



RTAP Request

Grant number _____

Authorization for an Individual Transit Assistance
Program Grant, FTA 5311(b)(2)

Air, Rail and Transit Office
Secretariat
South Dakota Department of Transportation (SDDOT)

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SDDOT Finance & Management authorizes:

Agency name _____

Address _____

to request reimbursement from SDDOT for RTAP trip expenses.

Trip purpose _____

Traveler names _____

Estimated departure date, time _____ Return date, time _____

RTAP Grant Budget

Cost Item	Requested Amount	Approved Amount	Description
Travel* ☒ Project ☐ Personal			
Lodging*			
Meals			
Registration*			
Other*			
Total	0.00		

**Receipts are required for commercial travel, lodging, tuition/registration and other expenses, excluding meals. Provide copies of the itinerary and each boarding pass.*

Submitted by: _____

Approved by Jess Marlow/Terri Geigle/Jack Dokken

Charge to _____ Effective date of award _____

	Required travel times			
Meals	In State	Out of State	Leave Before	Return After
Brkfast	6.00	10.00	5:31 AM	7:59 AM
Lunch	14.00	18.00	11:31 AM	12:59 PM
Dinner	20.00	28.00	5:31 PM	7:59 PM
Total	40.00	56.00		

Lodging Allowance			Mileage
In-state	All Year	\$113.00	\$.76- personal vehicle
Deadwood/ Spearfish	June-Sept	\$168.00	
Hot Springs	June-Sept	\$161.00	
Rapid City	June-Aug	\$173.00	
Out- Of-State		\$175.00	\$.35 – personal vehicle if state vehicle available

Return to or contact
Jess Marlow - Jess.Marlow@state.sd.us - 605-773-7038
Terri Geigle - Terri.Geigle@state.sd.us - 605-773-3014

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You may also print a copy and mail to the address located above.