



Arizona Department *of* Housing

CDBG Administration Handbook

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CHAPTER 1. ADOH AND THE STATE CDBG PROGRAM.....1

State CDBG Program (HUD 24 CFR Part 570).....1

Community Development and Revitalization/CDBG Contact Person1

Steps in the Funding Agreement Process1

- *Threshold Review*1
- *Pre-Funding Assessment Letter*.....2
- *Funding Award Letter*2
- *Funding Agreement (Contract) Execution*3

CHAPTER 2. FILE AND RECORDKEEPING REQUIREMENTS.....5

Introduction.....5

Funding Agreement (Contract) Files.....5

Other Files.....6

Records Accessibility.....7

Records Retention7

Document Requirements7

CHAPTER 3. FINANCIAL MANAGEMENT.....9

Introduction.....9

The Basics of Financial Management.....9

- *Accounts*.....10
- *Internal Controls – Personnel*10
- *Internal Controls – Procedures*10
- *Miscellaneous Procedures*10
- *Property Management*11
- *Allowable and Allocable Costs*11

CDBG Financial Management File Requirements.....13

- *Ledgers*.....13
- *Payroll Records*14
- *Equipment Use*.....14
- *Separate CDBG Checking Account*.....14
- *Financial Forms*.....15

CDBG Timely Request for Reimbursement Policy18

- *Timely Disbursement*18
- *Program Income*19
- *Property Management*22

Use of Real Property and Equipment23

- *Sale or Disposition*23

- *The Property Management System* 23
- *Audit Requirements* 24
- *Annual Audit Requirements* 25
- *Report Submission Requirements* 25
- Attachment I** 26
- Allocable Costs and Cost Allocation Plans (Indirect Costs)** 27

CHAPTER 4. CIVIL RIGHTS, AFFH AND 504 / ADA REQUIREMENTS 39

- Introduction to Civil Rights, Fair Housing, 504 / ADA** 39
- Civil Rights** 39
 - *Compliance Documentation* 41
 - *UGLG Employment* 41
 - *Program Benefits and Services* 42
 - *Relocation/Displacement* 43
 - *Housing* 43
- Affirmatively Furthering Fair Housing (AFFH)** 43
 - *Federal Laws and Regulations* 44
 - *Discriminatory Actions* 44
 - *State Laws and Regulations* 45
 - *HUD Regulations for State CDBG Programs* 45
 - *Federally Funded Housing and Housing Services* 45
 - *Compliance with AFFH Requirements* 45
 - *Minimum Requirements* 46
- Technical Assistance and Financial Resources** 48
 - *Technical Assistance* 48
 - *Financial Resources* 48
 - *Documenting AFFH Actions* 49
 - *Monitoring of AFFH Actions* 50
 - *504 / ADA Requirements* 50
 - *Funding For Section 504 Compliance* 50
 - *General Requirements* 51
 - *Additional Requirements for Larger Communities* 52
 - *Housing and Section 504* 52
 - *Non-Profit/Sub-recipient Facility and Services* 53
 - *Technical Assistance Resources For 504/ADA* 53

CHAPTER 5. RE-ALLOCATION, FUNDING AGREEMENT REVISIONS, AMENDMENTS 54

Allocation and Reallocation of Funds54

- *De-obligation of Funds*54
- *Recapture of Funds*.....54
- *Funding Agreement Revisions*.....55

Public Participation.....58

- *Requirements*.....58
- *Timeline*.....59

Termination or Suspension of the Funding Agreement.....59

CHAPTER 6. DESK AND ON-SITE MONITORING 64

Monitoring Visits and Technical Assistance64

- *Introduction*64
- *Technical Assistance*64
- *Types and Frequency of Monitoring*64
- *Sub-recipient Monitoring*69

Desk Monitoring Forms70

On-Site Monitoring Forms94

Sub-recipient Monitoring Forms.....137

UGLG Sub-recipient Monitoring Form (page 1 of 3)138

CHAPTER 7. PROJECT REPORTS 149

Performance Report/Schedule of Completion (PR)149

Project Status Reports (PSR).....149

CHAPTER 8. CLOSEOUT REPORTS 152

Introduction to Closeout Reports152

When to Closeout152

- *Zero Balance*152
- *De-obligated Funds*152
- *Funding Agreement Expiration*152
- *Funding Agreement Termination for Cause or Convenience*152

Due Date Extensions.....153

- *Special Circumstances*.....153

Preparing the Closeout153

- *Closeout Report Checklist*154
- *Certifications*154
- *Draft Closeout Reports*.....154

Administrative Closeout154

CDBG Program Review.....154

- *Closeout Report Acknowledgment*154
- *Consistency Review*.....154
- *Page Numbering*155
- *Outstanding Monitoring Issues*.....155
- *On-Site Monitoring Visit*.....155
- *Audits and Closeout Report Approval*156
- Records Retention**156
 - *Administrative Closeout*156
- Closeout Report Approval**156
 - *Signature*156
 - *Special Conditions*156
 - *Mailing*156
- Nomination for CDBG Award**.....156
- Sample Closeout Forms**.....158
- CHAPTER 9. FILE CHECKLISTS** 174
- Sample File Checklists**175
- CHAPTER 10. PROCLAMATION AND RESOLUTIONS** 188
- Sample Proclamation and Resolutions**.....189

CHAPTER 1. ADOH AND THE STATE CDBG PROGRAM

The Arizona Department of Housing (ADOH) is the state agency in Arizona responsible to the U.S. Department of Housing and Urban Development (HUD) for administering the small cities Community Development Block Grant (CDBG) Program in Arizona. The Community Development and Revitalization division within ADOH performs daily administrative oversight of the CDBG Program.

State CDBG Program (HUD 24 CFR Part 570)

The basis for the State of Arizona CDBG Program comes from HUD 24 CFR Part 570. Refer to www.hud.gov or http://www.access.gpo.gov/nara/cfr/waisidx_07/24cfr570_07.html for full text.

Community Development and Revitalization/CDBG Contact Person

The ADOH CDBG Program assigns a Community Revitalization Program Specialist staff person to each community or county unit of general local government (UGLG) receiving CDBG funds. Once a Funding Agreement (contract) is entered into, the Program Specialist assigned to the UGLG will be responsible for providing any necessary or requested technical assistance and general project oversight. Program Specialists will also monitor the UGLGs for program compliance.

All communications related to each Funding Agreement should occur through the assigned Program Specialist. However, ADOH CDBG staff members work as a team, and if the assigned Program Specialist is not available at the time that assistance is needed, any other Program Specialist can be called upon for assistance.

With the application process complete, it is time to finalize the official Scope of Work and execute a Funding Agreement with ADOH. The Funding Agreement execution process is outlined below.

Steps in the Funding Agreement Process

- *Threshold Review*

ADOH will review each application in accordance with Sections 2 and 3 of the CDBG Application Handbook for eligibility and threshold requirements. Additionally, applications for State Special Project (SSP) and Colonias Set Aside (Colonias) are competitively scored according to the criteria outlined in the Notice of Funding Availability announcing the SSP or Colonias application round.

- *Pre-Funding Assessment Letter*

Regional Account Applications

If a Regional Account (RA) application is found to have deficiencies, ADOH will inform the UGLG of such in a pre-funding Application Deficiency Letter. The applicant will have thirty (30) days to correct deficiencies. If deficiencies are not corrected in thirty (30) days, the application will receive no further consideration for funding. The allotted funding for the denied application will be returned to the SSP Account for future award in a competitive application round.

Competitive SSP or Colonias Applications

Applications for SSP or Colonias funding rounds are competitive and therefore no application deficiency corrective period is provided. SSP or Colonias applications that are found to have completeness or threshold deficiencies will not be given further consideration for funding.

Once an SSP or Colonias application is determined to meet all required eligibility and threshold criteria it will be eligible for scoring. Projects will be selected for funding through a competitive process in which applications are scored by a rating and ranking system that includes project need; per capita benefit; effectiveness; cost reasonableness; project readiness; leveraged funds; past performance; capacity and potential for direct/indirect benefits stemming from the project. The highest scoring applications will be awarded until the particular funding is exhausted.

- *Funding Award Letter*

Regional Accounts

Once a Regional Account application is determined to meet the requirements of Sections 2 and 3 of the CDBG Application Handbook the UGLG's Chief Elected Official (CEO) is notified in writing with a Funding Award Letter of the grant award with a copy to the CDBG Program Specialist. The Funding Award Letter will detail any contingencies that must be satisfied prior to the issuance of Funding Agreements for execution. These contingencies may include but are not limited to the following:

- completion of the ERR;
- bringing other Funding Agreements into compliance; or
- securing additional funding.

The UGLG will have thirty (30) days to accept the award and submit any contingencies outlined in the Award Letter. In all cases Funding Agreements will not be entered into until Environmental Reviews (as applicable) are completed for each proposed project. UGLGs will

have one hundred-twenty (120) days to complete an Environmental Review after which the Funding Award Letter will be rescinded and the application will receive no further consideration. The allotted funding for the denied application will be returned to the SSP Account for future award in a competitive application round.

SSP Account and Colonias Set Aside

After determining the ranking of SSP or Colonias competitive applications, the UGLG's Chief Elected Official (CEO) for the applications selected for award are notified in writing with a Funding Award Letter with a copy of the letter also provided to the CDBG Program Specialist. The Funding Award Letter will contain contingencies that must be satisfied prior to ADOH entering into a Funding Agreement with the UGLG. The UGLG will have thirty (30) days to accept the award and submit the contingencies outlined in the Award Letter.

- *Funding Agreement (Contract) Execution*

After the award is accepted and all contingencies are satisfied, ADOH prepares two (2) original Funding Agreements for signature. **The format and content of the Funding Agreement has been approved by the Attorney General's Office and must not be altered by the UGLG.** The Funding Agreement is entered into between the UGLG and ADOH and forms the basis for the use of CDBG funds by the UGLG. The Funding Agreement incorporates the application, Resolutions and Certifications submitted with the application; the Consolidated Plan (Con Plan) and updates to the Con Plan thru the annual Action Plan; handbooks; and any other program requirements. The main components of the Funding Agreement are the Scope of Work; Performance Report / Schedule of Completion; Budget; Request for Payment; and the Certification and Other Requirements Relating to Title I Assistance.

The Funding Agreement is assigned an ADOH Funding Agreement number (e.g. 102-13). The ADOH number becomes the identification number for all contacts between ADOH and the UGLG. The numbers before the dash signify the Funding Agreement number. The numbers after the dash (e.g. thirteen (13)), signifies the State Fiscal Year in which the Funding Agreement was generated. As a general rule, if there is a thirteen (13) after the Funding Agreement, these are federal FY2012 CDBG funds.

The two (2) original Funding Agreements, along with the F-1, F-2, CD-1 and GAO-618, are then mailed to the UGLG for signature. *All signed documents must be returned to ADOH within thirty (30) days.* The UGLG's legal counsel must review and approve the Funding Agreement as to form. **It is then signed by the UGLG's Chief Executive Officer unless another person is authorized to sign grant documents as stated in the Resolution Authorizing Submission of an Application.**

Once returned to ADOH, the Funding Agreements are signed by the director of ADOH (or a designated representative). The Funding Agreement becomes effective on the date it is signed by the ADOH official or on a previously negotiated date, if applicable.

A fully executed original will be return mailed to the UGLG.

CHAPTER 2. FILE AND RECORDKEEPING REQUIREMENTS

Introduction

The file and record keeping requirements for ADOH are based on HUD requirements and are intended to:

- ensure compliance with HUD requirements;
- facilitate record review during monitoring visits and audits;
- facilitate program continuity if there should be a change in staff in the community; and
- establish consistency so all UGLGs maintain records in a uniform manner.

The basic philosophies behind ADOH Funding Agreement files and general record keeping requirements are:

- document federally funded activities and compliance with federal regulations;
- program transparency regarding the use of public funds; and
- document the benefit provided through the investment of federal funds.

Funding Agreement (Contract) Files

All recipient UGLGs must establish separate files for **EACH** CDBG Funding Agreement. Although UGLGs may determine the physical form of each file, all files must be clearly marked to indicate the specific Funding Agreement number, project name and section (e.g. Civil Rights, Environmental Review, etc.). File monitoring forms for CDBG Administration are in this Handbook. ADOH strongly suggests recipient UGLG's set up their files according to the established order on the monitoring forms. Each Funding Agreement **must** have the following files:

- Application, Funding Agreement, and Closeout File
- Correspondence File
- Financial Management and Audits File
- Environmental Review Record (ERR) File
- Quarterly Performance Reports File (ADOH may require more frequent submissions at their discretion)

The following files are required based on the specific activities conducted by the UGLG:

- Procurement and Agreements File (a separate file for each such agreement for professional services or material/equipment)
- Construction Contract File (one (1) for each prime contractor)
- Labor Standards File (one (1) for each prime contractor with separate files for each subcontractor)
- Acquisition/Relocation Files (one (1) general file to describe the program guidelines and individual files for each parcel of property to be acquired and family to be relocated)
- Housing Rehabilitation Files:
 - One (1) general file to describe the program guidelines
 - Individual files for each beneficiary household
- Centers/Facilities
- Sub-recipients
- Section 3 (contract specific)
- Job Creation/Retention
- Status Reports (for non-profit and public service-oriented projects)

Other Files

The following files must also be maintained and kept separate from the Funding Agreement files.

- 504/ADA
- Affirmatively Furthering Fair Housing (AFFH) (by calendar year)
- Civil Rights/EEO File
- Limited English Proficiency (LEP)
- Section 3 (non-contract specific: by federal fiscal year to include qualified S-3 businesses, residents, complaints, etc.)
- Public Participation
- Housing Rehab Applicants (if conducting a Rehab program)
- Grievance

Records Accessibility

Agency: ADOH, HUD and the Comptroller General and their duly authorized representatives shall have access to any pertinent books, documents, papers and records of the UGLGs and their recipients (contractors and subcontractors) to make audits, examinations, excerpts and transcripts.

Public: CDBG Funding Agreement records are considered open to the public. Exceptions include records that contain personal information about private citizens, such as family size and income relating to housing rehabilitation; projects subject to special confidentiality requirements (e.g. domestic violence shelters); and profit/loss information relating to a CDBG loan program. Personal identifiers (names, social security numbers, etc.) should be kept **confidential** and filed separate from other documents. If a party wishes to review these records, a written Freedom of Information Act (FOIA) request should be forwarded to HUD. HUD will then request the records from the UGLG and release them as HUD records with identifiers deleted.

In all instances, UGLGs should consult with legal counsel regarding public access to records to ensure both privacy rights and public information rights are equally protected. Copies of any legal opinion rendered by the UGLG's legal counsel should be placed in that particular file. Should an UGLG wish to limit access of CDBG records (other than limits allowable under federal or state law), it must notify ADOH in writing of its intent and the reason for such a limitation. The CDBG Program's written approval is required before placing such a permanent limit on public access to these files. The request for limitation and the CDBG Program's response must be maintained in the particular file.

Records Retention

Records are defined as all items relating to a CDBG Funding Agreement. All CDBG records must be retained for at least three (3) years after the grant contract Closeout between HUD and ADOH has been approved. This means that after all of the grants awarded under a particular federal funding year are completed and expended, ADOH must submit a close out for the funding year to HUD for their approval. Upon HUD's approval ADOH will then notify the UGLG's with projects from the closed out funding year of the record retention requirements. Microfilmed or electronically scanned records may substitute for all original documents.

Document Requirements

Original Documents/Original Signature Required:

- F-1 (Designation of Deposit of Grant Funds)
- F-2 (Authorized Signature Card)
- F-3 (Funding Agreement Attachment D - Request For Payment Summary Sheet)
- CD-1 (Authorized Signatures for all Administrative Requirements)

- GAO-618 (Vendor Authorization for Direct Deposit)
- Form 1 (Application Cover Page)
- Form 1-R (Revised Application Cover Page)
- ERR Form E-12 (Request for Authority to Use Grant Funds and Certification)
- Closeout Form C-6 (CDBG Closeout Certifications)

Copies, Emailed-Versions or Faxed Documents

Copies, e-mailed versions or faxes of documents are acceptable to meet most other CDBG Program requirements. When a copy of a document is acceptable, the original document must be kept in the appropriate grantee file.

CHAPTER 3. FINANCIAL MANAGEMENT

Introduction

Although all CDBG Program requirements are incorporated into the Funding Agreement, special note should be taken of the Financial Management requirements. The UGLG must adhere to federal, state and local laws and ordinances as they pertain to financial management. Local policies and procedures must not prohibit any of the actions required by ADOH.

Financial Management requirements or guidelines are established in several Office of Management and Budget (OMB) Circulars, Treasury Circulars and HUD regulations:

- OMB Circular A-87: Cost Principles for State and Local Governments
- OMB Circular A-110: Grants and Agreements with Institutions of Higher Education, Hospitals and Other Nonprofit Organizations
- OMB Circular A-122: Cost Principles for Nonprofit Organizations
- OMB Circular A-133: Audits of State and Local Governments
- HUD Regulations at 24 CFR Subpart 85, Uniform Administrative Requirements for Grants . . . to state, local . . . governments” (also known as the “Common Rule”) and Subpart 570

Please consult this website for these and other OMB Circulars: <http://www.whitehouse.gov/omb/>

The Basics of Financial Management

The UGLG’s financial management system must comply with OMB Circular A-87 by ensuring that:

- financial records can be audited based on Generally Accepted Accounting Principles (GAAP);
- internal controls are effective and protect CDBG funds;
- procedures exist for determining costs are allowable, reasonable and allocable; and
- the UGLG has a system to review its financial management and cost procedures.

Additionally, the UGLG must maintain adequate control and accountability over all funds, property, and other assets. UGLGs and their sub-recipients must safeguard all such property and ensure that it is used solely for authorized purposes. ADOH will monitor for compliance with all requirements.

- *Accounts*
 - Each CDBG Funding Agreement must be identified by an internal name/number. When applicable, leverage accounts must be identified for each Funding Agreement.
 - UGLG records must show the account name/number with the financial institution where CDBG funds are ultimately deposited. This information must be consistent with Form F-1. (**Note:** Separate checking accounts for CDBG funds are *not recommended*.)
 - CDBG funds should be deposited in a non-interest bearing account unless all payments are on a reimbursement basis. (The local government may keep interest amount of up to \$100 per year for administrative expenses. §570.489(c)(2). However, if interest over \$100 per year is accrued unintentionally on advanced CDBG funds, the UGLG must return all such interest to ADOH as soon as possible for return to the U.S. Treasury.)
 - The UGLG must have a chart of accounts that will be used for the CDBG funds.
 - UGLGs are encouraged to use minority banks (i.e., those at least fifty-one percent (51%) owned by minorities, to include women) whenever possible.

- *Internal Controls – Personnel*

The UGLG must have written procedures that ensure ‘separation of duty’ and address the following:

- The identity of the person(s), by title, assigned to approve expenditures for each CDBG Funding Agreement.
- The identity of the person(s), by title, responsible for disbursement of funds for each CDBG Funding Agreement.
- The identity of the person(s), by title, who is responsible for maintaining CDBG financial records.

- *Internal Controls – Procedures*

The UGLG must have written procedures that address the following:

- Procedures for internal control.
- Cash disbursement procedures.

- *Miscellaneous Procedures*

The UGLG must have written procedures that address the following:

- Identify the person, by title, responsible for providing written instructions regarding the UGLG’s financial management procedures to employees who handle financial records.

- The procedures should indicate the frequency and nature of training provided to employees involved with the financial management system.
- The records should include an organizational chart for the finance department.

- *Property Management*

For any property, equipment or other fixed assets purchased or improved with CDBG funds:

- The UGLG should have a fixed assets ledger.
- All items on the ledger should be tagged.
- A property inventory should be conducted at least every two (2) years.
- The records should identify, by title, the person responsible for ensuring the inventory list is the same as the actual list of equipment/property.

- *Allowable and Allocable Costs*

All costs charged to a CDBG Funding Agreement must be *allowable* as defined below:

- eligible as stated in the *CDBG Application Handbook*;
- included in the funding agreement;
- necessary (consistent with and intrinsic to the implementation of the activities as described in the funding agreement);
- reasonable (documented by a procurement process, appraisals, or other procedure to ensure reasonable prices);
- not a general expense required to carry out the overall responsibilities of the UGLG;
- not prohibited under state or local laws or other regulations;
- be accorded consistent treatment through the application of generally accepted accounting principles;
- not be allocable to or included as a cost of any other federally funded program in either the current or a prior period;
- be net of all applicable credits; and
- must be allocable (can be traced to a particular eligible cost, either *direct* or *indirect*).

Direct Costs are those that can be easily identified for a specific activity (e.g. charges by a contractor, a housing specialist's time, sand and gravel purchased for a street paving project).

Indirect Costs are those for a common or joint purpose which benefit more than one (1) activity and are not readily assignable to any such activity (e.g. copy machine costs when persons funded by different programs use the machine).

Unallowable costs are listed in the stated in the *CDBG Application Handbook* and also include:

- Bad debts.
- Contributions to a contingency fund (e.g. operating and maintenance account).
- Contributions and donations.
- Entertainment.
- Fines and penalties.
- Salaries and other expenses of the chief executive of a political subdivision and the council or board of supervisors.
- Interest and other financial costs.
- Payments to another federally funded program to cover costs of that program.

In order to be “**allowable**” under a federal award, costs must meet several criteria:

- The cost must be reasonable for the performance of the award and allocable to it.
- The cost must conform to any limitations or exclusions of the OMB circular or the award itself.
- Treatment of costs must be consistent with the policies and procedures that apply to both federally financed activities and other activities of the organization.
- The cost must be determined in accordance with GAAP.
- Cost may not be included as a cost of any other federally financed program in the current or prior periods.
- The cost must be adequately documented.

Costs are considered to be “**reasonable**” if they do not exceed that which a prudent person would incur under similar circumstances. In determining the reasonableness of a cost, consideration must be given to:

- Whether the cost is of the type generally recognized as ordinary and necessary for the operation of the UGLG or sub-recipient for the performance of the award.
- The restraints or requirements imposed by such factors as: generally accepted sound business practices; arms length bargaining; federal and state laws and regulations; and terms and conditions of the award.

- Market prices for comparable goods or services.
- Whether the individuals concerned acted with prudence in the circumstances, considering their responsibilities to the organization, its members, employees and clients, the public at large and the government.
- Significant deviations from the established practices of the organization which may unjustifiably increase the award costs.

UGLGs and sub-recipients must document that their procurement costs are reasonable. These records must include, at a minimum, the basis for contractor selection and the award cost/price.

“Allocable” addresses the question *“Where do we put the cost?”* It pertains to the relative benefit received from incurring the cost. Costs are considered to be allocable to a Federal award if they fall into any one (1) of the three (3) categories:

1. Costs that are incurred specifically to implement activities allowable in the award (direct costs).
Example: The UGLG runs a homeowner rehabilitation program. Costs associated with taking in applications, inspecting the properties, writing costs estimates and the actual costs associated with making repairs are considered to be direct costs.
2. Costs that benefit both the award and other work and can be distributed in reasonable proportion to the benefits received (shared indirect costs).
Example: The UGLG develops an informational brochure describing funds available from both HOME and CDBG programs it is running. The costs must be allocated to both programs.
3. Costs that are necessary to the overall operation of the organization, but for which no direct relationship to any particular program or group of programs, can be shown (overhead indirect costs).
Example: The City Manager directly manages staff throughout the City.

CDBG Financial Management File Requirements

A Financial Management and Audits File Checklist are provided in this handbook as guidance for complying with CDBG Program financial management requirements. The UGLG’s financial management file must contain the documents indicated in the checklist or indicate the location of such.

- *Ledgers*
 The number of CDBG ledgers maintained by an UGLG will vary depending on the number of open contract activities. At a minimum, the UGLG must maintain:
 - A general CDBG ledger that encompasses all financial activity related to each open grant.

- A separate ledger for each activity that reflects expenditures, obligations and current balance.
- A leverage ledger (if applicable) that includes the total amount of leverage from all sources, and itemizes each disbursement, if such is not included in the general ledger. Examples of these ledgers can be found in this handbook.

- *Payroll Records*

Payroll records, such as time cards, must be maintained for all UGLG staff, volunteer and offender labor funded in any part with CDBG or leverage funds. Timesheets must be signed by the employee/volunteer/offender and his/her supervisor. In those instances where a worker cannot be located or refuses to sign, the supervisor must note such on the timesheet. Sample forms are included in this handbook (Forms F-5, F-6, F-7 and F-8). Other time records that document the same information as the CDBG forms may also be used.

CDBG funded employees must be paid consistent with the UGLG's personnel policies and cannot receive an increase in pay based solely on the additional funding source (CDBG). There must be documentation in the UGLG's personnel records regarding job descriptions and classifications, pay scales, and fringe benefits to support payroll records.

- *Equipment Use*

UGLGs may be reimbursed for the use of equipment on a CDBG project provided the rate is justifiable. An UGLG can justify such rates through:

- FEMA rates – consult the FEMA website at <http://www.fema.gov/schedule-equipment-rates>; or
- follow a standard small purchase procurement process and obtain and document three (3) verbal or written quotes to verify actual local rates.

The UGLG must document the type of equipment and the number of hours used on a daily basis, with such documentation signed by a supervisor. The form F-6 may be used to document this information.

- *Separate CDBG Checking Account*

Separate CDBG checking accounts are not recommended. However, if a community has already established such a system, it is essential that all records pertaining to the account be maintained in the CDBG financial management file.

- *Financial Forms*

All CDBG Program forms that begin with the letter “F” designate a form used in the financial management of the Funding Agreement. The UGLG will receive these forms along with the Funding Agreement. Sample financial forms are located at the end of this chapter.

Form F-1: Designation of Deposit of Grant Funds

Each UGLG must complete Section I and Section II. The UGLG should keep one F-1 for its files.

Section I: The UGLG should provide the name and address of the local government; the name of the financial institution where funds will be deposited; and the account number.

Section II: The UGLG should record the account number by which CDBG funds will be recorded and the account number for any leverage funds. The form must then be signed by an executive officer.

UGLGs that wish to have warrants (checks) deposited directly into their bank accounts must complete the State of Arizona’s GAO-618 ACH Vendor Authorization form.

Form F-2: Authorized Signature Card

This form certifies which individuals are authorized to sign Requests for Payment. No payment requests will be honored until ADOH has a completed F-2 on file. People are identified as signatories, by name, rather than position. Thus, if the finance director is identified as the person authorized to sign and he/she resigns, the new finance director cannot authorize a Request for Payment until a new F-2 is submitted to the CDBG Program.

It is recommended those authorized to request payment be familiar with the program (e.g. the grant administrator, community development director or town clerk). The person authorizing and certifying the signatures should be an appropriate authority such as the mayor, a council member or the town/city/county manager. This person cannot be one of those authorized to sign requests for payment. Further, that person must sign and date the form *after* the designees to verify his/her knowledge of who was authorized.

Form F-3: (Funding Agreement Attachment D) Request for Payment Summary Sheet

Form F-3, Request for Payment Summary Sheet, is used to request funds from the CDBG Program. Separate requests must be submitted for each Funding Agreement and each request must include an F-4 (Funding Agreement Attachment D, page 2) Itemized Payment Statement.

The F-3 must be complete and signed by person(s) authorized on the F-2. Generally, ADOH will review requests for payment within five (5) working days and the UGLG will be contacted if there are any problems. An UGLG should allow approximately two (2) weeks for receipt of CDBG funds. However, if documents that require desk monitoring are not submitted prior to or along with the F-3, reimbursement to the UGLG may be delayed pending such approval. To ensure a timely reimbursement, UGLGs are encouraged to submit documents for desk monitoring as soon as possible. Refer to the chapter regarding monitoring for additional guidance.

Note: Written approval for pre-award obligations must be provided by ADOH for any funds obligated prior to the issue date of the E-13 Authority to Use Grant Funds. Refer to the *Environmental Review (ERR) Handbook* for additional information. This handbook can be found at the ADOH website at: <http://www.azhousing.gov/ShowPage.aspx?ID=387&CID=16>.

Note: An F-4 Itemized Payment Statement and copies of all timesheets, invoices and checks for payment of contractors, supplies or services MUST accompany all Requests for Payment, F-3. The following list identifies documents that must be submitted for approval (desk monitoring) either before or with an F-3 that requests funds for the items indicated. Please note that based on a variety of circumstances (e.g. a new UGLG CDBG contact person, a history of prior compliance concerns, etc.), ADOH may request additional documents before approving an F-3.

Item Funds are Requested For:	Item to be Reviewed & Approved
ALL	Funding Agreement must be fully executed F-1, F-2 and CD-1 signatory forms Special Conditions of the Funding Agreement that may be applicable before funds are released. Performance Reports ERR Documentation (clearance received prior to execution of Funding Agreement)
Professional Services	Request for Proposals/Qualifications Draft Contract
Construction Materials and/or Equipment	Procurement
Item Funds are Requested For:	Item to be Reviewed & Approved
Construction	LS-2 and/or LS-3 as applicable. LS-4/5 for each contractor and each subcontractor

	LS-9/10 for each contractor and each subcontractor Draft bid notice, Request for Proposal, contract
Volunteer/Offender Labor	Volunteer Labor Plan LS-16(s) for each volunteer IGA between UGLG and State, County, Federal Agency for Offender Labor
Land Acquisition	Acquisition Forms, including ACQ-8 & response; URA Documentation Purchase Offer Appraisal Review Appraisal
Commercial or Industrial Rehabilitation	Commercial/Industrial Rehabilitation Guidelines (CRGs) Contractor Certification for each Contractor and/or Subcontractor
Public Service	All applicable non-profit documentation

An UGLG may request or ADOH may choose to waive the submission requirements of certain documents (requests for proposal, contracts, bids, etc.) if the UGLG:

- o has a history of compliance on prior CDBG Funding Agreements;
- o has several activities with similar components (e.g. a water improvement activity and a park improvement activity) and submits documentation for one (1) activity that verifies compliance; or
- o provides a written statement that the document (such as Housing Rehabilitation Guidelines) has not been changed since last approved by the CDBG Program.

Payment requests are compared to the application forms to ensure accuracy. If a discrepancy is found, the request will not be approved until adequate documentation is provided. For example:

- o The request indicates payment to a contracted engineer but the application states that city staff will perform engineering.
- o The request is for funds to reimburse the Town for force account labor but the application indicates that all work is to be contracted.
- o The request is for funds to pay an appraiser but the application does not mention acquisition.

Form F-4: (Funding Agreement Attachment D, page 2)

All F-3 forms must include a completed F-4 Itemized Payment Statement.

Based on OMB Management Circulars, federal regulations, and Treasury Circular 1075, it is an ADOH policy that an UGLG request funds only to cover reimbursement of its actual cash expenditures.

In some circumstances ADOH may approve an UGLG's request for funds to cover cash needs if the UGLG will be disbursing those funds within ten (10) days from the anticipated date of receipt of the ADOH warrant. To document compliance with this policy, the UGLG must submit evidence of disbursement of requested funds prior to submitting the next Request for Payment form.

CDBG Timely Request for Reimbursement Policy

As stated in ADOH's Funding Agreement language, "... Recipient's right to incur expenses under Agreement shall cease upon expiration of Agreement. All requests for reimbursement on expenditures made prior to expiration of Agreement must be requested within sixty (60) days after expiration. Unless expressly authorized by ADOH in writing, expenditures not requested within the sixty (60) day period after expiration of Agreement shall be disallowed and all funds shall be reclaimed by ADOH."

During the life of the Funding Agreement, the UGLG will be allowed ninety (90) days in which to submit requests for reimbursement on expenditures. Expenditures that have aged over ninety (90) days will not be eligible for reimbursement from CDBG funds.

For questions regarding pre-award application costs, contact the ADOH Contract Specialist assigned to your UGLG.

- *Timely Disbursement*

Section 205.4 of Treasury Circular 1075 establishes the basic standards for timely disbursement as follows:

- Cash advances to a recipient organization shall be limited to the minimum amounts needed and shall be timed to be in accord only with actual, immediate cash requirements of the recipient organization in carrying out the purpose of the approved program or project. The timing and amount of cash advances shall be as close as is administratively feasible to the actual disbursements by the recipient organization for direct program costs and the proportionate share of any allowable indirect costs.
- Cash advances made by primary recipient organizations (e.g. State) to secondary recipient organizations (e.g. UGLGs) shall conform to the same standards of timing and amount as apply to cash advances by Federal program agencies to primary recipient organizations.

It is ADOH policy that timely disbursement for CDBG funds is ten (10) days from the UGLG's receipt of the ADOH warrant. If circumstances are such that not all of the requested funds will be disbursed within this period, the UGLG must contact their ADOH Contract Specialist immediately for further instructions.

- *Program Income*

Program Income (PI) is defined as:

Gross income of \$35,000 or more, received by a state, UGLG or sub-recipient that was generated from the use of CDBG funds. When income is generated by an activity that is partially assisted with CDBG funds, the income shall be prorated to reflect the percentage of CDBG funds used.

Sources of Program Income

Funds generated from an activity assisted with CDBG funds are considered PI whether earned by the UGLG or a sub-recipient. PI sources may include:

- Proceeds from the sale or lease of real property purchased or improved with CDBG funds.
- Proceeds from the disposition of equipment purchased with CDBG funds.
- Net income from the use or rental of real or personal property acquired, constructed or improved with CDBG funds (normal operation and maintenance costs are not considered PI).
- Payments of principal and interest on loans made with CDBG funds. Such loans include housing and commercial rehabilitation and economic development loans.
- Proceeds from the sale of loans or obligations secured by loans made with CDBG funds.
- All interest earned on PI to include PI held in a CDBG Program pre-approved Revolving Fund. (Any PI earned as a result of a RF retains its identity as PI regardless of the amount earned during any calendar year. However, these funds may be used for another activity with prior approval from the CDBG Program.)
- Interest earned on CDBG funds held in an approved rehabilitation activity account at a lending institution, capitalized by a CDBG lump sum deposit.
- Funds collected through special assessments made against properties owned and occupied by households NOT of low and moderate income, where the special assessments are used to recover all or a part of the CDBG portion of a public improvement.
- Gross income paid to an UGLG or a sub-recipient from the ownership interest in a for-profit entity acquired in return for CDBG assistance.

- Even if an UGLG has no open CDBG Funding Agreements, it is possible to generate PI from the use of funds from prior CDBG Funding Agreements.

Use and Retention of Program Income

An UGLG or sub-recipient may retain and utilize PI if it meets the following requirements and with prior approval from the CDBG Program.

Note: All PI earned by an UGLG or sub-recipient must be disbursed **prior** to the UGLG or sub-recipient requesting additional funds from ADOH for the **same** activity.

- It has the administrative capacity to use the PI in full compliance with all CDBG Program requirements; AND
- The PI will be used to continue the same activity which generated the income; OR
- The PI is part of a pre-approved revolving fund, such as for housing rehabilitation; OR
- ADOH has approved another use for the PI prior to the execution of the Funding Agreement (This would normally be a special condition in the Funding Agreement.); OR
- The amount of PI earned during the calendar year is less than \$35,000.
- All PI must be deposited in federally insured institutions.

UGLGs are encouraged to earn the maximum amount of interest possible consistent with the design of its activities. For example: PI is to be used to continue a housing rehabilitation program which has a significant backlog of applicants. These funds must be readily available for additional housing rehabilitation assistance, and could appropriately be placed in an interest-bearing checking account. If repayments significantly exceed HR loan applications, some portion of the PI could reasonably be deposited in a higher yield, short term Certificate of Deposit, while yet maintaining a sufficient amount of funds in a readily accessible checking account. The deposit of PI must, of course, also conform to the UGLG's own ordinances and other financial management requirements.

Program Income Requirements

All PI is subject to the requirements governing the use of CDBG funds as illustrated below:

- Before using PI to fund a new activity, the UGLG must comply with applicable citizen and public participation requirements.

- Activities funded with PI must meet one (1) of the three (3) national objectives (e.g. low mod benefit). If PI is used to provide housing rehabilitation assistance, the family must meet CDBG definition of low or moderate income.
- New activities funded with PI will require an environmental review record.
- All construction activities funded in whole or in part with PI are covered by federal labor standards provisions in the same manner and to the same degree as the original CDBG funds.
- Property acquired or persons relocated using PI is subject to the Uniform Relocation Act and/or the displacement requirements.

Program Income Returned to the CDBG Program

PI that does not meet the requirements of the section above must be returned to ADOH. All PI returned to ADOH will be allocated for distribution in compliance with the specific method of distribution applicable to the grant year from which the funds were generated. In general, the method of distribution requires that funds be returned to the original account or component from which it was generated (i.e. to the specific sub-account of the RA or the SSP).

Program Income and a Revolving Fund

A Revolving Fund (RF) is defined as a separate and independent set of accounts, established for a specific purpose such as economic development loans, commercial or housing rehabilitation loans, or disposition of land or buildings purchased for the purpose of resale to LM persons for housing.

If an UGLG has an RF as part of its Funding Agreement, PI earned by loan repayments to that fund cannot be expended on other activities. The UGLG must disburse PI from its RF for continuing the same activity (e.g. other loans) prior to requesting additional funds from ADOH for the RF activity. For example: Community A has an approved Housing Rehabilitation Revolving Fund in which loan repayments are deposited. At the time that Community A receives its FY 2013 Funding Agreement (#622), it has \$20,000 in its RF. Funding Agreement #622 is for \$300,000 for HR. Community A CANNOT request funds for its HR activity from #622 until it has utilized all of the funds in its RF. As additional funds are deposited into its RF from loan payments, it must utilize those funds before requesting additional money from the CDBG Program. Thus, it will need to report on the amount in its RF with each Request for Payment and request ONLY those funds over the amount in its RF.

Note: With prior CDBG Program approval, UGLGs may establish a Revolving Fund to be funded only from PI. *No CDBG funds can be used to **capitalize** a RF (except for the lump sum*

drawdown allowed in housing rehabilitation activities). ADOH approval of such a program will be based on the capacity of the community or sub-recipient to administer the RF in full compliance with CDBG Program requirements.

Program Income and Sub-recipients

A sub-recipient is defined as a public or private non-profit agency, authority or organization that implements a CDBG activity. (This does not include a contractor providing supplies, equipment, construction or services.)

UGLG agreements with sub-recipients who generate PI must specify whether the PI earned by the sub-recipient will be returned to the UGLG or retained by the sub-recipient. If retained by the sub-recipient, the agreement must specify how such funds will be used, what records will be maintained and when reports and audits will be submitted to the UGLG and the CDBG Program. All CDBG requirements apply to such funds. Additionally, the UGLG shall require the sub-recipient to use its PI prior to requesting additional CDBG funds.

Program Income Records

UGLGs must maintain records of all PI received that includes the following:

- Source of the PI: CDBG Funding Agreement number, activity number and name, other identifying information such as the loan number or land parcel.
- Amount and date of receipt.
- Date of deposit and location of depository.
- Date, amount and purpose of each disbursement.

If PI is from interest earned, records must include the date and amount of such interest earned, interest rate, and the depository of such interest.

- *Property Management*

There are three (3) types of property covered by these requirements:

1. Real property
2. Equipment
3. Supplies

Title to any of the three (3) types of property resides with the UGLG (or sub-recipient if specified in the sub-recipient agreement) during the period of the CDBG Funding Agreement.

Definitions

- *Acquired* - for property or equipment to be considered *acquired* there must be a minimum twenty-five (25) year lease.
- *Acquisition Cost* - the net price of the purchased equipment including the cost of modifications, attachments, accessories or auxiliary apparatus necessary to make the property usable for the purpose for which it was acquired. Other charges, such as the cost of installation, transportation, taxes or in-transit insurance, shall be included or excluded from the unit acquisition cost in accordance with the UGLG's regular accounting practices.
- *Equipment* - tangible, non-expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.
- *Real Property* - land, including land improvements, structures and appurtenance thereto, excluding movable machinery and equipment;
- *Supplies* - all tangible personal property other than "equipment" as defined above.

Use of Real Property and Equipment

Property or equipment acquired/improved with CDBG funds must be used for the purpose stated in the Funding Agreement for the duration of the Funding Agreement and for at least five (5) years after Closeout approval. If the UGLG or sub-recipient wishes to change the use of the property or equipment during this time period, it must receive permission from ADOH and comply with public participation requirements. The change cannot affect the national objective benefit. If the UGLG or sub-recipient wishes to change the use of the property or equipment to a non-CDBG eligible use, it must reimburse ADOH in the amount of the current fair market value of the property/equipment less any expenditures of non-CDBG funds used for the acquisition or improvements.

- *Sale or Disposition*

All proceeds from the sale or disposition of real property or equipment purchased or improved in whole or in part with CDBG funds shall be considered program income and spent by the UGLG in compliance with those requirements (see Section 7.0). This applies for the term of the CDBG Funding Agreement and five years (5) after Closeout approval.

- *The Property Management System*

The UGLG must establish a property management system (and verify that all sub-recipients establish similar systems) to ensure the safety of the property, equipment and supplies, and to prevent loss, damage and theft. The system must comply with the following minimum standards:

- There must be an identified property management officer.
- All equipment must be marked.
- Supplies (when still in boxes) should be identified as for CDBG Program.
- A physical property inventory must be conducted at least once every two years and the results reconciled with property records;
- Property records must be maintained to include:
 - ✓ A description of the property
 - ✓ A serial number or other identification number
 - ✓ The source of funding for the property (e.g., CDBG)
 - ✓ The title holder
 - ✓ Date of acquisition
 - ✓ Cost of the property
 - ✓ Amount or percentage of the CDBG funds expended for the property
 - ✓ Location of the property
 - ✓ Use and condition of the property
 - ✓ Disposition of the property to include date of disposal and sale price

There must be adequate safeguards to prevent loss, damage or theft, and a system to investigate any such incidents that do occur. This system shall be documented in the form of a written policy or procedure.

- *Audit Requirements*

Audit requirements for entities receiving federal funds are governed by the United States Office of Management and Budget (OMB). The OMB issued Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, which provides the specific audit requirements for entities receiving federal funds. This portion of the handbook is intended to summarize and serve as a guide for audit submission to the Arizona Department of Housing (ADOH). It is not all-inclusive. For specific compliance requirements, definitions, forms, etc., please refer to the OMB Circular A-133. A copy may be obtained from the official website at: http://www.whitehouse.gov/sites/default/files/omb/assets/a133/a133_revised_2007.pdf.

- *Annual Audit Requirements*

For Local Governments and Non-Profits that expend \$500,000 or more in a year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of OMB A-133.

Local Governments and Non-Profits that expend less than \$500,000 a year in Federal awards are exempt from Federal audit requirements for that year, but records must be available for review or audit by appropriate officials of the Federal agency, pass-through entity, and General Accounting Office (GAO).

- *Report Submission Requirements*

The Arizona Department of Housing (ADOH) requires that all local governments and non-profits that have expended more than \$500,000 in its fiscal year, submit a copy of their Single Audit Reporting Package. This package includes the following items:

- Financial Statements and Schedule of Expenditures of Federal Awards
- Summary schedule of prior audit findings
- Independent Auditor's report
- Corrective Action Plan that addresses findings in the current audit report

ADOH also requires a copy of any management letters issued by the auditor and responses to that letter.

If the sub-recipient has not expended more than \$500,000 and therefore is not subject to the Single Audit requirements, then ADOH requires an Audit Certification Statement on letterhead signed by the auditor or by someone authorized to do so (see Attachment I).

The reporting package or the Audit Certification letter should be submitted to the following address:

Arizona Department of Housing
Attn: Accounting
1110 West Washington Street, Suite 310
Phoenix, AZ 85007

Attachment I

**Federal Funds
Recipients**

Official Letterhead

Audit Certification Statement

I hereby certify that the city/town/county/non-profit _____ was not required to have a Single Audit conducted for the FY _____ and that I have the authority to sign this Certification.

Name

Title

Signature

Date

Allocable Costs and Cost Allocation Plans (Indirect Costs)

“A cost is allocable to a federal award if it is treated consistently with other costs incurred for the same purpose in like circumstances and if it:

1. is incurred specifically for the Funding Agreement;
2. benefits both the Funding Agreement and other work and can be distributed in a reasonable proportion to the benefits received; or
3. is necessary to the overall operation of the organization, although a direct relationship to any particular cost objective cannot be shown.

Indirect costs are those that have been incurred for common or joint objectives and cannot be readily identified with a particular final cost objective.” See OMB Circular A-122 at:

http://www.whitehouse.gov/omb/circulars_a122_2004.

These statements highlight the difference between costs allocated under a cost allocation plan and an indirect cost plan. Direct costs are allocable under Item 1 above, allocable direct costs are under Item 2 above, and indirect costs are under Item 3.

Indirect costs are only those costs which cannot be readily identified to a final cost objective (i.e. those costs that do not connect back to the end result). Examples of indirect costs include salaries of department managers, depreciation or use allowances, personnel costs and accounting. It is the UGLG’s responsibility to show that the cost is related to carrying out the objectives set forth in the grant agreement (i.e. to show an incurred expense). By definition, indirect costs cannot be tied back to the objectives in the grant agreement; the only way to make these costs allocable is through an approved indirect cost allocation plan.

A cost allocation plan does not need cognizant agency approval while an indirect cost allocation plan does. Cost allocation plans (see Item 2 above) allocate costs that benefit both the Funding Agreement and other work and can be distributed in reasonable proportion to the benefits received. For example: A plan to allocate an electricity bill based upon square footage and direct labor costs may be reasonable if the UGLG can show that electricity use was reasonably necessary to carry out the objectives, electricity was actually used to carry out the objectives, the bill resulted at least in part from that usage, and the bill was paid by the UGLG. Since there is a direct tie between the cost (electricity bill) and the objective, the cost is not an indirect cost but an allocable direct cost.

If indirect costs were approved as part of the UGLG’s administration budget in the CDBG application, the UGLG must provide a copy of its Cost Allocation Plan at the beginning of each fiscal year for which it has a CDBG Funding Agreement as well as a copy of the Plan’s approval by the cognizant agency.



**Community Development Block Grant (CDBG) Program
DESIGNATION OF DEPOSIT OF GRANT FUNDS (F-1)**

Funding Agreement Number(s): _____

(Complete the name and address of Recipient Unit of Local Government [UGLG])

UGLG: _____

Address: _____

City: _____

State: Arizona

Zip: _____

has been designated as the recipient for all funds to be received from ADOH resulting from CDBG Funding Agreement Number(s) shown above.

Funds shall be deposited by the recipient UGLG to:

Name of Financial Institution: _____ Account Name/#: _____

- A. Check this box if payment to be mailed to grantee
- B. Check this box if payment to be sent electronically (direct deposit).

Note: If Box B is checked, GA0-618 Automated Clearinghouse (ACH) Vendor Authorization must be sent to ADOH.

Account number by which CDBG funds will be recorded in grantee financial records: _____

Leverage account number, if applicable: _____

I certify that CDBG funds shall be deposited as specified above; shall not be deposited in an interest bearing account (unless all requests for payment shall be on a reimbursement basis); and shall be deposited in an FDIC-insured financial institution.

Typed Name of Chief Elected Official

Signature of Chief Elected Official

Title

Date



Arizona
Department
of Housing

Community Development Block Grant (CDBG) Program
AUTHORIZED SIGNATURE CARD
FOR REQUESTS FOR PAYMENT ON CDBG ACCOUNT (F-2)

UGLG:	Funding Agreement Number(s):
-------	------------------------------

SIGNATURES OF INDIVIDUALS AUTHORIZED TO REQUEST FUNDS ON THE CITED CDBG FUNDING AGREEMENTS(s):

1

Signature	Date
Typed Name	Title

2

Signature	Date
Typed Name	Title

3

Signature	Date
Typed Name	Title

4

Signature	Date
Typed Name	Title

I certify that the signatures above are of the individuals authorized to request payments for the cited contract and that I, as the Chief Elected Official (Mayor/County Board Chairperson), have the authority to designate these individuals to take such action.

Signature of Chief Elected Official	Date
Typed Name	Title



**Community Development Block Grant (CDBG) Program
EMPLOYEE/VOLUNTEER/OFFENDER TIME RECORD (F-5)**

1. UGLG:				2. CDBG FUNDING AGREEMENT #:			
3. PROJECT NAME:				4. ACTIVITY NUMBER:			
5. EMPLOYEE NAME:				6. HOURLY RATE OF PAY: \$			
7. SOCIAL SECURITY NUMBER:				8. FRINGES (per hour): \$			
9. POSITION:				10. TOTAL HOURLY RATE: \$			
11. MONTH/YEAR:							
12. DATE:							
	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>	<i>Sunday</i>
13. HOURS WORKED:							
14. TOTAL HOURS:			X hourly rate	\$	=	\$	
15. AMOUNT CLAIMED AGAINST FUNDING SOURCE:		CDBG Grant: \$		Leverage: \$		Other: \$	
16. JOB ACCOMPLISHMENTS:							
<p>This document certifies that the information provided herein is true and correct and the named employee devoted the time indicated to the cited CDBG contract.</p>							
17. Employee Signature _____				Date _____			
18. Supervisor Signature _____				Date _____			



**Community Development Block Grant (CDBG) Program
EMPLOYEE/VOLUNTEER/OFFENDER
AND/OR EQUIPMENT TIME RECORD (F-6)**

1. UGLG:				3. CDBG FUNDING AGREEMENT NUMBER:			
2. PROJECT NAME:				4. ACTIVITY NUMBER:			
5. EMPLOYEE NAME:				6. HOURLY RATE OF PAY: \$			
7. SOCIAL SECURITY NUMBER:				8. FRINGES (per hour) : \$			
9. POSITION:				10. TOTAL HOURLY RATE: \$			
11. TYPE OF EQUIPMENT:				12. EQUIPMENT HOURLY RATE: \$			
13. MONTH/YEAR:							
14. DATE							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
15. HOURS WORKED:							
17. TOTAL EMPLOYEE HOURS:			X hourly rate	\$	=	\$	
18. TOTAL EQUIPMENT HOURS:			X hourly rate	\$	=	\$	
19. AMOUNT CLAIMED AGAINST FUNDING SOURCE:		CDBG Grant: \$		Leverage \$		Other \$	
20. JOB ACCOMPLISHMENTS:							
<p>This document certifies that the information provided herein is true and correct and the named employee devoted the time indicated and/or the noted equipment was used for the cited CDBG contract.</p>							
21. Employee Signature <i>(not required for equipment only)</i>				Date			
22. Supervisor Signature <i>(required for employee and/or equipment)</i>				Date			



**Community Development Block Grant (CDBG) Program
PROFESSIONAL SERVICES TIME RECORD (F-8)**
(for use by engineers; individuals paid by percentage of completion related to CDBG grants)

1. UGLG:		2. CDBG FUNDING AGREEMENT #:			
3. EMPLOYEE NAME:		4. ANNUAL OR HOURLY RATE OF PAY: \$			
5. EMPLOYEE ID #:		6. FRINGES: \$			
7. POSITION:		8. TOTAL ANNUAL OR HOURLY RATE: \$			
9. BEGINNING DATE:		ENDING DATE:			
10. TOTAL HOURS OR PERCENTAGE:		X pay rate	\$	=	\$
11. AMOUNT CLAIMED AGAINST FUNDING SOURCE:	CDBG Grant: \$	Leverage: \$		Other: \$	
12. JOB ACCOMPLISHMENTS:					
<p>This document certifies that the information provided herein is true and correct and the named employee devoted the time indicated to administration of the cited CDBG contract</p>					
12. Employee Signature _____			Date _____		
13. Supervisor Signature _____			Date _____		

Instructions for Completing the CDBG Activity Ledger/Sub-Ledger (F-10)

1. Self explanatory.
2. Self explanatory.
3. Self explanatory.
- 4.a. Self-explanatory.
- 4.b. The Reference column should include the check number and the name of the vendor or payee. If the purpose of the payment is unclear from the payee name, include a brief explanation (e.g. appraisal, construction, design, etc.).
- 4.c. Self-explanatory.
- 4.d. Self-explanatory.
- 4.e. Current Encumbrances reflects OBLIGATED items (e.g. once the construction contract has been signed, the Town is obligated for the entire contract amount). If an encumbrance is revised, the change should be indicated on a different line (e.g. if the construction contract is increased due to a change order, the increase should appear as an additional amount encumbered on the date the change order is effective).
- 4.f. Encumbered Balance reflects the total of Current Encumbrances (3.e.) less those expenditures related to encumbrances.
- 4.g. Unencumbered Balance reflects a running total of the balance available to spend (i.e. the unobligated amount of funds for the activity). The first line will indicate the total amount of funds for the activity. Subtracted from that total are Current Encumbrances (3.e.) when initiated and those expenditures unrelated to encumbrances (e.g. publishing costs, office supplies, etc.).
- 4.h. Activity Balance is the checkbook per se, and reflects the balance after every expenditure.

CHAPTER 4. CIVIL RIGHTS, AFFH AND 504 / ADA REQUIREMENTS

Introduction to Civil Rights, Fair Housing, 504 / ADA

All local governments have a responsibility to abide by civil rights, fair housing, and ADA/504 laws, to ensure non-discrimination in program administration. This chapter will provide guidance for compliance and documentation.

Civil Rights

Title I of the Housing and Community Development Act of 1974 (HCDA) as amended, established the Community Development Block Grant (CDBG) Program. It also states that recipients of CDBG funds (including the state and all UGLGs) shall comply with statutes, implementing regulations and Executive Orders relating to civil rights, non-discrimination and equal opportunity. These laws require three (3) discrete types of actions:

1. Prohibit discrimination (to include lack of equal access to programs, services, and facilities).
2. Require equal opportunity.
3. Require affirmative action in specific instances.

Recipients of CDBG funds shall not discriminate against any person on the basis of race, color, national origin, gender, or religion per Section 109 of HCDA. No person shall be excluded from participating or benefiting from any activity receiving CDBG funds.

Section 104 of the HCDA requires that each UGLG certify that it will comply with Title VI of the Civil Rights Act of 1964. This prohibits non-discrimination under any program or activity that receives federal financial assistance.

The HCDA also requires compliance with other applicable statutes:

- **Civil Rights Act of 1964, Title VI**, as amended, requires that no person shall be excluded from participation, denied program benefits or subjected to discrimination on the basis of race, color or National Origin.
- **Civil Rights Act of 1968, Title VIII**, as amended, prohibits discrimination in housing on the basis of race, color, religion, sex or National Origin.
- **Rehabilitation Act of 1973, Section 504**, as amended, requires that no otherwise qualified individual shall be excluded from participation and/or employment, denied program benefits,

subjected to discrimination under any program receiving federal funds solely by reason of his or her disability.

- **Age Discrimination Act of 1975**, as amended, requires that no person shall be excluded from participation, denied program benefits, or subjected to discrimination on the basis of age under any program or activity receiving federal funds.
- **Americans with Disabilities Act of 1990**, as amended, requires that there shall be no employment discrimination against "qualified individuals with disabilities."
- **Executive Order 11063**, requires that no person shall be discriminated against in housing and related facilities provided with federal assistance, or lending practices with respect to residential property when such practices are connected with loans insured or guaranteed by the federal government on the basis of race, color, religion, sex or national origin.
- **Executive Order 11246**, as amended, requires that no person shall be discriminated against, on the basis of race, color, religion, sex or national origin, in any phase of employment during the performance of federal or federally assisted construction contracts in excess of \$10,000.

UGLGs cannot discriminate on the basis of:

- Race
- Color
- National origin
- Ethnicity
- Religion or creed
- Gender
- Disability
- Age
- Marital status
- Familial status

Groups specifically protected by civil rights provisions include:

- Minorities (Blacks, Hispanics, Asians, Pacific Islanders, American Indians, Alaskan Natives)
- Women
- Groups distinguished by age
- Person(s) with Disabilities

- Families with children (in terms of housing)

Each UGLG certifies compliance with these laws as they relate to the following by signing and submitting the required certifications with its CDBG application:

- UGLG employment (equal opportunity employer);
- CDBG Program benefits and services (including employment);
- CDBG generated business opportunities and contracting;
- Relocation/displacement;
- Housing programs;
- Fair housing activities; and
- Equal access for all to the UGLG's programs, activities, services and physical facilities.

- *Compliance Documentation*

Civil rights laws prohibit certain actions. Therefore, an UGLG can verify compliance by adopting some general procedures and in limited circumstances, by taking affirmative action.

- *UGLG Employment*

The following materials must be developed and maintained to document that the UGLG does not discriminate and is an equal opportunity employer:

- Employment Ordinances, Policies, Procedures or Manuals

All UGLGs must have written policies that describe the UGLG's employment practices to ensure they are non-discriminatory and equitable. Such policies should cover conditions of: employment, wages, fringe benefits, training, promotion, suspension, termination and grievance procedures.

Applications should be kept for at least one (1) year after a position is filled to document non-discriminatory hiring practices.

- Application Forms

Applications for employment may request only information that is job related and should clearly state that the UGLG is an equal opportunity employer. Information that may be required by governmental agencies such as ethnicity, gender, etc. may be obtained after the position is filled.

- Employment Advertising

UCLGs should have an established non-discriminatory employment advertising process and be able to document this. This can include posting notices in public places, advertising in the local newspaper and sending notices to groups that work with person(s) with disabilities.

- The Interview Process

The interview process must be non-discriminatory in terms of both intent and effect. This can be achieved by following these steps before applications are received:

- ✓ determine the criteria for selecting which applicants to interview;
- ✓ decide who will conduct the interviews; and
- ✓ decide on the questions that will be asked in the interviews.

Additional questions may be asked of applicants if appropriate but interviewers should be very careful not to ask any questions that could be construed as discriminatory.

- Equal Employment Opportunity Posters

These posters must be displayed in as many prominent places as appropriate.

- Complaint/Grievance Procedure

UCLGs must maintain documentation of all civil rights complaints. ADOH may request this documentation.

- *Program Benefits and Services*

A CDBG Funding Agreement can provide either direct or indirect benefits or services. Both require documentation of compliance with civil rights laws.

- Direct Benefits

Direct benefit programs include housing rehabilitation, housing creation programs, homeownership assistance, economic development activities and some public services. Documentation of non-discrimination should include:

- ✓ Program design and marketing materials.
- ✓ Applicant and beneficiary records.

- Indirect Benefits

Indirect benefits include all area wide activities such as street improvements, recreational facilities, community centers and limited clientele activities. The public participation process conducted as part of the application process must be non-discriminatory. The census or special survey data submitted with CDBG applications provides beneficiary information.

Subcontractors, facility operators, owners and lessees working on or part of a CDBG funded activity must also abide by civil rights laws.

- Business Opportunities

UGLGs must maintain a list of all contracts, agreements and purchases made in whole or in part with CDBG funds and document that CDBG funded contractors and businesses are non-discriminatory and equal employment opportunity employers. All bids, RFPs, contracts and agreements must require compliance with civil rights laws and regulations. Non-discrimination and equal employment opportunity information must be presented at bidder's conferences for contracts covered by federal labor standards. See the *Procurement and Contracting Handbook* for example certifications that are to be included in contract documents.

- *Relocation/Displacement*

Any relocation or displacement activity must be designed so as not have a discriminatory effect. Records must be maintained of all persons displaced and include ethnicity, gender, age, disability, income and familial status. Replacement housing should be available in all sections of the community and not only those areas with similar ethnic concentrations.

- *Housing*

All housing programs must abide by Title VIII of the Civil Rights Act of 1968 and Title VIII of the Fair Housing Amendments Act of 1988. This includes non-discriminatory actions in the sale, rent or rehab of homes.

Affirmatively Furthering Fair Housing (AFFH)

Affirmatively Furthering Fair Housing (AFFH) requirements are those actions taken by the *local government* to document non-discrimination. If a local government has never received CDBG funds for any type of housing project, it must still document compliance with AFFH requirements.

- *Federal Laws and Regulations*

The words "*affirmatively further(ing) fair housing*" were first included in the Fair Housing Act of 1964, which, in Title VI, prohibited discrimination in housing on the basis of race, color and national origin. This Act also required HUD to administer its programs in a manner that affirmatively promotes fair housing.

Title VIII of the Civil Rights Act of 1968 covered housing discrimination on the basis of race, color, religion, sex or national origin. Title VIII was amended in 1988 by the Fair Housing Act which added two categories of protected persons from housing discrimination: 1) families with children (anyone under eighteen (18)); and 2) person(s) with disabilities.

The Housing and Community Development Act of 1974, as amended, Section 104, specifically states that UGLGs will "affirmatively further fair housing."

Executive Order 11063 and implementing regulations require equal opportunity in housing, cover discrimination based on race, color, religion, sex or national origin, and are applicable to facilities owned or operated by the federal government and those receiving federal financial assistance or insurance.

HUD's advertising guidelines appear in 24 CFR Parts 100.75,109, 110 and 200 (subpart M). Those guidelines require the use and provide examples of the fair housing logo and statement; provide guidance on discriminatory words, phrases or language; and include required corrective actions.

- *Discriminatory Actions*

Discriminatory actions under the Fair Housing Acts of 1964, 1968 and 1988 and Title VIII of the Civil Rights Act of 1968 include the following:

- refusing to sell or rent to, deal or negotiate with any person;
- discriminating in terms or conditions for buying or renting housing;
- discriminating by advertising that housing is available only to persons of a certain race, color, religion, gender, national origin, family status or lack of disability;
- denying that housing is available for inspection, sale, or rent when in reality it is available;
- refusing to allow reasonable modifications to be made for an individual with a disability;
- blockbusting (realtors, developers, etc. who persuade owners to sell or rent housing by telling them that minority groups are moving into the neighborhood;

- denying or making different terms or conditions for home loans by commercial lenders; or
- denying to anyone the use of or participation in any real estate service, multiple-listing service or other facilities related to the selling or renting of housing.

- *State Laws and Regulations*

The State's ordinance, enforcement mechanism and procedures regarding fair housing can be found in ARS Title 41, Chapter 9, Article 7.

- *HUD Regulations for State CDBG Programs*

HUD regulations regarding the state CDBG Program are quoted below (HUD 24 CFR Part 570):

- *Affirmatively Furthering Fair Housing*

The Act requires the state to certify to the satisfaction of HUD that it will affirmatively further fair housing. The Act also requires each unit of general local government to certify that it will affirmatively further fair housing. The certification that the State will affirmatively further fair housing shall specifically require the State to assume the responsibility of fair housing planning by:

- ✓ conducting an analysis to identify impediments to fair housing choice within the State;
- ✓ taking appropriate actions to overcome the effects of any impediments identified through that analysis;
- ✓ maintaining records reflecting the analysis and actions in this regard; and
- ✓ assuring that units of local government funded by the State comply with their certifications to affirmatively further fair housing.

- *Federally Funded Housing and Housing Services*

When an UGLG is involved in the provision of housing or housing services, whether funded through CDBG (such as housing rehabilitation or infrastructure to support the development of LM housing), or other public funds to include HOME or public housing programs, it must ensure that such programs are designed and implemented in a non-discriminatory way. Documentation must be maintained to verify that program design, impact and implementation are non-discriminatory.

- *Compliance with AFFH Requirements*

Communities are encouraged to plan and implement AFFH actions in coordination with other local entities, to include the local PHA and Board of Realtors, and with regional entities, such as COGs. In many instances, training, advertising, public relations and education, surveys and

even a Fair Housing Analysis, should be undertaken on a regional basis since housing markets often overlap and are not limited to the confines of one (1) legal entity. Such coordination will also avoid duplication of efforts and be more cost effective.

- *Minimum Requirements*

- Minimum Requirements to Comply with AFFH Regulations, require a community to:
 - ✓ adopt a Fair Housing Proclamation or Resolution; and
 - ✓ display a Fair Housing poster in at least one (1) public area of the community's administration building/office year round; and
 - ✓ undertake at least one (1) additional action. The additional action must be specifically designed to further fair housing, and/or educate the public about fair housing laws.

Examples of Acceptable AFFH Actions

The focus of the actions listed below and any others that a community may design and undertake, is public education.

- ***Adopt a fair housing resolution or proclamation (required).*** This is normally done during April, which is national Fair Housing Month. When adopted at an open meeting, it publicizes the community's commitment to fair housing.

Because a resolution is not legally binding, each community must reaffirm its position on this issue by adopting a new resolution or proclamation each year.

- ***Display a Fair Housing poster in a public area of the community's administration building/office (required).*** Posters may be obtained by visiting HUD's Fair Housing website at:

http://portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp/adcampaign

or by contacting the ADOH Fair Housing Coordinator at (602) 771-1000. **Posters need to be hung in the public area year round.**

- ***Distribute the fair housing brochure.*** Brochures may be obtained by visiting HUD's Fair Housing website at:

http://portal.hud.gov/hudportal/HUD?src=/program_offices/fair_housing_equal_opp/adcampaign

or by contacting the ADOH Fair Housing Coordinator at (602) 771-1000.

Distribution could include making it available in the town hall, public library, post office, Chamber of Commerce and real estate offices; mailing copies annually along with utility bills; annually printing a copy in the local paper or advertising its existence in the newspaper.

- ***Encourage the media to promote fair housing awareness with public service announcements (PSAs) and news releases.*** Many local newspapers and radio stations are anxious for news to meet PSA requirements.
- ***Sponsor a fair housing poster, essay or poetry contest in the local schools.*** This is an excellent way to focus attention on the importance of fair housing. Prizes could be awarded at a school assembly, general community function or at the council/board meeting at which the Fair Housing Proclamation/Resolution is adopted. The winning entries could become the community's fair housing poster(s), and excerpts might be used in brochures, press releases, Public Service Announcements (PSAs) and other media.
- ***Publicize the State's procedures regarding discrimination complaints and assist persons to file such.*** The UGLG can inform the public about the role of the Attorney General's Office in fair housing complaints. This information can be conveyed through a brochure, media focus on community involvement with fair housing, or through posters and other information displayed in prominent places.
- ***Review local zoning laws and building codes and procedures*** to determine if such contribute to or detract from fair housing choices.
- ***Conduct a community wide public opinion survey*** to assess public attitude about fair housing and housing discrimination. Determine if there is an understanding of the terms, a perception that discrimination exists, and approval for local actions to remove any impediments. This would be an excellent project for a high school class.
- ***Conduct a survey to assess the community's housing needs and possible discriminatory housing practices.*** The results of the survey should then be used to determine additional actions necessary to eliminate any discrimination practices.
- ***Hold annual or a series of public meetings or forums on fair housing*** to discuss any problems residents may have had in obtaining housing appropriate to their needs. Speakers could include representatives from the Attorney General's Office, the Department Real Estate and various statewide non-profit organizations that provide technical assistance on fair housing issues.
- ***Encourage school and civic organizations to invite speakers to talk about fair housing.*** Provide schools and organizations with a list of appropriate speakers to include those from: the Attorney General's Office, the Department of Real Estate, the Arizona Association of Realtors or residents of the community who have experienced housing discrimination or have worked in other communities to AFFH.
- ***Conduct an Analysis of Impediments to Fair Housing study.*** Contact the ADOH Fair Housing Coordinator at (602) 771-1000 for how-to information.

Technical Assistance and Financial Resources

- *Technical Assistance*

In addition to a local board of realtors, the entities listed below may provide technical assistance to help communities comply with AFFH requirements:

Southwest Fair Housing Council – Phoenix
323 W. Roosevelt St. Suite 100B
Phoenix, AZ 85003
(602) 252-3423
www.swfhc.com

Southwest Fair Housing Council - Tucson
2030 East Broadway, #101
Tucson, AZ 85719
(888) 624-2611
www.swfhc.com

Arizona Department of Real Estate
2910 North 44th Street, #100
Phoenix, AZ 85018
(602) 771-7799
<http://www.azre.gov>

Arizona Association of Realtors
255 East Osborn Road, #200
Phoenix, AZ 85012
(800) 426-7274
www.aaronline.com

Arizona Office of the Attorney General – Civil Rights Section (3 locations):
1275 West Washington Street
Phoenix, AZ 85007
(602) 542-5065
<http://www.azag.gov>

400 West Congress St., South Bldg. Ste. 315
Tucson, AZ 85701-1367
(520) 628-6504

1000 Ainsworth Drive, Suite A-210
Prescott, AZ 86305
(928) 778-1265

Web Sites: www.fairhousing.com
 www.hud.gov/offices/fheo/index.cfm

- *Financial Resources*

CDBG funds can be used for fair housing activities including funds for staff that devotes time to implementing AFFH actions; travel to attend AFFH training; the costs of printing a fair housing

brochure; letters to realtors; and prizes for essay or poster contests. In addition, a CDBG community may request funds for an AFFH planning activity which could cover the costs of an Analysis of Impediments to Fair Housing. Note however, that AFFH costs, whether for administration or planning, are limited to 18% of the community's total CDBG application request.

Communities may also identify other resources such as soliciting contributions from the real estate and lending communities and from civic organizations; using volunteers from various local organizations such as Boy and Girl Scouts Troops, other youth groups, schools, etc. (e.g. to assist in the distribution of pamphlets). UGLGs should attempt to also commit local resources as a commitment to AFFH actions.

- *Documenting AFFH Actions*

UGLGs must *document all actions* and correspondence related to fair housing activities. The file may include the following:

- the community's Fair Housing Resolution or Proclamation;
- fair housing posters, a list where such are posted or to which organizations or entities they have been mailed with the mailing dates;
- notes regarding phone calls made and responses received;
- letters mailed to various groups;
- press releases;
- newspaper articles related to fair housing;
- PSAs and a list of stations to which they were sent;
- poster or essay contest brochures;
- an Analysis to Impediments to Fair Housing study;
- minutes of a fair housing committee or task force meetings and a list of members;
- a list of those asked to serve and serving on any such committee or taskforces;
- funds spent for brochures, training, prizes for contests, mailings to schools or civic organizations, travel to and from training;
- paid newspaper advertisements about AFFH;
- newspaper notices requesting persons to serve on an AFFH committee;
- copies of the federal and state fair housing laws, which can be a reference for other actions or requests by residents;

- The names, addresses and telephone numbers of citizen groups concerned with housing issues (e.g. fair housing groups, tenant associations, builders, real estate personnel); organizations representing specific populations groups (e.g. minorities, women, senior citizens); and other local organizations (e.g. advocacy groups, unions, voters' leagues).
- *Monitoring of AFFH Actions*

ADOH will monitor for compliance with AFFH requirements as described below.

On-Site Monitoring

CDBG Program staff will review an UGLG's AFFH file during an on-site monitoring visit. This is to verify that the community implemented at least the minimum actions required.

Contract Special Conditions

In instances where prior AFFH actions have been limited or monitoring indicates non-compliance, ADOH may condition the receipt of a future CDBG Funding Agreement on the community's implementation of such actions.

- *504 / ADA Requirements*

Many laws directly or indirectly prohibit discrimination against persons with disabilities. As seen in prior sections, these include Civil Rights and Fair Housing laws. More specifically however, implementing regulations for Section 504 of the Rehabilitation Services Act of 1973, as amended, prohibit discrimination against persons with disabilities in all actions undertaken or funded by a local government. The goal of Section 504 is to ensure that "No otherwise qualified individual with handicaps in the U.S. ... shall, solely by reason of his/her handicap, be excluded from participation in, or be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

Note that 504 requirements apply to any community receiving CDBG funds. Sub-recipients of CDBG funds such as non-profit agencies must also comply with certain components of 504.

Title II of the Americans with Disabilities Act (ADA) applies to all state and local governments, whether or not they receive federal funds. Although there are minor differences in definitions and requirements, compliance with Section 504 will generally ensure compliance with the ADA.

- *Funding For Section 504 Compliance*

CDBG administration funds from an existing or future Funding Agreement may be used to assist in the implementation of Section 504. Funds may be used to pay staff salary for required

actions, public notice costs, etc. Additionally, CDBG funds may be used to remove architectural barriers identified as part of the Section 504 process.

- *General Requirements*

UGLGs or entities receiving CDBG funds *must* comply with Section 504 regulations in four (4) areas:

1. Communications
2. Employment
3. Self Evaluation Plan
4. Transition Plan

Communications

- A Telecommunications Device for the Deaf (TDD/TTY) must be available for public access and all stationary, publications, and public notices must include the TDD/TTY number.
- Another method of communication for the Deaf is the Arizona Relay Service. For more information visit www.azrelay.org.
- Be sensitive to the visually impaired when determining print size for a document.
- All notices should include a “reasonable accommodation statement” such as “Persons with disabilities may request a reasonable accommodation such as a sign language interpreter by contacting _____ at _____ as soon as possible.”

Employment

- UGLGs must ensure that employment practices (including those to whom it provides funds) do not discriminate on the basis of disability and that reasonable accommodations are made for employees with disabilities.
- Application forms and recruiting materials should be reviewed to ensure there is no unintended discrimination.

Self Evaluation Plan

Self evaluation plans were to have been completed by July 10, 1989. Thus, if a community has not yet done so, contact ADOH for guidance.

Transition Plan

Those communities receiving CDBG funds must have provided ADOH with either a copy of the transition plan or a letter of assurance that such has been completed. If additional guidance is needed, contact the CDBG Program.

- *Additional Requirements for Larger Communities*

Those communities that employ *fifteen (15) or more permanent full or part time employees* must comply with regulations in an additional three (3) areas:

1. 504 Coordinator
2. Grievance Procedure
3. Public Notice

504 Coordinator

One (1) designated employee must be responsible and have the authority for coordinating all 504 responsibilities – a “504 Coordinator”.

Grievance Procedure

UGLGs must adopt a grievance procedure for all employees and beneficiaries. (The same procedure does not have to apply to applicants for employment or benefits.) This procedure may be integrated into the grievance/complaint procedure required by CDBG. It must incorporate due process standards and allow for prompt resolution of complaints of alleged discrimination on the basis of disability.

Notice

All UGLGs should have by now published a notice notifying the public that it does not discriminate on the basis of disability and identifying the 504 Coordinator. However, Section 504 requires that the notification process be “ongoing.” Thus, an UGLG should document how it complies with the ongoing notification requirement (e.g. website, print, posters, TV, radio etc.).

- *Housing and Section 504*

All multi-family housing that is assisted with federal funds must comply with Section 504 requirements. **Note:** Public Housing Authorities have more requirements in addition to those listed below.

New Construction

All new multifamily housing projects, including public housing, must be designed and constructed for accessibility. A minimum of five percent (5%) or at least one (1), of the total dwelling units must be accessible for individuals with mobility impairments; two percent (2%) of the units or at least one (1), must be accessible for persons with hearing or vision impairments. However, more units may be designated if census or other data indicates a need for such.

Existing Housing

Substantial alterations on multi-family units must meet the same requirements as new construction. *Substantial alteration* is defined as one in which the cost of the alterations to a facility with fifteen (15) or more units equals or exceeds seventy-five percent (75%) of the replacement cost of the completed facility. Generally, a minimum of five percent (5%) of the units in a project must be accessible.

Other alterations and those to common areas such as entrances and lobbies, must be made accessible to the maximum extent feasible.

UGLGs must give priority to the selection of projects that will result in accessible dwelling units.

- *Non-Profit/Sub-recipient Facility and Services*

UGLGs that provide CDBG funds to fund wholly or in part, non-profits or other sub-recipient facilities and services, must ensure that these facilities and services are accessible.

- *Technical Assistance Resources For 504/ADA*

UGLGs may utilize the Arizona Office for Americans with Disabilities and other resources for technical assistance in this area. Some resources are listed below.

Arizona Office for Americans with Disabilities

1700 West Washington, #164

Phoenix, AZ 85007

(602) 542-6276 / TTY (602) 542-6686

www.know-the-ada.com

ADAAG Accessibility Guidelines

www.access-board.gov

CHAPTER 5. RE-ALLOCATION, FUNDING AGREEMENT REVISIONS, AMENDMENTS

Allocation and Reallocation of Funds

CDBG funds can only be used according to the ADOH Funding Agreement Budget, Scope of Work and Schedule of Completion. To the extent that there are deviations from these Funding Agreement provisions, ADOH does one (1) of the following: 1) de-obligate funds; 2) recapture funds; or 3) amend the Funding Agreement.

- *De-obligation of Funds*

De-obligation is the action of removing funds from a Funding Agreement because of one (1) of the following: 1) the scope of work is completed using less CDBG funds than anticipated and leaving a balance of unexpended funds; 2) the original allocation was a loan and the loan was paid; 3) an activity was changed or cancelled (for reasons other than performance) resulting in excess funding; 4) program income is received that is not programmed for use; and 5) disallowed expenditures which includes ineligible expenditures and expenditures aged ninety (90) days or more with no request for reimbursement submitted to ADOH.

De-obligated funds will be distributed according to the following order of priority.

ADOH may reallocate de-obligated funds to the same community from which it was de-obligated to an existing Funding Agreement of the same funding year based on the following criteria:

- performance of the Funding Agreement from which the funds were de-obligated; and
- ability to commit de-obligated funds to another open project of the same funding year that can immediately use the funds provided the new funds can be committed through an amended Funding Agreement fully executed within sixty (60) days.

If ADOH cannot reallocate de-obligated funds according to the above criteria, the de-obligated funds will be redistributed by ADOH to the CDBG SSP Account.

- *Recapture of Funds*

Recapture is the action of removing funds from a Funding Agreement because of the following two (2) types of circumstance: 1) ADOH determines that CDBG funds were not used in compliance with the Funding Agreement or with federal regulations (constituting a Recapture

for Non-compliance); and 2) the recipient fails to perform according to the performance criteria outlined in the Funding Agreement scope of work, the Funding Agreement schedule and/or the performance criteria outlined in the text of the Funding Agreement (constituting a Recapture for Non-performance).

Funds Recaptured for Non-compliance and Recaptured for Non-performance will be redistributed by ADOH to the CDBG SSP Account.

- *Funding Agreement Revisions*

Substantial changes to CDBG funded projects require Funding Agreement amendments, public participation, local government approval and ADOH approval. Smaller changes can be accomplished administratively with ADOH approval. There are three (3) ways to document changes:

1. Changes to the Schedule on the Funding Agreement – Attachment B Performance Report/Schedule of Completion (“Performance Report”).
2. Communication Letter Changes (CLC).
3. Funding Agreement Amendment.

Changes to the Schedule on the Funding Agreement – Attachment B Performance Report/Schedule of Completion (“Performance Report”)

Every quarter, UGLGs must submit a Performance Report to ADOH. Included on the Performance Report is the Schedule of Completion agreed to in the Funding Agreement with ADOH. UGLGs must document on the Performance Report whether they have accomplished the milestones by the dates indicated on the Schedule of Completion. In the cases where they are not meeting the accomplishment milestone deadlines, UGLGs must provide new dates and explanations for the deviation. ADOH will review the date changes, explanations and the overall accomplishment milestones to determine if the project remains viable. ADOH, at its discretion, may require additional documentation or agreements to conditions for the project to continue to proceed.

After two (2) revisions to the Schedule of Completion, ADOH will require a formal conference with the UGLG to determine what corrective actions can be implemented to address project deficiencies. Following the conference, ADOH will provide the UGLG with written corrective actions along with a timeline for completion. If the UGLG fails to complete corrective actions ADOH may assign additional corrective action or recapture the funding for lack of progress.

Note: Changing the Funding Agreement expiration date requires a Funding Agreement amendment.

Communication Letter Changes

The following changes require that UGLGs send a Communication Letter Change (CLC) to ADOH for approval. ADOH will respond within ten (10) business days. A CLC is accomplished by completing a Form 1-R and sending it to the assigned CDBG Program Specialist along with revised Funding Agreement documents as necessary.

- All Scope of Work changes. (Submit Form 1-R and explanation).

Note: Scope of Work changes where the project is altered by fifty percent (50%) or such that it becomes a different activity requires a Funding Agreement amendment.

- Funds moved from activity one (1) (administration) to activity two (2) (project) within the same Funding Agreement. (Submit Form 1-R and a revised Budget).

Note 1: Funds moved from one activity to another activity of the same funding year but a different Funding Agreement requires a Funding Agreement amendment.

Note 2: Administration funds cannot be increased.

Note 3: Funds cannot be moved between activities of different program years.

- The introduction of new funds into a project (e.g. HOME, bank financing, etc.). (Submit Form 1-R and a revised Budget and Scope of Work, as applicable)

Typically introducing new funds in a project will allow the scope of work to be expanded which will require either a CLC or amendment depending upon the extent of the change.

- Changes in project team. For example, if a City Engineer is replaced by a contracted engineer (Submit 1-R with and the details of new who and what is changing).

Examples of when a CLC is required:

- ✓ Community A decides to contract with a COG for grant administration instead of using UGLG staff as initially proposed in the application.
- ✓ Community B determines that it is necessary to hire an architect/engineer instead of using in house staff as initially proposed in the application.

Amendment

A substantial change to an activity invokes public participation requirements and a request to ADOH for a Funding Agreement amendment. **Requests for an amendment must be submitted in writing at least thirty (30) days prior to the Funding Agreement expiration date.** ADOH will respond within twenty (20) business days. ADOH will evaluate whether to allow Funding Agreement amendments on a case-by-case basis. **Only two (2) amendments will be**

allowed for each Funding Agreement. An amendment is required if any of the following types of substantial change occur:

- The purpose of the activity changes.
- The location of the activity changes.
- An activity is added, deleted or altered by fifty (50%) or such that it becomes a different activity.
- The beneficiary of an activity changes.
- An extension to the expiration of the Funding Agreement is requested.
- Funds of a particular funding year moved from one contracted activity to another (different) contracted activity of the same funding year.

Note: Funds cannot be moved from one activity to another if they are not of the same funding year.

If an amendment is not approved by ADOH for the above circumstances the alternative result may be de-obligation of funds, recapture of funds or Funding Agreement termination.

Extension to the expiration of the Funding Agreement do not require public participation.

UGLGs are encouraged to contact ADOH when considering a Funding Agreement amendment to discuss the revision requirements as well as any others that may be triggered by such (e.g. a new ERR).

Examples of when an amendment request is required:

- ✓ Community A will be unable to complete the streets project by the time the Funding Agreement expires. An amendment is required to extend the termination date by three (3) months.
- ✓ Community B decides that it will spend all of the funds allotted for street improvements in a specific neighborhood to instead install ramps, handrails, and curb cuts as accessibility improvements throughout the community. This changes the activity from street improvements to removal of architectural barriers and changes the National Objective component and the number of beneficiaries.
- ✓ A CLC Scope of Work changed the amount for activity two (2) by 25%. Another change to the amount for activity two (2) of thirty percent (30%) is needed. Since the total cumulative change exceeds fifty percent (50%), an amendment is required.
- ✓ The activity changes.

All requests to amend an ADOH Funding Agreement must include the following:

- A revised Form 1-R. If the revision is unclear on Form 1-R or requires additional explanation, please include additional narrative and number sequentially details of the change.
- Documentation of public participation including a local government resolution authorizing the amendment, as applicable.
- A revised Scope of Work, as applicable.
- A revised Budget, as applicable
- A revised Schedule of Completion, as applicable
- If a new activity, applicable revised application forms, maps and resolutions.
- If the amendment is approved, the ADOH's CDBG Program will prepare an amended Funding Agreement and initiate the same procedure used in executing the original Funding Agreement.

Note: UGLGs should review the requirements of A.R.S. §34-201(C) when considering budget changes for construction work by the entity's own work force (force account) to ensure that bidding requirements are met, if applicable.

Public Participation

The following requirements apply to all amendments (except those that extend the Funding Agreement term or move funds between Funding Agreements as long as neither scope of work is increased or decreased by fifty percent (50%) or greater). An UGLG must retain documentation of public participation, to include any comments received, in its CDBG Public Participation file.

- *Requirements*

Newspaper Display Advertisements

Publish display advertisements in a newspaper of general circulation. The advertisement must be published at least sixteen (16) days prior to the public hearings, allowing a fifteen (15) day period between the advertisement and the public hearing.

Flyers, Bulletins and Information Notices

Prepare and distribute flyers, bulletins or informational notices to neighborhoods and service centers and other places where low-income and minority populations are predominant. Post in at least three (3) locations.

The amendment process is as follows:

- Publish and post the Display Notice P-6.
- Obtain approval of the change in a public hearing of the local governing body (City Council or Board of Supervisors) through which a Resolution is adopted.

Amendment Public Hearing Newspaper Display Notice P-6

The amendment public hearing must include the following:

- date, time and location of the public hearing;
- name, title and contact information for contact person for general assistance and for grievances;
- a description of what CDBG funds are and what they can be used for;
- a description of the proposed amendments to be discussed at the public hearing during which public comment will be accepted;
- proposed amendments are available to the general public for review;
- where amendments can be reviewed;
- persons with disabilities or special language needs will be accommodated upon request; and
- technical assistance will be provided to groups representing low and moderate income persons upon request.

- *Timeline*

<u>Day</u>	<u>Action to be Taken</u>
1	Publish and post a Display Notice P-6
15	End of public review and comment period
16	Local Government adopts resolution or similar action to approve change

Termination or Suspension of the Funding Agreement

The Funding Agreement between ADOH and the UGLG contains several sections that describe the conditions for recapturing funds and terminating the Funding Agreement. If ADOH determines recapture or termination of a Funding Agreement is necessary, the UGLG shall be notified of such pending action by certified mail, return receipt requested. This notification will be provided to the chief elected official before the effective date of the action. Copies will also be mailed to the CDBG

contact person. The notification will specify the cause of the recapture or termination and will identify the remedy to avoid such action.

<input type="checkbox"/> Regional - COG:	FORM 1-R	Funding Agreement No:			
<input type="checkbox"/> State Special Project		CLC No:	Amendment No:		
<input type="checkbox"/> Colonia Project					
COMMUNITY DEVELOPMENT BLOCK GRANT REVISED APPLICATION COVER SHEET					
1a. UGLG:		2. Full Address (incl. Zip + 4):			
1b. DUNS Number:					
3. Contact Person:		4a. Phone:	4b. Fax:		
		4c. E-mail:			
5. Indicate the following information for each of the activities for which you are requesting funds:					
a. Activity # and Name	b. Original CDBG Funds	c. CDBG Funds as of Last Revision	d. Non-CDBG Funds Type* and Revision	e. CDBG Revision Amount and +/-%**	f. New Total CDBG Funds
1.	\$	\$		\$ %	\$
2.	\$	\$		\$ %	\$
* Types of non-CDBG funds are (1) Leverage, (2) Program Income, or (3) Other. ** Indicate the amount of the revision and percentage of difference from the original application.					
6. Total CDBG Funds: \$			7. Contract Duration: (enter Contract begin date) through (enter current contract expiration date)		
8. Describe Revision [attach additional pages as necessary to describe revision(s)]:					
9. List all other contracts affected by this revision (if applicable): Contract No. _____ Contract No. _____ Contract No. _____ Contract No. _____ Contract No. _____ Contract No. _____					
10. Certification: I hereby certify that I have been authorized by the governing body of this entity to make the above changes. Signature of Authorized Representative: _____ Date: _____ Name (typed): _____ Title: _____					
For ADOH CDBG Use Only				Revision Approval	
Revision No: _____		FISCAL YEAR _____		Revision Type: <input type="checkbox"/> CLC <input type="checkbox"/> Amendment	
Signature: _____			Date: _____		
Name (typed): Katherine E. Blodgett			Title: CD&R Programs Administrator		

REV. 7-2014

Instructions for Completing Form 1-R

Top Left Corner: Indicate whether this revision is to a Funding Agreement from the Regional Account, Colonia Set Aside or the State Special Project. If from a Regional Account, indicate which COG by name (i.e. NACOG, WACOG, CAG or SEAGO).

Top Right Corner: Indicate the Funding Agreement number and the revision number. Revisions should be numbered consecutively and denote whether they apply to an Amendment or a Communication Letter Change (CLC).

Line Item Instructions

1. Enter name of Unit of General Local Government [UGLG] (county, city or town) and DUNS number. The DUNS number is a unique nine (9) digit number used for tracking federal funds.
2. Enter mailing address for the UGLG.
3. Enter the name(s) of the UGLG contact person(s). If a Council of Government is involved, please also list the COG representative's name and contact information.
4. Enter the phone, fax and email of each individual CDBG Contact Person the UGLG uses. (ADOH recommends that there be just one (1) official contact person). A COG contact person, if a COG is administering the Funding Agreement, should also be listed.
- 5a. Indicate the number and name of each activity for the Funding Agreement.
- 5b. Indicate the original amount of CDBG funds, as per the original Funding Agreement between the State and the UGLG.
- 5c. Indicate the total CDBG funds for each activity as per the last revision. If you have not had a prior revision, either indicate "not applicable" or bring forward the amounts from column "b". Either is acceptable.
- 5d. List any non-CDBG funds and their type (i.e. (1) Leverage; (2) Program Income; or (3) Other).
- 5e. List the amount of the CDBG revision in dollars and as a percentage of the original funds.
- 5f. List the new total CDBG funds after the revision.
6. List the total CDBG funds, after the revision.
7. Enter the beginning date and current expiration date of the Funding Agreement.
8. Describe the revision. This should include justification for any revision. If additional pages are required, number all pages, including the 1-R sequentially.
9. If moving funds between Funding Agreements issued from the same application, list those Funding Agreement numbers.
10. This form must have an original signature. *Only the Mayor, Chair of the Board of Supervisors or other individual as authorized by Form CD-1 may sign the Revised Cover Sheet.*

Send an original copy to ADOH via regular mail and keep a copy in UGLG's application file.

CHAPTER 6. DESK AND ON-SITE MONITORING

Monitoring Visits and Technical Assistance

- *Introduction*

ADOH has implemented a monitoring system to ensure that CDBG funded activities carried out in furtherance of the State's Consolidated Plan are done so in a timely manner in accordance with the federal monitoring requirements of 24 CFR 570.501(V) and all other applicable laws, regulations, policies and sound management and accounting practices.

ADOH staff conducts monitoring of CDBG funded activities during all phases of each project based on a combination of a risk analysis and random sampling. Forms and procedures to fulfill monitoring requirements have been developed and samples of all monitoring forms are provided later in this chapter.

Because our goal is to *assist* each community in the implementation of its projects, UGLGs are strongly encouraged to consider CD&R Programs staff as a resource for technical assistance. In this way, ADOH can guide UGLG's in completing a compliant and timely project that provides benefit.

- *Technical Assistance*

Although this chapter focuses on formal monitoring, we encourage all communities to contact ADOH (and/or a COG) for technical assistance before the formal monitoring process begins. Technical assistance includes guidance by phone, e-mail, letter and/or on-site visits.

Desk monitoring can be another form of technical assistance. By reviewing the various Funding Agreement-related documents, ADOH can help an UGLG avoid situations requiring corrective action.

Requests for technical assistance are indications that the community is committed to designing and implementing a compliant project.

- *Types and Frequency of Monitoring*

The types and frequency of monitoring for CDBG funded activities are determined through a combination of risk analysis and random sampling. In all cases, projects receive desk monitoring in some form. On-site monitoring frequency is based largely on the scope of the project and capacity of the UGLG.

Desk Monitoring

Desk monitoring is the review of documents by CD&R Program staff of items submitted to ADOH by the UGLG. Desk monitoring forms (samples found in this handbook) can be used as a tool.

Initial desk monitoring of CDBG funded activities includes a documented, detailed application review of national objectives, eligible activities, cost reasonableness, anti-speculation, citizen/public participation and certifications, housing rehabilitation guidelines, homeownership assistance guidelines, and sub-recipient agreements,.

Prior to onset of project implementation, ADOH will conduct a desk monitoring of Environmental Review documentation and provide an E-13 Authority to Use Grant Funds to the UGLG.

After the CDBG funded activities have begun implementation, ADOH will conduct desk monitoring on requests for payment, progress reports, procurement and contracting, acquisition, construction bids/contracts, labor standards including weekly payrolls and employee interviews, Section 3, closeout reports and audits as they apply to the scope of work for the project. Grantees are notified, in writing, regarding the results of the review with compliance and/or due dates for corrective steps. Chart 1.A provides more details on when desk monitoring activities are required and why.

- o Desk Monitoring Forms

Samples of desk monitoring forms have been provided in this handbook. There is at least one (1) form for each type of document to be submitted to ADOH. UGLGs are encouraged to use the appropriate desk monitoring forms to determine which documents need to be submitted and to ensure that the documents contain the required items. ADOH also recommends that UGLGs complete and submit the appropriate form with the document to expedite the review process. Forms are available for download from the ADOH website at: <http://www.azhousing.gov/ShowPage.aspx?ID=528&CID=16>

- o Document Review and Approval

UGLGs must allow at least *ten (10) working days* for review and approval of documents submitted to the CDBG Program. Once the desk monitoring is complete, the UGLG will be given written notification that the document was either approved or needs additional work and the number of days in which to submit required corrections or revisions.

Chart 1.A - Activities that Require Desk Monitoring (alphabetically)

Activities that Require Desk Monitoring	When Required	Why
Acquisition and/or Relocation	When the UGLG will acquire land, including easements, and/or relocate as a part of its CDBG Funding Agreement, whether with CDBG funds or not.	Funds will not be released for construction costs or to pay for the land until the acquisition/relocation forms have been approved.
Agreements (sub-recipient agreements, centers and facility agreements, operator, etc.)	When the UGLG will contract with sub-recipient(s) and/or operators. Submit draft of agreement as soon as possible. (See <i>Procurement & Contracting Handbook</i> .)	Funds will not be released for the sub-recipient (and possibly the entire activity) until the agreement has been approved. Funding Agreements will not be closed out until all agreements have been approved and signed by all concerned parties.
Construction Bids	When construction is part of an activity. Submit prior to advertising the bid. (See <i>Procurement & Contracting Handbook</i> .)	Funds will not be released for that portion of the activity until the bid has been approved.
Contracts	When contracting with an engineer, architect, general contractor, etc. Note: If contract submitted as part of the bid or RFP package, it will be approved then. (See <i>Procurement & Contracting Handbook</i> .)	Funds will not be released for that portion of the activity until the contract has been approved.
ERR	ALWAYS (See <i>Environmental Review Handbook</i> .)	No Funding Agreements are forwarded for execution until the activity has received Environmental clearance.
Homeownership Assistance Guidelines	Submit as soon as possible or with the CDBG Application.	Funds will not be released for a Homeownership Assistance activity until the HOAG's have been approved.
Housing Rehab or Commercial Rehab Guidelines	Submit as soon as possible or with the CDBG Application.	Funds will not be released for a rehab activity until the HRGs or CRGs have been approved.
Labor Standards	When a construction project is covered by Davis Bacon. Must Submit no later than with the first F-3 for contractor payment. (See <i>Labor Standards Handbook</i> .)	Funds will not be released to pay the contractor until the LS forms have been approved.
Requests for Proposal	Most often for engineering or architectural services but also includes RFPs for administrative services. Submit prior to advertising the RFP. (See <i>Procurement & Contracting Handbook</i> .)	Funds will not be released for that portion of the activity until the RFP has been approved.
Special Survey	Submit for approval prior to conducting the special survey (see	Special surveys MUST be approved in advance for the results to be accepted by the CDBG Program.

	<i>Application Handbook</i> as this is done pre-application submittal).	
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On-site Monitoring

In addition to desk review of CDBG funded activities, CD&R Program staff typically schedule at least one (1) site visit for each recipient on an annual basis. However, for some CDBG projects it is unnecessary to perform more than one (1) on-site monitoring due to the scope of the project (e.g. purchase of fire equipment or public service activities such as staffing salaries for a domestic violence shelter, etc.). Staff will also conduct an on-site monitoring visit as part of a Funding Agreement close-out.

Prior to the on-site visit, CD&R Program staff will contact the UGLG to set up the appointment and send a letter of confirmation regarding the visit. The letter will also include the files that staff expects to review. All CDBG records shall be available for review during on-site visits. Appropriate personnel should be available.

The on-site visit consists of a one (1) or two (2) day visit to the recipient agency to review records, inspect the project's progress in completing required activities and meet with staff responsible for the project. On-site monitoring visits include the following components:

- ✓ entrance/exit conferences;
- ✓ documentation/file review; and
- ✓ viewing of the project (as applicable).

CD&R Program staff asks that the UGLG provide a room for the conferences and documentation/file review that has sufficient space to work comfortably and with minimal interruption.

Activities such as planning grants, pre-development loans and operating subsidies are more service oriented in nature and do not require actual "on-site" inspection of activities. ADOH will monitor the delivery of these services by such methods as observation, requiring tangible deliverables and other methods deemed appropriate.

Samples of the forms used by ADOH for on-site visits are provided in this handbook. A review of those forms can provide the UGLG with a general idea of which files will be reviewed.

The Closeout Visit

The Close-out on-site monitoring visit must be completed before the Funding Agreement can be closed out. This on-site monitoring visit includes document review as well as a visit to the completed project (except for planning grants).

On-Site Monitoring Follow Up

Within thirty (30) days of an on-site monitoring visit, staff will provide written monitoring comments to the recipient in the form of a monitoring visit follow-up letter (MVL). The letter includes, at a minimum, the date of review and those present during the review, results of the monitoring (satisfactory performance, concern or finding), a statement describing the basis for each conclusion, instructions on what the recipient must do to address any area of concern or finding and a deadline by which the recipient must respond. In extreme cases of non-compliance, staff must determine if an additional on-site monitoring visit is necessary before an issue can be adequately resolved. In all cases, staff will work with recipients to come to a satisfactory resolution.

Not Responding to an MVL

ADOH will outline any concerns in a letter to the CDBG contact person indicating the reply due date. The UGLG is required to respond or it will be considered non-compliant.

If no response is received by the reply due date, the contact person will receive a follow up communication via e-mail. If no response is received, the local government's Chief Elected Official and the Chief Administrative Officer will be notified. The communication will also state that funds will not be released and no other documents or actions will be approved until a satisfactory response to the concern is received.

An outstanding concern is evidence of non-compliance and therefore a threshold issue which could potentially make an UGLG ineligible to apply for future funds.

Extensions to the reply due date may be approved on a case by case basis if requested in writing and a valid reason is provided. CD&R Program Staff reserve the right to decline requests for extension to reply. Extension communication may be provided by email.

- *Sub-recipient Monitoring*

UGLGs are responsible for ensuring that CDBG funds are used by their sub-recipient in a manner compliant with CDBG Program requirements. UGLGs shall periodically visit their sub-recipient's offices and conduct a formal on-site monitoring visit at least twice during the term of the Funding Agreement. This is in addition to the monitoring of the UGLG conducted by CD&R Program Staff.

Desk Monitoring Forms

- Bid Document/Construction Procurement
- Commercial Rehabilitation Guidelines (CRGs)
- Equipment-Materials Procurement
- ERR (please refer to the Environmental Review Handbook available on ADOH Website at: <http://www.azhousing.gov/ShowPage.aspx?ID=387&CID=16>)
- Homeownership Assistance Guidelines (HOAGs)
- Housing Rehabilitation Guidelines (HRGs)
- Labor Standards – Interview & On-site Inspection
- Labor Standards – Payroll-Statement of Compliance
- Professional Services Contract – Agreement
- Professional Services Procurement
- Special Survey
- Sub-recipient Agreement

Bid Documents/Construction Procurement (page 1 of 2)

BID DOCUMENTS/CONSTRUCTION PROCUREMENT

Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Bid Document Includes:	Page	Section	Comment
1. Statement that project federally funded			
2. Correct wage rate #			
3. HUD 4010 40			
4. LS-2 and LS-3			
5. LS-4 and LS-5, SOC			
6. Civil Rights provisions			
If under \$50,000, local bonding procedures followed			
7. Bid bond, 10%			
8. Performance bond, 100%			
9. Payment bond, 100%			
10. Records retention			
11. Access to records			
12. Work schedule/timing			
13. Amount of payment			
14. Method of payment			
15. Method of termination			
16. Cement and fly ash certifications			
17. Conflict of interest			
18. Anti lobbying provisions			
19. Protest procedure or note to grantee to include in non-award letters			
20. Contractor's license required			
21. ADA/503 clause included			
22. Specs either included or referred to in table of contents			
23. Other Significant Items			

Bid Documents/Construction Procurement (page 2 of 2)

Construction Procurement (cont'd)	Page	Section	Comment
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If applicable (contracts for \$100,000 or more), the following Section 3 items should be included in the bid document:

22. Section 3 Clause			_____
23. S3B-1 - Section 3 Assurance			_____
24. S3B-2 - Estimated Project Work Force			_____
25. S3B-3 - Business Self-Certification			_____

Approval of this bid document does not constitute approval of the technical component of the scope of work, the construction specifications, or the design of the project. ADOH CDBG Program approval verifies only that the bid includes the CDBG requirements as listed on this form.

ADOH Staff: _____ Date: _____

Contact Person: _____ Phone or Fax: _____

Approved: Yes Contingent Upon: _____
 No

Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Comments:

Commercial Rehabilitation Guidelines (CRG's) (page 1 of 2)

COMMERCIAL REHABILITATION GUIDELINES (CRGs) Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

1. Program Design	Page	Section	Comment
a. Purpose			_____
b. Target Area			_____
c. Eligible Applicants			_____
d. Preferences			_____
e. Grant/Loan			_____
f. Funding Sources			_____
g. Maximum Amount			_____
h. Exceptions to maximum allowed? Who can authorize?			_____
i. Labor Standards, if applicable			_____
j. Non-discrimination			_____
k. Self Help or Sweat Equity allowed?			_____
l. SHPO continual consultation for historic properties			_____

2. Marketing	Page	Section	Comment
a. Procedure			_____
b. Media used (brochure, radio, newspaper, etc.)			_____
c. Bilingual, if applicable			_____
d. Accessibility			_____

3. Staff Structure/Responsibilities	Page	Section	Comment
a. Staff Titles and Responsibilities must include: inspections, application intake, income verification, change order and completed work approvals, case management and tracking, contractor selection.			_____
b. Reporting Structure			_____

Commercial Rehabilitation Guidelines (CRG's) (page 2 of 2)

4. Application Process	Page	Section	Comment
a. Pre-screening			_____
b. Timeline for approval/disapproval			_____

5. Forms	Page	Section	Comment
a. Copies of forms provided			_____
b. Review Application Form: Ethnicity, gender, disability			_____
c. Review Property Inspection Form/Work Write-Up: Deficiency list, allowable improvements, energy saving items, ADA compliance, smoke detectors, cost estimate.			_____
d. Contracts (grantee & recipient)			_____

6. Contractor Selection	Page	Section	Comment
a. Bidding process			_____
b. Pre-bid and pre-construction conferences			_____
c. Contractor verification (license, insurance, references)			_____
d. Selection based on low bid or recipient pays difference			_____
e. Warranties provided to recipient			_____

7. Complaint Resolution Process	Page	Section	Comment
a. Procedures			_____
b. Use by recipient, vendors, contractors			_____

ADOH Staff: _____ Date: _____

Contact Person: _____ Phone or Fax: _____

Approved: Yes Contingent Upon: _____
 No

Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Equipment/Materials Procurement

EQUIPMENT/MATERIALS PROCUREMENT

(\$100,000 or more/sealed bid)

Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Bid Includes the following:	Yes	No	Comments
1. Specs (include warranties)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Section stating that any or all bids may be rejected	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Non-Discrimination	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Other significant items	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____ _____
5. Date sealed bids are due: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Bid opening date: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADOH Staff: _____	Date: _____
Contact Person: _____	Phone or Fax: _____
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Contingent Upon: _____
Grantee notified on (date): _____ by <input type="checkbox"/> copy of this form <input type="checkbox"/> separate letter/fax <input type="checkbox"/> e-mail	

Comments:

Homeownership Assistance Guidelines (HOAG's) (page 1 of 3)

HOMEOWNERSHIP ASSISTANCE GUIDELINES

Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

1. Program Design	Yes	No	Comments
a. Purpose	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Target Area	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Eligible Applicants	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Preferences	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Grant/Loan and terms, if any.	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Funding Sources	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. If homes need rehab, connection to rehab program?	<input type="checkbox"/>	<input type="checkbox"/>	_____
h. Maximum Amount	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Exceptions to maximum allowed? Who can authorize?	<input type="checkbox"/>	<input type="checkbox"/>	_____
j. Non-discrimination to include accessibility	<input type="checkbox"/>	<input type="checkbox"/>	_____
k. Meeting the needs of non or limited English speaking applicants	<input type="checkbox"/>	<input type="checkbox"/>	_____
l. Use of subrecipients	<input type="checkbox"/>	<input type="checkbox"/>	_____
m. Insurance Requirements or Waiver Policy	<input type="checkbox"/>	<input type="checkbox"/>	_____

2. Supportive Services	Yes	No	Comments
Homeowner counseling provided by: _____ and will include the following:			
a. Advantages and disadvantages of homeownership	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. The costs of purchasing a home	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Analysis of existing income and expenses (pre-qualifying)	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Down payment requirements	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Shopping for a home (including property standards)	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Home inspections	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. Finding the right home	<input type="checkbox"/>	<input type="checkbox"/>	_____
h. Role of real estate professionals	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Buyer's relationship to realtors	<input type="checkbox"/>	<input type="checkbox"/>	_____
j. Comparison shopping	<input type="checkbox"/>	<input type="checkbox"/>	_____

Homeownership Assistance Guidelines (HOAG's) (page 2 of 3)

2. Supportive Services (cont'd)		Yes	No	Comments
k.	Negotiating the purchase price	<input type="checkbox"/>	<input type="checkbox"/>	_____
l.	Types of mortgages and financing	<input type="checkbox"/>	<input type="checkbox"/>	_____
m.	Shopping for a loan and obtaining a mortgage	<input type="checkbox"/>	<input type="checkbox"/>	_____
n.	The loan process	<input type="checkbox"/>	<input type="checkbox"/>	_____
o.	Financial planning and budgeting	<input type="checkbox"/>	<input type="checkbox"/>	_____
p.	Basic home maintenance and repair	<input type="checkbox"/>	<input type="checkbox"/>	_____

3.		Yes	No	Comments
a.	Property inspections required and guidelines for such	<input type="checkbox"/>	<input type="checkbox"/>	_____
b.	Energy efficiency guidelines	<input type="checkbox"/>	<input type="checkbox"/>	_____

4. Marketing		Yes	No	Comments
a.	Procedure	<input type="checkbox"/>	<input type="checkbox"/>	_____
b.	Media used (brochure, radio, newspaper, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	_____
c.	Bilingual, if applicable	<input type="checkbox"/>	<input type="checkbox"/>	_____
d.	Accessibility	<input type="checkbox"/>	<input type="checkbox"/>	_____

5. Staff Structure/Responsibilities		Yes	No	Comments
a.	Staff Titles and Responsibilities must include: Inspections, application intake, income verification, change order and completed work approvals, case management and tracking.	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____ _____
b.	Reporting Structure to include between subrecipients and grantee, if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	_____

6. Application Process		Yes	No	Comments
a.	Pre-screening	<input type="checkbox"/>	<input type="checkbox"/>	_____
b.	Timeline for approval/disapproval	<input type="checkbox"/>	<input type="checkbox"/>	_____
c.	Bilingual	<input type="checkbox"/>	<input type="checkbox"/>	_____
d.	Accessibility	<input type="checkbox"/>	<input type="checkbox"/>	_____

Homeownership Assistance Guidelines (HOAG's) (page 3 of 3)

7. Agreements & Other Documents		Yes	No	Comments
a.	Copies of forms provided	<input type="checkbox"/>	<input type="checkbox"/>	_____
b.	Review Application Form: Ethnicity, gender, disability, income (L v. M) family size, privacy act statement, authorization to verify income.	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____
c.	Review Agreement: Indicates terms, amount, whether grant or loan, services to be provided.	<input type="checkbox"/>	<input type="checkbox"/>	_____
c.	Property Inspection form	<input type="checkbox"/>	<input type="checkbox"/>	_____
e.	Verification that lead based paint info provided to owner	<input type="checkbox"/>	<input type="checkbox"/>	_____

8. Complaint Resolution Process		Yes	No	Comments
a.	Procedures	<input type="checkbox"/>	<input type="checkbox"/>	_____
b.	Use by applicants, vendors, contractors	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADOH Staff: _____ Date: _____

Contact Person: _____ Phone or Fax: _____

Approved: Yes Contingent Upon: _____
 No

Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Housing Rehabilitation Guidelines (HRG's) (page 1 of 3)

HOUSING REHAB GUIDELINES

Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

1. Program Design	Page	Section	Comments
a. Purpose			
b. Target Area			
c. Eligible Applicants			
d. Preferences (elderly, VLI%, disabled, etc.)			
e. Grant/Loan (Loan Closing and Lien recordation if applicable)			
f. Loan Servicing Policies and Procedures (including lien release, refinance of existing debt or equity loans after completion of the rehab and prior to rehab loan repayment or expiration of affordability period) IF APPLICABLE			
g. Funding Sources			
h. Maximum Amount			
i. Exceptions to maximum allowed? Who can authorize?			
j. Labor Standards, if applicable			
k. Non-discrimination			
l. Self Help or Sweat Equity allowed?			
m. Rehab Standards (minor, substantial, remove code violations etc)			
n. Plan to promote Green Technologies (i.e. solar energy, tankless water heaters, water harvesting and reuse etc.)			
o. Energy Efficiency requirements included (weatherized in accordance with ADOH published Weatherization Standards for OOHR Housing Rehab and weatherization work to be done by BPI certified professionals.			
p. Method for determining Scope of Work			
q. Temporary relocation policy and procedures			
r. Revolving Loan Fund (IF APPLICABLE)			
s. Home Owner Insurance			
t. Insurance Requirements or Waiver Policy			
u. Housing Maintenance Counseling (i.e. changing filter pads, servicing A/C, warranty review for new systems)			

Housing Rehabilitation Guidelines (HRG's) (page 2 of 3)

v. Homeownership education (i.e. budgeting, timely mortgage payments, maintaining homeowner's insurance)			
w. Method for determining After Rehab Value			
x. Program Income Procedures (IF APPLICABLE)			

2. Staff Structure/Responsibilities	Page	Section	Comments
-------------------------------------	------	---------	----------

a. Staff Titles and Responsibilities must include: inspections, application intake, income verification, change order and completed work approvals, case management and tracking, contractor selection.			
b. Reporting Structure			

3. Marketing	Page	Section	Comments
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a. Procedure			
b. Method (radio, newspaper, etc.)			
c. Bilingual, if applicable			
d. Accessibility			

4. Application Process	Page	Section	Comments
------------------------	------	---------	----------

a. Pre-screening			
b. Timeline for approval/disapproval			
c. Applicant recertified if taken 6-months or more prior to receiving services			
d. Bilingual			
e. Accessibility			
f. Wait List Procedure.			

5. Contractor Selection, Inspection, Payment Schedule	Page	Section	Comments
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a. Unit Inspection, Work Write Up, Cost Estimates			
b. Pre-bid conference			
c. Bidding process			
d. Contractor verification (license, insurance, references)			
e. Selection based on low bid or homeowner pays difference			
f. Pre-construction Conference			
g. Construction Inspection Process			
h. Schedule of Contractor Payment			
i. Final Draw procedure			
j. Warranties provided to homeowner			

Housing Rehabilitation Guidelines (HRG's) (page 3 of 3)

k. Homeowner acceptance of all rehab work

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6. Forms	Page	Section	Comments
a. Copies of forms provided			
b. Review Application Form: Ethnicity, gender, disability, income (L v. M) family size, privacy act statement, authorization to verify income.			
c. Review Property Inspection form/Work Write-Up: Deficiency list, allowable improvements, leads based paint and asbestos problems, weatherization/energy savings items, smoke detectors, cost estimate.			
d. Verification that lead based paint info provided to owner			
e. Contracts (between homeowner & contractor or homeowner & grantee)			
f. Copy of Promissory Note Form(IF APPLICABLE)			
g. Copy of Deed of Trust Form (IF APPLICABLE)			

7. Grievance and Quality Assurance Process	Page	Section	Comments
a. Procedures (allows for escalation to higher authority?)			
b. Use by homeowners, vendors, contractors			

ADOH Staff: _____	Date: _____
Contact Person: _____	Phone or Fax: _____
Approved: <input type="checkbox"/> Yes Contingent Upon: _____	
<input type="checkbox"/> No	
Grantee notified on (date): _____ by <input type="checkbox"/> copy of this form <input type="checkbox"/> separate letter/fax <input type="checkbox"/> e-mail	

COMMENTS:

Labor Standards (Interview & On-site Inspection)

LABOR STANDARDS **Desk Monitoring Form**
LS-9/10 (Interview & On-site Inspection)

Complete one for each LS-9/10 reviewed

UGLG: _____ CDBG Funding Agreement #: _____

Name of Employee: _____ Interview Date: _____

Review of the LS-9 – Employee Interview		Yes	No	Comments
1. Section A:	Complete	<input type="checkbox"/>	<input type="checkbox"/>	_____
	Correct	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Section B:	Complete	<input type="checkbox"/>	<input type="checkbox"/>	_____
	Correct	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Section C:	Complete	<input type="checkbox"/>	<input type="checkbox"/>	_____
	Correct	<input type="checkbox"/>	<input type="checkbox"/>	_____
4.	Information compares to LS-4?	<input type="checkbox"/>	<input type="checkbox"/>	_____
5.	Name of LS Monitor: _____			_____
6.	Name of Payroll Inspector: _____			_____
7.	Date of Inspection: (Section C Payroll examination)			_____

Review of the LS-10 – On-site Inspection		Yes	No	Comments
7.	Complete?	<input type="checkbox"/>	<input type="checkbox"/>	_____
8.	Correct?	<input type="checkbox"/>	<input type="checkbox"/>	_____
9.	Date of Inspection: _____			_____

LS-9/10 Compliant: Yes No See follow-up letter dated: _____

ADOH Staff: _____ Date: _____
 Contact Person: _____ Phone or Fax: _____
 Approved: Yes Contingent Upon: _____
 No
 Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Comments:

Labor Standards (LS 4/5 Payroll/Statement of Compliance) (page 1 of 2)

LABOR STANDARDS **Desk Monitoring Form**
LS-4/5 Payroll/Statement of Compliance

UGLG: _____ CDBG Funding Agreement # _____

Use a separate form for each contractor or subcontractor payroll reviewed.

1. Activity Name: _____

2. Name of Contractor/Sub: _____ 3. Verified (LS-2/3): Yes No

4. Payroll Number: _____ 5. Date: _____ 6. Number of employees: _____

Review of the LS-4/5	Yes	No	N/A	Comments
7. Submitted timely to grantee (7 days)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. Reviewed timely and initialed (7 days)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
9. Name and ID # for all employees If No, list employees w/incomplete information _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
10. Complete classifications (to match WRD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
11. Overtime pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
12. Apprentices/Helpers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
13. Statement of Compliance (LS-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. Correct deductions (supported by LS-15 if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Appropriate original signature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Fringe benefits: Cash <input type="checkbox"/> Plan <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. If plan, approved plan in file supported by LS-14 and LS-17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
14. WRD number and MOD:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Labor Standards (LS 4/5 Payroll/Statement of Compliance) (page 2 of 2)

15. Select three employees and list below. If not three, explain:

	Name – Emp. #1	Name – Emp. #2	Name – Emp. #3						
a. Classification:	_____	_____	_____						
b. Wage/Fringe as per WRD	_____	_____	_____						
c. Wage/Fringe as per Payroll	_____	_____	_____						
	Yes	No	N/A	Yes	No	N/A	Yes	No	N/A
c. Wage compares to WRD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Fringes compare to WRD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Overtime amount correct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Deductions correct and include documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Math correct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Apprentice/helper documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LS-4/5 Compliant: Yes No

If NO, see follow-up letter dated: _____

ADOH Staff: _____	Date: _____
Contact Person: _____	Phone or Fax: _____
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No Contingent Upon: _____	
Grantee notified on (date): _____ by <input type="checkbox"/> copy of this form <input type="checkbox"/> separate letter/fax <input type="checkbox"/> e-mail	

Comments:

Professional Services Contract/Agreement (page 1 of 2)

PROFESSIONAL SERVICES CONTRACT/AGREEMENT **Desk Monitoring Form**

UGLG: _____ CDBG Funding Agreement # _____

Activity Name: _____ Contractor: _____

REQUIRED ITEMS	Page	Section	Comment
1. Names of parties			_____
2. Effective date			_____
3. Term of contract			_____
4. Statement that project federally funded			_____
5. Work schedule			_____
6. Payment amount			_____
7. Payment method			_____
8. Method of termination			_____
9. Copyright/section from contract, if applicable			_____
10. Sanctions/penalties (refer to A.R.S. §38-511)			_____
11. Specs			_____
12. Other Significant Items			_____

The following Section 3 items should be included in the contract, if applicable (contract \$100,000 or greater):

13. Section 3 Clause			_____
14. S3R-2 - Business Utilization Report			_____
15. S3R-3 - Applicant & New Hire Employment			_____

Professional Services Contract/Agreement (page 2 of 2)

If the following items were included in desk monitoring of RFP, indicate date desk monitoring was completed. If not in RFP, must be in contract.

- 16. Scope of work
- 17. Records retention
- 18. Access to records
- 19. Non-Discrimination
- 20. Anti lobbying provisions
- 21. Conflict of interest

Page	Section	Comment

Approval of this contract does not constitute approval of the technical component of the scope of work, the construction specifications, or the design of the project. ADOH CDBG Program approval verifies only that the contract includes the applicable requirements as listed on this form.

ADOH Staff: _____ Date: _____
 Contact Person: _____ Phone or Fax: _____
 Approved: Yes Contingent Upon: _____
 No
 Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Comments:

Professional Services Procurement (page 1 of 2)

PROFESSIONAL SERVICES PROCUREMENT

Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Activity Name: _____ Type of service for bid: _____

REQUIRED ITEMS	Page	Section	Comment
1. Name of local government			_____
2. Scope of work or purpose			_____
3. Clear evaluation criteria (e.g., quantitative, in order of importance)			_____
4. Section 3 statement, if applicable			_____
5. Who will evaluate (evaluation sheet not required as part of RFP but must be used)			_____
6. Federally funded statement			_____
7. Factors considered do not include cost			_____
8. Deadline for receipt of proposals			_____
9. Timeline for award decision			_____
10. Other requirements (license, special knowledge)			_____

FOLLOWING MUST BE IN RFP OR CONTRACT	Page	Section	Comment
11. Records retention			_____
12. Access to records			_____
13. Non-discrimination			_____
14. Anti-Lobbying certification			_____
15. Conflict of Interest statement			_____

FOLLOWING ITEMS ARE RECOMMENDED	Page	Section	Comment
16. Ability to reject bids			_____
17. Statement regarding negotiations			_____
18. Possible interviews			_____
19. Copyright statement, if applicable			_____

Professional Services Procurement (page 2 of 2)

Approval of this Request for Proposal (RFP) does not constitute approval of the technical component of the scope of work, the specifications, or the design of the project. ADOH CDBG Program approval verifies only that the RFP includes the applicable requirements as listed on this form.

ADOH Staff: _____ Date: _____

Contact Person: _____ Phone or Fax: _____

Approved: Yes Contingent Upon: _____
 No

Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Comments:

Special Survey (page 1 of 3)

SPECIAL SURVEY **Desk Monitoring Form**

UGLG: _____ CDBG Funding Agreement # _____

Monitoring Date: _____ Reviewer: _____

Survey Instrument	Yes	No	Comments
1. Copy attached	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Contains correct income levels	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Cover letter explains purpose but does not encourage specific responses	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Correct and complete	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Confidentiality maintained	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Non-English translations necessary? If yes, issue addressed	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Accessibility issue addressed	<input type="checkbox"/>	<input type="checkbox"/>	_____

Description of Survey Method	Yes	No	Comments
8. <input type="checkbox"/> Mail	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> Personal Interview			
<input type="checkbox"/> Telephone			
9. Appropriate to situation	<input type="checkbox"/>	<input type="checkbox"/>	_____

Definition of Population	Yes	No	Comments
10. Describe _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
11. Details development of survey group	<input type="checkbox"/>	<input type="checkbox"/>	_____
12. SA appears reasonable and related to population	<input type="checkbox"/>	<input type="checkbox"/>	_____

Special Survey (page 2 of 3)

Households to be Surveyed	Yes	No	Comments
13. Total number be surveyed	<input type="checkbox"/>	<input type="checkbox"/>	_____
14. Appears reasonable and related to SA/population	<input type="checkbox"/>	<input type="checkbox"/>	_____
15. Random Sample Size: (If small, may require a response rate higher than 75%. Refer to <i>Application Handbook</i> . Advise applicant in approval letter.)	<input type="checkbox"/>	<input type="checkbox"/>	_____
16. Complies with the Application Handbook:	<input type="checkbox"/>	<input type="checkbox"/>	_____
17. Math to compute size of random sample:	<input type="checkbox"/>	<input type="checkbox"/>	_____
18. Random sample method reasonable	<input type="checkbox"/>	<input type="checkbox"/>	_____

Response Process	Yes	No	Comments
19. Response process	<input type="checkbox"/>	<input type="checkbox"/>	_____
20. Length of time for first response:	<input type="checkbox"/>	<input type="checkbox"/>	_____
21. Number of follow-up attempts:	<input type="checkbox"/>	<input type="checkbox"/>	_____
22. Time of day/week:	<input type="checkbox"/>	<input type="checkbox"/>	_____
23. Length of time for follow up:	<input type="checkbox"/>	<input type="checkbox"/>	_____
24. Anticipated date of survey completion:	<input type="checkbox"/>	<input type="checkbox"/>	_____
25. Method to determine non-respondents	<input type="checkbox"/>	<input type="checkbox"/>	_____

Staff & Security	Yes	No	Comments
26. Number of Staff:	<input type="checkbox"/>	<input type="checkbox"/>	_____
27. Position Titles & Responsibilities:	<input type="checkbox"/>	<input type="checkbox"/>	_____
	<input type="checkbox"/>	<input type="checkbox"/>	_____
28. Survey files location	<input type="checkbox"/>	<input type="checkbox"/>	_____
29. Files secured to ensure confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	_____
30. Staff responsible for confidentiality:	<input type="checkbox"/>	<input type="checkbox"/>	_____
31. Process appears reasonable	<input type="checkbox"/>	<input type="checkbox"/>	_____

Special Survey (page 3 of 3)

Survey Expiration Date

- 32. Date survey begun: _____
Based on: Cover Letter First Interview
- 33. Survey valid until (for as long as proven valid or until invalidated by the introduction of the current decennial census): _____

CDBG Staff: _____	Date: _____
Contact Person: _____	Phone or Fax: _____
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Contingent Upon: _____
Grantee notified on (date): _____	by <input type="checkbox"/> copy of this form <input type="checkbox"/> separate letter/fax <input type="checkbox"/> e-mail

NOTE: Use the Survey Tabulation form from the CDBG Application Handbook to tabulate survey results. Approval of this survey is NOT approval of the service area or any proposed project.

Comments:

Sub-recipient Agreement (page 1 of 2)

SUBRECIPIENT AGREEMENT

Desk Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Activity Name: _____ Subrecipient: _____

Agreement should include:	Page	Section	Comment
1. Names of Parties			_____
2. Effective date			_____
3. Term of Agreement			_____
4. Statement of Work			_____
a. Service Area			_____
b. Work schedule			_____
c. Records and reports			_____
5. National Objective requirements			_____
6. Performance Monitoring			_____
7. Contact persons for grantee and subrecipient			_____
8. Special Conditions			_____
9. No copyrights allowed			_____
10. ADOH disclosure of materials allowed			_____
11. Subrecipient "Independent Contractor"			_____
12. Worker's Compensation required			_____
13. Contract amount			_____
14. Payment terms			_____
15. Insurance and Bonding			_____
16. Reversion of Assets			_____
17. Subcontractors			_____
18. Records maintenance and availability			_____
19. Contract termination			_____
20. Audits			_____

Sub-recipient Agreement (page 2 of 2)

Agreement (cont'd)	Page	Section	Comments
21. Budget			_____
a. Amounts by activity			_____
b. Amounts by line items			_____
c. Disposition of Program Income			_____
22. Certifications and Uniform Administrative Requirements			_____
a. Uniform Administrative Requirements			_____
b. Equal opportunity			_____
c. Conflict of interest			_____
d. Hatch Act			_____
e. Labor Standards			_____
f. Compliance w/environmental requirements			_____
g. Lead based paint			_____
h. Property disposition			_____
I. Lobbying			_____
j. Acquisition/Relocation			_____
23. Itemized list of records to be maintained			_____
24. Additional provisions if agreement w/religious organization or N/A			_____
25. Other			_____

ADOH Staff: _____ Date: _____
 Contact Person: _____ Phone or Fax: _____
 Approved: Yes Contingent Upon: _____
 No
 Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Comments:

On-Site Monitoring Forms

- 504 / ADA – Construction, Rehab or ROB Activities
- 504 / ADA – Grantee Facilities
- Acquisition
- AFFH
- Civil Rights and EEO Information
- Construction Contracts
- File Memorandum
- Financial Management System
- Financial Systems Survey
- Homeownership Assistance
- Housing Rehabilitation – Beneficiary Files
- Housing Rehabilitation – Program Files
- Labor Standards
- Procurement & Contracting
- Public Participation
- Section 3
- Special Survey

504 / ADA – Construction, Rehab or ROB Activities (page 1 of 3)

504 / ADA – CONSTRUCTION, REHAB or ROB ACTIVITIES

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Grantee shall complete this form and certify either before or after an on-site visit. Make a copy for 504 file. Each NO must include the actual measurements or an explanation. Note: Measurements shall be obtained. If no measurements are taken and inspection is based solely on observation, indicate "OK - Visual" for that item.

Buildings

Complete 1 form per structure or facility affected.

a. ADDRESS: _____

b. PARKING

i. Total number of spaces in parking lot: _____

ii. Total number of designated accessible spaces: _____ (if only one space, must be van accessible)

Total Spaces	Accessible
1-25	1
26-50	2
51-75	3
76-100	4

iii. Spaces are marked with the universal symbol, striped & signed: Yes No

iv. Width: _____ Width of access aisle: _____
 (Parking (van or car) space width: 8' Access aisle width [car]: 5' or [van]: 8')

v. Number of van spaces: _____ Width of access aisle: _____

c. ACCESSIBLE ROUTE

i. Spaces near the building are on an accessible route to the building: Yes No
 (Clear of other parking and traffic lanes; Path width not less than 36"
 Clear, stable, smooth slip resistant surface; Ramp or grade not to exceed 1":12";
 Level landing not less than 60" diameter)

ii. Distance from accessible spaces or bus stop to the entrance: _____

iii. Curb ramp slope: _____ = Height divided by Length (Rise over Run)
 (For new construction (after 1992) should not exceed .08
 Construction prior to 1992 may be less due to space limitations)

iv. Steps are present: Yes No #: _____ Handrail: Yes No

v. Ramp to building: Yes No Handrail: Yes No

504 / ADA – Construction, Rehab or ROB Activities (page 2 of 3)

Degree of Rise: _____ (shall not exceed 1":12")

Surface of Route: _____ (clear, stable, smooth, slip resistant surface)

vi. The building entryway appears accessible: Yes No

vii. Landing present: Yes No Width: _____ Length: _____ (not less than 60" diameter)

d. ENTRANCES

i. Door opening:

Power Door Door opening width: _____ (32" minimum)

Non Power Door Door opening width: _____ (32" minimum)

Has clear and level maneuvering space: Yes No

Two door series Door opening width: _____ (42" space plus door swing)

Shape of knob: _____

(Handles can be operated with one hand, no need to grasp or turn)

Door opens easily with little effort: Yes No

ii. Threshold: _____ (shall have beveled edges)

iii. Entry relatively free of obstacles: Yes No

If No (e.g. a revolving door), is there an alternate entry way: Yes No

e. PUBLIC/Common AREAS

i. Width of all door openings: _____ (32" minimum)

ii. Width of hallways: _____ (36" except at doors)

iii. Shape of doorknobs: _____

(Handles can be operated with one hand, no need to grasp or turn)

iv. Carpet is securely attached and nap does not exceed 1/2": Yes No

v. Height of reception counter, if applicable: _____ (36" from floor)

vi. Elevators present: Yes No

1) Elevator call button no higher than 42": Yes No

2) Highest button in elevator car no higher than 54": Yes No

3) Panel: Braille or raised numbers on each floor: Yes No

4) Auditory floor indicators: Yes No

vii. All rooms, pathways, and doorways open to the public appear to be accessible:

504 / ADA – Construction, Rehab or ROB Activities (page 3 of 3)

Yes No

viii. Visual/audio alarms present: Yes No If yes, location: _____

f. FACILITIES

i. Restroom(s) appear accessible: Yes No

ii. Pathways are clear and accessible: Yes No

iii. Clear turning space: Yes No (60" turning radius)

iv. Toilet: (33"-36" high; 36" minimum length; 1 1/2" from side and back walls)

1) Height of toilet seat: _____ (17"-19"; no spring set seat)

2) Distance from side wall: _____ Grab bars: Yes No

v. Sink:

1) Height from floor to top of sink: _____ (34" maximum)

2) Height from floor to bottom of sink: _____ (27" minimum)

3) Clear space under sink: Yes No

vi. Drinking fountains and telephones appear to be accessible: Yes No

To be completed by UGLG:

I certify by signing below that the information provided is true & correct to the best of my knowledge.

Printed Name: _____ Title: _____

Signature: _____ Date: _____

ADOH Staff: _____ Date: _____

Comments:

504 / ADA – Grantee Facilities (page 1 of 6)

504 / ADA – GRANTEE FACILITIES

On-Site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

- This form is applicable *only* if grantee facilities have never been monitored or if their administrative offices have been changed or renovated in some way.
- Use this form in conjunction with the 504/ADA Pre-visit Form. A copy must be filed in the grantee’s 504 file.
- If CDBG funds were used for construction/rehab of a facility or ROB activities, also use the 504/ADA Construction form.

A. Pre-visit File Check	Yes	Date	Complete	N/A	Comments
1. Name and position of grantee’s ADA/504 Coordinator: _____					_____
2. CDBG file includes:					_____
a. Self Evaluation (if yes, B.2.a not applicable)	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Transition Plan (if yes, B.2.b not applicable)	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Letter of Assurance	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Grievance Procedure	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Notice	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Newspaper and date of publication for Notice:	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____
g. TDD/TDY Information	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	_____

B. On-site Visit

Each NO must include the actual measurements or an explanation. Staff must obtain measurements when possible and as time permits. If no measurements are taken and inspection is based solely on observation, indicate "OK - Visual" for that item.

1. Buildings

This shall be completed for the building in which ADOH is administered. If more than one building surveyed, a separate form shall be completed for each building.

- a. ADDRESS: _____
- b. PARKING
 - i. Total number of spaces in parking lot: _____

504 / ADA – Grantee Facilities (page 2 of 6)

ii. Total number of designated accessible spaces: _____ (if only one space, must be van accessible)

Total Spaces	Accessible
1-25	1
26-50	2
51-75	3
76-100	4

iii. Spaces are marked with the universal symbol, striped & signed: Yes No

iv. Width: _____ Width of access aisle: _____
 (Parking (van or car) space width: 8' Access aisle width [car]: 5' or [van]: 8')

v. Number of van spaces: _____ Width of access aisle: _____

c. ACCESSIBLE ROUTE

i. Spaces near the building are on an accessible route to the building: Yes No

(Clear of other parking and traffic lanes; Path width not less than 36"
 Clear, stable, smooth slip resistant surface; Ramp or grade not to exceed 1":12";
 Level landing not less than 60" diameter)

ii. Distance from accessible spaces or bus stop to the entrance: _____

iii. Curb ramp slope: _____ = Height divided by Length (Rise over Run)
 (For new construction (after 1992) should not exceed .08
 Construction prior to 1992 may be less due to space limitations)

iv. Steps are present: Yes No #: _____ Handrail: Yes No

v. Ramp to building: Yes No Handrail: Yes No

Degree of Rise: _____ (shall not exceed 1":12")

Surface of Route: _____ (clear, stable, smooth, slip resistant surface)

vi. The building entryway appears accessible: Yes No

vii. Landing present: Yes No Width: _____ Length: _____ (not less than 60" diameter)

d. ENTRANCES

i. Door opening:

Power Door Door opening width: _____ (32" minimum)

Non Power Door Door opening width: _____ (32" minimum)

Has clear and level maneuvering space: Yes No

Two door series Door opening width: _____ (42" space plus door swing)

Shape of knob: _____

(Handles can be operated with one hand, no need to grasp or turn)

504 / ADA – Grantee Facilities (page 3 of 6)

Door opens easily with little effort: Yes No

ii. Threshold: _____ (shall have beveled edges)

iii. Entry relatively free of obstacles: Yes No

If No (e.g. a revolving door), is there an alternate entry way: Yes No

e. **PUBLIC/Common AREAS**

i. Width of all door openings: _____ (32" minimum)

ii. Width of hallways: _____ (36" except at doors)

iii. Shape of doorknobs: _____
(Handles can be operated with one hand, no need to grasp or turn)

iv. Carpet is securely attached and nap does not exceed 1/2": Yes No

v. Height of reception counter, if applicable: _____ (36" from floor)

vi. Elevators present: Yes No

1) Elevator call button no higher than 42": Yes No

2) Highest button in elevator car no higher than 54": Yes No

3) Panel: Braille or raised numbers on each floor: Yes No

4) Auditory floor indicators: Yes No

vii. All rooms, pathways, and doorways open to the public appear to be accessible:
Yes No

viii. Visual/audio alarms present: Yes No If yes, location: _____

f. **FACILITIES**

i. Restroom(s) appear accessible: Yes No

ii. Pathways are clear and accessible: Yes No

iii. Clear turning space: Yes No (60" turning radius)

iv. Toilet: (33"-36" high; 36" minimum length; 1 1/2" from side and back walls)

1) Height of toilet seat: _____ (17"-19"; no spring set seat)

2) Distance from side wall: _____ Grab bars: Yes No

v. Sink:

1) Height from floor to top of sink: _____ (34" maximum)

504 / ADA – Grantee Facilities (page 4 of 6)

2) Height from floor to bottom of sink: _____ (27" minimum)

3) Clear space under sink: Yes No

vi. Drinking fountains and telephones appear to be accessible: Yes No

2. Grantee Actions

a. **THERE IS A 504 FILE:** Yes No

Location: _____

b. **SELF EVALUATION (SE):** Yes No (skip to viii) SE in CDBG files - skip to c)

i. An advisory committee has been established: Yes No

ii. It includes persons with handicaps or representing groups of such persons:

Yes No

iii. If **NO** committee, describe the other method(s) used to "consult" with required individuals.

iv. SE appears to evaluate the local government's policies, practices, programs, activities and services to include those undertaken on behalf of the local government by Subrecipients and non-profits:

Yes No

v. SE identifies items to be modified, if any: Yes No

vi. SE identifies modifications/remedial steps actually taken. For example: are all programs and services now accessible both in terms of communications and location or has the grantee made provisions to relocate or provide such in an equivalent manner: Yes No

vii. Other: _____

viii. Date SE Plan completed or to be completed, and by whom:

c. **TRANSITION PLAN:** Yes No (Skip to item vi) TP in CDBG files - skip to d)

i. The advisory committee or other interested and required persons were involved:

Yes No

ii. Appears to identify buildings owned, rented or leased by the local government or in which subrecipients/non-profits provide local government-funded services/programs: Yes No

iii. Appears to identify any physical obstacles in each to include at a minimum: parking, exits and entrances, rest rooms, drinking fountains, and doorways: Yes No

iv. Describes the methods that will be used to make each facility accessible to include signage:

Yes No

504 / ADA – Grantee Facilities (page 5 of 6)

- v. Specifies the schedule for taking the steps necessary to achieve compliance and prioritizes removal, with approximate dates and costs for each: Yes No
 - 1) Plan indicates that it is based on UFAS/ADAAG or an equivalent: Yes No
 - 2) Dates for removal of barriers appears adequate: Yes No
 - 3) Includes interim measure for program access: Yes No
- vi. Transition Plan to be completed: _____

d. **GRIEVANCE PROCEDURE** (If answer to A.2.d was Yes, skip to iii)

- i. Yes No
Comments: _____
- ii. Contacts, timelines, appeals and related procedures appear adequate: Yes No
- iii. Grievances: Yes No
Status: _____

e. **NOTICE:** (If answer to A.2.e was Yes, skip to ii)

- i. Initial Notice
 - 1) Affidavits of publication: Yes No
 - 2) Newspaper & date(s) of publication: _____
- ii. Other methods to publicize, if any: _____
- iii. These appear adequate: Yes No
- iv. Subsequent notices: Yes No (should be ongoing about once a year)
- v. There are plans for on-going notifications: Yes No

504 / ADA – Grantee Facilities (page 6 of 6)

f. ACTIONS IMPLEMENTED TO IMPROVE PROBLEM AREAS IDENTIFIED FROM PRIOR VISITS OR AUDITS:

Yes No

To be completed by UGLG:

I certify by signing below that the information provided is true & correct to the best of my knowledge.

Printed Name: _____ Title: _____

Signature: _____ Date: _____

ADOSH Staff: _____ Date: _____

Comments:

Acquisition

ACQUISITION

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Complete an Acquisition Checklist (A-CK.9 in Procurement Handbook) for at least one of the acquisition files as part of the file review.

1. Address of acquired property: _____
2. Property Use: <input type="checkbox"/> Single Family Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Non profit organization <input type="checkbox"/> Multifamily Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____
3. Owner Name(s) (indicate if occupant) _____ Tenant(s) _____

4. Significant Dollar Amounts:

Item	First Appraisal	Review Appraisal	Just Compensation Determination	Initial Written Offer	Acquisition Price
Date					
Amount					

5. Review the progress of the acquisition by checking the dates on the Acquisition Checklist in grantee files to determine if the owner was caused an unnecessary hardship.
 Acquisition Checklist (A-CK.9) complete and dates reasonable: Yes No

ADOH Staff: _____	Date: _____
-------------------	-------------

Comments:

AFFH (page 1 of 2)

AFFH

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

(File a copy in AFFH File)

A. Grantee AFFH Items

1. a. The Grantee does have an AFFH file: Yes No
 If no, explain: _____

- b. Does the file contain documentation of at least 3 actions per year? Yes No
- c. List the file contents by calendar year: _____

2. Posters:
 - a. Fair Housing posters posted in at least 1 public place: Yes No
 Location: _____
 - b. Was the poster displayed on a daily basis, year round? Yes No
3. Either a Fair Housing Resolution OR Proclamation was adopted: Yes No Attach a copy

An AFFH Resolution or Proclamation must be adopted every calendar year the contract was open and in years when the local government was eligible for CDBG funds, even if it had no open contracts.

B. Grantee Fair Housing Items

1. Is the complaint/referral log maintained? Yes No
 - a. Who maintains log? Name, title, phone number: _____
 - b. Are all questions answered? Yes No
 - c. How many complaints received per year? _____
 - d. Are the complaints housing related? Yes No
 - e. Is the file kept confidential? Yes No
 - f. Location of the file: _____
2. Is staff knowledgeable about fair housing? Yes No
 - a. Has staff attended fair housing training? Yes No
 - b. When/where? _____
 - c. Does staff need fair housing training? Yes No

If yes, follow up

AFFH (page 2 of 2)

- 3. Does staff have the referral lists of appropriate agencies? Yes No
- a. Is the Attorney General's office (Phoenix and Tucson) listed? Yes No
- b. Is HUD listed? Yes No
- c. Are addresses and phone numbers listed? Yes No
- d. Is HUD's website listed? Yes No

- 4. How many complainants were referred to the following?
 - a. Attorney General-Phoenix # _____
 - b. Attorney General-Tucson # _____
 - c. HUD # _____
 - d. Other # _____

Name, address, phone number:

ADOH Staff: _____ Date: _____

cc: Fair Housing Coordinator

Comments:

Civil Rights and EEO Information

CIVIL RIGHTS and EEO INFORMATION FORM

On-Site Monitoring Form

UGLG: _____ Monitoring Date: _____

UGLG - NOTE: Please complete this form and have it available on the scheduled monitoring date.

Discrimination Grievances (includes employee and general public discrimination complaints)

1. File exists: Yes No

If No, explain: _____

2. Location of file: _____

3. File is kept confidential: Yes No

If No, explain: _____

4. Number, Description and Status of Unresolved Grievances (general):

5. Number, Description and Status of Unresolved Grievances (related to CDBG-funded activity)

6. EEO Posters visible: Yes No

Location(s) of Poster(s): _____

To be completed by UGLG:

I certify by signing below that the information provided is true and correct to the best of my knowledge.

Signature _____ Date _____

Printed Name _____ Title _____

Construction Contracts (page 1 of 2)

CONSTRUCTION CONTRACTS

On-site Monitoring Form

Pre-visit File Check

UGLG: _____ CDBG Funding Agreement # _____

1. Activity Name: _____
2. Date bid was desk monitored and approved: _____
3. Follow up actions to be documented on-site, if any: _____

On-site Visit

1. Bid Notice Yes No N/A Comments

- | | | | | |
|-------------------------------------|--------------------------|--------------------------|--------------------------|-------|
| a. Date published: _____ | | | | |
| b. Paper(s): _____ | | | | _____ |
| c. Publication appropriate | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| d. Affidavit of publication | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| e. Notice includes: | | | | |
| bid receipt deadline | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| location, date, time of bid opening | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| sealed bid declaration | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

2. Bidder's List Yes No N/A Comments

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|-------|
| a. At least 3 contractors on list | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| b. Documentation of mailing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| c. If bid not mailed to all on list, indication that list is rotated | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

3. Bid Opening Date Comments

- | | | | | |
|--|--------------------------|--------------------------|--------------------------|-------|
| a. Date, time, location, list of those present | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| b. Information regarding each bid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| c. Number of bids received | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Construction Contracts (page 2 of 2)

4. Bid Award				Yes	No	N/A	Comments
a.	Low bid award or documentation of reason for selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
b.	Notification of award/non-award to all bidders includes protest procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
5. Signed Contract				Yes	No	N/A	Comments
a.	Date signed:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
b.	Payment bond provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
c.	Performance bond provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
d.	Licensed contractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
g.	Bid incorporated into contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
6. Change Orders				Yes	No	N/A	Comments
	Approved and appropriate (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
	If project involved historic properties, SHPO approval for all change orders was documented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		
7. Architect/Engineer Approvals				Yes	No	N/A	Comments
	Documentation of work in progress/approvals from architect/engineer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____		

ADOH Staff: _____ Date: _____

Comments:

File Memorandum (page 2 of 3)

Officials Contacted (Name & Title)

B. Fundability Verification

	Yes	No	N/A	Comments
1. Activities are the same as indicated in application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Activities are in the same location as in application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If area-wide LM/SB:				
a. Service/Target area is same as in application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Area appears to be LM/SB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. If facility/service, activity is serving intended group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. If direct benefit, correct income limits being used and all household information is available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. If jobs, documentation of total number created/retained and the number of LM persons employed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Temporary Construction signage giving credit to ADOH for funding exists.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. If CDBG-funded activity involves transitional housing, documentation that the service has been registered with www.socialserve.com per ADOH contract agreement language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Pictures: Before, Progress, After pictures have been provided to ADOH.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

C. Files

	Yes	No	N/A	Comments
1. All files labeled with:				
a. Contract Number and "CDBG"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Other appropriate identification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Application and Contract File				
a. Complete application on file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Revisions, Amendments, CLCs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Correspondence file complete (as appropriate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

File Memorandum (page 3 of 3)

D. Other	Yes	No	N/A	Comments
1. Activity(ies) are timely (compare w/application)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Contract Special Conditions met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Documentation for Special Survey, Windshield Survey, or SB (ARS Compliant), if applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Evidence of final inspection by local government and stamped certified plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Grantee has access to all handbooks? :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Grantee receives ADOH Information Bulletins.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADOH Staff: _____ Date: _____

Comments:

Financial Management System (page 1 of 3)

FINANCIAL MANAGEMENT SYSTEM

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

A. Pre-visit File Check

1. Number of Requests for Payment: _____ 2. Total \$ requested to date: _____
3. Total disbursed to date: _____ 4. Balance: _____
5. Follow-up needed from prior visits or audits (consult with Potential File, prior MVL, Accounting, Correspondence)
- _____
- _____

B. On-site Visit

Ask for a copy of the Revenue & Expense ledger(s) for each fiscal year this contract was open. Ledgers can be requested in the appointment memo so they will be available at the on-site visit. Ledgers must be reviewed prior to the preparation of the MVL.

1. Internal Controls	Yes	No	N/A	Comments
a. Title of person(s) who approves expenditures: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Title of person(s) who signs checks: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Title of person(s) responsible for general ledger transactions: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

2. Disbursements (random sample of 2 RFPs)	Yes	No	N/A	Comments
a. Request # _____ Amount: _____				_____
Date Authorized by ADOH: _____				_____
Date received by grantee: _____				_____
Date deposited by grantee: _____				_____
Funds were for reimbursement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
If no, all CDBG funds disbursed within 10 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Financial Management System (page 2 of 3)

2. Disbursements (cont'd) Yes No N/A Comments

b. Request # _____ Amount: _____
 Date authorized by ADOH: _____
 Date received by grantee: _____
 Date deposited by grantee: _____

Funds were for reimbursement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If no, all funds disbursed within 10 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c. Costs were incurred prior to Authority to Use Grant Funds date

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

3. Source Documentation Yes No N/A Comments

Files should contain records of invoices, vouchers and documents - select two items paid by grantee and trace through their financial/ledger system.

<u>RFP #</u>	<u>Amount</u>	<u>Paid to</u>
a. _____		
b. _____		

c. Each item includes approval to pay notation

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

4. CDBG Funded Staff (based on application including force account) Yes No N/A Comments

a. Names/Title:

b. Engaged in activities as in application

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

c. Time records signed by employee and supervisor

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Financial Management System (page 3 of 3)

5. Program Income	Yes	No	N/A	Comments
a. Records indicate source, date, amount, and deposit account	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Disbursements for eligible activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. PI spent prior to additional requests for funds (unless a revolving loan fund)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Payments timely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

6. Property Management	Yes	No	N/A	Comments
a. Fixed assets ledger lists all assets acquired w/CDBG funds and includes: description, serial/ID number, acquisition date, invoice, unit cost and total cost, location, use, condition, documentation of disposition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Inventory agrees w/application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Policies and Procedures in place for preventative maintenance and security of equipment including maintenance through warranty if applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

7. Other Items	Yes	No	N/A	Comments
a. Indirect cost documentation, if applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Audits: File contains or identifies location of all audits and related correspondence pertaining to contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Follow-up actions from prior visits or audits were implemented (see A.5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADOH Staff: _____ Date: _____

Comments:

Financial Systems Survey (page 1 of 3)



Financial Systems Survey

UGLG: _____ CDBG Funding Agreement #: _____

Please answer every question by filling in the circle next to the correct answer. Attach materials and document comments as required.

As stewards of federal funds, the Arizona Department of Housing awards funds to communities qualified to receive CDBG small cities grants that are both capable of achieving CDBG project goals/objectives and upholding their responsibility for properly managing funds as they achieve those objectives.

This survey will be used primarily for initial monitoring of the community/organization. This survey may also be used in evaluating the financial capability of the community/organization in the award process. Deficiencies should be addressed for corrective action and the community/organization should consider procuring technical assistance in correcting identified problems.

A. GENERAL INFORMATION

1. Has your community/organization received a Federal or State Grant within the last two years?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Has your community/organization completed an A-133 Single Audit within the past two years? If yes, please attach a copy of your Management Letter, including Findings and Questioned Costs.	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. If your community/organization has not completed an A-133 Single Audit, have your financial statements been audited, reviewed or compiled by an independent Certified Public Accountant within the past two years? If yes, please attach a complete copy of the most recent audited, reviewed or compiled financial statements.	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Please attach a schedule showing the TOTAL federal funds (by granting agency) expended by your community/agency for the most recent fiscal year. Note: If your community/organization had an A-133 Single Audit, a copy of the "Schedule of Expenditures for Federal Awards" can be submitted	
5. Has your organization received funding from the Arizona Department of Housing within the past two years? If yes, specify the grant contract number(s): _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Has your community/organization been granted tax-exempt status by the Internal Revenue Service? (obtain IRS Statement)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
7. If you answered YES to question #6, under what section of the IRS code? O 501 C (3) O 501 C (4) O 501 C (5) O 501 C (6) O Other. Specify: _____	
8. Does your organization have established policies related to salary scales, fringe benefits, travel reimbursement and personnel policies?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Financial Systems Survey (page 2 of 3)

B. FUNDS MANAGEMENT

1. Which of the following describes your community's/organization's accounting system?	<input type="checkbox"/> Manual <input type="checkbox"/> Automated <input type="checkbox"/> Combination
2. How frequently do you post to the General Ledger?	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other
3. Does the accounting system completely and accurately track the receipt and disbursements of funds by each grant or funding source?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Does the accounting system provide for the recording of actual costs compared to budgeted costs for each budget line item?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Are time and effort distribution reports maintained for employees working fully or partially on state or federal grant programs which account for 100% of each employee's time?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Is your community/organization familiar with Federal Cost Principles (i.e. OMB Circular A-87, A-122 or A-21)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
7. How does your organization plan to charge common/indirect costs to this grant? NOTE: Those organizations using an indirect cost plan/rate need to attach a copy of the methodology and calculations in determining the rate.	<input type="checkbox"/> Direct Charges <input type="checkbox"/> Utilizing an Indirect Cost Allocation Plan or Rate

C. INTERNAL CONTROLS

1. Are duties of the bookkeeper/accountant segregated from the duties of cash receipt or cash disbursement?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment and the preparation of payroll?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Are all accounting entries and payments supported by source documentation?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Are cash or in-kind matching funds supported by source documentation?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Are employee time sheets supported by appropriately approved/signed documents?	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Does the organization maintain policies that include procedures for assuring compliance with applicable cost principles and terms of each grant award?	<input type="checkbox"/> YES <input type="checkbox"/> NO

D. PROCUREMENT

1. Does the community/organization maintain written codes of conduct for employees involved in awarding or administering procurement contracts?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Does the community/organization conduct purchases in a manner that encourages open and free competition among vendors?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Does the community/organization complete some level of cost or price analysis for every major purchase?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Does the community/organization maintain a system of contract administration to ensure contractor conformance with the terms and conditions of each contract?	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Does the community/organization maintain written procurement policies and procedures?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Financial Systems Survey (page 3 of 3)

E. CONTACT INFORMATION

Please indicate the following information. In the event that the Arizona Department of Housing has questions about this survey, this individual will be contacted.

Prepared By: _____

Job Title: _____

Date: _____

Phone/Fax/Email: _____

F. CERTIFICATION

I certify that this report is complete and accurate, and that the Grantee/Organization has accepted the responsibility of maintaining the financial systems.

Signature – CFO/Finance Director

G. COMMENT AND ATTACHMENTS

Please use the space below to comment on any answers in Sections A – D. Please indicate the Section and Question # next to each comment. If more space is needed, please attach an additional comments page.
Number of Attachments (please number each attachment):

COMMENTS:

H. ADOH MONITORING

COMMENTS:

Signature - CDBG Specialist Date

Homeownership Assistance (page 1 of 3)

HOMEOWNERSHIP ASSISTANCE

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

A. Pre-visit File Check

1. Expected number of assistance grants/loans: _____
2. Type of assistance provided (grants/loans, down payment assistance/closing costs, etc.):

3. Date Homeownership Assistance Guidelines (HOAGs) approved by CDBG: _____
4. Follow up from HOAG approval, if any: _____
5. Were any of the purchased homes also rehabilitated with CDBG funds? Yes No

Arrangements must be made to visit three of the homeowners assisted by the program at their homes.

B. On-site Review

1. Person(s) responsible for application intake, qualifying potential homeowners:

2. Homeowner counseling provided by:

3. List topics covered during counseling.

4. List educational materials provided as part of counseling service or get copies of such.

Homeownership Assistance (page 2 of 3)

5. File Information	Yes	No	N/A	Comments
a. Marketing documentation (newspaper stories and dates, ads, information included w/water bills, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Application forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. List of applicants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Date of list: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
ii) Number of applicants: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Documentation that all applicants notified of selection or non-selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Complaint file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Number of complaints: _____				_____
ii) Response/resolution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Records of benefit by ethnicity, gender, handicapped status, other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. Total number of grants/loans made: _____				_____
h. Review 3 individual case files:				
Case #1: _____				
Case #2: _____				
Case #3: _____				

Answer as applicable for each case file: "Y" (yes), "N" (no), "N/A" or with requested information i.e. date, amount, etc.

	Case #1	Case #2	Case #3
6. Client contact sheet (optional)			
7. Date of application form			
8. Authorization to obtain information (Privacy Act)			
9. Verification of low/mod status through employment, credit liability, other income, SS benefits			
10. Credit report, if applicable			
11. Date of approval notification			
12. Verification of attendance at counseling sessions			
13. Property inspection			
14. Lead based paint information provided			
15. Closing documents verifying possession by the homeowner			

Homeownership Assistance (page 3 of 3)

	Case #1	Case #2	Case #3
16. Complete the following for LOAN programs only			
a. Right of rescission			
b. Preliminary title report			
c. Promissory note			
d. Total amount of loan			
e. Repayment schedule			
i) Term			
ii) Interest rate			
iii) Monthly amount			
iv) Deferred amount			
f. Deed of trust			
g. Escrow account number			
i) Contains CDBG Funds (if yes, complete the following)			
Current amount of CDBG funds in account			
Account earns interest			
Funds disbursed within 10 days			
ii) Contains non-CDBG related funds			
Describe account:			
h. Repayment amount correct and timely			
If No, appropriate action taken			
i. Amount paid to date			

ADOH Staff: _____ Date: _____

Comments:

Housing Rehabilitation – Beneficiary Files (page 1 of 3)

HOUSING REHABILITATION (Owner) – Beneficiary Files

On Site Monitoring Form

UGLG/Non-Profit: _____ CDBG/SHF Funding Agreement # _____

Family Name & Address: _____ Project # _____

1. Participant Information	Yes	No	N/A	Comments
a. Homeowner Contact Sheet (optional)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Homeowner Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Application Date: _____				
ii. Authorization of Obtain Info (Privacy Act)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
iii. Source of Income (employment, retirement, SS etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
iv. Verification of Household Size (i.e. copies of ID, Birth Certificates, SS Cards)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
v. Certification of Owner - Principal Residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Third Party Verification of Income? (Use Sect 8 Guidelines HUD 4350.5) (at least 2 consecutive mos. source documentation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Income at or below 80%AMI? (verify calculations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____				_____
_____				_____
_____				_____
e. Income Verification within 6mos. Prior to investment of state funds (contract for rehab signed)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Credit Report (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. If Pre 1978: Evidence Homeowner received LBP Brochure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
h. Temporary relocation documentation (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Complaint or Grievance information (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
j. Correspondence with Homeowner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Property Information	Yes	No	N/A	Comments
a. Verification of Ownership? (i.e. Deed, Note, Title Search)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Evidence of current Homeowner's Insurance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Verification that Mortgage and Property Taxes are current? (through credit report, third party verification, Title Search, Payoff Letter, Assessor search)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Housing Rehabilitation – Beneficiary Files (page 2 of 3)

- d. Environmental Review Record
 - i. Individual Appendix A
 - ii. SHPO Clearance Letter (if applicable)
- e. Lead Based Paint Compliance (if applicable)
 - i. Lead Hazard Evaluation
 - ii. Clearance Report
- f. Homeowner Notified of Program Eligibility?

3. Construction/Rehabilitation Work Yes No N/A **Comments**

- a. Initial Written Property Inspection?
- i. Pre-construction Energy Audit by BPI
- b. Digital "Before" Photos?
- c. Cost Estimate/Work Write up with Homeowner's Concurrence?
- i. Weatherization standards included?
- d. HOME Project Set Up (if applicable)
- e. Document After Rehab Value does not exceed HUD Limits (HOME Only)
- f. Procurement:
 - i. Bid Specs, Bid Package?
 - ii. Copy of Bid Advertisement?
 - iii. At least 3 bids received?
 - iv. Copies of all bids?
 - v. Low bid accepted or appropriate documentation why low bid not selected?
 - vi. Contractor/Subcontractor Debarment check? (use website www.sam.gov)
 - vii. Contractor Employer ID: _____
 - viii. Contractor DUNS #: _____
 - ix. Contractor CCR#: _____
 - x. Print out of Contractor License from AZROC?
 - xi. Copy of Contractor current Insurance?
- g. Pre-construction conference including Homeowner?
- h. Signed contract between Grantee & Contractor or Homeowner & Contractor?
- i. Notice to Proceed? (must be after E-13)
- j. Copies of Permits or Permit Numbers?

Housing Rehabilitation – Beneficiary Files (page 3 of 3)

k	Change Orders, with approval from all parties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
l	Copies of interim progress/construction inspections?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
	i. Interim BPI Inspections?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
m	Final Inspection with Homeowner's signature of acceptance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
	i. BPI Post Construction Compliance Inspection PASS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
n	Lien Releases/waivers from Contractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
o	Warranties/Guarantees provided to Homeowner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
p	Digital "After" Photos?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
q	Copies of payment requests with back up documentation? (i.e. contractor invoices, checks etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
r	HOME Project Completion (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

4.	Loan Documents	Yes	No	N/A	Comments
a.	Copy of signed Note?(required for HOME only, unless in HRG's for CDBG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b.	Copy of recorded Deed of Trust? (required for HOME only unless in HRG's for CDBG)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADOH Staff: _____ Date: _____

Contact Person: _____ Phone or Fax: _____

Approved: Yes Contingent Upon: _____
 No

Grantee notified on (date): _____ by copy of this form separate letter/fax e-mail

Comments:

Housing Rehabilitation – Program Files (page 1 of 2)

HOUSING REHABILITATION – Program Files - CDBG

On-site Monitoring Form

UGLG: _____

CDBG Funding Agreement # _____

ADOH Staff: _____

Date: _____

A. Pre-visit File Check

1. Number of homes to be rehabilitated: _____
2. Type of rehabilitation program
 - a. Financial design (grant, deferred payment, loan, etc.)

 - b. Other design features (weatherization, senior citizens, emergency repair, etc.)

3. Date Housing Rehab Guidelines (HRGs) approved by CDBG: _____
4. Follow up from HRG approval, if any: _____
5. Are 8 or more units rehabbed for one owner, as one job? Yes No
If yes, labor standards apply - use the Labor Standards and Construction Contracts On-site Monitoring Forms.
6. Contractor eligibility verified? Yes No

B. On-site Review

1. Person(s) responsible for work write ups, cost estimates, inspections:

2. File Information	Yes	No	N/A	Comments
a. HRGs as approved by CDBG Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Marketing documentation (newspaper stories and dates, ads, information included w/water bills, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Application forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. List of applicants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Date of list: _____				_____
ii) Number of applicants: _____				_____
e. Documentation that all applicants notified of selection or non-selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Housing Rehabilitation – Program Files (page 2 of 2)

2. File Information (cont'd)	Yes	No	N/A	Comments
f. Complaint file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Number of complaints: _____				_____
ii. Response/resolution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. Records of benefit by ethnicity, gender, handicapped status, other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
h. Total number of individual files: _____				

ADOH Staff: _____	Date: _____
-------------------	-------------

Comments:

Labor Standards (page 1 of 4)

LABOR STANDARDS

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Activity Name: _____

A. Pre-Visit File Check	Yes	No	N/A	Comments
1. LS-1; Request for Wage Determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Most recent WRD number (including MOD and date): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. LS-13; Request to Conform	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. DOL response to LS-13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. LS-2; Contractor's Certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Prime Contractor: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. LS-3; Subcontractor's Certification(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. List subcontractors from LS-3s in Section 4.d for on-site follow up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
9. LS-8; Construction Status Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
10. LS-4/5; Weekly Payroll/Statement of Compliance Prime/Sub: _____ Payroll No./Date: _____ Desk Monitor Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____ _____
11. LS-9; Employee Interview Prime/Sub: _____ Employee Names: _____ _____ Desk Monitor Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ _____ _____ _____
12. Complaints/Violations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. LS-11; Investigative Report complete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Contractor/Sub Name: _____				_____
c. Employees Names: _____ _____				_____ _____

Labor Standards (page 2 of 4)

Pre-Visit File Check (cont'd)	Yes	No	N/A	Comments
d. Timely investigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Findings with sufficient documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Evidence of restitution, corrective actions, and resolution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
13. LS-12; Enforcement Report (required for restitution of \$1,000 or more or for willful/intentional violation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. Contractor/Sub Name: _____				_____
b. Employees Names: _____				_____
14. Follow-up needed from previous monitoring and/or correspondence:				_____

B. On-site Review

1. Grantee's LS monitor: _____

Complete the following from review of grantees labor standards files

2. Wage Rate Decision (WRD)

- a. Applicable WRD number (including MOD and date): _____
- b. Bid Opening Date (BOD): _____

	Yes	No	N/A	Comments
c. If last MOD received 10 days or more before BOD, evidence that bidders notified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. If last MOD received less than 10 days before BOD and not included in bid, explanation in file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. If MOD received after BOD but contract was not awarded w/in 90 days, evidence that the MOD was included in the contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. LS-13 (Request for Wage Conformance) and CDBG Program response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Labor Standards (page 3 of 4)

3. LS-6 Pre-Construction Conference Report	Yes	No	N/A	Comments
a. Date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Complete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

(This is an industry standard and ADOH recommended practice)

4. LS-4/5 Payroll	Yes	No	N/A	Comments
a. Prime Contractor same as CDBG records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Name of Prime: _____				_____
c. Number of LS-4s for prime: _____				_____
d. Names of Subcontractors: #LS-4's				_____
1) _____				_____
2) _____				_____
3) _____				_____
4) _____				_____
5) _____				_____
6) _____				_____
7) _____				_____
8) _____				_____
e. Same as CDBG records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. If no, list those subs not in CDBG files or for which no LS-3 has been approved:				_____
1) _____				_____
2) _____				_____
g. Write the number of LS-4s for each sub next to the appropriate name in d. above				_____
h. COMPLETE AND ATTACH LS-4 and LS-9 DESK MONITORING FORMS. Select a payroll and an interview that was not desk monitored.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

5. LS-9 Employee Interview	Yes	No	N/A	Comments
a. Number appropriate for prime contractor (Sec. 10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Number appropriate for subs (at least one per sub)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Labor Standards (page 4 of 4)

6. LS-10 On-site Inspections	Yes	No	N/A	Comments
a. Number appropriate (1 per month for first 2 months, quarterly thereafter)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Select one and complete the following:				_____
Correct and Complete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Date: _____				_____
Concerns: _____				_____

7. LS-11/12 Status

ADOH Staff: _____	Date: _____
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Comments:

Procurement & Contracting (page 1 of 3)

PROCUREMENT & CONTRACTING

On-site Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

(This form is used for all non-construction procurement)

A. Pre-visit File Check

1. List potential procurements not desk monitored:

Activity #	Procurement Type	Contract Issued? (y/n)	Date issued

2. Indicate any follow-up required for those items desk monitored (reference correspondence by date)

Activity #	Follow-Up Required

3. If non-competitive negotiations approved, complete the following:

Activity #	Item/Service	Approval Date

Procurement & Contracting (page 2 of 3)

B. On-site Review

1. Professional Services/RFPs

List services procured:

Act#	Type of Service	Adv. Date	RFP Deadline	No. RFPs Mailed	No. Response Received

	Yes	No	N/A	Comments
a. Bidders list maintained and rotated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. RFP evaluation sheet used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Evaluation process followed and documented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Negotiations documented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. All bidders notified of award, non-award, and protest procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Appeals process followed, if applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If some items have not been desk monitored, use Procurement Desk Monitoring Form. Form attached:

Yes No

2. Small Purchase Procurement

List items procured:

Activity # Item

	Yes	No	N/A	Comments
a. Evidence of three firms contacted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Evidence that request for information was uniform	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Evidence of evaluation factors used in award determination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

3. Non-Competitive Negotiations

List items procured without prior approval, if any, or NA:

Act. # Item/Service Acceptable?

Procurement & Contracting (page 3 of 3)

4. Sealed Bid Procurement (Equipment, Materials, Books, Vehicles, Cement, etc.)

List Items Procured:

Act. #	Item	Advertisement Date	Bid Deadline	No. Bids Mailed	No. Response Received

Bids for cement or concrete must include fly ash certification

	Yes	No	N/A	Comments
a. Bidders list used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Procedure followed and deadline adhered to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Documentation of low bid award or rationale if award based on other criteria	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. All bidders notified of award and protest procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If some items not desk monitored, use Procurement Desk Monitoring Form.

Form attached: Yes No

5. Professional Services Contracts

- a. Contract Administrator: _____
- b. List the provider of each service (refer to Section A. and comment if any discrepancy)

Act. #	Service	Provider

	Yes	No	N/A	Comments
c. Contract for each item	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Evidence that reports current	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Change order/amendments allowable (no more than 25% w/o new procurement)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Separate file for each contract/agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

If some items not desk monitored, use Procurement Desk Monitoring Form.

Form attached: Yes No

ADOH Staff: _____ Date: _____

Comments:

Public Participation

PUBLIC PARTICIPATION		On-Site Monitoring Form	
	Yes	No	N/A or Comments
Pre-Visit File Check			
1. Check ARC and ARC-R to identify missing items & list	<input type="checkbox"/>	<input type="checkbox"/>	
2. Items that appear in Application File or ARC-R do not need to be reviewed. Indicate 'N/A' in those items.	<input type="checkbox"/>	<input type="checkbox"/>	
On Site Visit			
1. Separate file maintained or part of the application file	<input type="checkbox"/>	<input type="checkbox"/>	
2. PN #2			
a. Proof of publication (for all publications)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Record of first public hearing	<input type="checkbox"/>	<input type="checkbox"/>	
c. List of Attendees	<input type="checkbox"/>	<input type="checkbox"/>	
d. Requests for TA or note that none received	<input type="checkbox"/>	<input type="checkbox"/>	
e. Responses to TA requests	<input type="checkbox"/>	<input type="checkbox"/>	
f. Record of 2 nd public hearing, if more than one held	<input type="checkbox"/>	<input type="checkbox"/>	
3. PN#4			
a. Proof of publication (for all publications)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Comments received or stated as "none"	<input type="checkbox"/>	<input type="checkbox"/>	
c. Responses to comments	<input type="checkbox"/>	<input type="checkbox"/>	
d. Minutes of meeting where resolutions adopted	<input type="checkbox"/>	<input type="checkbox"/>	
e. Attendee list for above meeting	<input type="checkbox"/>	<input type="checkbox"/>	
4. If PN #6 published			
a. Proof of publication (for all publications)	<input type="checkbox"/>	<input type="checkbox"/>	
b. Comments received or stated as "none"	<input type="checkbox"/>	<input type="checkbox"/>	
c. Responses to comments	<input type="checkbox"/>	<input type="checkbox"/>	
d. Minutes of meeting where resolutions adopted	<input type="checkbox"/>	<input type="checkbox"/>	
e. Attendee list for above meeting	<input type="checkbox"/>	<input type="checkbox"/>	

ADOH Staff: _____ Date: _____

Comments:

Section 3

SECTION 3

On-Site Monitoring Form

UGLG: _____

CDBG Funding Agreement # _____

A. Pre-visit File Check

1. List those activities that are Section 3 covered:

Activity Name

2. Does the final RFP include?

a. Section 3 Business Utilization Report (S3R-2): Yes No

b. Section 3 Applicant and New Hire Employment Report (S3R-3): Yes No

B. On-site Review

	Yes	No	N/A	Comments
1. General Section 3 File Maintained by Federal fiscal year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
a. List of qualified S-3 businesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. List of qualified S-3 residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Eligibility documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Public notice (S3P forms) and Notice Documentation (S3R-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Documentation of other actions taken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Complaints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Contract File				
a. Notice Documentation (S3R-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Business Utilization Report (S3R-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Applicant and New Hire Employment Report (S3R-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. Complaints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Note to file documenting no new hires	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

ADOH Staff: _____ Date: _____

Comments:

Special Survey

SPECIAL SURVEY	Onsite Monitoring Form
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UGLG: _____ CDBG Funding Agreement # _____

Monitoring Date: _____ Reviewer: _____

Survey File	Yes	No	N/A	Comments
1. Does the UGLG have a Special Survey File?	<input type="checkbox"/>	<input type="checkbox"/>		_____
2. Does the file indicate which CDBG projects the survey covers?	<input type="checkbox"/>	<input type="checkbox"/>		_____
3. Survey File Location: _____				_____
4. Location is secure & protects privacy?	<input type="checkbox"/>	<input type="checkbox"/>		_____
5. Does the file contain a copy of the ADOH approval of the Survey Methodology?	<input type="checkbox"/>	<input type="checkbox"/>		_____
6. Does the file contain blank copies of all forms to be used in the Special Survey?	<input type="checkbox"/>	<input type="checkbox"/>		_____
7. Non-English translations necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. Does the file contain all responses (including invalid responses)?	<input type="checkbox"/>	<input type="checkbox"/>		_____
9. Do the responses appear legitimate?	<input type="checkbox"/>	<input type="checkbox"/>		_____
10. Is the appropriate response back-up documentation retained?	<input type="checkbox"/>	<input type="checkbox"/>		_____
11. Does the file contain the original signed Survey Tabulation Form?	<input type="checkbox"/>	<input type="checkbox"/>		_____
12. Does the file contain a copy of the ADOH approval of the Tabulation and Final Survey Results?	<input type="checkbox"/>	<input type="checkbox"/>		_____

ADOH Staff: _____	Date: _____
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Comments:

Sub-recipient Monitoring Forms

- **UGLG Sub-recipient Monitoring Form**
- **Sub-recipient Financial Management System**
- **Homeownership Assistance Sub-recipient Monitoring Form**
- **Housing Rehabilitation Sub-recipient Monitoring Form**

UGLG Sub-recipient Monitoring Form (page 1 of 3)

UGLG SUBRECIPIENT MONITORING FORM

CDBG UGLG: _____ CDBG Funding Agreement # _____

Subrecipient Name: _____

A. Pre-visit File Check

1. Activity Name: _____

2. Activity Description/Services to be provided: _____

3. List related Special Conditions in the UGLG-ADOH Contract and/or in the UGLG-Subrecipient Agreement:

4. Special Conditions have been met. Yes No N/A

Comments: _____

5. The Subrecipient Agreement has been signed by all parties. Yes No

6. Reports as required in the Subrecipient Agreement are current. Yes No N/A

Comments: _____

7. A review of the Subrecipient's Financial Management System is *required*. Use other forms as applicable.

Indicate which monitoring forms used:

Financial Management System Housing Rehabilitation Homeownership Assistance

B. Site Visit

	Yes	No	N/A	Comments
1. <i>Required if activity is housing related:</i> Fair Housing poster is displayed in the administration office.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Has Subrecipient received any type of complaint or grievance during this calendar year? If yes, describe and indicate status of complaint.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Subrecipient performance (work) is as described in the Statement of Work section of the Agreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Subrecipient has achieved expected milestones/ deadlines as described in the Statement of Work portion of the Agreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. If Subrecipient is a religious organization, it is abiding by the contractual provisions for religious organizations included in the Agreement & promulgated in 24 CFR 5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

UGLG Sub-recipient Monitoring Form (page 2 of 3)

Site Visit (cont'd)	Yes	No	N/A	Comments
6. Subrecipient is maintaining records as specified in the Agreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Files are labeled w/appropriate identification.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Has the Subrecipient requested reimbursement for Administration e.g., utilities, office supplies, etc.? (For verification of administrative staff costs, use the Financial Management Monitoring Form.) If yes, review at least 2 purchases and complete the following:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Item: _____				
• File contains documentation that three firms were contacted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• File contains documentation that the request for information was uniform.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• File contains either documentation that the item was purchased for the lowest cost or rationale for other selection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Item: _____				
• File contains documentation that three firms were contacted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• File contains documentation that the request for information was uniform.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
• File contains either documentation that the item was purchased for the lowest cost or rationale for other selection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

UGLG Sub-recipient Monitoring Form (page 3 of 3)

For HR and HOA activities, use the appropriate monitoring form. See below for PS activities.

Public Service Activities	Yes	No	N/A	Comments
9. Subrecipient has marketed the service/program as agreed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Client application process as approved by grantee and CDBG.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Subrecipient is using current HUD Income Limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Subrecipient is obtaining and tracking beneficiary information (ethnicity, gender, handicapped status, other) as required for Closeout.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Number of clients served to date: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

(signature of reviewer)

(date)

(printed name)

(title)

ADOH Staff: _____ Date: _____

Comments:

Sub-recipient Financial Management System (page 1 of 2)

SUBRECIPIENT FINANCIAL MANAGEMENT SYSTEM

Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Subrecipient Name: _____

A. Pre-visit File Check

1. Number of Payment Requests submitted to date: _____ 2. Total \$ requested to date: _____

3. Total disbursed to date: _____ 4. Balance: _____

5. Current audit (FY _____) received and copy forwarded to CDBG: Yes No

6. Comments: _____

B. Site Visit

A copy of the Revenue & Expense ledger from contract for all calendar years the contract has been open must be provided with this form. The expense ledger must show each expenditure.

1. Internal Controls	Yes	No	N/A	Comments
a. Title of person(s) who approves expenditures: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Title of person(s) who signs checks: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Title of person(s) responsible for bookkeeping/ general ledger transactions: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

2. Source Documentation

Files should contain original records, invoices, vouchers and documents - select two items and trace through the system.

	Payment Request #	Amount	Expense Item	Comments
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	Approval to pay on each <input type="checkbox"/> Yes <input type="checkbox"/> No			_____

Sub-recipient Financial Management System (page 2 of 2)

3. CDBG Funded Staff (based on application)	Comments
---	----------

a. Names/Title:

b. Subrecipient staff is performing work as described in application and agreement. Yes No

--	--

c. Time records signed by employee and supervisor.
 Yes No

--	--

Comments: _____

 (Signature of reviewer) (Date)

 (Printed name) (Title)

ADOH Staff: _____	Date: _____
-------------------	-------------

Comments:

Homeownership Assistance Sub-recipient Monitoring Form (page 1 of 3)

HOMEOWNERSHIP ASSISTANCE

Sub-recipient Monitoring Form

CDBG Grantee: _____ CDBG Funding Agreement # _____

Sub-recipient Name: _____

A. Pre-visit File Check

1. Expected number of assistance grants/loans: _____
2. Type of assistance provided (grants/loans, down payment assistance/closing costs, etc.):

3. Date Homeownership Assistance Guidelines (HOAGs) approved by CDBG: _____
4. Follow up from HOAG approval, if any: _____
5. Were any of the purchased homes also rehabilitated with CDBG funds? Yes No

Arrangements must be made to visit 3 of the homeowners assisted by the program at their homes to verify existence of the residence and to discuss their experience (satisfied customer?).

B. On-site Review

1. Name and title of person(s) responsible for application intake, qualifying potential homeowners:

2. Homeowner counseling provided by:

3. List topics covered during counseling.

4. List educational materials provided as part of counseling service or get copies of such.

5. File Information	Yes	No	N/A	Comments
----------------------------	------------	-----------	------------	-----------------

Homeownership Assistance Sub-recipient Monitoring Form (page 2 of 3)

a. Marketing documentation (newspaper stories and dates, ads, information included w/water bills, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Application forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. List of applicants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Date of list: _____				_____
ii. Number of applicants: _____				_____
d. Documentation that all applicants notified of selection or non-selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
e. Complaint file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i. Number of complaints: _____				_____
ii. Response/resolution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Records of benefit by ethnicity, gender, handicapped status, other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. Total number of grants/loans made: _____				_____

6. Review 3 individual case files:

Case #1: _____

Case #2: _____

Case #3: _____

Answer as applicable for each case file: "Y" (yes), "N" (no), "N/A" or with requested information.

Client Information	Case #1	Case #2	Case #3
7. Client contact sheet (optional)			
8. Date of application form			
9. Authorization to obtain information (Privacy Act)			
10. Verification of low/mod status through employment, credit liability, other income, SS benefits			
11. Credit report, if applicable			
12. Date of approval notification			
13. Verification of attendance at counseling sessions			
14. Property inspection			
15. Lead based paint information provided			
16. Closing documents verifying possession by the homeowner			

Client Information (cont'd)	Case #1	Case #2	Case #3
17. Complete the following for LOAN programs only			

Homeownership Assistance Sub-recipient Monitoring Form (page 3 of 3)

- a. Right of rescission
- b. Preliminary title report
- c. Promissory note
- d. Total amount of loan
- e. Repayment schedule
 - i. Term
 - ii. Interest rate
 - iii. Monthly amount
 - iv. Deferred amount
- f. Deed of trust
- g. Escrow account number
 - i. Contains CDBG Funds (if yes, complete the following)
 - 1) Current amount of CDBG funds in account
 - 2) Account earns interest
 - 3) Funds disbursed within 10 days
 - ii. Contains non-CDBG related funds
Describe account: _____
- h. Repayment amount correct and timely
If No, appropriate action taken _____
- i. Amount paid to date
 - ii. Interest rate
 - iii. Monthly amount
 - iv. Deferred amount

_____ (signature of reviewer) _____ (date)

_____ (printed name) _____ (title)

ADOH Staff _____ Date: _____

Comments:

Housing Rehabilitation Sub-recipient Monitoring Form (page 1 of 3)

HOUSING REHABILITATION Subrecipient Monitoring Form

UGLG: _____ CDBG Funding Agreement # _____

Subrecipient Name: _____

A. Pre-visit File Check

1. Number of homes to be rehabilitated: _____
2. Type of rehabilitation program
 - a. Financial design (grant, deferred payment, loan, etc.)

 - b. Other design features (weatherization, senior citizens, emergency repair, etc.)

3. Date Housing Rehab Guidelines (HRGs) approved by CDBG: _____
4. Follow up from HRG approval, if any: _____

Note: Arrangements should be made to visit 3 of the homes rehabilitated to verify work done and to meet with the owners to discuss their experience (satisfied customers?)

B. On-site Review

1. Person(s) responsible for work write ups, cost estimates, inspections: _____

2. File Information	Yes	No	N/A	Comments
a. HRGs as approved by CDBG Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. Marketing documentation (newspaper stories and dates, ads, information included w/water bills, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. Application forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
d. List of applicants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Date of list: _____				_____
ii) Number of applicants: _____				_____
e. Documentation that all applicants notified of selection or non-selection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
f. Complaint file	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Number of complaints: _____				_____
ii) Response/resolution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
g. Records of benefit by ethnicity, gender, handicapped status, other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
h. Total number of individual files: _____				_____

Housing Rehabilitation Sub-recipient Monitoring Form (page 2 of 3)

3. Identify and review 3 individual case files:

Case #1: _____

Case #2: _____

Case #3: _____

Answer for each case file: "Y" (yes), "N" (no), "N/A" OR answer with requested data, i.e. date, amount, etc.

Client Information	Case #1	Case #2	Case #3
4. Client contact sheet (optional)			
5. Date of application form			
6. Authorization to obtain information (Privacy Act)			
7. Verification of low/mod status through employment, credit liability, other income, SS benefits			
8. Credit report, if applicable			
9. Ownership verification			
10. Date of approval notification			
11. Cost estimate			
12. Work write-up with owner's concurrence			
13. ERR forms EHR-3, EHR-4, EHR-5 & E-HR.6 in file			
14. Owner's color preference indicated (roof, carpet, tile, etc.)			
15. Evidence that tenant received lead based paint info			
16. Homeowner's insurance (and flood, if applicable)			
17. Contractor selection			
a. Three quotations received			
b. Low bid selected OR appropriate documentation			
c. Licensed Contractor			
d. Contractor eligibility verified?			
e. Signed contract between City/Contractor or Owner/Contractor			
18. Copy of permits or permit numbers, if applicable			
19. Notice to proceed			
20. Documentation of billing and payment approval			
21. Progress inspections, as applicable			
22. Allowable and approved change orders			

Client Information (cont'd)

Case #1	Case #2	Case #3
---------	---------	---------

CHAPTER 7. PROJECT REPORTS

Performance Report/Schedule of Completion (PR)

Performance Reports, also known as Attachment B to the Funding Agreement, are provided to the UGLG by ADOH and are due on a **quarterly** basis. ADOH at its discretion can require more frequent submissions. These reports serve as a tool for the UGLG and for ADOH so that we can best ensure that the project is on schedule. A sample Attachment B Performance Report/Schedule of Completion Form is included in this chapter.

Project Status Reports (PSR)

Project Status Reports (PSR) are used by the UGLG's non-profit sub-recipient to demonstrate that the project is serving the people it was intended to serve and that milestones and objectives of the project are met. As an example these reports might be used for a non-profit sub-recipient to report to the UGLG on the hours of operation and numbers of persons utilizing the Public Service-type activities of the non-profit. Your CD&R Program Specialist will let you know at the time of Scope of Work development, if such is applicable to your project. A sample Project Status Report is included in this chapter.

Performance Report/Schedule of Completion (PR)



ATTACHMENT B

FILL IN CDBG, HOME, HOPWA, State Housing Fund, SHP, SPC

ADOH PERFORMANCE REPORT/SCHEDULE OF COMPLETION										Page 1 of 1
Recipient	Contract Period: from to		Date							
Contract No			Revision							
Activity			Jan		April		July		Oct	
Recipient Address			Project City							
Contact Person			Zip Code							
Phone	Email		Fax							
Program Specialist	Email		Project County							
Indicate adherence to contract or schedule changes. Due by the 15th Jan, April, July, Oct.										
Contract Schedule			Contract Date		Complete Yes/No		Modification Date			
Site Acquisition										
Construction Loan-Firm Commitment										
Permanent Loan-Firm Commitment										
Other Loans-Firm HUD										
Plans, Specs, Working Drawings										
Constr Document Approval										
Bldg Permits Drawn										
Bidding Process Complete										
Site Work Begins										
Construction Complete										
Lease up Complete										
Project Complete-Contract Close Out										
Please provide a brief description of activities performed this three month period. Include occurrences that caused variation from schedule changes to plans, unforeseen circumstances, etc. Please be specific.										
Recipient Authorized Signature							Date			
							Title			

Project Status Report (PSR)

PROJECT STATUS REPORT

For Sub-recipients

For the period _____

UGLG: _____ CDBG Funding Agreement # _____

SUBRECIPIENT NAME _____

1. List the programs and number of participants during the reporting period.

Program Name/Description	Number of Participants

2. Hours of operation during reporting period (include days of the week): _____

3. Total number of hours the facility was open (excluding use by other groups): _____

4. Did any other groups use the facility during the reporting period? Yes No
If yes, complete the following:

Group Name	Date(s) of Use	Total Hours	Fee Charged for Use, if applicable

5. Beneficiary information:

- a. Number of participants/beneficiaries last reporting period: _____
- b. Number of participants/beneficiaries this reporting period: _____
- i. Number of LM beneficiaries: _____
- ii. Number of non-LM beneficiaries: _____

CERTIFICATION: By my signature below, I certify that:

- LM status has been determined based on household income and according to CDBG guidelines;
- Documentation is available to support the information provided; and
- The information provided is true and correct to the best of my knowledge.

Signature

Title

Printed Name

Date

CHAPTER 8. CLOSEOUT REPORTS

Introduction to Closeout Reports

The CDBG Program's Closeout system establishes procedures to ensure that all applicable administrative actions and projects within each Funding Agreement have been completed by the grantee and approved by CDBG, and that the National Objective for each activity has been met.

HUD requires that a Closeout system include procedures relating to termination and suspension of a contract; submittal of reports; refunds; settlements and adjustments of funds; contract audits; and accounting for all property acquired with CDBG funds. Samples of all Close Out forms are included in this chapter.

When to Closeout

The Closeout report is due no later than sixty (60) days after either the Funding Agreement terminates/expires or all CDBG and leverage funds have been expended. A grantee cannot submit a signed Closeout Report (CO) until all CDBG funds have been received and disbursed.

- *Zero Balance*

A Closeout Due Memo will be sent to the grantee when ADOH approves the final RFP causing the project budget to result in a zero balance.

- *De-obligated Funds*

With submittal of the final RFP, any remaining funds are to be de-obligated by ADOH. ADOH will then send a Closeout Due Memo.

- *Funding Agreement Expiration*

When the Funding Agreement has expired, the UGLG will receive a Closeout Due Memo within thirty (30) days of expiration. The UGLG must request reimbursement for expenditures incurred prior to the expiration of the Funding Agreement, receive and disburse such funds and complete the CO by the due date stated in the memo.

- *Funding Agreement Termination for Cause or Convenience*

If the Funding Agreement is terminated by ADOH for either cause or convenience, the UGLG is still responsible for completing and submitting a CO. ADOH will send a Closeout Due Memo after appropriate notification to the grantee.

Due Date Extensions

Extensions to the CO due date may be approved on a case by case basis if requested in writing and a valid reason is provided. Extensions to the due date for the CO should be requested at least 30 days prior to the due date established in the Close Out Due Memo. CD&R Program staff reserve the right to decline requests for extension to submit. Extension communication may be provided by email.

- *Special Circumstances*

CDBG Funds That Do Not Directly Meet A National Objective

If the national objective benefit is not directly achieved by the completion of the CDBG funded activity, then the CO must address both items. For example, if the activity is an infrastructure for economic development project, the CO must describe both the CDBG funded water line extension that has been completed and the construction of the factory expansion which resulted from the line extension. It must also include information about the people who applied for and received jobs as a result of the project.

If the national objective benefit is to be achieved more than six (6) months after the final disbursement of CDBG funds, it is strongly recommended that the grantee submit a *draft* CO report.

Example: If a sewer lift station which is necessary to allow for the development of a new self help housing project is completed in December but the last self help house will not be completed until the following September, a draft CO should be submitted by the due date, with a notation about a final date for submittal.

Preparing the Closeout

The grantee should double check all figures in the CO to ensure that there are no discrepancies between sections or with other documents as described below.

Before beginning to prepare a CO, the grantee should gather the following documents:

- The Funding Agreement and all revisions;
- All RFPs and Disbursement Documentation forms (F-3,F-4);
- The Business Opportunities Report (which should be maintained on an on-going basis) for all contracts and purchase orders; and
- Construction reports or other documents describing the actual work completed.

- *Closeout Report Checklist*

Before submitting the CO to the CDBG Program, the grantee should use the CO Checklist to ensure that the CO is correct and complete. The Checklist must be submitted to the CDBG Program.

- *Certifications*

The Chief Elected Official (or designee per CD-1) should review the entire CO, and read and sign the Certifications.

- *Draft Closeout Reports*

ADOH welcomes draft CO. CDBG Program staff will review the report before it is in final form and work with the grantee to ensure its accuracy. The Chief Elected Official should *not* sign the draft report.

Administrative Closeout

An Administrative Closeout (AC) is applicable when all final reports have been received, reviewed and found acceptable; and to ADOH's knowledge, all Funding Agreement activities have been satisfactorily completed according to the terms of the Funding Agreement and there are no known issues of non-compliance.

All audits for fiscal years in which the UGLG received funds from ADOH must be received, reviewed and found to be acceptable by the ADOH Accounting Division. If any costs are questioned by ADOH as a result of any current or future audit conducted after the date of AC, and ADOH disallows such, the UGLG will be required to refund such monies back to ADOH.

CDBG Program Review

- *Closeout Report Acknowledgment*

Within ten (10) working days of receipt of the CO, ADOH will acknowledge such and provide an estimated date for review. Generally, the CO review will be within thirty (30) days of receipt. This acknowledgment is *not* an approval of the Closeout Report.

- *Consistency Review*

ADOH will check for all items indicated on the CO Checklist, which include:

- The total shown on the Section I - Business Opportunities Report (BOR) shall be equal to the total of funds received (CDBG and Leverage) as shown in Section III - Contract Accounting.

- The Section I – BOR is fully completed and all information regarding the contractor/vendor is included.
- The list of providers on the Section I - BOR must be supported by other information in the file (e.g. contractor's verification forms, professional services contracts and the names of the vendors on the RFPs).
- The total amount of CDBG dollars expended per activity on the Section II – Performance Report is the same as that shown on the total of the RFPs.
- The total number of beneficiaries as stated in the Section II.C Performance Report and the total number of homes rehabbed or built, if a direct benefit activity; is the same as that shown in Section IV – Demographic Spreadsheet.
- The total of assistance per home on the Section IV – Demographic Spreadsheet is supported by the RFPs and is consistent with the information on the BOR.
- The non-financial information in the Funding Agreement file, including contractor's verifications, weekly payroll reports, contracts for professional services, and other correspondence is consistent in all sections.

- *Page Numbering*

Pages shall be numbered consecutively.

- *Outstanding Monitoring Issues*

CDBG staff will determine whether the grantee has responded to all concerns identified in desk or on-site monitoring visit follow-up letter(s) and that ADOH has accepted such responses. No CO shall be approved until all such issues have been resolved.

- *On-Site Monitoring Visit*

A CO cannot be approved unless the Funding Agreement has been monitored on-site at least once. Planning only grants may be closed out based on desk monitoring only.

At the discretion of ADOH, a CO may be approved even though the last on-site visit was conducted before the disbursement of all funds. This may occur if the project was completed (or almost completed) at the time of the last visit and prior monitoring has indicated no financial or other compliance concerns.

- *Audits and Closeout Report Approval*

ADOH may withhold approval of a CO until approval of the next fiscal year's audit, including the resolution of all issues based on any of the following reasons:

- audits covering any portions of the Funding Agreement have not been received and reviewed by ADOH Accounting Division;
- prior audit reports identified serious concerns and resulted in disallowed costs; or
- outstanding audit issues remain unresolved.

Records Retention

- *Administrative Closeout*

If ADOH approves an AC, the grantee must retain all records relating to the Funding Agreement according to the retention schedule provided by ADOH. Please see the Records Retention section of Chapter 2. File and Recordkeeping Requirements of this handbook for further information.

Closeout Report Approval

- *Signature*

CD&R staff may make minor and non-substantive corrections to the CO (e.g. correcting an obvious transposition of numbers). If there are no other concerns, the Program Administrator will approve the CO and the CD&R Specialist will forward a copy of the approved document to the UGLG.

- *Special Conditions*

In rare circumstances, the CO may be approved with a Special Condition regarding additional reports. The Special Condition is usually identified in the Funding Agreement. If a Special Condition is incorporated into the CO, it will be attached to the CO and indicated in the transmittal letter.

- *Mailing*

A transmittal letter and a copy of the entire CO will be emailed to the CDBG contact person. The original CO will be retained at ADOH.

Nomination for CDBG Award

Every year as part of HUD's Annual Reporting the State, CDBG Program recommends an outstanding CDBG project to HUD for an award.

UGLGs may nominate their completed project to ADOH. Nominations should focus on the innovative character of the project and its significance to the community. UGLGs may submit a nomination as part of the Closeout package; indicate such on the Closeout Report Checklist. Please contact ADOH for the current year nomination form. Nominations will also be solicited through other mailings.

Sample Closeout Forms

- Closeout Due Memorandum
- Administrative Closeout Letter
- Closeout Certifications (Form C-6)
- Closeout Report Checklist
- Section I. – Business Opportunity Report (BOR)
- Section II. – Performance Report
- Section III. – Contract Accounting (Form C-9)
- Section IV. – Demographic Spreadsheet
- Section V. – Job Creation Retention Statement
- Annual Report for a CDBG-Funded Facility
- Project Award Nomination

Closeout Due Memorandum

JANICE K. BREWER
Governor



MICHAEL TRAILOR
Director

STATE OF ARIZONA
DEPARTMENT OF HOUSING
1110 WEST WASHINGTON, SUITE 310
PHOENIX, ARIZONA 85007

(602) 771-1000 WWW.AZHOUSING.GOV
FAX: (602) 771-1002

DATE: March 30, 2009 (sent via e-mail)

TO: Name, Title

FROM: Specialist Name, Community Development and Revitalization Specialist

SUBJECT: Closeout Report for Community Name, Contract xxx-xx

Closeout Report Due: Due date here

Effective (date here), ADOH has approved request for payment #X expending all funds in the above-mentioned contract.

OR

Effective (date here), the above-mentioned contract terminated with a balance of \$xxxxx. Please submit a final Payment Request along with any outstanding invoices, not more than ninety (90) days old, for payment prior to completing the closeout report.

As stated in the ADOH Funding Agreement, a Closeout Report is due within sixty (60) days of either the date that all funds have been expended or the date of contract expiration. Thus, ADOH anticipates receiving the Closeout Report for this contract on or **before due date here**.

If you will be unable to submit the Closeout Report by the deadline above, please notify us in writing at least 30 prior to the due date with: a) the reason for the delay; and b) a proposed date for completion and submittal of the report.

Please be sure to use the Closeout Forms attached to this email. These forms are also provided in Chapter 8 of the *CDBG Administration Handbook*. ADOH recommends that you read the entire chapter on Closeouts as it may answer many of the questions you are likely to have about the process.

As always, should you have any questions or concerns about this procedure, please contact us at 602/771-1000 or contact me at xxxx@azhousing.gov.

REV. 7-2014

Administrative Closeout Letter (page 1 of 2)

JANICE K. BREWER
Governor



MICHAEL TRAILOR
Director

STATE OF ARIZONA
DEPARTMENT OF HOUSING

1110 WEST WASHINGTON, SUITE 310
PHOENIX, ARIZONA 85007

(602) 771-1000 WWW.AZHOUSING.GOV
FAX: (602) 771-1002

[Date]

[Contact Name, Title]
[UGLG or Non-profit Name]
[Street Address]
[City, State, Zip]

**RE: Funding Agreement #[contract number]
 Administratively Closed: [Date]
 Name of Project: [project name]**

Dear [Mr/Ms]. [Contact Last Name]:

This letter is to notify you that as of the date noted above, the State of Arizona, Arizona Department of Housing (the "Department") considers the above referenced contract to be Administratively Closed. This means that the Department does not consider this contract to have any outstanding issues with regard to contract compliance:

- All final reports have been received, reviewed and found acceptable; and
- To the Housing Department's knowledge, all contract activities have been satisfactorily completed according to the terms of the contract and there are no known issues of noncompliance at this time.

All audits for fiscal years in which your agency received funds from the Department must be received, reviewed and found to be acceptable by the Department. If any costs are questioned by the Department as a result of any current or future audit conducted after the date of Administrative Closeout, and this agency disallows such, [UGLG or Non-profit Name] will be required to refund such monies back to the Department.

Administrative Closeout Letter (page 2 of 2)

As a reminder, the terms of your contract require that you retain all files and documentation pertaining to the use of these public dollars, as well as information regarding actual beneficiaries of the funds for five (5) years from the date of Administrative Closeout of the contract for all SHF projects; and three (3) years from the date of grant close out between HUD and ADOH for all CDBG projects. (The Department will notify CDBG recipient units of local government when a CDBG grant with HUD has been closed, which triggers the three (3) year retention period.) Additionally, if this project resulted in your agency holding any liens or notes as a result of this funding, you must retain all pertinent records for five (5) years beyond the expiration or release of such liens and notes.

For CDBG & SHF Homeownership: Recipients must report Program Income/Recaptured Funds and return funds within thirty (30) days of receipt.

Should you have any questions regarding the disposition of your contract, please feel free to call me at (602) 771-10[Specialist's extension number].

Sincerely,

[Specialist's Name]
[Title]

Closeout Report Checklist

UGLG: _____

CDBG Funding Agreement #: _____

Closeout Report Checklist

Check each item as completed or N/A. This form should be page 2 (after the Closeout Certification).

A. DRAFT CLOSEOUT OR FINAL CLOSEOUT

B. AUTHORIZED SIGNATURE ON CERTIFICATIONS

C. ATTACHMENTS

- 1. Certifications (required) page _____
- 2. Section I. Business Opportunities Report (required) page _____
- 3. Section II. Performance Report (required) page _____
- 4. Section III. Contract Accounting (required) page _____
- 5. Section IV. Housing Applicant/Beneficiary Statement N/A or page _____
- 6. Section V. Job Creation/Retention Applicant/
Beneficiary Statement N/A or page _____
- 7. A description of all property acquired with CDBG N/A or page _____
- 8. A description of how Program Income *was* used N/A or page _____
- 9. A description of how Program Income *will be* used N/A or page _____
- 10. Nomination Form for Outstanding CDBG Project N/A or page _____

D. CONSISTENCY REVIEW

- 1. Ensure that the totals agree in Section II.G and Section III.A.7.
- 2. The list of providers on Section I. BOR, must be supported by other information in the file, e.g., contractor verification forms, contracts, and RFPs.
- 3. The total CDBG funds expended per activity (Section II.D) equals the total indicated on the RFPs.
- 4. The number of beneficiaries (and number of units if a housing activity) stated in Section II.C is the same as in Section IV. or Section V., as applicable.
- 5. All other descriptive information is consistent throughout the Closeout Report.

E. COPY OF CLOSEOUT RETAINED FOR GRANTEE RECORDS

Page _____ of _____

SECTION I. – Business Opportunity Report (BOR)

Section I. BUSINESS OPPORTUNITIES REPORT (BOR)

UGLG:	Funding Agreement #	Contact Person	Phone Number	Address, City, State Zip Code +4
-------	---------------------	----------------	--------------	----------------------------------

Project Name:

Contractor/Subcontractor Information												
A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.
Amount of Contract	Type of Trade Code*	Racial Code*	Hispanic Owned (Y/N)	Women Owned (Y/N)	IRS Tax ID (EIN) and DUNS Numbers	Sec. 3 (Y/N)	Legal Name	Street Address	City	State	Zip Code	Date of Contract
\$												
\$												
\$												
\$												

*See Demographic and Trade Code table below for information

Vendors/Suppliers/Professional Service Providers Information												
A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.
Amount of Contract	Type of Trade Code*	Racial Code*	Hispanic Owned (Y/N)	Women Owned (Y/N)	IRS Tax ID (EIN) Number	Sec. 3 (Y/N)	Legal Name	Street Address	City	State	Zip Code	Date of Contract
\$												
\$												
\$												
\$												
\$												
\$												
\$												

*See Demographic and Trade Code table below for information

Demographic and Trade Codes	
Race	Type of Trade Code (All Other Activities)
11 – White	1 – New Construction
12 – African American	2 – Substantial Rehab
13 – Asian	3 – Repair
14 – American Indian or Alaskan Native	4 – Service
15 – Native Hawaiian or Other Pacific Islander	5 – Project Management
16 – American Indian or Alaskan Native and White	6 – Professional
17 – Asian and White	7 – Tenant Services
18 – African American and White	8 – Educational Training
19 – American Indian or Alaskan Native and African American	9 – Architecture/Engineering
20 – Other Multi-racial	10 – Other

REV. 7-2014

SECTION I. – Business Opportunity Report (BOR) Instructions

Section I. BUSINESS OPPORTUNITIES REPORT FORM (BOR) Instructions

This form should be completed as contracts are awarded to the engineer, contractor, etc. Use continuation pages as necessary.

To complete the BOR, gather the following materials:

- all Payment Requests (F-3s and F-4s)
- all contracts and purchase orders
- ledgers
- DUNS numbers and Tax ID numbers for all contractors and sub-contractors. Both DUNS and Tax ID Numbers are 9 digits long.

Provide the required information for all contracts or purchases of \$10,000 and over to the same provider.

Fill out Unit of General Local Government (UGLG) and Contract information at the top of the form.

- A. Enter the total amount of the provider's contract (CDBG and any other funds) including any change orders. Any contractor, subcontractors, vendors, suppliers or professional service providers that appear on the BOR should have also appeared on Payment Requests.
- B. Enter the type of trade using the codes (1-0 for Housing Activities and 1-3 for all other activities) at the bottom of the BOR form.
- C. *Indicate the race of the owner(s) of the company using the Demographic/Race codes (11-20) at the bottom of the BOR form.
- D. *Enter (Y)es or (N)o to indicate if the business is Hispanic-owned.
- E. *Enter (Y)es or (N)o to indicate if the business is woman-owned.
- F. Enter the business' IRS Tax ID/EIN Number and the DUNS Number for Contractors and Subcontractors. Each number should be 9 digits long.
- G. Enter (Y)es or (N)o to indicate if the contractor was Section 3 covered (contract was \$100,000 or more). Section 3 does not apply to Public Service activities or Equipment purchases.
- H - L. Enter the Legal Name and address of the business.
- M. Enter the date of the contract with the contractor/vendor/professional service provider.

*ADOH is required to collect information regarding the race, ethnicity, and gender of business owners from which goods and services have been procured. There is no requirement, however, that a certain percentage of contracts or a certain dollar amount must be awarded to any such firm; and the number of contracts or dollar amount awarded to minority and/or woman owned businesses does not impact in any way on the grantee. The grantee is responsible only to report the information requested and of course, not to discriminate.

This information may be available in the contract or the grantee may find it necessary to contact the provider. If a determination is impossible, please state "unknown" in the section (C, D or E).

REV. 7-2014

SECTION II. - Performance Report

Section II. PERFORMANCE REPORT

UGLG: CDBG Funding Agreement #:				
A. Activity No.	B. Activity Name	C. Actual Accomplishments	D. CDBG Funds	E. Leverage/Other/PI Funds
1	Administration		\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
2	Actual Activity Name from Form 1 of Application			
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
F. Totals			\$	\$

G. TOTAL OF ALL FUNDS (D. + E.): \$ _____

Report Prepared By: _____ (Typed Name)
 Date: _____
 Phone Number: _____

Arizona Department of Housing, 1110 W. Washington, Suite 310, Phoenix, AZ 85007 REV. 7-2014

SECTION II. – Performance Report Instructions

Section II. PERFORMANCE REPORT Instructions

- A. Activity #1 for Administration and Activity #2 are entered. Preparer need not adjust these.
- B. The Activity #2 item will indicate the project name and address.
- C. Enter the *actual* accomplishments for each Activity. To determine the actual accomplishments for each activity: review contract scope of work and performance reports; and visit the activity site(s). See examples below. Housing and Economic Development activities must also include beneficiaries.

Examples:

For a street project: the number of linear feet of street paved; the materials used to pave the streets; the street names.

For a water project: the number of linear feet of water pipe laid; the locations of the pipe; the size of pipe that was installed.

For an economic development project: the name and address of the business that benefited, the number of jobs created, and the type of products or service it provided.

For an architectural barrier removal project: the number and location of curb cuts; the number and location of restrooms made accessible; the number and location of ramps or handicapped parking installed.

For a housing rehab project: include the number of homes rehabilitated, the number of beneficiaries, type of assistance (loans, grants, DPLs, etc.), average size of assistance or range, specific area in which assistance was provided if there was a target area, who provided HR services, and the subrecipient, if any, that administered the program. (This information should not conflict with that provided in Section IV.)

For a public service activity: include how the funds were actually spent (purchased a van (size, model etc.), paid salaries of (type of staff), paid O&M costs for x months), the total number of beneficiaries, the number of LM, the number VL (50% of median income) if known, and ethnicity data.

- D. Enter the amount of CDBG funds expended for each Activity.
- E. Enter the amount and type (see codes below) **and source** (i.e. RD, ADOT, UGLG General Funds, etc.) of non-CDBG funds expended for each Activity:
 - (L) = Leverage
 - (O) = Other
 - (PI) = Program Income
- F. Enter the TOTAL for each column (D. and E.).
- G. Enter the TOTAL of ALL funds expended for this contract.

SECTION III. – Contract Accounting (Form C-9)

UGLG: _____

CDBG Funding Agreement #: _____

Section III. CONTRACT ACCOUNTING (Form C-9)

A. GRANT BALANCE

- 1. TOTAL CDBG FUNDS as stated in the *original* contract \$ _____
- 2. CDBG FUNDS ADDED TO THIS CONTRACT \$ _____
 - From CDBG Funding Agreement # _____ Amount: _____
 - From CDBG Funding Agreement # _____ Amount: _____
- 3. FUNDS TRANSFERRED TO OTHER CDBG CONTRACT(S) \$ _____
 - To CDBG Funding Agreement # _____ Amount: _____
 - To CDBG Funding Agreement # _____ Amount: _____
- 4. DEOBLIGATED FUNDS \$ _____
- 5. TOTAL CDBG FUNDS PER MOST RECENT FORM 1-R \$ _____
- 6. TOTAL CDBG FUNDS RECEIVED AND DISBURSED \$ _____
- 7. TOTAL EXPENDITURES (CDBG, LEVERAGE, and OTHER FUNDS) \$ _____

B. PROGRAM INCOME (PI): Yes N/A

- 1. Amount of Program Income earned during grant period \$ _____
- 2. Amount of Program Income disbursed during grant period \$ _____
- 3. Balance of Program Income retained by grantee \$ _____
- 4. Description of how Program Income *was* used is attached as page:_____.
- 5. Description of how Program Income retained by grantee *will be* used is attached as page _____.

Prepared By: _____
 (Signature) (Printed Name)

Page ____ of ____

SECTION IV. – Demographic Spreadsheet

Part IV. Housing Applicant/Beneficiary Statement

CDBG Funding Agreement #: _____ UGL#: _____

IDIS #	Name	Address, Zip Code +4	* Lead Paint	Amount Expended (\$)	Alter Rehab Value (\$)	Project Completion Date (mm/dd/yy)	# Bedrooms	Persons in HH (#)	Gross Monthly Income (\$)	**HH% of Area Median Income	* Race of HH	* Hispanic (Y/N)	* HH Type	* Head of HH	* Disabled (Y/N)

Total # of Units:	
CDBG Funds Expended:	\$0.00

* Demographic Codes	HH % of Area Median Income	Race of HH	Hispanic?	HH Type (Select ALL that apply)	Head of Household	Disabled?
Lead Paint?	1- 0 to 30% 2- 31 to 50% 3- 51 to 60% 4- 61 to 80%	11- White 12- Black/African American 13- Asian 14- American Indian or Alaskan Native 15- Native Hawaiian or other Pacific Islander 16- American Indian or Alaskan Native & White 17- Asian & White 18- African American & White 19- American Indian or Alaskan Native & Black 20- Other Multi-racial	Y – Yes N – No	1- Single, Non-Elderly 2- Elderly (62+) 3- Single Parent 4- Two parent adults 5- Other (e.g 2 unmarried adults)	M – Male F – Female	Y – Yes N – No
1 – Housing constructed before 1978 a. Lead Safe Work Practices b. Interim Controls c. Abatement 2 – EXEMPT Housing constructed 1978 or later 3 – Otherwise exempt						

SECTION V. – Job Creation Retention Statement

Section V. JOB CREATION/RETENTION APPLICANT/BENEFICIARY STATEMENT

CDBG Funding Agreement #:

A. Position Title	B. Name & Social Security No.	C. FHH (Y/N)	D. DIS (Y/N)	E. Elderly (Y/N)	F. Ethnicity (11-20)	G. Income Level LM/VL/N	H. Date & Type of Income Determination	I. Interview Date	J. Job Offer Date	K. Result	L. Job Class at Hire	M. Wage & Fringe Ben.	N. Full or Part Time	O. Hispanic (Y/N)

Race Codes:
11 = White
12 = Black/African American
13 = Asian
14 = American Indian/Alaska Native
15 = Native Hawaiian/Other Pacific Islander
16 = American Indian/Alaskan Native & White
17 = Asian and White
18 = Black/African American & White
19 = American Indian/Alaskan Native and Black/African American
20 = Other Multi-Racial Category

Report Prepared By: _____ Date: _____ Phone Number: _____
(Signature) (Typed Name)

SECTION V. – Job Creation Retention Statement Instructions

**Section V. JOB CREATION/RETENTION APPLICANT/BENEFICIARY STATEMENT
Instructions**

NOTE: To be considered an applicant, the person must meet the minimum qualifications for the position. For example, if the job requires that a person have a valid driver's license, those persons applying for the position *without* a driver's license are *not* considered applicants for reporting purposes.

- A. Enter the title of job for which interviews were conducted and a person hired.
- B. Enter the name and social security number of *each applicant* for the described position.
- C.* **Female Head of Household is defined as one female adult with a child or children, or who is pregnant. A female living alone or with other adults is not considered a female head of household. Indicate (Y)es or (N)o.**
- D.* **Enter (Y)es if the applicant is a person(s) with disabilities. Otherwise indicate (N)o.**
- E.* **Elderly is defined as 62 years of age or older. Indicate with a (Y)es or (N)o if the applicant was elderly.**
- F.* **Indicate the Race of the applicant:**

- 11 = White
- 12 = Black/African American
- 13 = Asian
- 14 = American Indian/Alaska Native
- 15 = Native Hawaiian/Other Pacific Islander
- 16 = American Indian/Alaskan Native & White
- 17 = Asian and White
- 18 = Black/African American & White
- 19 = American Indian/Alaskan Native & Black/African American
- 20 = Other Multi-Racial Category

- G. **Indicate the income level of the applicant:**
 - LM = Low/Mod Income (at or below 80% AMI);
 - VL = Very Low Income (at or below 50%AMI);
 - N = Not Low Mod
- H. Enter the date and method of LM determination. Allowable methods for determining LM are:
 1. Self certification by the applicant. (Self certification form to be retained in file.)
 2. Based on location (resident of an Enterprise Community or Empowerment Zone, 70% LM census tract or BNA; 20% poverty census tract or BNA) and documented by address and method to verify, e.g. driver’s license, mail, etc.
 3. Documented by a public program with income criteria at or below the CDBG level. Provide the name of the program and name and telephone number of a responsible official at the program. (Documentation must be maintained in the file.)
- I. **Enter the date the applicant was interviewed. Enter N/A if not applicable.**
- J. - K. **Self explanatory.**
- L. **Indicate if the position has been under filled by a trainee or apprentice.**
- M. **Enter the beginning hourly wage and fringe benefit amount. Enter N/A if not applicable.**
- N. **Indicate:**
 - FT=Full Time position (at least 32 hours per week)
 - PT=Part Time position (less than 32 hrs per wk).
 - If PT, include the number of hours per wk)
- O. **Indicate with a Y if the individual is of Hispanic Origin. Indicate with an N if the individual is non-Hispanic.**

* Note: These categories are determined by self identification, visual observation or any other method that the grantee feels is appropriate - sometimes just a best guess. The UGLG is responsible only to report the information requested and of course, not to discriminate.

REV. 7-2014

Annual Report for a CDBG-Funded Facility

ANNUAL REPORT FOR A CDBG-FUNDED FACILITY

Use of this form required only when instructed as part of the final Closeout of the contract.

UGLG: _____ CDBG Funding Agreement #: _____

Report for Year Ending: _____

The following information is requested to show that the facility/building is meeting the CDBG LM National Objective by benefiting at least 51% LM persons. This objective is met if at least 51% of the space serves only LM; or at least 51% of the persons using the facility (unduplicated count) are LM. Thus, it is advisable to provide as much information as possible about the facility's tenants and program beneficiaries.

1. Program Name	2. Program Description	3. Space Occupied	4. Total Beneficiaries	5. Total LM Beneficiaries	6. LM %
		%			%
		%			%
		%			%
		%			%

1. List the programs that are housed in the facility and that provide services on a regular basis.
 2. Describe the purpose of each.
 3. Indicate the percentage of space each program occupies in the building.
 4. Indicate the total number of beneficiaries for each program.
 5. Show the total number of LM beneficiaries for each program.
 6. Show the LM % of the beneficiaries for each program
-
7. Provide documentation from each program for the beneficiary information provided above.
8. Provide a floor plan sketch that shows the location and space occupied by each program.
9. Describe any other uses of the facility such as meetings, classes, etc., to include purpose, frequency, etc.

Project Award Nomination

CDBG Project Award Nomination Form

UGLG Name:
Contact Person:
Address:
Email:
Telephone Number:

Name of Project:
Type of Project:
Area Served:
Primary Beneficiary/Category:

General Project Information:
 a) Amount of CDBG funds: \$
 b) Year that activity was funded:
 c) Project Start Date:
 d) Project Completion Date:

Sources of leverage: Were other funds, besides CDBG, leveraged for this project?
 a) Yes/ No
 b) If any, list other sources, amounts and uses of funding, please include in-kind contributions:
 c) What was the total project cost including CDBG and leveraged funds? \$

Other Partners:
 Names of sub-recipients/non-profits involved with this project:
 Public departments and agencies involved with this project:
 Other key players who contributed to the project (lenders, schools, business owners, elected officials)?

SUMMARY OF SUCCESS STORY: Please provide a general summary of the project. Some suggestions are listed below—you do not need to answer these specific questions.

- What is one unique aspect about this story?
- Who were the beneficiaries of the project and how did it change their lives (in general)?
- What are some of the factors that contributed to the project's success?
- What were some of the obstacles you faced?
- How did working with partners contribute to the project?
- Why was the use of CDBG funds critical to the project?
- How did the project contribute to the community as a whole?
- What was the most significant result of this project?

DOCUMENTATION:
 Please include hyperlinks and/or photos, video clips, news media coverage, and/or statistics summarizing your success or other tangible materials to help further illustrate your story.

CHAPTER 9. FILE CHECKLISTS

Sample File Checklists

- Application, Contract and Closeout
- Civil Rights/EEO/Affirmative Action
- Correspondence
- 504/ADA Requirements
- Affirmatively Furthering Fair Housing (AFFH)
- Housing Rehabilitation Beneficiary Files
- Housing Rehabilitation Program Files
- Financial Management and Audits
- Public Participation

Application, Funding Agreement and Closeout



**CDBG FILE CHECKLIST
APPLICATION, FUNDING AGREEMENT AND CLOSEOUT**

CDBG Funding Agreement #: _____ Funding Agreement Term: _____
 Date to Terminate: _____ Extended Termination Date (if applicable): _____

Check/Date: Item:

Application:

- _____ CDBG Application as approved by ADOH to include all maps, Certifications, Resolutions, Citizen Participation Plan, Public Participation, and all revisions/additions/clarifications.
- _____ Additional Public Participation NOT Submitted with the Application

Funding Agreement:

- _____ CDBG Funding Agreement including Award Letter
- _____ Form CD-1 (authorization to sign grant documents) and any updated CD-1s
- _____ Revisions to Funding Agreement (I-R's, CLCs and Amendments) as approved by ADOH
- _____ Filed Amendments, to include Resolutions and evidence of Public Participation
- _____ Program Grievances or complaints and status or disposition of each, as authorized by the Citizen Participation Plan

Close Out:

- _____ Closeout Report
- _____ Closeout Approval Letter (Closeout Approved: _____ (date))

Civil Rights/EEO/Affirmative Action



**CDBG FILE CHECKLIST
CIVIL RIGHTS/EEO/AFFIRMATIVE ACTION
CDBG Funding Agreement # _____**

UGLG: _____

Check/Date:	Item:
_____	UGLG Employment Materials including: Employment Policies & Procedures; Application Forms; and Employment Advertising comply with Civil Rights & EEO.
_____	Location of EEO Posters: _____
_____	Documentation of direct benefits (e.g. jobs or housing rehabilitation to include both applicants for and actual recipients of the benefits (identified by Activity number))
_____	List of all contracts, agreements, and purchases made in whole or in part with CDBG funds and documents that CDBG funded contractors and businesses are non-discriminatory and equal employment opportunity employers.
_____	Documentation of persons relocated/displaced in demographic terms. (Records must be maintained of all persons displaced and must include: ethnicity, gender, age, disability, income, and familial status. Replacement housing should be available in all sections of the community and not only those areas with similar ethnic concentrations.)
_____	Documentation of Discrimination grievances on file (including responses to such) and kept confidential.

Correspondence



Arizona
Department
of Housing

CDBG FILE CHECKLIST
CORRESPONDENCE
CDBG Funding Agreement # _____

UGLG: _____

Check/Date:	Item:
_____	Award Letter
_____	CDBG Program letter transmitting Funding Agreement (contract) for signature
_____	CDBG Program letter transmitting filed Funding Agreement and forms
_____	CDBG Program letters regarding desk monitoring
_____	UGLG responses regarding desk monitoring
_____	CDBG Program letters confirming on-site monitoring (MV)
_____	CDBG Program monitoring visit follow up letters (MVL)
_____	UGLG responses to monitoring follow up letters (MVL-R)
_____	Quarterly Performance/Schedule of Completion Reports (Attachment B)
_____	Letters regarding Closeout revisions
_____	Closeout approval letter from ADOH
_____	Miscellaneous correspondence (If correspondence is located in another file (e.g. ERR, Labor Standards, etc.), note the location in the check/date column.)

If it helps to locate a particular document within the file, tab and number and then insert the tab number and the date in the check/date column for easier reference.

504/ADA Requirements (page 1 of 2)



CDBG FILE CHECKLIST
 504/ADA REQUIREMENTS FOR UGLG
 CDBG Funding Agreement # _____

Check/Date:	Item:
-------------	-------

Communications:

- _____ Documentation regarding UGLG use of TDD/TTY or Arizona Relay Service
- _____ Information about location of the TDD/TTY
- _____ Documentation regarding staff training on use of the TDD/TTY or Arizona Relay Service
- _____ Copy of stationary with TDD/TTY number or Arizona Relay Service number
- _____ Documentation to show that TDD/TTY or the Arizona Relay Service number is used on UGLG brochures, etc.
- _____ Documentation regarding other efforts made to ensure that communications are accessible to those with visual impairments or other physical disabilities
- _____ Documentation regarding efforts to ensure that communication at public meetings and other activities sponsored by the UGLG are accessible to the hearing impaired
- _____ Information about other auxiliary aids

Employment:

- _____ Copy of personnel policy or note with location of such
- _____ Documentation to show that policy reviewed to ensure that it does not discriminate against persons with disabilities

Self Evaluation:

- _____ Documentation regarding outreach efforts to create an advisory committee
- _____ List of advisory committee members and dates appointed
- _____ Minutes of all meetings of the advisory committee
- _____ If no committee, documentation regarding other methods used to ensure that the persons with or groups representative of persons with disabilities were consulted in the self-evaluation process
- _____ Copy of the Self Evaluation with date completed
 Date completed: _____

504/ADA Requirements (page 2 of 2)

_____ Documentation that Self Evaluation approved by appropriate authority.
Approved by: _____

_____ Updates, if applicable

Transition Plan

_____ Documentation to show that the advisory committee/other appropriate persons were involved

_____ Copy of the plan itself with date of completion
Date of completion: _____

_____ Documentation that plan approved by appropriate authority
Date of approval: _____

_____ Information and summary about status of implementation of each action to be taken to remove obstacles

_____ Updates, if applicable

NOTE: Items below apply only if the UGLG has 15 or more employees (full and/or part time)

504 Coordinator-Responsible Person

_____ Title of person: _____

_____ Documentation of the appointment process

Grievance Procedure

_____ Copy in the file

_____ Copies of any grievances filed and their resolution

Notice of Non Discrimination and Identification of 504 Coordinator

_____ Documentation regarding other methods of making the public aware of the notice

_____ Documentation of a process to ensure on-going notification

Affirmatively Furthering Fair Housing (AFFH)



**CDBG FILE CHECKLIST
AFFIRMATIVELY FURTHERING FAIR HOUSING (AFFH)
CDBG Funding Agreement # _____**

UGLG: _____

Calendar Year: _____

Check/Date: Item:

(*) = required action. The other items listed are samples of AFFH activities. You must complete at least three (3), including the two (2) required actions.

- _____ Resolution or Proclamation (*)
- _____ Location of Posters (*) _____
- _____ Assessment, with information about status of such, committee members, meeting notices or public hearings, minutes/notes and list of attendees
- _____ Press Releases
- _____ Brochures and distribution/ mailing list
- _____ Copies of newspaper articles
- _____ Poster or essay contest information
- _____ Letters to real estate licensees and a mailing list
- _____ Letters to housing lenders and a mailing list
- _____ Notices of AFFH training, public meetings, workshops; a list of attendees
- _____ PSAs and a mailing list
- _____ Information about housing discrimination complaints and the disposition of each (e.g. referral to the Attorney General)
- _____ Contacts made (by telephone) with groups interested in providing AFFH training or workshops
- _____ Other (Action Taken: _____)

Communities must maintain an annual checklist demonstrating compliance with AFFH whether or not they have open CDBG Funding Agreements (contracts).

Housing Rehabilitation – Beneficiary Files (page 1 of 2)



Arizona
Department
of Housing

CDBG FILE CHECKLIST
HOUSING REHABILITATION – Beneficiary Files

CDBG Funding Agreement #: _____

UGLG: _____

Beneficiary Name: _____

Beneficiary Address: _____

NOTE: The following items are to be filed in separate household/beneficiary files Each project (i.e., household/beneficiary) should have an identifier such as NAME, ADDRESS or NUMBER to avoid problems with similar names and addresses.

Check/Date:	Item:
_____	Homeowner contact sheet (optional)
_____	Homeowner application
_____	Authorization for exchange of information/privacy act notice
_____	Verification of LM status (i.e. income and family size, third party verifications)
_____	Credit Report, if applicable
_____	Title Report, if applicable
_____	Verification of Homeownership
_____	Verification of current homeowner insurance (including flood insurance, if applicable)
_____	Verification that mortgage and property taxes are current
_____	Notification of approval
_____	Individual ERR - Forms E-HR.1, E-HR.2, SHPO clearance (if applicable)
_____	Documentation of receipt by homeowner or tenant of Lead Based Paint Notification AND actions required if a child under 7 lives on the premises
_____	Lead Based Paint evaluation/Clearance (if applicable)
_____	Work Write Up/property inspection(full HQS even if less work will be done)
_____	Pre-construction energy audit by BPI professional
_____	Cost Estimate with homeowners concurrence
_____	If emergency repairs, documentation that they are in compliance with grantee's definition as stated in its HRGs.
_____	HOME project set up report (if applicable)
_____	Work Write Up (including weatherization standards) with acceptance by owner/beneficiary
_____	After Rehab Value documentation (HOME only)
_____	"Before" Photographs
_____	Construction procurement docs (Bid specs, Bid advertisement, Public Notice, etc.)

Housing Rehabilitation – Beneficiary Files (page 2 of 2)

Check/Date:	Item:
_____	Copies of all bids received
_____	Documentation of bid opening, if applicable
_____	Award/non-award notification. Lowest bid accepted. If not, appropriate documentation stating why lowest bid was not selected
_____	Contractor debarment check
_____	Verification of contractor information (DUNS #, CCR #, contractor license, current insurance)
_____	Bid, performance and payment bonds, if applicable
_____	Signed construction rehab contract (Grantee & Contractor, or Homeowner & Contractor)
_____	Pre-construction conference, to include the homeowner
_____	Notice to Proceed
_____	Periodic inspections (to include BPI inspections)
_____	Change Orders, with approvals
_____	Owner signs off on selection of color (tile, roof, carpet, paint, etc...)
_____	Copies of permits or permit numbers
_____	Final Inspection (with homeowners signature)
_____	BPI post construction compliance inspection
_____	Documentation of compliance with CDBG Program Lead Identification, notification, reduction, elimination and abatement policy
_____	“After” Photos
_____	HOME project completion report (if applicable)
_____	Certificate of owner’s acceptance of work
_____	Contractor’s waiver of all liens and release of retention
_____	All approved payment requests with original invoices and copies of checks
_____	Right of Rescission, if a loan
_____	Promissory Note, Mortgage or Deed of Trust (if applicable)
_____	Warranties/guarantees provided to homeowner and copies of such
_____	If a loan, loan servicing documentation to include evidence of timely payments, records of all payments, and if payments are not timely, evidence of appropriate actions, including foreclosure if necessary.
_____	If rehab by owner (self help), invoices for all items billed against CDBG funds

Housing Rehabilitation – Program Files



Arizona
Department
of Housing

**CDBG FILE CHECKLIST
HOUSING REHABILITATION – Program
Files**

CDBG Funding Agreement #: _____

UGLG: _____

NOTE: This form should be used for the overall HR file.

Check/Date	Item
_____	Rehab Guidelines, as approved by the CDBG Program
_____	CDBG Program correspondence
_____	If a Sub-recipient is involved, a copy of the Sub-recipient Agreement with evidence of approval of such by the CDBG program
_____	Documentation of marketing
_____	List of all applicants, with demographic information (to be maintained on an on-going basis and aggregated at the end of the contract)
_____	List of all beneficiaries, with demographic information (to be maintained on an on-going basis and aggregated at the end of the contract)
_____	Documentation that all applicants notified of award or non-award
_____	Complaint file, to include disposition of each complaint (the grantee should consult with its legal counsel to ensure that the maintenance and availability of this information does not violate the complainants privacy rights)
_____	Contact Sheet or Log
_____	Copies of all forms (homeowner application, contractor’s contract, lien documents, etc...)

Financial Management and Audits



CDBG FILE CHECKLIST
FINANCIAL MANAGEMENT AND AUDITS
 CDBG Funding Agreement # _____

UGLG: _____

Check/Date:	Item:
_____	F-1 - Designation of Depository Form and any revisions
_____	F-2 - Authorized Signature Form and any revisions
_____	F-3 - Request for Payment (Attach. D)
_____	F-4 - Disbursement Documentation
_____	** General ledger
_____	** Leverage funds ledger
_____	** Activity ledger(s)
_____	** Other ledgers (receipt, disbursement, payroll)
_____	** Source documentation (invoices, vouchers, etc.)
_____	** Time records for CDBG-funded staff
_____	** Equipment log or use records
_____	** Copies of ADOH warrants issued with DATE OF RECEIPT
_____	** CDBG warrant deposit slips
_____	** CDBG cancelled checks/warrants issued
_____	** CDBG checkbook, if a separate account
_____	** Voided CDBG account checks
_____	** Bank statements for CDBG account, if a separate account
_____	** Audit report(s)
_____	Correspondence relating to the audit(s)
_____	** Fixed assets ledger
_____	** Program income records (as outlined Chapter 3 of the <i>CDBG Grant Administration Handbook</i> , to include amounts received, source and expenditures)

*** These items may be located elsewhere, e.g. the Finance Department. However, this file must indicate where the documents are located and they must be readily available for review during CDBG Program monitoring visits.*

Public Participation (page 1 of 2)



CDBG FILE CHECKLIST
PUBLIC PARTICIPATION

CDBG Funding Agreement #: _____

Check/Date:	Item:
-------------	-------

_____	Most current UGLG Public Participation Plan retained and available for review upon demand.
-------	--

First Public Hearing

_____	P-2 publication and posting for first public hearing including: publisher’s affidavit with the name of the newspaper and the published date, a copy of the newspaper page showing the display ad, a copy of the bill for the publication; copy of the postings with posting dates and locations, and a Certificate of Postings/Distribution.
-------	--

_____	Meeting/Hearing Agenda <i>and</i> Minutes
-------	---

_____	A sign in sheet of Meeting/Hearing Attendees
-------	--

_____	Written comments submitted at the Meeting/Hearing or regarding proposed applications and responses to such by the UGLG.
-------	---

_____	Requests for and responses to technical assistance. If none are requested, this should be noted in the file.
-------	--

_____	Requests for accommodations for person(s) with disabilities and how such were addressed. If none are requested, this should be noted in the file.
-------	---

Second Public Hearing:

_____	P-4 publication and posting for second public hearing including: publisher’s affidavit with the name of the newspaper and the published date, a copy of the newspaper page showing the display ad, a copy of the bill for the publication; copy of the postings with posting dates and locations, and a Certificate of Postings/Distribution.
-------	---

_____	Meeting/Hearing Agenda <i>and</i> Minutes
-------	---

_____	A sign in sheet of Meeting/Hearing Attendees
-------	--

_____	Written comments submitted at the Meeting/Hearing or regarding proposed applications and responses to such by the UGLG.
-------	---

_____	Requests for and responses to technical assistance. If none are requested, this should be noted in the file.
-------	--

_____	Requests for accommodations for person(s) with disabilities and how such were addressed. If none are requested, this should be noted in the file.
-------	---

Public Participation (page 2 of 2)

Amendment Public Hearing:

- _____ P-6 publication and posting for amendment public hearing including; publisher’s affidavit with the name of the newspaper and the published date, a copy of the newspaper page showing the display ad, a copy of the bill for the publication; copy of the postings with posting dates and locations, and a Certificate of Postings/Distribution.

- _____ Meeting/Hearing Agenda *and* Minutes

- _____ A sign in sheet of Meeting/Hearing Attendees

- _____ Written comments submitted at the Meeting/Hearing or regarding proposed applications and responses to such by the UGLG.

- _____ Requests for and responses to technical assistance. If none are requested, this should be noted in the file.

- _____ Requests for accommodations for person(s) with disabilities and how such were addressed. If none are requested, this should be noted in the file.

CHAPTER 10. PROCLAMATION AND RESOLUTIONS

Sample Proclamation and Resolutions

- Fair Housing Proclamation
- Fair Housing Resolution
- Resolution to Amend Existing CDBG Program Contract

Fair Housing Proclamation

FAIR HOUSING PROCLAMATION

WHEREAS, The Civil Rights Act of 1968 (commonly known as the Federal Fair Housing Act) and the Fair Housing Amendments Act of 1988 prohibit discrimination in the sale, rental, leasing and financing of housing or land to be used for the construction of housing or in the provision of brokerage services on the basis of race, color, religion, sex, disability, familiar status or national origin; and

WHEREAS, the 1968 and 1988 Federal Fair Housing Acts declare that it is a national policy to ensure equal opportunities in housing; and

WHEREAS, April has traditionally been designated as Fair Housing Month in the United States;

NOW, THEREFORE, I, [name & Title of Mayor or Chairman of the Board] do proclaim April as Fair Housing Month in [Name of City, Town or County] and do hereby urge all citizens of this community to comply with the letter and spirit of the Fair Housing Law.

Signature

Title

Signed this ____ day of _____, 20____.

REV. 7-2014

Fair Housing Resolution (page 1 of 2)

FAIR HOUSING RESOLUTION

A RESOLUTION OF THE [Mayor and Council OR Board of Supervisors] OF THE [City or Town or County] OF [Name of City, Town or County] ADOPTING A FAIR HOUSING POLICY, MAKING KNOWN ITS COMMITMENT TO THE PRINCIPLE OF FAIR HOUSING, AND DESCRIBING ACTIONS IT SHALL UNDERTAKE TO AFFIRMATIVELY FURTHER FAIR HOUSING.

WHEREAS, the Housing and Community Development Act of 1974 as amended requires that all applicants for Community Development Block Grant funds certify that they shall affirmatively further fair housing; and

WHEREAS, the Civil Rights Act of 1968 (commonly known as the Federal Fair Housing Act) and the Fair Housing Amendments Act of 1988 declare a national policy to prohibit discrimination in the sale, rental, leasing and financing of housing or land to be used for the construction of housing or in the provision of brokerage services, on the basis of race, color, religion, sex, disability, familial status or national origin; and

WHEREAS, fairness is the foundation of the American system and reflects traditional American values; and

WHEREAS, discriminatory housing practices undermine the strength and vitality of America and its people;

NOW, THEREFORE, BE IT RESOLVED THAT the [Mayor and Council OR Board of Supervisors] of the [City or Town or County] of [Name of City, Town or County] hereby wish all persons living, working, doing business in or traveling through this [City or Town or County] to know that:

discrimination in the sale, rental, leasing and financing of housing or land to be used for construction of housing, or in the provision of brokerage services on the basis of race, color, religion, sex, handicap, familial status or national origin is prohibited by Title VIII of the Fair Housing Act Amendments of 1988; and that it is the policy of the [City or Town or County] of [Name of City, Town or County] to implement programs, within the constraints of its resources, to ensure equal opportunity in housing for all persons regardless of race, color, religion, sex, handicap, familial status or national origin; and within available resources the [City or Town or County] of [Name of City, Town or County] will assist all persons who feel they have been discriminated against in housing issues on the basis of race, color, religion, sex, handicap, familial status or national origin to seek equity under existing federal and state laws to file a complaint with the Arizona Attorney General's Office or the U.S. Department of Housing and Urban Development; and that the [City or Town or County] of [Name of City, Town or County] shall publicize this Resolution and thereby encourage owners of rental properties, developers, builders and others involved with housing to become aware of their respective responsibilities and rights under the Fair Housing Amendments Act of 1988 and any applicable state or local laws or ordinances; and that the [City or Town or County] of [Name of City, Town or County] shall undertake the following actions to additionally "affirmatively further fair housing:"

(List all such actions to include: mailing copies of this resolution to the real estate community, banks, developers, community organizations and the local media; posting copies of this resolution at identified locations; distributing flyers; sponsoring school poster or essay contests.)

Fair Housing Resolution (page 2 of 2)

PASSED AND ADOPTED BY THE [Mayor and Council OR Board of Supervisors] OF [Name of City, Town or County] ON THIS ____ DAY OF _____, 20 ____.

[typed name & Title of Mayor or Board Chair]

ATTEST:

APPROVED AS TO FORM:

[typed name and Title of City, Town or County Clerk]

[typed name & title of City, Town or County Attorney]

Resolution to Amend Existing CDBG Program Contract

**RESOLUTION TO AMEND EXISTING
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM CONTRACT
(ADDING OR DELETING A CDBG ACTIVITY ONLY)**

RESOLUTION NO. _____

A RESOLUTION OF THE [City or Town Council OR Board of Supervisors] OF THE [Name of City or Town or County] AUTHORIZING THE SUBMISSION OF AN AMENDMENT TO ARIZONA DEPARTMENT OF HOUSING CDBG FUNDING AGREEMENT NO. _____.

WHEREAS, the [City or Town or County] of [Name of City or Town or County] has entered into a contract with the State of Arizona Department of Housing to perform certain duties funded by Community Development Block Grant funds; and

WHEREAS, said contract is known as CDBG Funding Agreement No. _____; and

WHEREAS, the [City or Town or County] will [describe condition requiring amendment, e.g. add Activity #2 - Street Improvements, or delete Activity #2 - Water System Improvements]; and

WHEREAS, the [City or Town or County] now wishes to [describe proposed changes (e.g. undertake a new activity to utilize remaining funds)].

NOW, THEREFORE BE IT RESOLVED, that the [City or Town or County] submit a request for such an amendment of said contract.

PASSED AND ADOPTED BY THE [Mayor and Council OR Board of Supervisors] OF [Name of City, Town or County] ON THIS ____ DAY OF _____, 20____.

[typed name & Title of Mayor or Board Chair]

ATTEST:

APPROVED AS TO FORM:

[typed name and Title of City, Town or County Clerk]

[typed name & title of City, Town or County Attorney]