applicant with end-user sites on tribal lands must include Tribal Consent (see Application Guide for additional details)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
J	Compliance with Other Federal Statutes and Regulations	<input type="checkbox"/>	
	1. Certificate Regarding Flood Hazard Area Precautions ( <b>check appropriate box below</b> )  The Project is <b>not</b> located in a 100-yr Flood Plain. No flood insurance is required.  The Project is located in a 100-yr Flood Plain. <b>See attached statement</b> regarding who is or will be providing the flood insurance.	<input type="checkbox"/> <input type="checkbox"/>	J-1
	2. Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 Certification	<input type="checkbox"/>	J-2
	3. Certificate Regarding Architectural Barriers	<input type="checkbox"/>	J-3
	4. Non-Duplication of Services Certificate	<input type="checkbox"/>	J-4
K	Evidence of Legal Existence and Authority to Contract with the Federal Government 1. Evidence of Legal Existence 2. SAM.gov registration with Financial Assistance General Certifications & Representations	<input type="checkbox"/> <input type="checkbox"/>	
L	Environmental Impact and Historic Preservation Provide a narrative to include the following: 1 - Project Description 2 - Project Location(s) 3 - Proposed NEPA class of Action	<input type="checkbox"/>	
M	Consultation with State Director for each state where there will be end-users	<input type="checkbox"/>	

By signing this certification, you are agreeing to the language in schedules J-1, J-2, J-3, and J-4, as shown in the application guide. If a box checked in Section J-1 above requires an attachment, the attachment is provided with this application. If you have any questions about your application, please contact RUS prior to submitting this application and certification.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
Name of Entity