

# Conflict of Interest and Ethics Disclosure Form for LPA/Consultants

Local Federal-aid Transportation Projects

**Project Owner (Local Government):** City of Gahanna

**Project Name:** FRA Wynne Ridge Court

**PID (if programmed):** 116417

As the LPA/Consultant (Municipal Engineer, Engineer of Record and/or 3<sup>rd</sup> Party Consultant providing Owner's Representative Services) for the above local federal-aid transportation project, I have:

1. Reviewed the ethics and conflict of interest information found in Ohio's Local Let Manual of Procedures, and for Safety funded projects [ODOT's Safety Analysis Guidelines Section 6.0](#).
2. Reviewed the Ethics and Conflict of Interest laws, including 23 CFR § 1.33, 23 CFR 636.116 and Ohio Revised Code sections 102.03, 2921.42 and 2921.43.

And, to the best of my knowledge, determined that, for myself, any owner, partner or employee, with my firm or any of my sub-consulting firms providing services for this project, including family members and personal interests of the above persons, there are:

- ☐ No real or potential conflicts of interest or ethics issues.  
If no conflicts have been identified, complete and sign this form and submit with executed LPA Agreement and/or project application.
- ☐ Real conflicts of interest or the potential for conflicts of interest or ethics issue.  
If a real or potential conflict of interest or an ethics issue has been identified, please attach a summary describing the nature of the conflict or issue, and provide details of Consultant's proposed mitigation measures (if possible). Complete and sign this form and send it, along with all attachments, to the ODOT District LPA Manager, along with the executed engineering services contract. For safety funding applications, submit this form and summary with the application.

## LPA – Person in Responsible Charge

Project Owner (LPA): \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Consultant – Municipal Engineer

☐ Applicable ☐ Not Applicable

Firm Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Engineer of Record

Firm Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## 3rd Party Consultant

☐ Applicable ☐ Not Applicable

Firm Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_