

**OVERALL WORK PROGRAM AGREEMENT (OWPA)
Tehama County Transportation Commission**

FY: 2026/27

OWP Board Approval Date: 05/18/2026

Amendment #: _____

- The undersigned signatory hereby commits to complete this Fiscal Year (FY) the Annual Overall Work Program (OWP), which has been approved by the Department of Transportation (Caltrans), Federal Highway Administration (FHWA) and Federal Transit Administration (FTA) and is attached as part of this OWPA.
- All of the obligations, duties, terms and conditions set forth in the Master Fund Transfer Agreements (MFTA) that was executed January 1, 2025 through December 31, 2034 with Caltrans are incorporated by reference as part of this OWPA for this FY.
- Match amounts, sources, and eligibility for Regional Transportation Planning Funds listed below, must be in compliance with Federal, State, or contractually agreed upon requirements.
- Subject to the availability of funds this FY OWPA funds encumbered by Caltrans include, but may not exceed, the following:

CFDA #	Funding Source	MIN Required Match %	CURRENT FY Allocated Programmed Amount	CARRYOVER Programmed Amount	Toll Credit Match	Local/In-Kind Match	TOTAL Estimated Expenditures
20.205	FHWA PL (Toll Credit)	11.47%					\$0.00
20.205	FHWA PL (Local/In-kind Match)	11.47%					\$0.00
20.205	FHWA PL (CS LM Waiver)	0.00%					\$0.00
20.505	FTA 5303 (Toll Credit Match)	11.47%					\$0.00
20.505	FTA 5303 (Local/In-kind Match)	11.47%					\$0.00
20.505	FTA 5304	11.47%					\$0.00
20.205	FHWA SPR	20.00%					\$0.00
	RPA	0.00%	\$404,500.00	\$0.00			\$404,500.00
	RPA Grants	0.00%					\$0.00
	SHA Grants	11.47%					\$0.00
	SB1 Formula	11.47%					\$0.00
	SB1 Competitive	11.47%					\$0.00
	SHA-Climate Adaptation	11.47%					\$0.00
	Total Programmed Amount			\$0.00	\$0.00	\$0.00	\$404,500.00

Agency Certification of Programmed Funds	District Approval of Programmed Funds
The Agency certifies that programmed amounts are representative of eligible and	The District has reviewed and approves the OWPA as submitted. Programmed
<i>Jessica Riske-Gomez</i> _____	_____
03/04/2026	_____
Authorized Signature Date	Authorized Signature Date
Jessica Riske-Gomez	_____
Printed Name and Title	Printed Name and Title

(HQ Department of Transportation Use Only)					
The total amount of FEDERAL funds encumbered by this document are: \$ _____					
Fund Title: _____	Item: _____	Chapter Statute: _____	Fiscal Year: _____		
The total amount of STATE funds encumbered by this document are: \$ _____					
Fund Title: _____	Item: _____	Chapter Statute: _____	Fiscal Year: _____		
Encumbrance Details:					
Fed/State	CT	Acct Line #	Project ID	Phase/Fund	Amount \$

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and expenditure purpose stated above.

Signature of Department of Transportation Resources/Accounting Officer

Date