

(Local Public Agency Letterhead)

(Date)

Ms. Ja'Nece Gibson
LAP Program Manager
GDOT/Office of Program Control
One Georgia Center
600 West Peachtree St. NW
Atlanta, Ga 30308

RE: LAP Compliance Plan

Ms. Gibson,

(Local Public Agency) would like to remain within compliance with the approved LAP Certification by notifying GDOT of a change within personnel.

GDOT District: (#)

GDOT DPPL Rep.: (Name)

LPA Fulltime Responsible Charge: (Name/Title)

LPA Alternate Responsible Charge Rep: (Name/Title)

Employee leaving/departed: (Name/Date)

Employee joining/added: (Name/Date)

LAP course completed/attending

- PDP: (Date completed or date of anticipated class participation)
- LAP: (Date completed or date of anticipated class participation)
- Title VI: (Date completed or date of anticipated class participation)
- ROW: (Date completed or date of anticipated class participation)
- Procurement: (Date completed or date of anticipated class participation)

List active project(s) impacted (P.I. Nos.) and their current phase status, next milestone and Project Manager:

Sincerely,

Attachments:

Revised Organizational Chart (with names and titles)

Training Certificates of completed courses