



**CVAP
(Clean Vessel Assistance Program)**

www.efc.ny.gov/CVAP

LABOR COST DETAIL & AFFIRMATION REPORT FOR IN-HOUSE LABOR

Facility/Project Name: _____

NOTE: In addition to details below, you must include:

1. A payroll document that shows the employee(s) normal rate of pay
2. A copy of the employee(s) paycheck, payroll stub, or other documentation that shows the employee(s) received payment during the periods listed below

Date	Employee Name	Hours worked on CVAP project	Rate/hour	Work Performed

Total # of Employees Claimed: _____ Total In-House Labor Costs Claimed: \$_____

Check here if additional pages are attached describing employee activity for this project.

Affidavit

I certify that the persons listed on the above log and any attached documents, performed work that was directly related to the Clean Vessel Assistance Program pumpout project and that hours worked and costs claimed are accurate to the actual work being performed in the completion of this project, and in accordance with all requirements of the Funding Agreement between the Applicant and New York State Environmental Facilities Corporation.

Authorized Representative: _____ **Date:** _____

Signature

Print Name: _____