

CDOT Flood Recovery Office Timesheet Certification Form for Single Employee

Project Number:		
Subaccount Number:		
Agency:		
Employee:		
Supervisor:		
Project Location/Site #:		
Reimbursement Request #:		
Task(s)*:		
	*If additional tasks were performed, please sheet and attach to this form.	e include on a separate
I certify that the employee labor hours and costs included herein are true and accurate for the noted project and tasks. Employee signatures to certify hours worked are retained by the Consultant/Local Agency.		
Supervisor Signature:		Date:



EXPLANATION OF FIELDS FOR TIMESHEET CERTIFICATION FOR SINGLE EMPLOYEES		
Field	Explanation	
Project Number	Project Number assigned by CDOT in the Task Order (C XXX-XXX or M YYY-YYY)	
Subaacount Number	Subaccount is a five digit Number assigned by CDOT in the Task Order, normally found in () after the Project Number	
Agency	Agency responsible for time verification/certification.	
Employee	Person(s) whose timesheets are being certified; performed work on the project.	
Supervisor	Supervisor of the employee.	
Project Location/Site #	Roadway number, bridge number, or project number/description.	
Reimbursement Request #	Sequential number of Request for Reimbursement submittal.	
Task(s)	Specific task(s) performed by the employee. This field should include details like: cost estimating, review plans, consultant oversight, construction oversight, project management, operating equipment (back hoe), inspections, traffic control, etc.	
Supervisor Signature	Certifies firsthand knowledge of work performed.	

CDOT Form TCF 1 Explanation 9/14