

APPENDIX 1 INDEX

FORM TITLE

1. Statement of CDBG Award – Sample
2. Vendor Management Bank Account Form
3. Authorized Signature Card
4. Recipient's Civil Rights Compliance Certification
5. Statement of Special Conditions
6. Statement of Revisions
7. Request for Drawdown of CDBG Funds
8. Instructions for Preparing Request for Drawdowns of CDBG Funds
9. Quarterly Expenditure and Progress Report REVISED 9/15/2009
10. Actual Accomplishments Form
11. Sample Notices Post Award Public Hearing and Project Completion Hearing
12. Source and Application of Funds Schedule
13. Project Cost Schedule
14. Grant Administrative Notice
15. Certification of Categorical Exclusion (not subject to 58.5)
16. Certification of Categorical Exclusion (subject to 58.5)
17. Environmental Assessment
18. Concurrent Notice (Environmental FONSI/NOIRROF)
19. Notice of Intent to Request Release of Funds (NOIRROF)
20. Request for Release of Funds and Certification
21. Notice of Early Public Review (Floodplains and/or Wetlands)
22. Notice of Explanation (Floodplains and/or Wetlands)
23. Request of Wage Rate Determination and Response to Request
24. Clearance of Prime Contractor
25. Record of Employee Job Site Interview
26. Instructions for Job Site Interviews
27. Final Wage Compliance Report
28. Weekly Payroll Report (reduced sample copy, one page)
29. Statement of Compliance for Weekly Payroll
30. Notice of Contract Action
31. Sample Time and Attendance Record
32. CDBG/EIP Disclosure Report (DCA Form 13)
33. Authorization To Make Other Deductions (Davis-Bacon Related Form)
34. DCA Request For Reasonable Accommodation forms
35. HUD Floodplain/Wetland Regulatory Changes
36. HUD Floodplain Management Checklist
37. Section 504 DCA Meeting Checklist

Many of these documents are available on the DCA website, at this address:
<http://www.dca.ga.gov/communities/CDBG/programs/CDBGforms.asp>

1.

Statement of CDBG
Award---Sample

Georgia Department of
COMMUNITY AFFAIRS
60 Executive Park South, N.E.
Atlanta, Georgia 30329-2231

STATEMENT OF CDBG AWARD

GEORGIA COMMUNITY DEVELOPMENT
BLOCK GRANT PROGRAM

Recipient: _____ CDBG Funds: _____
Date of Award: _____ Grant Period: From _____ To _____
Program Title: _____ Program Category: _____
Grant Number: _____

Award is hereby made in the amount and for the period shown above under the Housing and Community Development Act of 1974, as amended to the above mentioned recipient, in accordance with the plan set forth in the application of the above mentioned recipient and subject to any attached revisions or special conditions.

This award is subject to all applicable rules, regulations, and conditions as prescribed by the Department of Community Affairs' CDBG Non-entitlement Program Regulations, its Applicants' Manual and Recipients' Manual as well as the Uniform Administration Requirements ("the common rule") 24 CFR Part 85 and OMB Circulars A-87 and A-133, the U.S. Department of Housing and Urban Development's Community Development Block Grant: State's Program Final Rule (24 CFR Part 570) and Environmental Review Procedures for Title I Community Development Block Grant Program (24 CFR Part 58). It is also subject to such further rules, regulations and policies as may be reasonably prescribed by the State or Federal Government consistent with the purposes and authorization of the Housing and Community Development Act of 1974, as amended.

This grant shall become effective on the beginning date of the grant period (above), provided that within thirty (30) days of the award execution date (below) the properly executed original of the "Statement of CDBG Award" and any attached properly executed revisions and special condition statements are returned to the Georgia Department of Community Affairs.

DEPARTMENT OF COMMUNITY AFFAIRS

- This award is subject to revisions.
(attached)
- This award is subject to special
conditions. (attached)

Commissioner

Date Executed

I, _____, acting under my authority to contract on behalf of the recipient, hereby signify acceptance for the recipient of the above described grant on the terms and conditions stated above or incorporated by reference therein.

Date of Acceptance: _____
Chief Elected Official

Title (typed)

2.

Vendor Management Bank
Account Form

VENDOR MANAGEMENT FORM (TeamWorks)

The initiating Agency will submit this form to the Vendor Management Group for verification and approval. Agency must complete section 5 of the form to obtain approval.

SECTION 1 – VENDOR IDENTIFICATION (COMPLETE ALL APPLICABLE FIELDS)

VENDOR NUMBER: _____ FEI/SSN/EMP ID NUMBER: _____

VENDOR NAME: _____

PAYMENT ALT NAME: (IF CHECK IS TO BE PAYABLE IN A DIFFERENT NAME) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____

PHONE NUMBER: _____ FAX NUMBER: _____

CONTACT EMAIL: _____

PYMT REMIT EMAIL _____ LOC # _____ PYMT REMIT EMAIL XXXXXXXXXXXXXXXXXXXXXXX LOC # _____

PYMT REMIT EMAIL cdbg.pynt@dca.ga.gov LOC# _____ PYMT REMIT EMAIL XXXXXXXXXXXXXXXXXXXXXXX LOC# _____

SECTION 2 – BANK ACCOUNT INFORMATION (ATTACH COPY OF VOIDED CHECK)

ROUTING # _____ BANK ACCOUNT # _____

Check here if General Bank Account can be used by ALL State of Georgia agencies making payments

Check here if this account can only be used for a SPECIFIC purpose _____

(Indicate specific purpose for which this account can be used)

I authorize the State of Georgia to deposit payment for goods or services received into the provided bank account by the Automated Clearing House (ACH). I further acknowledge that this agreement is to remain in full effect until such time as changes to the bank account information are submitted in writing by the vendor or individual named above. I understand it is the sole responsibility of the vendor or individual to notify the State of Georgia of any changes to the bank account information.

(Vendor Printed Name)

(Vendor Signature)

(Date)

SECTION 3 – SPECIFY TYPE OF ACTION (CHECK ALL THAT APPLY)

- | | | |
|------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> New Vendor | <input type="checkbox"/> Employee | <input type="checkbox"/> 1099 Code _____ |
| <input type="checkbox"/> Classification Change _____ | <input type="checkbox"/> Add address | <input type="checkbox"/> FEI/TIN Change** |
| <input type="checkbox"/> Name Change** | <input type="checkbox"/> Change of Address: Address # _____ | <input type="checkbox"/> Right of Way Purchase |
| <input type="checkbox"/> Vendor Deactivation | <input type="checkbox"/> Fleet Anywhere Vendor | <input type="checkbox"/> Other (provide details in Section 4) |
| <input type="checkbox"/> Bank Account Add | <input type="checkbox"/> Bank Account Change | <input type="checkbox"/> Bank Account Delete |
| <input type="checkbox"/> E - Payable | | |

Documentation for Vendor Name/TIN changes must include at least one of the following: IRS documentation (tax documents, FEI issuance letter, etc); Confirmation from Secretary of State's office of legal name change OR a newly completed W-9 form provided by the vendor.

SIC CODES (CHECK ALL THAT APPLY)

- | | | | | |
|--------------------------------------------|------------------------------------------------------|-------------------------------------------------------|-------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Small Business | <input type="checkbox"/> Women Owned | <input type="checkbox"/> Minority Business Enterprise | <input type="checkbox"/> African American | <input type="checkbox"/> Asian American |
| <input type="checkbox"/> GA Based Business | <input type="checkbox"/> Minority Business Certified | <input type="checkbox"/> Hispanic - Latino | <input type="checkbox"/> Native American | <input type="checkbox"/> Pacific Islander |

SECTION 4 – ADDITIONAL COMMENTS

SECTION 5 – STATE OF GEORGIA AGENCY CONTACT INFORMATION (OFFICE USE ONLY)

Requestor Name: Denise Robinson Agency BU#: 42800 Date: _____

Email: denise.robinson@dca.ga.gov Phone: 404.679.5273 Fax #: 404.679.3143

3.

Authorized Signature Card

Authorized Signature Card For Drawdown of CDBG Funds

Name of Recipient:	Award Number:
CHECK ONE: <div style="text-align: center; margin: 10px 0;"> <input type="checkbox"/> ONLY ONE SIGNATURE REQUIRED ON PAYMENT VOUCHERS or <input type="checkbox"/> ANY TWO SIGNATURES REQUIRED TO SIGN OR COUNTERSIGN </div>	
SIGNATURES OF INDIVIDUALS AUTHORIZED TO DRAW ON THE CITED LETTER OF CREDIT	
Typed Name: Job Title: Signature:	Typed Name: Job Title: Signature:
Typed Name: Job Title: Signature:	Typed Name: Job Title: Signature:
I CERTIFY THAT THE SIGNATURES ABOVE ARE OF THE INDIVIDUALS AUTHORIZED TO DRAW PAYMENT UNDER THE GRANT CITED ABOVE: Typed Name: Title: Chief Elected Official must sign here	
SIGNATURE OF Authorizing Official (<i>Recipient</i>)	DATE

INSTRUCTIONS

An Authorized Signature Card must be signed by at least two signatories (one of which must be a local government employee) authorized to request payment of funds under the grant agreement. Check the box designating either one (1) or two (2) signatures as required. **(NOTE If the authorized official designates himself for drawdown, the two (2) signatures required box must be checked.)** The Authorizing Official should also sign the card (on the **SIGNATURE OF AUTHORIZING OFFICIAL** line) to certify that the individuals named are indeed authorized to request payment and that the signatures on the card are theirs. No erasures or corrections may appear on this form.

If the name of someone on this form changes, DCA must receive a corrected signature card with current information within 30 days for the signature to be valid.

Each drawdown form must have the signature of at least one authorized local government representative at the time of the draw.

4.

Recipient's Civil Rights
Compliance Certification

CIVIL RIGHTS COMPLIANCE CERTIFICATION

Grant Recipient

Grant Number

Date

- | | <u>Yes</u> | <u>No</u> | <u>N/A</u> |
|------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|
| 1. Has your government had any employment vacancies in the past three months? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. If so, did you follow equal employment opportunity guidelines in advertising the vacancies? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you have written employment and personnel policies available for review? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Do you have employment records available? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is your employment data detailed enough to determine your staff composition by: | | | |
| ▪ Sex? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Race? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Disability Status? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ National Origin? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is your position and salary information detailed enough to assess hiring, training, promotion and compensation practices? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does your employment data indicate any deficiencies in providing for equal employment opportunities? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have any written civil rights complaints been filed against your community? If yes, list and briefly describe below. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

9. Use the space below to describe any situation relating to the above questions that need additional clarification.

The undersigned hereby certifies that the information contained in this Civil Rights Compliance Certification is correct to the best of his or her knowledge.

Signature: Chief Elected Official

Title

Date

Signature of person preparing Certification

Title

Date

5.

Statement of Special
Conditions

GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS
CDBG PROGRAM
STATEMENT OF SPECIAL CONDIIIONS

Recipient: _____

Grant Number: _____

SAMPLE

Date

Authorized Signature

6.

Statement of Revisions

GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS
CDBG PROGRAM
STATEMENT OF REVISIONS

Recipient: _____

Grant Number: _____

SAMPLE

Date

Authorized Signature

7.

Request for Drawdown of
CDBG Funds

8.

Instructions for Preparing
Request for Drawdown of
CDBG Funds

INSTRUCTIONS FOR PREPARING REQUEST FOR DRAWDOWN OF CDBG FUNDS

Please Mail Drawdowns only (no other correspondence) To:
Georgia Department of Community Affairs
Office of Community Development
60 Executive Park South, NE
Atlanta, Georgia 30329-2231

GENERAL REQUIREMENTS: The original and one copy of this form must be submitted to DCA each time a local government CDBG Recipient wishes to drawdown funds. **PLEASE READ CAREFULLY** the sections on Award and Acceptance of CDBG Funds and on the Drawdown of Funds in your current CDBG Recipients' Manual before preparing this form.

BLOCK 1: Enter the name of the local government Grant Recipient, and the name and telephone number of the person who prepares the Drawdown Request.

BLOCK 2: Enter the Grant Award Number as well as the drawdown request number. Drawdowns should be numbered consecutively, the first one being Number 1, the second one being Number 2, etc. The final drawdown should be indicated by checking the "yes" box when appropriate.

BLOCK 3:

- Item A** **Activity Number:** Enter the numbers for all approved activities as shown on the DCA Budget Summary. Include all approved activities, including the Contingency Activity.
- Item B** **Budget Amount:** Enter the amount budgeted for all approved activities as shown on the DCA Budget Summary. These numbers should never be changed once they are entered correctly.
- Item C** **Budget Adjustments:** Enter the total amount of Prior Budget Adjustments, which should reflect your current Revised Budget. Do not enter New Budget Adjustments on the current draw. If your draw request exceeds the Budget Revised amount, (Column H) should indicate a negative balance for that activity. Submit your request showing the negative balance. Money will be adjusted from the Contingency Activity to cover the current draw. If money is not available in the Contingency Activity, indicate the activities that the money should be transferred from in Block 4. This Budget Adjustment should be shown on your next drawdown request. The total of (Column C) always should equal zero unless the grant amount is changed by DCA.
- Item D** **Budget Revised:** Equals Item C (positive or negative) added to Item B.
- Item E** **Amount Drawn to Date:** This should reflect, by activity, the total funds drawn down by the Recipient.
- Item F** **Budget Balance Prior to this Draw:** This should reflect, by activity, the budget balance prior to the current draw.
- Item G** **Amount of Drawdown Requested:** Enter the amount requested for each activity.
- Item H** **Budget Balance After this Draw:** Equals Item G subtracted from Item F

BLOCK 4: When determining the amount requested (Column G), confirm that an adequate balance of funds remains. If you are requesting a draw in excess of the activity balance, you must indicate the activity number from which you want funds transferred.

BLOCK 5: Please indicate the amount of program income received since the date of your last drawdown. If this is left blank, you are certifying that no program income has been received. If program income has been received, please review the Recipients' Manual (Chapter 3, Section 3) for DCA's program income policies and reporting requirements. Please indicate the cash on hand (including program income) in your CDBG account as of the date of the drawdown:

BLOCK 6: Enter the authorized signature(s), date signed, and authorized signatory(s) title on the original drawdown form

9.

Quarterly Expenditure and
Progress Report

REVISED 9/15/2009

GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS
QUARTERLY EXPENDITURES AND PROGRESS REPORT

Final Report

Recipient Name: _____ Grant Number: _____ Report No: _____ Quarter End: _____ Final Report: _____

SECTION IV: Work in Progress

Use this section to provide a brief narrative description of work in progress during the reporting period. Use the Project Implementation Schedule included in your application as the basis for reporting.

SECTION V: Other Supporting Efforts

Use this section to provide a description of all other supporting efforts that have begun, been partially implemented, or completed during this period. Use quantifiable data whenever possible. Use the information from DCA 8 (Budget Analysis) as the basis for reporting.

SECTION VI: Problems Encountered/Technical Assistance Needed

Use this section to provide a brief description of any problems or delays encountered or anticipated, or any technical assistance needed from DCA.

10.

Actual Accomplishments
Form

**Georgia Department of Community Affairs
CDBG Program
Actual Accomplishments Report**

1. Recipient: _____
2. Grant # _____
3. Prepared by: _____
4. Date _____
5. Reviewed by: _____

<i>Activity</i>	<i>Measure</i>	<i>Accomplishments</i>
Acquisition, Disposition	# of Structures # of Parcels	
Clearance	# of Structures # of Parcels	
Building Type:	# of Facilities # of Persons Served # Low and Moderate Income	
Water Facilities	# of Persons Served # Low and Moderate Income	
Sewer Facilities	# of Persons Served # Low and Moderate Income	
Flood/Drainage Facilities	# of Persons Served # Low and Moderate Income	
Street Improvements	# of Persons Served # Low and Moderate Income	
Other Public Facilities Type:	# of Persons Served # Low and Moderate Income	
Public Services	# of Persons Served # Low and Moderate Income	
Relocation Assistance	# of Businesses Relocated # of Households Relocated # LMI Households Relocated	
Residential Rehabilitation	# of Units Rehabbed # of Persons Served # of Low and Moderate Income	
Economic Development	# of Businesses Assisted # of Jobs Created # of LMI Jobs Created # of Jobs Retained # of LMI Jobs Retained	
Reconstruction of Housing	# of Units # of Persons Served # of Low and Moderate Income	

11.

Sample Notices Post
Award Public Hearing
and Project Completion
Hearing

SAMPLE PUBLIC HEARING NOTICE
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
(Project Completion Hearing)

The (City or County) of (name of City or County) has completed its FY XXXX Community Development Block Grant Project. The following activities were completed:

(List accomplishments, benefit numbers, etc.)

The (City or County) of (name of City or County) will hold a PUBLIC HEARING on (Date/Time/Location) for the purpose of discussing the completed activities and receiving citizen comments. All citizens are invited to attend this Hearing.

A copy of the Final Quarterly Report is now available at (LOCATION) for review. Any person desiring to comment on the performance of the project may write to the City/County at (ADDRESS).

The (City or County) of (name of City or County) is committed to providing all persons with equal access to its services, programs, activities, education and employment regardless of race, color, national origin, religion, sex, familial status, disability or age. For a reasonable accommodation please contact

() at: (Number) or email _____.

If you need an alternative format or language, please contact: () at: (Number) or email _____.

Persons with hearing disabilities can contact us at our TDD number (AC + number). [Applicants who do not have a TDD phone may consider using the Georgia Relay Service, at (TDD) 1-800-255-0056 or 1-800-255-0135 (Voice).]

The applicant must maintain detailed minutes of this hearing, a "tear sheet" or affidavit pertaining to the public notice and documentation as to whether or not meeting "special needs" was required and, if applicable, addressed.

Sample - Spanish Pre Application Public Hearing Notice

Muestra de Aviso de Audiencia Pública – Pre-solicitud de fondos para CDBG

La/el (ciudad o condado) de (nombre de ciudad o condado) está considerando solicitar un *Community Development Block Grant* (Subvención en bloque para el desarrollo de la comunidad) de hasta \$(cantidad de fondos) del Departamento de Asuntos Comunitarios de Georgia. Se deben usar estos fondos principalmente para beneficiar a personas de ingreso bajo o medio. Se pueden usar estos fondos para actividades en las áreas de vivienda, instalaciones públicas y desarrollo económico. Se proporcionarán detalles más específicos sobre las actividades elegibles, los planes para dar asistencia a personas desplazadas (si existen), la cantidad aproximada de fondos propuestos para actividades que benefician a personas de ingreso bajo y medio, y el sistema de clasificación en una audiencia pública que tendrá lugar en (lugar/dirección) el (fecha), a las (hora). El motivo de esta audiencia será obtener opiniones de ciudadanos sobre el desarrollo de la solicitud y revisar el progreso de la subvención de CDBG previa (si procede). La/el (ciudad o condado) de la/el (nombre de ciudad o condado) está comprometido a proporcionarles a todas las personas acceso igual a sus servicios, programas, actividades, educación y empleo de manera independiente de su raza, color, origen nacional, religión, sexo, estatus familiar, discapacidad o edad. Las personas con necesidades especiales o adecuaciones relacionadas con accesibilidad de discapacitados o idiomas extranjeras contactarán a (nombre/número de teléfono) antes de (fecha). Se puede encontrar a tal persona en (dirección completa) entre las horas (horas am – pm), lunes a viernes, excepto durante fiestas. Personas con discapacidades auditivas pueden contactarnos a nuestro número telefónico TDD (número AC +). [Los solicitantes quienes no tienen un teléfono TDD pueden considerar usar el *Georgia Relay Service*, al (TDD) 1-800-255-0056 o (Voz) 1-800-255-0135.]

Sample - Spanish Project Completion Public Hearing Notice

DE AVISO DE AUDIENCIA PÚBLICA PROGRAMA COMMUNITY DEVELOPMENT BLOCK GRANT

(Audiencia de término de proyecto)

La/el (ciudad o condado) de (nombre de ciudad o condado) ha terminado su proyecto *Community Development Block Grant* (Subvención en bloque para el desarrollo de la comunidad) del AF XXXX. Se han llevado a cabo las siguientes actividades:

(Lista de logros, cantidades de beneficios, etc.)

La/el (ciudad o condado) de (nombre de ciudad o condado) realizará una audiencia pública el (fecha/hora/lugar) para hablar de las actividades completadas y escuchar las opiniones de ciudadanos. Se les invita a todos ciudadanos a dar asistencia en esta audiencia.

Una copia del informe trimestral final está disponible en (lugar) para revisión. Cualquier persona quien desea comentar sobre el desempeño del proyecto puede escribirle a la/el ciudad o condado a (dirección).

La/el (ciudad o condado) de (nombre de ciudad o condado) está comprometido a proporcionarles a todas personas acceso igual a sus servicios, programas, actividades, educación y empleo de manera independiente de su raza, color, origen nacional, religión, sexo, estatus familiar, discapacidad o edad. Para una adaptación razonable por favor contacte a () al: (número telefónico) o envíe un correo electrónico a _____.

Si necesita un formato o idioma alternativo, por favor contacte a: () al: (número telefónico) o envíe un correo electrónico a _____.

Personas con discapacidades auditivas pueden contactarnos a nuestro número TDD (número AC +). [Los solicitantes quienes no tienen un teléfono TDD pueden considerar usar el *Georgia Relay Service*, al (TDD) 1-800-255-0056 o 1-800-255-0135 (Voz).]

12.

Source and Application of
Funds Schedule

Sample

SOURCE and APPLICATION OF FUNDS SCHEDULE
Community Development Block Grant

Recipient Name

CDBG Grant Number

For the Period Ending: _____
(Cumulative)

Total Fiscal Year _____ CDBG Funds Awarded to Recipient: _____

Total Amount Drawdown by Recipient from DCA: _____

Less: CDBG Funds Expended by Recipient: _____

Amount of Fiscal Year _____ CDBG Funds held by Recipient: _____

13.

Project Cost Schedule

Sample
**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM
 PROJECT COST SCHEDULE**

Recipient: _____

Grant #: _____

For the Period Ending: _____

<i>Col. 1</i>	<i>Col. 2</i>	<i>Col. 3</i>	<i>Col. 4</i>	<i>Col. 5</i>	<i>Col. 6</i>	<i>Col. 7</i>
Program Activity	CDBG Activity Number	Latest Approved Budget	Accumulative CDBG Expenditures To Date	Accumulative Expenditures To Date (Other Funds)	Grand Total of Expenditures To Date (Col 4 +5)	Questioned Costs (Explain in Remarks)
Fire Protection	B-03c-p	\$6,000	\$6,000	\$1,500	\$7,500	
Water	B-04f-p	\$26,000	\$59,069	\$3,500	\$62,569	
Clearance	B-04-h	\$15,950	\$17,056	\$2,750	\$19,806	
Interim Assist.	B-06-h	\$8,310	\$9,868	\$920	\$10,788	
Rehabilitation	B-10b-h	\$312,450	\$299,279	\$3,000	\$302,279	\$1,250
Administration	B-15	\$23,300	\$25,428		\$25,428	
Contingencies	B-16	\$24,090	\$0	\$0	\$0	
TOTAL		\$416,700	\$416,700	\$11,670	\$428,370	\$1,250

Source(s) of Other Funds:

Remarks:

14.

Grant Adjustment Notice

ADJUSTMENT NOTICE

Award Serial No. _____ Adjustment No. _____ Award No. _____

Recipient _____

Co-Recipient _____

Type _____

Project _____

TO THE RECIPIENT:

Pursuant to your request of _____ the following amendment or other change in the above award program is approved, subject to such conditions or limitations as may be set forth below.

NATURE OF ADJUSTMENT:

- | | |
|------------------------------|------------------------------------|
| _____ New Activity | _____ Special Condition Compliance |
| _____ Decrease in Scope | _____ Change in Award Period |
| _____ Change in Target Area | _____ Error Correction |
| _____ Budget Revision | _____ Acceptance of Final Report |
| _____ Change in Award Amount | _____ Other (see below) |

Date: _____

15.

Exempt/Certification of
Categorical Exclusion
(not subject to 58.5)



U.S. Department of Housing and Urban
Development
451 Seventh Street, SW
Washington, DC 20410
www.hud.gov
espanol.hud.gov

**Environmental Review
for Activity/Project that is Exempt or
Categorically Excluded Not Subject to Section 58.5
Pursuant to 24 CFR Part 58.34(a) and 58.35(b)**

Project Information

Project Name:

Responsible Entity:

Grant Recipient (if different than Responsible Entity):

State/Local Identifier:

Preparer:

Certifying Officer Name and Title:

Consultant (if applicable):

Project Location:

Description of the Proposed Project [24 CFR 58.32; 40 CFR 1508.25]:

Level of Environmental Review Determination:

Activity/Project is Exempt per 24 CFR 58.34(a): _____

Activity/Project is Categorically Excluded Not Subject To §58.5 per 24 CFR 58.35(b):

Funding Information

Grant Number	HUD Program	Funding Amount

Estimated Total HUD Funded Amount:

This project anticipates the use of funds or assistance from another Federal agency in addition to HUD in the form of (if applicable):

Estimated Total Project Cost (HUD and non-HUD funds) [24 CFR 58.32(d)]:

Compliance with 24 CFR §50.4 and §58.6 Laws and Authorities

Record below the compliance or conformance determinations for each statute, executive order, or regulation. Provide credible, traceable, and supportive source documentation for each authority. Where applicable, complete the necessary reviews or consultations and obtain or note applicable permits of approvals. Clearly note citations, dates/names/titles of contacts, and page references. Attach additional documentation as appropriate.

Compliance Factors: Statutes, Executive Orders, and Regulations listed at 24 CFR 50.4 and 58.6	Are formal compliance steps or mitigation required?	Compliance determinations
STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR §58.6		
Airport Runway Clear Zones and Accident Potential Zones 24 CFR Part 51 Subpart D	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Coastal Barrier Resources Coastal Barrier Resources Act, as amended by the Coastal Barrier Improvement Act of 1990 [16 USC 3501]	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Flood Insurance Flood Disaster Protection Act of 1973 and National Flood Insurance Reform Act of 1994 [42 USC 4001-4128 and 42 USC 5154a]	Yes No <input type="checkbox"/> <input type="checkbox"/>	

Project Name

Project Locality and State

HEROS Number

Mitigation Measures and Conditions [40 CFR 1505.2(c)]

Summarize below all mitigation measures adopted by the Responsible Entity to reduce, avoid, or eliminate adverse environmental impacts and to avoid non-compliance or non-conformance with the above-listed authorities and factors. These measures/conditions must be incorporated into project contracts, development agreements, and other relevant documents. The staff responsible for implementing and monitoring mitigation measures should be clearly identified in the mitigation plan.

Law, Authority, or Factor	Mitigation Measure

Preparer Signature: _____ Date: _____

Name/Title/Organization: _____

Responsible Entity Agency Official Signature:

Date: _____

Name/Title: _____

This original, signed document and related supporting material must be retained on file by the Responsible Entity in an Environmental Review Record (ERR) for the activity/project (ref: 24 CFR Part 58.38) and in accordance with recordkeeping requirements for the HUD program(s).

16.

Certification of Categorical

Exclusion

(subject to 58.5)



U.S. Department of Housing and Urban
Development
451 Seventh Street, SW
Washington, DC 20410
www.hud.gov
espanol.hud.gov

**Environmental Review for Activity/Project that is Categorically
Excluded Subject to Section 58.5
Pursuant to 24 CFR 58.35(a)**

Project Information

Project Name:

Responsible Entity:

Grant Recipient (if different than Responsible Entity):

State/Local Identifier:

Preparer:

Certifying Officer Name and Title:

Grant Recipient (if different than Responsible Entity):

Consultant (if applicable):

Direct Comments to:

Project Location:

Description of the Proposed Project [24 CFR 50.12 & 58.32; 40 CFR 1508.25]:

Level of Environmental Review Determination:

Categorically Excluded per 24 CFR 58.35(a), and subject to laws and authorities at §58.5: _____

Funding Information

Grant Number	HUD Program	Funding Amount

Estimated Total HUD Funded Amount:

Estimated Total Project Cost (HUD and non-HUD funds) [24 CFR 58.32(d)]:

Compliance with 24 CFR 50.4, 58.5, and 58.6 Laws and Authorities

Record below the compliance or conformance determinations for each statute, executive order, or regulation. Provide credible, traceable, and supportive source documentation for each authority. Where applicable, complete the necessary reviews or consultations and obtain or note applicable permits of approvals. Clearly note citations, dates/names/titles of contacts, and page references. Attach additional documentation as appropriate.

Compliance Factors: Statutes, Executive Orders, and Regulations listed at 24 CFR §58.5 and §58.6	Are formal compliance steps or mitigation required?	Compliance determinations
STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 & 58.6		
Airport Hazards 24 CFR Part 51 Subpart D	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Coastal Barrier Resources Coastal Barrier Resources Act, as amended by the Coastal Barrier Improvement Act of 1990 [16 USC 3501]	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Flood Insurance Flood Disaster Protection Act of 1973 and National Flood Insurance Reform Act of 1994 [42 USC 4001-4128 and 42 USC 5154a]	Yes No <input type="checkbox"/> <input type="checkbox"/>	
STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 & 58.5		

<p>Clean Air</p> <p>Clean Air Act, as amended, particularly section 176(c) & (d); 40 CFR Parts 6, 51, 93</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Coastal Zone Management</p> <p>Coastal Zone Management Act, sections 307(c) & (d)</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Contamination and Toxic Substances</p> <p>24 CFR Part 50.3(i) & 58.5(i)(2)</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Endangered Species</p> <p>Endangered Species Act of 1973, particularly section 7; 50 CFR Part 402</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Explosive and Flammable Hazards</p> <p>24 CFR Part 51 Subpart C</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Farmlands Protection</p> <p>Farmland Protection Policy Act of 1981, particularly sections 1504(b) and 1541; 7 CFR Part 658</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Floodplain Management</p> <p>Executive Order 11988, particularly section 2(a); 24 CFR Part 55</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Historic Preservation</p> <p>National Historic Preservation Act of 1966, particularly sections 106 and 110; 36 CFR Part 800</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Noise Abatement and Control</p> <p>Noise Control Act of 1972, as amended by the Quiet Communities Act of 1978; 24 CFR Part 51 Subpart B</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	
<p>Sole Source Aquifers</p> <p>Safe Drinking Water Act of 1974, as amended, particularly section 1424(e); 40 CFR Part 149</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>	

Wetlands Protection Executive Order 11990, particularly sections 2 and 5	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Wild and Scenic Rivers Wild and Scenic Rivers Act of 1968, particularly section 7(b) and (c)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
ENVIRONMENTAL JUSTICE			
Environmental Justice Executive Order 12898			

Field Inspection (Date and completed by):

Summary of Findings and Conclusions:

Mitigation Measures and Conditions [40 CFR 1505.2(c)]

Summarize below all mitigation measures adopted by the Responsible Entity to reduce, avoid, or eliminate adverse environmental impacts and to avoid non-compliance or non-conformance with the above-listed authorities and factors. These measures/conditions must be incorporated into project contracts, development agreements, and other relevant documents. The staff responsible for implementing and monitoring mitigation measures should be clearly identified in the mitigation plan.

Law, Authority, or Factor	Mitigation Measure

Determination:

- This categorically excluded activity/project converts to **EXEMPT** per Section 58.34(a)(12), because it does not require any mitigation for compliance with any listed statutes or authorities, nor requires any formal permit or license; **Funds may be committed and drawn down after certification of this part** for this (now) EXEMPT project; OR
- This categorically excluded activity/project cannot convert to Exempt status because one or more statutes or authorities listed at Section 58.5 requires formal consultation or mitigation. Complete

consultation/mitigation protocol requirements, **publish NOI/RROF and obtain "Authority to Use Grant Funds"** (HUD 7015.16) per Section 58.70 and 58.71 before committing or drawing down any funds; OR

- This project is not categorically excluded OR, if originally categorically excluded, is now subject to a full Environmental Assessment according to Part 58 Subpart E due to extraordinary circumstances (Section 58.35(c)).

Preparer Signature: _____ Date: _____

Name/Title/Organization: _____

Responsible Entity Agency Official Signature:

_____ Date: _____

Name/Title: _____

This original, signed document and related supporting material must be retained on file by the Responsible Entity in an Environmental Review Record (ERR) for the activity/project (ref: 24 CFR Part 58.38) and in accordance with recordkeeping requirements for the HUD program(s).

17.

Environmental Assessment



U.S. Department of Housing and Urban
Development
451 Seventh Street, SW
Washington, DC 20410
www.hud.gov
espanol.hud.gov

Environmental Assessment Determinations and Compliance Findings for HUD-assisted Projects 24 CFR Part 58

Project Information

Project Name:

Responsible Entity:

Grant Recipient (if different than Responsible Entity):

State/Local Identifier:

Preparer:

Certifying Officer Name and Title:

Grant Recipient (if different than Responsible Entity):

Consultant (if applicable):

Direct Comments to:

Project Location:

Description of the Proposed Project [24 CFR 50.12 & 58.32; 40 CFR 1508.25]:

Statement of Purpose and Need for the Proposal [40 CFR 1508.9(b)]:

Existing Conditions and Trends [24 CFR 58.40(a)]:

Funding Information

Grant Number	HUD Program	Funding Amount

Estimated Total HUD Funded Amount:

Estimated Total Project Cost (HUD and non-HUD funds) [24 CFR 58.32(d)]:

Compliance with 24 CFR 50.4, 58.5, and 58.6 Laws and Authorities

Record below the compliance or conformance determinations for each statute, executive order, or regulation. Provide credible, traceable, and supportive source documentation for each authority. Where applicable, complete the necessary reviews or consultations and obtain or note applicable permits of approvals. Clearly note citations, dates/names/titles of contacts, and page references. Attach additional documentation as appropriate.

Compliance Factors: Statutes, Executive Orders, and Regulations listed at 24	Are formal compliance steps or	Compliance determinations
-------------------------------------------------------------------------------------------	--------------------------------------	---------------------------

CFR §58.5 and §58.6	mitigation required?	
---------------------	----------------------	--

STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 and 58.6

Airport Hazards	Yes No	
24 CFR Part 51 Subpart D	<input type="checkbox"/> <input type="checkbox"/>	
Coastal Barrier Resources	Yes No	
Coastal Barrier Resources Act, as amended by the Coastal Barrier Improvement Act of 1990 [16 USC 3501]	<input type="checkbox"/> <input type="checkbox"/>	
Flood Insurance	Yes No	
Flood Disaster Protection Act of 1973 and National Flood Insurance Reform Act of 1994 [42 USC 4001-4128 and 42 USC 5154a]	<input type="checkbox"/> <input type="checkbox"/>	

STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 & 58.5

Clean Air	Yes No	
Clean Air Act, as amended, particularly section 176(c) & (d); 40 CFR Parts 6, 51, 93	<input type="checkbox"/> <input type="checkbox"/>	
Coastal Zone Management	Yes No	
Coastal Zone Management Act, sections 307(c) & (d)	<input type="checkbox"/> <input type="checkbox"/>	
Contamination and Toxic Substances	Yes No	
24 CFR Part 50.3(i) & 58.5(i)(2)	<input type="checkbox"/> <input type="checkbox"/>	
Endangered Species	Yes No	
Endangered Species Act of 1973, particularly section 7; 50 CFR Part 402	<input type="checkbox"/> <input type="checkbox"/>	
Explosive and Flammable Hazards	Yes No	
24 CFR Part 51 Subpart C	<input type="checkbox"/> <input type="checkbox"/>	

Farmlands Protection Farmland Protection Policy Act of 1981, particularly sections 1504(b) and 1541; 7 CFR Part 658	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Floodplain Management Executive Order 11988, particularly section 2(a); 24 CFR Part 55	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Historic Preservation National Historic Preservation Act of 1966, particularly sections 106 and 110; 36 CFR Part 800	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Noise Abatement and Control Noise Control Act of 1972, as amended by the Quiet Communities Act of 1978; 24 CFR Part 51 Subpart B	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Sole Source Aquifers Safe Drinking Water Act of 1974, as amended, particularly section 1424(e); 40 CFR Part 149	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Wetlands Protection Executive Order 11990, particularly sections 2 and 5	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Wild and Scenic Rivers Wild and Scenic Rivers Act of 1968, particularly section 7(b) and (c)	Yes No <input type="checkbox"/> <input type="checkbox"/>	
ENVIRONMENTAL JUSTICE		
Environmental Justice Executive Order 12898	Yes No <input type="checkbox"/> <input type="checkbox"/>	

Environmental Assessment Factors [24 CFR 58.40; Ref. 40 CFR 1508.8 & 1508.27] Recorded below is the qualitative and quantitative significance of the effects of the proposal on the character, features and resources of the project area. Each factor has been evaluated and documented, as appropriate and in proportion to its relevance to the proposed action. Verifiable source documentation has been provided and described in support of each determination, as appropriate. Credible, traceable and

supportive source documentation for each authority has been provided. Where applicable, the necessary reviews or consultations have been completed and applicable permits of approvals have been obtained or noted. Citations, dates/names/titles of contacts, and page references are clear. Additional documentation is attached, as appropriate. **All conditions, attenuation or mitigation measures have been clearly identified.**

Impact Codes: Use an impact code from the following list to make the determination of impact for each factor.

- (1) Minor beneficial impact
- (2) No impact anticipated
- (3) Minor Adverse Impact – May require mitigation
- (4) Significant or potentially significant impact requiring avoidance or modification which may require an Environmental Impact Statement

Environmental Assessment Factor	Impact Code	Impact Evaluation
LAND DEVELOPMENT		
Conformance with Plans / Compatible Land Use and Zoning / Scale and Urban Design		
Soil Suitability/ Slope/ Erosion/ Drainage/ Storm Water Runoff		
Hazards and Nuisances including Site Safety and Noise		
Energy Consumption		

Environmental Assessment Factor	Impact Code	Impact Evaluation
SOCIOECONOMIC		
Employment and Income Patterns		
Demographic Character Changes, Displacement		

Environmental Assessment Factor	Impact Code	Impact Evaluation

COMMUNITY FACILITIES AND SERVICES		
Educational and Cultural Facilities		
Commercial Facilities		
Health Care and Social Services		
Solid Waste Disposal / Recycling		
Waste Water / Sanitary Sewers		
Water Supply		
Public Safety - Police, Fire and Emergency Medical		
Parks, Open Space and Recreation		
Transportation and Accessibility		

Environmental Assessment Factor	Impact Code	Impact Evaluation
NATURAL FEATURES		
Unique Natural Features, Water Resources		
Vegetation, Wildlife		
Other Factors		

Additional Studies Performed:

Field Inspection (Date and completed by):

List of Sources, Agencies and Persons Consulted [40 CFR 1508.9(b)]:

List of Permits Obtained:

Public Outreach [24 CFR 50.23 & 58.43]:

Cumulative Impact Analysis [24 CFR 58.32]:

Alternatives [24 CFR 58.40(e); 40 CFR 1508.9]

No Action Alternative [24 CFR 58.40(e)]:

Summary of Findings and Conclusions:

Mitigation Measures and Conditions [40 CFR 1505.2(c)]

Summarize below all mitigation measures adopted by the Responsible Entity to reduce, avoid, or eliminate adverse environmental impacts and to avoid non-compliance or non-conformance with the above-listed authorities and factors. These measures/conditions must be incorporated into project contracts, development agreements, and other relevant documents. The staff responsible for implementing and monitoring mitigation measures should be clearly identified in the mitigation plan.

Law, Authority, or Factor	Mitigation Measure

Determination:

- Finding of No Significant Impact** [24 CFR 58.40(g)(1); 40 CFR 1508.27]
The project will not result in a significant impact on the quality of the human environment.

- Finding of Significant Impact** [24 CFR 58.40(g)(2); 40 CFR 1508.27]
The project may significantly affect the quality of the human environment.

Preparer Signature: _____ Date: _____

Name/Title/Organization: _____

 Certifying Officer Signature: _____ Date: _____

Name/Title: _____

This original, signed document and related supporting material must be retained on file by the Responsible Entity in an Environmental Review Record (ERR) for the activity/project (ref: 24 CFR Part 58.38) and in accordance with recordkeeping requirements for the HUD program(s).

18.

Concurrent Notice
(Environmental
FONSI/NOIRROF)

Sample Notice of Finding of No Significant Impact and Notice of Intent to Request a Release of Funds

The language below is HUD's recommended wording of the combined Notice of Finding of No Significant Impact and Notice of Intent to Request a Release of Funds. This Notice is used for projects requiring an Environmental Assessment (24 CFR Part 58, Section 58.36). Words in **bold type** are required language. Words in *italics* are to be replaced by language appropriate to the particular project and Responsible Entity.

NOTICE OF FINDING OF NO SIGNIFICANT IMPACT AND NOTICE OF INTENT TO REQUEST RELEASE OF FUNDS

Date of Notice

Name of Responsible Entity [RE]

Address (e.g., Street No. or P.O. Box)

City, State, Zip Code

Telephone Number of RE

These notices shall satisfy two separate but related procedural requirements for activities to be undertaken by the name of RE or grant recipient.

REQUEST FOR RELEASE OF FUNDS

On or about at least one day after the end of the comment period the name of RE will if the RE is not also the grant recipient, insert the following language here: "authorize the [name of grant recipient] to" submit a request to the HUD/State administering agency for the release of name of grant program funds under Title/Section [] of the name of the Act of [year], as amended, to undertake a project known as project title for the purpose of nature/scope of project, estimated funding (include non-HUD funding sources if applicable) and project location if applicable.

FINDING OF NO SIGNIFICANT IMPACT

The name of RE has determined that the project will have no significant impact on the human environment. Therefore, an Environmental Impact Statement under the National Environmental Policy Act of 1969 (NEPA) is not required. Additional project information is contained in the Environmental Review Record (ERR) on file at name and address of RE office where ERR can be examined and name and address of other locations where the record is available for review and may be examined or copied weekdays __A.M to __P.M.

PUBLIC COMMENTS

Any individual, group, or agency may submit written comments on the ERR to the *RE* designated office responsible for receiving and responding to comments. All comments received by if notice is published: publication date plus fifteen days; if notice is mailed and posted: mailing and posting date plus eighteen days will be considered by the name of *RE* prior to authorizing submission of a request for release of funds. Comments should specify which Notice they are addressing.

ENVIRONMENTAL CERTIFICATION

The name of *RE* certifies to HUD/State that name of Certifying Officer in his/her capacity as Official Title consents to accept the jurisdiction of the Federal Courts if an action is brought to enforce responsibilities in relation to the environmental review process and that these responsibilities have been satisfied. HUD's State's approval of the certification satisfies its responsibilities under NEPA and related laws and authorities and allows the name of grant recipient to use Program funds.

OBJECTIONS TO RELEASE OF FUNDS

HUD/State will accept objections to its release of fund and the *RE*'s certification for a period of fifteen days following the anticipated submission date or its actual receipt of the request (whichever is later) only if they are on one of the following bases: (a) the certification was not executed by the Certifying Officer of the name of *RE*; (b) the *RE* has omitted a step or failed to make a decision or finding required by HUD regulations at 24 CFR part 58; (c) the grant recipient or other participants in the development process have committed funds, incurred costs or undertaken activities not authorized by 24 CFR Part 58 before approval of a release of funds by HUD/State; or (d) another Federal agency acting pursuant to 40 CFR Part 1504 has submitted a written finding that the project is unsatisfactory from the standpoint of environmental quality. Objections must be prepared and submitted in accordance with the required procedures (24 CFR Part 58, Sec. 58.76) and shall be addressed to HUD/State administration office at address of that office. Potential objectors should contact HUD/State to verify the actual last day of the objection period.

Name and Title of *RE* Certifying Officer

Note: The fifteen or eighteen-day public comment periods are the minimum time periods required by regulation prior to submission of a Request for Release of Funds and Certification (form HUD-7015.15) to HUD/State. The Responsible Entity may choose to allow a longer comment period. 24 CFR Part 58 requires, at Section 58.46, "Time delays for exceptional circumstances," a 30-day comment period for controversial or unique projects or those similar to projects normally requiring preparation of an Environmental Impact Statement. The fifteen-day objection period is a statutory requirement. The objection period follows the submission date specified in the Notice or the actual date of receipt by HUD/State, whichever is later.

Following completion of the comment period recipients may FAX the form HUD-7015.15 to HUD/State together with a copy of the public notice and a cover letter stating whether comments were received and, if so, how the recipient responded to the

comment. The Request for Release of Funds and Certification should not be submitted before the recipient has responded. If the request is sent by FAX, the original signed form should be mailed to HUD/State. The date of receipt by FAX will be counted as the submission date. However, HUD will not issue the 7015.16 "Authority to Use Grant Funds" until after the original signed form is received.

19.

Notice of Intent to Request
Release of Funds
(NOIRROF)

Sample Notice of Intent to Request a Release of Funds

The language below is HUD's recommended wording of the Notice of Intent to Request a Release of Funds. This Notice is used to request the environmental release of funds for Categorically Excluded projects [24 CFR Part 58, Section 58.35(a)] or for projects for which a Notice of Finding of No Significant Impact was previously issued. Words in **bold type** are required language. Words in *italics* are to be replaced by language appropriate to the particular project and Responsible Entity. The minimum comment period is seven days following publication or ten days if posting and mailing without publication is used

NOTICE OF INTENT TO REQUEST RELEASE OF FUNDS

Date of Notice

Name of Responsible Entity [RE]

Address (e.g., Street No. or P.O. Box)

City, State, Zip Code

Telephone Number of RE

On or about *at least one day after the end of the comment period* **the name of RE will** *if the RE is not also the grant recipient, insert the following language here: "authorize the [name of grant recipient] to"* **submit a request to the HUD/State administering agency for the release of name of grant program funds under Title/Section [] of the name of the Act of [year], as amended, to undertake a project known as project title for the purpose of nature/scope of project, estimated funding (include non-HUD funding sources if applicable) and project location if applicable.**

The activities proposed *alternative #1: are categorically excluded under HUD regulations at 24 CFR Part 58 from National Environmental Policy Act (NEPA) requirements or alternative #2: comprise a project for which a Finding of No Significant Impact on the environment was [published/posted] on [date of Finding publication/posting].* **An Environmental Review Record (ERR) that documents the environmental determinations for this project is on file at name and address of RE office where ERR can be examined and name and address of other locations where the record is available for review and may be examined or copied weekdays __A.M to __P.M.**

PUBLIC COMMENTS

Any individual, group, or agency may submit written comments on the ERR to the RE designated office responsible for receiving and responding to comments. All comments received by if notice is published: notice date plus seven days; if notice is mailed and posted: mailing and posting date plus ten days will be considered by the name of RE prior to authorizing submission of a request for release of funds.

ENVIRONMENTAL CERTIFICATION

The name of RE certifies to HUD/State that name of Certifying Officer in his/her capacity as Official Title consents to accept the jurisdiction of the Federal Courts if an action is brought to enforce responsibilities in relation to the environmental review process and that these responsibilities have been satisfied. HUD's State's approval of the certification satisfies its responsibilities under NEPA and related laws and authorities and allows the name of grant recipient to use Program funds.

OBJECTIONS TO RELEASE OF FUNDS

HUD/State will accept objections to its release of fund and the RE's certification for a period of fifteen days following the anticipated submission date or its actual receipt of the request (whichever is later) only if they are on one of the following bases: (a) the certification was not executed by the Certifying Officer of the name of RE; (b) the RE has omitted a step or failed to make a decision or finding required by HUD regulations at 24 CFR part 58; (c) the grant recipient or other participants in the development process have committed funds, incurred costs or undertaken activities not authorized by 24 CFR Part 58 before approval of a release of funds by HUD/State; or (d) another Federal agency acting pursuant to 40 CFR Part 1504 has submitted a written finding that the project is unsatisfactory from the standpoint of environmental quality. Objections must be prepared and submitted in accordance with the required procedures (24 CFR Part 58, Sec. 58.76) and shall be addressed to HUD/State administration office at address of that office. Potential objectors should contact HUD/State to verify the actual last day of the objection period.

Name and Title of RE Certifying Officer

Note: The seven or ten-day public comment periods are the minimum time periods required by regulation prior to submission of a Request for Release of Funds and Certification [form HUD-7015.15] to HUD/State. The Responsible Entity may choose to allow a longer comment period. The fifteen-day objection period following submission of the request is a statutory requirement. The objection period follows the submission date specified in the Notice or the actual date of receipt by HUD/State, whichever is later.

Following completion of the comment period recipients may FAX the form HUD-7015.15 to HUD/State together with a copy of the public notice and a cover letter stating whether comments were received and, if so, how the recipient responded to the comment. The Request for Release of Funds and Certification should not be submitted before the recipient has responded. If the request is sent by FAX, the original signed form should be mailed to HUD/State. The date of receipt by FAX will be counted as the submission date. However, HUD will not issue the 7015.16 "Authority to Use Grant Funds" until after the original signed form is received.

20.

Request for Release of
Funds and Certification

Request for Release of Funds and Certification

U.S. Department of Housing and Urban Development
Office of Community Planning and Development

OMB No. 2506-0087
(exp. 07/31/2017)

This form is to be used by Responsible Entities and Recipients (as defined in 24 CFR 58.2) when requesting the release of funds, and requesting the authority to use such funds, for HUD programs identified by statutes that provide for the assumption of the environmental review responsibility by units of general local government and States. Public reporting burden for this collection of information is estimated to average 36 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Part 1. Program Description and Request for Release of Funds (to be completed by Responsible Entity)

1. Program Title(s)	2. HUD/State Identification Number	3. Recipient Identification Number (optional)
4. OMB Catalog Number(s)	5. Name and address of responsible entity	
6. For information about this request, contact (name & phone number)		
8. HUD or State Agency and office unit to receive request	7. Name and address of recipient (if different than responsible entity)	

The recipient(s) of assistance under the program(s) listed above requests the release of funds and removal of environmental grant conditions governing the use of the assistance for the following

9. Program Activity(ies)/Project Name(s)	10. Location (Street address, city, county, State)
11. Program Activity/Project Description	

Part 2. Environmental Certification (to be completed by responsible entity)

With reference to the above Program Activity(ies)/Project(s), I, the undersigned officer of the responsible entity, certify that:

1. The responsible entity has fully carried out its responsibilities for environmental review, decision-making and action pertaining to the project(s) named above.
2. The responsible entity has assumed responsibility for and complied with and will continue to comply with, the National Environmental Policy Act of 1969, as amended, and the environmental procedures, permit requirements and statutory obligations of the laws cited in 24 CFR 58.5; and also agrees to comply with the authorities in 24 CFR 58.6 and applicable State and local laws.
3. The responsible entity has assumed responsibility for and complied with and will continue to comply with Section 106 of the National Historic Preservation Act, and its implementing regulations 36 CFR 800, including consultation with the State Historic Preservation Officer, Indian tribes and Native Hawaiian organizations, and the public.
4. After considering the type and degree of environmental effects identified by the environmental review completed for the proposed project described in Part 1 of this request, I have found that the proposal did did not require the preparation and dissemination of an environmental impact statement.
5. The responsible entity has disseminated and/or published in the manner prescribed by 24 CFR 58.43 and 58.55 a notice to the public in accordance with 24 CFR 58.70 and as evidenced by the attached copy (copies) or evidence of posting and mailing procedure.
6. The dates for all statutory and regulatory time periods for review, comment or other action are in compliance with procedures and requirements of 24 CFR Part 58.
7. In accordance with 24 CFR 58.71(b), the responsible entity will advise the recipient (if different from the responsible entity) of any special environmental conditions that must be adhered to in carrying out the project.

As the duly designated certifying official of the responsible entity, I also certify that:

8. I am authorized to and do consent to assume the status of Federal official under the National Environmental Policy Act of 1969 and each provision of law designated in the 24 CFR 58.5 list of NEPA-related authorities insofar as the provisions of these laws apply to the HUD responsibilities for environmental review, decision-making and action that have been assumed by the responsible entity.
9. I am authorized to and do accept, on behalf of the recipient personally, the jurisdiction of the Federal courts for the enforcement of all these responsibilities, in my capacity as certifying officer of the responsible entity.

Signature of Certifying Officer of the Responsible Entity

Title of Certifying Officer

Date signed

X

Address of Certifying Officer

Part 3. To be completed when the Recipient is not the Responsible Entity

The recipient requests the release of funds for the programs and activities identified in Part 1 and agrees to abide by the special conditions, procedures and requirements of the environmental review and to advise the responsible entity of any proposed change in the scope of the project or any change in environmental conditions in accordance with 24 CFR 58.71(b).

Signature of Authorized Officer of the Recipient

Title of Authorized Officer

Date signed

X

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

21.

Notice of Early Public
Review
(Floodplains and/or
Wetlands)

**Early Notice and Public Review of a Proposed
Activity in a [100-Year/500-year Floodplain or Wetland]**

**[Note: May also be combined with other notices such as state floodplain or wetland notices so long
as it contains the required information]**

To: All interested Agencies **[include all Federal, State, and Local]**, Groups and Individuals

This is to give notice that **[HUD under part 50 or Responsible Entity under Part 58]** has determined that the following proposed action under **[Program Name]** and **[HUD grant or contract number]** is located in the **[100-year/500-year floodplain/wetland]**, and **[HUD or the Responsible Entity]** will be identifying and evaluating practicable alternatives to locating the action in the **[floodplain/wetland]** and the potential impacts on the **[floodplain/wetland]** from the proposed action, as required by **[Executive Order 11988 and/or 11990]**, in accordance with HUD regulations at 24 CFR 55.20 Subpart C Procedures for Making Determinations on Floodplain Management and Protection of Wetlands. **[Describe the activity, e.g. purpose, type of assistance, the size of the site, proposed number of units, size of footprint, type of floodplain/wetland, natural and beneficial values potentially adversely affected by the activity].** **[State the total number of acres of floodplains/wetland].** The proposed project(s) is located **[at addresses]** in **[Name of City]**, **[Name of County]**.

There are three primary purposes for this notice. First, people who may be affected by activities in **[floodplains/wetlands]** and those who have an interest in the protection of the natural environment should be given an opportunity to express their concerns and provide information about these areas. Commenters are encouraged to offer alternative sites outside of the **[floodplain/wetland]**, alternative methods to serve the same project purpose, and methods to minimize and mitigate impacts. Second, an adequate public notice program can be an important public educational tool. The dissemination of information and request for public comment about **[floodplains/wetlands]** can facilitate and enhance Federal efforts to reduce the risks and impacts associated with the occupancy and modification of these special areas. Third, as a matter of fairness, when the Federal government determines it will participate in actions taking place in **[floodplains/wetlands]**, it must inform those who may be put at greater or continued risk.

Written comments must be received by **[HUD or Responsible Entity]** at the following address on or before **[month, day, year]** **[a minimum 15 calendar day comment period will begin the day after the publication and end on the 16th day after the publication]:** **[HUD or Responsible Entity]**, **[Address]** and **[phone number]**, Attention: **[Name of Certifying Officer or designee]**, **[Title]**. A full description of the project may also be reviewed from **[enter available office hours]** at **[address or state address is same as above]** and **[web address if available]**. Comments may also be submitted via email at **[email address]**.

Date:

22.

Notice of Explanation
(Floodplains and/or
Wetlands)

Final Notice and Public Explanation of a Proposed Activity in a [100-Year/500-year Floodplain or Wetland]

To: All interested Agencies [include all Federal, State, and Local], Groups and Individuals

This is to give notice that the [HUD under part 50 or Responsible Entity under Part 58] has conducted an evaluation as required by [Executive Order 11988 and/or 11990], in accordance with HUD regulations at 24 CFR 55.20 Subpart C Procedures for Making Determinations on Floodplain Management and Wetlands Protection. The activity is funded under the [Program Name] under [HUD grant or contract number]. The proposed project(s) is located [at addresses] in [Name of City], [Name of County]. [Describe the activity, e.g. purpose, type of assistance, the size of the site, proposed number of units, size of footprint, type of floodplain/wetland, natural values]. [State the total number of acres of floodplains/wetland involved].

[HUD or Responsible Entity] has considered the following alternatives and mitigation measures to be taken to minimize adverse impacts and to restore and preserve natural and beneficial values: [List (i) ALL of the reasons why the action must take place in a floodplain/wetland, (ii) alternatives considered and reasons for non-selection, (iii) all mitigation measures to be taken to minimize adverse impacts and to restore and preserve natural and beneficial values] [Cite the date of any final or conditional LOMR's or LOMA's from FEMA where applicable] [Acknowledge compliance with state and local floodplain/wetland protection procedures]

[HUD or Responsible Entity] has reevaluated the alternatives to building in the [floodplain/wetland] and has determined that it has no practicable alternative. Environmental files that document compliance with steps 3 through 6 of [Executive Order 11988 and/or 11990], are available for public inspection, review and copying upon request at the times and location delineated in the last paragraph of this notice for receipt of comments.

There are three primary purposes for this notice. First, people who may be affected by activities in [floodplains/wetlands] and those who have an interest in the protection of the natural environment should be given an opportunity to express their concerns and provide information about these areas. Second, an adequate public notice program can be an important public educational tool. The dissemination of information and request for public comment about [floodplains/wetlands] can facilitate and enhance Federal efforts to reduce the risks and impacts associated with the occupancy and modification of these special areas. Third, as a matter of fairness, when the Federal government determines it will participate in actions taking place in [floodplains/wetlands], it must inform those who may be put at greater or continued risk.

Written comments must be received by the [HUD or Responsible Entity] at the following address on or before [month, day, year] [a minimum 7 calendar day comment period will begin the day after the publication and end on the 8th day after the publication]: [Name of Administrator], [Address] and [phone number], Attention: [Name of Certifying Officer or designee], [Title]. A full description of the project may also be reviewed from [enter available office hours] at [address or state address is same as above] and [web address if available]. Comments may also be submitted via email at [email address].

Date:

23.

Request for Wage Rate
Determination and
Response to Request

<p>Georgia Department of Community Affairs Office of Community Development 60 Executive Park South, NE Atlanta, Georgia 30329</p>	<p>Request for Determination and Response to Request (Davis-Bacon Act as amended and Related Statutes)</p> <p>Wage Determination under the Davis-Bacon and related act. (This decision is effective from the date of publication in the Federal Register without limitation as to time.)</p>
<p>Name, Address and Phone Number to Which a Copy of This Determination is to be Mailed (Other than Grant Recipient)</p>	<p>CDBG Recipient (City/County)</p>
<p>Name</p>	<p>Grant Number</p>
<p>Street/Box</p>	<p>Project Name</p>
<p>City/State/Zip</p>	<p>County</p>
<p>E-mail Address/Telephone Number</p>	<p>Date of this Request</p>
<p>Check Type of Work <input type="checkbox"/> Water/Sewer <input type="checkbox"/> Drainage <input type="checkbox"/> Street <input type="checkbox"/> Buildings Estimated Total Cost</p>	<p>Area Code/Phone Number</p>
<p>Estimated Cost</p>	<p>Estimated Date of Bid Opening:</p>
<p>Estimated Advertising Date:</p>	<p>Estimated Construction Start Date:</p>
<p>Estimated Date of Contract Award:</p>	<p></p>
<p>To Be Completed by Georgia Department of Community Affairs</p> <p>Approving DCA Representative: _____</p> <p>Wage Decision Number (s): _____</p>	

24.

Clearance of Prime
Contractor

Georgia Department of Community Affairs
Office of Community Development
60 Executive Park South, NE
Atlanta, Georgia 30329-2231

Request for Clearance of Prime Contractor

CDBG Recipient

Grant Number

Name

Title (Mayor/Commissioner)

Address

City, State, Zip

<i>Type of Work</i>	<i>Contractor Name and Address</i>	<i>Start Date</i>

Submitted by:

Cleared by DCA Staff:

Signature and Date

Signature and Date

CC Form To:

Name

Address

City, State, Zip

E-Mail Address

Note: You may also fax or e-mail request and receive a letter back for documentation

Fax Pam Truitt at (404) 679-1583

Email: pam.truitt@dca.ga.gov

25.

Record of Employee
Job Site Interview

Record of Employee Interview

U.S. Department of Housing and Urban Development Office of Labor Relations

OMB Approval No. 2501-0009
(exp. 10/31/2010)

Reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this collection, unless it displays a currently valid OMB control number. The information is collected to ensure compliance with the Federal labor standards by recording interviews with construction workers. The information collected will assist HUD in the conduct of compliance monitoring; the information will be used to test the veracity of certified payroll reports submitted by the employer. **Sensitive Information.** The information collected on this form is considered sensitive and is protected by the Privacy Act. The Privacy Act requires that these records be maintained with appropriate administrative, technical, and physical safeguards to ensure their security and confidentiality. In addition, these records should be protected against any anticipated threats or hazards to their security or integrity that could result in substantial harm, embarrassment, inconvenience, or unfairness to any individual on whom the information is maintained. **The information collected herein is voluntary, and any information provided shall be kept confidential.**

1a. Project Name			2a. Employee Name		
1b. Project Number			2b. Employee Phone Number (including area code)		
1c. Contractor or Subcontractor (Employer)			2c. Employee Home Address & Zip Code		
			2d. Verification of identification? Yes <input type="checkbox"/> No <input type="checkbox"/>		
3a. How long on this job?	3b. Last date on this job before today?	3c. No. of hours last day on this job?	4a. Hourly rate of pay?	4b. Fringe Benefits?	
				Vacation Yes <input type="checkbox"/> No <input type="checkbox"/>	4c. Pay stub? Yes <input type="checkbox"/> No <input type="checkbox"/>
				Medical Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Pension Yes <input type="checkbox"/> No <input type="checkbox"/>	

5. Your job classification(s) (list all) --- continue on a separate sheet if necessary

6. Your duties

Tools or equipment used

8. Are you an apprentice or trainee? <input type="checkbox"/> Y <input type="checkbox"/> N	10. Are you paid at least time and 1/2 for all hours worked in excess of 40 in a week? <input type="checkbox"/> Y <input type="checkbox"/> N
9. Are you paid for all hours worked? <input type="checkbox"/> Y <input type="checkbox"/> N	11. Have you ever been threatened or coerced into giving up any part of your pay? <input type="checkbox"/> Y <input type="checkbox"/> N

12a. Employee Signature	12b. Date
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13. Duties observed by the Interviewer (Please be specific.)

14. Remarks

15a. Interviewer name (please print)	15b. Signature of Interviewer	15c. Date of interview
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Payroll Examination

16. Remarks

Signature of Payroll Examiner	17b. Date
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26.

Instructions for
Job Site Interviews

Record of Employee Interview Instructions

U.S. Department of Housing
and Urban Development
Office of Labor Relations

OMB Approval No. 2501-0009
(exp. 10/31/2010)

Instructions

General:

This form is to be used by HUD and local agency staff for recording information gathered during on-site interviews with laborers and mechanics employed on projects subject to Federal prevailing wage requirements. Typically, the staff that will conduct on-site interviews and use this form are HUD staff and fee construction inspectors, HUD Labor Relations staff, and local agency labor standards contract monitors.

Information recorded on the form HUD-11 is evaluated for general compliance and compared to certified payroll reports submitted by the respective employer. The comparison tests the veracity of the payroll reports and may be critical to the successful conclusion of enforcement actions in the event of labor standards violations. The thoroughness and accuracy of the information gathered during interviews is crucial.

Note that the interview itself and the information collected on the form HUD-11 are considered confidential. Interviews should be conducted individually and privately. All laborers and mechanics employed on the job site must be made available for interview at the interviewer's request. The employee's participation, however, is voluntary. Interviews shall be conducted in a manner and place that are conducive to the purposes of the interview and that cause the least inconvenience to the employer(s) and the employee(s).

Completing the form HUD-11

Items 1a - 1c: Self-explanatory

Items 2a - 2d: Enter the employee's full name, a telephone number where the employee can be reached, and the employee's home address. Many construction workers use a temporary address in the locality of the project and have a more permanent address elsewhere from which mail may be forwarded to them. Obtain a more permanent address, if available. Ask the employee for a form of identification (e.g., driver's license) to verify their name.

Items 3a - 4c: Enter the employee's responses. Ask the employee whether they have a pay stub with them; if so, determine whether the pay stub is consistent with the information provided by the employee.

Items 5 - 7: Be certain that the employee's responses are specific. For example, job classification (#5) must identify the trade involved (e.g., Carpenter, Electrician, Plumber) - responses such as "journeyman" or "mechanic" are not helpful for our purposes.

Items 8 - 12b: Self-explanatory

Items 13 - 15c: These items represent some of the most important information that can be gathered while conducting on-site interviews. Please be specific about the duties you observed the employee performing. It may be easiest to make these observations before initiating the interview. Please record any comments or remarks that may be helpful. For example, if the employee interviewed was working with a crew, how many workers were in the crew? Was the employee evasive?

The level of specificity that is warranted is directly related to the extent to which interview(s) or other observations indicate that there may be violations present. If interviews indicate that there may be underpayments involving a particular trade(s), the interviewer is encouraged to interview as many workers in that trade(s) that are available.

Items 16 - 17b: The information on the form HUD-11 may be reviewed for general compliance, initially. For example, are the job classification and wage rate stated by the employee compatible with the classifications and wage rates on the applicable wage decision? Are the duties observed by the interviewer consistent with the job classification?

Once the corresponding certified payroll reports are received, the information on the HUD-11 shall be compared to the payroll reports. Any discrepancies noted between the HUD-11 information and that on the payroll report shall be noted in Item 16, Remarks. If discrepancies are noted, follow-up actions to resolve the discrepancies must be taken.

27.

Final Wage
Compliance Report

**FINAL WAGE COMPLIANCE REPORT
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

CDBG

Recipient: _____

Grant Number: _____

Project Name: _____ Project Completion Date: _____

1. While you or your representative were reviewing the contractor's and subcontractor's weekly payroll submissions, were any laborers or mechanics paid less than the prevailing wage rate as specified in the Secretary of Labor's official Wage Rate Determination that applied to this project (Check one Answer)?

Yes, or No.

2. If yes, provide the following information:

a) Total amount of wage restitution paid (difference between what was first paid and what was required to be paid by Wage Rate:

\$ _____

b) Method of restitution (check one):

Paid by contractor, or

Paid by CDBG Recipient government with funds withheld from payments to contractor.

Name of Contractor or Subcontractor	Name of Affected Employee	Amount of Restitution Paid to Employee	Nature of the Violation Requiring Restitution

Signed by: _____ Title: _____ Date: _____

28.

Weekly Payroll Report
(reduced sample copy,
One page)

29.

Statement of Compliance
for Weekly Payroll

30.

Notice of Contract Action

31.

Sample Time and
Attendance Record

32.

CDBG/EIP Disclosure
Report (DCA Form 13)

If this is an Updated Report:

- 1) Check this box,
- 2) Provide CDBG Recipient:

Name: _____

Grant #: _____

- 3) Certifying Official must sign below.

PART III – Other Government Assistance Applied For and/or Provided

Provide the information below for any other federal, state or local governmental assistance on-hand or applied for, that will be used in conjunction with the CDBG grant.

Name of Agency Providing or to Provide Assistance	Program Name	Type of Assistance	Amount Requested or Provided

I hereby certify that this information is true and correct: (Note: Sign only if this is an updated page)

Signature of Certifying Official

Date

(Typed or Printed Name and Title)

If this is an Updated Report:

- 1) Check this box,
- 2) Provide CDBG Recipient:

Name: _____

Grant #: _____

- 3) Certifying Official must sign below.

PART IV – Interested Parties

List of all persons or entities with a reportable financial interest in the project (See instructions)	Social Security # or Employer ID #	Type of Participation	Financial Interest (Amount and Percent of Total Project Cost)

I hereby certify that this information is true and correct: (Note: Sign only if this is an updated page)

Signature of Certifying Official

Date

(Typed or Printed Name and Title)

If this is an Updated Report:

- 1) Check this box,
- 2) Provide CDBG Recipient:

Name: _____

Grant #: _____

- 3) Certifying Official must sign below.

Part V – Expected Sources and Uses of All Funds

This Part requires that you identify the sources and uses of all assistance for the project, including CDBG, CHIP and any other funds that may or will be used for the Project.

Source	Use

Part VI – CERTIFICATION

I hereby certify that the information provided in the Disclosure Report is true and correct and I am aware that any false information or lack of information knowingly made or omitted may subject me to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, I am aware that if I knowingly and materially violate any required disclosure of information, including intentional nondisclosure, I am subject to a civil monetary penalty not to exceed \$10,000 for each violation.

(Signature of Certifying Official)

(Date)

(Typed or Printed Name and Title)

33.

Authorization to Make
Other Deductions
(Davis-Bacon Related
Form)

"OTHER DEDUCTIONS"

AUTHORIZATION TO MAKE OTHER DEDUCTIONS

I, _____, hereby authorize my employer, _____ to make the below described deductions which are permitted under 29 CFR, Part 3, without separate approval of the Secretary of Labor, from wages earned while employed on the following project:

PROJECT NUMBER: _____
PROJECT NAME: _____
PROJECT LOCATION: _____

These deductions are voluntary and are listed below:

<u>DEDUCTION</u>	<u>AMOUNT</u>
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____

Employee Signature

Witness

Date

Date

34.

DCA Request For
Reasonable
Accommodation forms

STATE OF GEORGIA
Georgia Department of Community Affairs (DCA)

REASONABLE ACCOMMODATION REQUEST

Documentation in Support of Request: Health Care Professional Information

Please answer the following questions regarding _____'s condition
as it relates to his/her ability to participate in _____ and
possible accommodations. _____
Individual Program signed *Limited Medical*
Individual

Release is also attached.

This information is requested so that DCA can properly evaluate this individual's request
for an accommodation to participate in _____
Program

Does the individual have a mental or physical impairment that substantially limits a major
life activity? If so, describe the impairment and its impact on this individual's major life
activities. (Major life activities include, but are not limited to, walking, seeing, hearing,
speaking, breathing, learning, performing manual tasks, caring for oneself.)

Does the impairment affect the individual's ability to participate in the essential eligibility
requirements for the program? If so, please describe the impact on the person's ability
to perform specific functions.

Is the need for accommodation likely to be temporary or permanent? If temporary, how long do you estimate the need for accommodation will exist?

Health Care Professional name
(please print)

Professional license or specialty

Signature

Date

Are you aware of alternative methods that might effectively accommodate your impairment?

Yes No If yes, specify:

List all dates/times the accommodation(s) are needed (specify):

Please identify any potential resources or other suggestions for DCA to consider in responding to your accommodation requests.

I request that all information pertaining to my accommodation request:

Be kept confidential Not be kept confidential

Date: _____

(Print Name)

(Signature)

Review and Action

Reasonable Accommodation Request Form received from applicant on _____ (Date).

If necessary, Request for Additional Information requested on _____ (Date).

If necessary, Request for Additional Information completed and returned on _____ (Date).

Requested Accommodation granted on _____ (Date).

Requested Accommodation denied on _____ (Date) because:

Other action taken (explain) on _____ (Date).

Notification to applicant concerning action taken on _____ (Date).

(Date)

(Signature of DCA Official)

STATE OF GEORGIA
Georgia Department of Community Affairs (DCA)

REQUEST FOR REASONABLE ACCOMMODATION

DCA personnel want to make our services and facilities accessible to all. Your requests and recommendations are welcome. If you know in advance that you will require accommodation services, please complete this *Request for Reasonable Accommodation Form* and return to a Division Coordinator (see attached list with email and telephone numbers) or e mail it to fairhousing@dca.ga.gov.

If you need assistance completing this form, contact the Division Coordinator.

Note: Some types of reasonable accommodations (e.g., readers, sign language interpreters, brailled/alternative formatted materials) require advance notice. Requests for reasonable accommodations will be evaluated on a case by case basis. There must exist a nexus or connection between your condition and the accommodation(s) that you are requesting.

You may be required to complete a *Documentation in Support of Request Form* and *Limited Medical Release* for DCA to properly evaluate your reasonable accommodation request(s). This information, if required, will remain **confidential** and will only be used to evaluate your accommodation request(s).

Name: _____

Address: _____

Telephone No.: _____

E-mail: _____

I am participating in the following DCA service/program/activity as a (check all that apply):

Program Name _____

Other (please specify):

I am requesting accommodation because (please check one or more of the following)

I am requesting accommodation that will allow me to participate in a program or activity offered by DCA.

I am requesting an exception to the following rule, policy or procedure. Please specify the reasons necessary for the exception and the exception requested.

Auxiliary Aid or Service (for example, sign language interpreter, the way that DCA communicates with you).

Please specify:

Describe the impairment that necessitates the accommodation(s) (specify):

Describe the accommodation(s) you are requesting and explain how the requested accommodation(s) would be effective.

STATE OF GEORGIA
Georgia Department of Community Affairs (DCA)

REASONABLE ACCOMMODATION REQUEST

Documentation in Support of Request: Release

I hereby authorize _____ to provide the medical information requested by DCA. The information will solely be used to evaluate my request for reasonable accommodation under the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973.

Name (Please print)

Telephone/E-mail

Signature

Date

[Attach cover letter from DCA explaining reason for requesting information.]

35.

HUD Floodplain/Wetland
Regulatory Changes



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
WASHINGTON, DC 20410-7000

OFFICE OF COMMUNITY PLANNING
AND DEVELOPMENT

DEC 17 2013

MEMORANDUM FOR: Regional Environmental Officers
Field Environmental Officers
FROM: *Danielle Schopp*
Danielle Schopp, Director, Office of Environment and Energy, DGE
SUBJECT: Floodplain Management and Protection of Wetlands Rulemaking

I. Background

HUD recently finalized a rule that changes HUD regulations of floodplains and wetlands at 24 CFR part 55. Federal departments and agencies are charged by executive orders with incorporating floodplain management and wetland protection considerations in their respective planning, regulatory, and decision making processes. This document offers guidance and explanations for the changes to HUD policy and regulations.

II. Executive Orders

The floodplain regulations are derived from Executive Order 11988 (E.O. 11988) entitled "Floodplain Management," dated May 24, 1977 (42 FR 26951). HUD implements E.O. 11988 through regulations at 24 CFR part 55. The final rule that was published in the Federal Register on November 15, 2013 updated the floodplain regulations and added a process for wetlands. The rule is available at: (<https://federalregister.gov/a/2013-27427>).

E.O. 11988 requires each federal agency to identify and evaluate practicable alternatives to locating in the floodplain. If it is not practicable to avoid the floodplain, then each federal agency must identify and evaluate the potential effects of any actions it may take in or affecting a floodplain. The goals of E.O. 11988 are: to avoid adversely impacting the natural functions of floodplains wherever possible; to ensure that the agency's planning programs and budget requests reflect consideration of flood hazards and floodplain management, including the restoration and

preservation of such land areas as natural undeveloped floodplains; and to prescribe procedures to implement the policies and procedures of this Executive Order.

A second executive order, Executive Order 11990 (E.O. 11990), entitled "Protection of Wetlands," dated May 24, 1977, (42 FR 26961) directs each agency to provide leadership and take action to minimize the destruction, loss, or degradation of wetlands. E.O. 11990 also directs each agency to preserve and enhance the natural and beneficial values of wetlands in carrying out the agency's responsibilities for: (1) acquiring, managing, and disposing of federal lands and facilities; (2) providing federally undertaken, financed, or assisted construction or improvements; and (3) conducting federal activities and programs affecting land use.

Although HUD had regulations on floodplain management at 24 CFR part 55, these regulations did not codify procedures for implementing E.O. 11990. Consistent with the intent of the executive orders HUD had relied on existing procedures established for floodplain management under 24 CFR part 55 to guide wetland protection considerations in planning, regulatory, and decision - making processes. This rule codifies in 24 CFR part 55 the procedures applicable to wetlands and authorized by E.O. 11990.

III. Regulatory Changes

A. Prohibition on Construction of New Structures and Facilities in Coastal High Hazard Areas (V Zones) (55.1(c))

The rule prohibits HUD funding or FHA mortgage insurance for the construction of new development in Coastal High Hazard Areas. This change would not affect existing structures. Existing structures would be eligible to receive funding, and disaster assistance would continue to be available for reconstruction of structures destroyed by a disaster. FHA mortgage insurance would continue to be available as long as the mortgage insurance does not finance new construction.

In V Zones, HUD now prohibits new construction of structures and infrastructure. Structures are defined by FEMA regulations at 44 CFR 9.4 to mean walled or roofed buildings, including mobile homes and gas or liquid storage tanks. Infrastructure is development that is not structures. Infrastructure includes roads, bridges, and utility lines. This change will prevent new development in Coastal High Hazard Areas, which will result in less development in areas of higher risk to lives and property. However, HUD receives few requests to fund new construction or provide FHA mortgage insurance for new construction in Coastal High Hazard Areas. The change will also further align HUD's development standards with those of FEMA grant programs.

Section 55.11(c) is also revised to make a corresponding change to a table describing the type of proposed actions allowed in various locations.

B. Use of Preliminary Flood Maps and Advisory Base Flood Elevations (55.2(b)(1))

The rule updates a provision in HUD's regulations to require the use of FEMA preliminary flood maps and advisory base flood elevations, where available. Prior to this rulemaking, HUD's regulations at 24 CFR 55.2(b)(1) indicated that effective Flood Insurance Rate Maps (FIRMs) are the only source of data for compliance with the 8 Step Process. In the wake of Hurricane Katrina and Hurricane Sandy, FEMA determined that the existing FIRMs may not reflect actual flood risk and issued Advisory Base Flood Elevations and Preliminary FIRMs. This change in map usage requirements will bring HUD's regulations into alignment with the intent of E.O. 11988 that agencies are to use the "best available information." In addition, this change will provide greater consistency with floodplain management activities across HUD and FEMA programs.

The rule clarifies that, when available, the latest interim FEMA information, such as an Advisory Base Flood Elevation or preliminary map or study, is the best available information for

the designation of flood hazard areas or equivalents. Unless the latest information has a lower Base Flood Elevation (BFE) than the effective FIRM, the latest FEMA information is then used for Part 55 purposes and throughout the decision making process. In instances where the latest information has a lower BFE than the effective FIRM, the higher BFE must be used to comply with the regulation and the National Flood Insurance Program requirements. If FEMA information is unavailable or insufficiently detailed, other Federal, state, or local data may be used as “best available information.”

C. Broadened use of the 5 Step Process for selected actions (55.12(a))

The rule broadens the use of the 5 Step Process for repairs, rehabilitations, and improvements. The 5 Step Process is an abbreviated 8 Step Process that omits Steps 2, 3, and 7. Steps 2, 3, and 7 require the publication of two notices and the consideration of alternatives to locating the project in the floodplain. The 5 Step Process was used for a variety of activities specified in 24 CFR 55.12(a), such as disposition of HUD-owned properties and mortgage insurance for the purchase, refinancing, or rehabilitation of existing multifamily structures subject to certain additional conditions.

An 8 Step Process was required for financial assistance, other than mortgage insurance, for rehabilitation of nonresidential or residential structures with more than four housing units located in floodplains. Rehabilitations now subject to the 5 Step Process are any repair, weatherization, reconstruction, modernization, or improvement of a structure that is not a substantial improvement, does not significantly increase the footprint in a floodplain or wetland, does not result in a 20 percent increase in the number of dwelling units or in the average peak number of customers and employees, and does not convert a nonresidential to a residential land use.

The rule allows rehabilitations of residential properties and nonresidential properties,

including weatherization, to forego Steps 2, 3, and 7 of the 8 Step Process. As outlined above, Steps 2, 3, and 7 are the consideration of alternatives at Step 3 and the publication of the preliminary and final notice at Steps 2 and 7, respectively. This change will streamline project approvals and allow more resources to be devoted toward the analyses of projects with greater potential impacts on floodplains and wetlands.

D. Activities excepted from the 8 Step Process (55.12(c))

The rule exempts certain activities from the 8 Step Process for floodplain management compliance. Exempted activities include leasing structures insured with the National Flood Insurance Program (NFIP) and not located in a floodway or Coastal High Hazard Area. The exemption for leased structures also requires that: (1) the leased structure is an existing structure; and (2) the structure is insured for its total value or up to the NFIP maximum as of the commencement of the lease term. Critical actions (e.g., hospitals, nursing homes, and emergency services) in a 100- or 500-year floodplain are not covered by this exemption.

Other exempt activities include special projects to increase access for those with special needs, activities involving ships or water-borne vessels, and activities that restore and preserve natural and beneficial functions of floodplains and wetlands. The exception for access for those with special needs includes wheelchair ramps, lifts, and elevators designed for access. While the 8 Step process is not required for these activities to enhance access for those with special needs, the requirement to obtain flood insurance for the project cost applies to the activity.

Activities that are designed for floodplain restoration must: clear all structures and improvements from the site; dedicate the site's use to flood control, wetland protection, park land or open space; and place a permanent covenant or comparable restriction on the site to preserve the floodplain or wetland from future development. These changes will reduce unnecessary delays.

E. Codification of Wetland Policy and Expanded Floodplain Guidance (24 CFR 55.20)

1. *Codification of Wetlands Policy*

This rule codifies procedures authorized by E.O. 11990. Through this rule, HUD adopts in regulation the procedures of E.O. 11990. These procedures will aid in the consistent application of policy and increase compliance by making the policy readily available.

The wetlands definition from E.O. 11990 has been added at 24 CFR 55.2(b)(11). In addition to incorporating the E.O. 11990 definition, the 24 CFR part 55 definition clarifies that the term includes constructed or man-made wetlands and wetlands that have been separated from a natural water supply by construction actions. The definition also explicitly states that wetlands subject to Section 404 of the Clean Water Act (CWA), as well as those wetlands that are not subject to Section 404 of the CWA, are subject to E.O. 11990 and 24 CFR part 55.

The definition also outlines a process for evaluating wetlands resources and the use of Fish and Wildlife Service- National Wetlands Inventory (NWI) staff. The rule states that NWI maps are the primary source of data, but NWI staff, if available, should be consulted for delineations of the wetland or if the maps are thought to be inaccurate. If NWI staff is unavailable, a wetland professional may be consulted. HUD also encourages the use of secondary sources such as Natural Resource Conservation Service's National Soil Surveys and any state and local information concerning wetlands that may be impacted by site activities.

If wetlands are found to be subject to E.O. 11990, the rule requires the completion of an eight-step process, referred to below as the "8 Step Process." The 8 Step Process is administered by HUD or responsible entities under 24 CFR part 58. Step 1 requires a determination of whether or not the proposed project to be developed with HUD financial assistance will be in a wetland. If so, Step 2 requires that a public notice be issued to inform interested parties that a proposal to consider

an action in a wetland has been made. Following this notice, Step 3 requires the identification and evaluation of practicable alternatives to avoid locating the project in a wetland. Such an evaluation of alternatives shall include, for example, alternative locations outside the wetland, feasible technological alternatives, and social values such as aesthetics, historic and cultural values, and land use patterns. Step 4 requires the identification and evaluation of the potential direct and indirect impacts associated with the occupancy or modification of wetlands. Step 4 also requires the identification of the potential direct and indirect support of wetlands development that could result from the proposed action. Relevant factors include the proposal's effect on the survival and quality of the wetland and other factors listed in the regulation. Direct support consists of projects located in the wetland such as housing, public service structures, or office buildings that require additional investment such as food service or parking. Indirect support for wetland development can be caused by infrastructure that can induce further development due to proximity to the wetland. Examples of indirect support include water and waste water systems, power supplies, roads, airports, and mass transit systems. Step 5 requires an analysis of practicable modifications and changes to the proposal to minimize adverse impacts to the wetlands and to the project as a result of its proposed location in wetlands. Under Step 6, the alternatives and the proposed wetland site are then reevaluated. If it is determined that there is no practicable alternative to the proposed wetland development, Step 7 requires a second notice to be issued to the public stating that the decision has been made and providing details associated with the decision. After this second notice, Step 8 implements the action, including any mitigating measures that were established during the decision making process. This evaluation process requires the same eight steps as E.O. 11988, Floodplain Management.

The rule recommends appropriate and practicable compensatory mitigation for adverse

impacts to more than one acre of wetlands. Compensatory mitigation resulting from other federal, state, or local governmental requirements can be used to fulfill this requirement. Compensatory mitigation approaches include permittee-responsible mitigation, mitigation banking, in-lieu fee mitigation, the use of preservation easements or protective covenants, and any form promoted and approved by the authority of the state governments or the Federal government. In certain situations, compensatory mitigation may not be practicable or appropriate due to the cost of compensatory mitigation in a state or watershed, a lack of funds within the project, or other reasons that make compensatory mitigation impossible. One example would be an Alaska Native village that is mainly in a wetland and is surrounded by federal and state land. The cost in this situation could make compensatory mitigation inappropriate or impracticable.

2. *Expanded Floodplain Guidance*

The rule expands upon guidance in the existing floodplain regulation. The new guidance results in additional factors that should be considered when identifying site and project alternatives at Step 3, evaluating impacts at Step 4, minimizing impacts at Step 5, and reevaluating alternatives at Step 6. These additions include concepts from various resources and better inform reviewers on what factors to consider when conducting these steps.

F. Adoption of executive order reviews performed by HUD or another responsible entity

(55.26)

The rule amends 24 CFR 55.26 to make clear that under the executive orders, HUD or a responsible entity may adopt previous review processes that were performed by another responsible entity or HUD. This change will prevent duplicative processing in cases where a project may have multiple recipients contributing funding or has funding that may not allow the responsible entity to perform the review. Nothing in the rule or part is binding or applicable to the USACE or USACE

processes. USACE has its own regulations, policies, and procedures, which are not impacted by this part.

G. Use of Individual 404 Permits for Wetlands (24 CFR 55.28)

This rule allows HUD and HUD's recipients of assistance to use individual permits issued under section 404 of the Clean Water Act (33 U.S.C. 1344) (Section 404) in lieu of performing the first five steps of the 8 Step Process. This streamlined option will reduce costs and the processing time for complying with parts of the 8 Step Process for which the adhering to the standard process affords minimal substantive benefit. The Clean Water Act establishes the basic structure for regulating discharges of pollutants into the waters of the United States and regulating water quality standards for surface waters. Section 404 of the Clean Water Act requires a applicant to obtain a permit from the U.S. Army Corps of Engineers (USACE) prior to beginning any nonexempt activity involving the placement of dredged or fill material in waters of the United States, including wetlands.

If the applicant has obtained an individual USACE Section 404 permit and submits the individual permit with its application for a HUD program, then HUD or the responsible entity will be required to complete only the last three steps of the 8 Step Process, and thus will be able to avoid § 55.20(a) through (e). The last three steps include the publication of a single public notice and thereby avoid the requirement under the usual 8 Step Process for the publication of two notices. If HUD or the responsible entity determines that a reevaluation or repeat of any of the steps is necessary to comply with E.O. 11990, HUD or the responsible entity will reevaluate and complete the necessary steps of the 8 Step Process. None of the 8 steps or any provisions of this rule should be interpreted as being requirements of the USACE's regulatory program. USACE has its own regulations, policies, and procedures, none of which are impacted by this rulemaking.

The issuance of an individual Section 404 permit may not substitute for processing under the 8 Step Process and compliance with E.O. 11988 where the property is also located in a floodplain. Section 404 of the Clean Water Act also allows states to administer an individual and general permit program in lieu of the USACE permit program. Individual Section 404 permits issued by state agencies may be used in lieu of the first five steps of the E.O. 11990 process under this regulation. General or Nationwide permits issued under Section 404 may not be used under this provision, and new construction in the wetland subject to these permits must undergo full processing under 24 CFR 55.20 unless excepted under 55.12.

All wetlands subject to Section 404 of the Clean Water Act are wetlands for the purposes of E.O. 11990. However, the combined process in this rule will not apply in all instances, because wetlands not considered waters of the United States under Section 404 of the Clean Water Act are typically wetlands for the purposes of E.O. 11990. Isolated or non-jurisdictional wetlands not subject to Section 404 of the Clean Water Act must be processed under the 8 Step Process.

H. Modifying the Categorical Exclusion for Minor Rehabilitations of Single Family Homes

(58.35)

Finally, the rule amends 24 CFR 58.35(a)(3)(i) by modifying the categorical exclusion from environmental review under the National Environmental Policy Act of 1969 (42 U.S.C. 4321) for minor rehabilitation of one- to four-unit residential properties, by removing the qualification that the footprint of the structure may not be increased in a floodplain or wetland. Prior to this rulemaking, four units could be constructed in a floodplain or wetland as an individual action under the categorical exclusion in § 58.35(a)(4)(i), but rehabilitated structures with an increased footprint in a floodplain or wetland required a full environmental assessment. It is logically inconsistent to require a greater review for minor rehabilitations than for new construction. The rule resolves this

inconsistency but will still require part 55 processing for construction in floodplains and wetlands unless excluded under § 55.12(b) or (c). HUD believes that this change will eliminate needless assessments without contributing to environmental degradation. HUD is basing its conclusion on a recent survey of its environmental experts.

IV. Contact Information

For further information, contact Jerimiah Sanders, Environmental Review Division, Office of Environment and Energy, Office of Community Planning and Development, at 202-402-4571 or via email at Jerimiah.J.Sanders@hud.gov.

36.

HUD Floodplain
Management Checklist

Floodplain Management

Checklist for HUD or Responsible Entity

General requirements	Legislation	Regulation
Avoid the adverse impacts associated with the occupancy and modification of floodplains. Avoid floodplain development whenever there are practicable alternatives.	Executive Order 11988, May 24 1977	24 CFR Part 55

1. Is the Project located in a floodway or a 100 or 500-year flood plain?

For projects in areas mapped by FEMA, maintain the FEMA map panel that includes your project site. Make sure to include the map panel number and date. If FEMA information is unavailable or insufficiently detailed, other Federal, state, tribal or local data may be used as 'best available information.' However, a base flood elevation from an interim or preliminary or non-FEMA source cannot be used if it is lower than the current FIRM and FIS. Include documentation, including a discussion of why this is the best available information for the site.

- No: STOP here. The Floodplain Management regulations do not apply. Record your determination that the project is not in a floodplain or floodway.
- Yes—Floodway. **STOP. The National Flood Insurance Program prohibits federal financial assistance for use in a floodway.** The only exception is for functionally dependent uses, such as a marina, a port facility, a waterfront park, a bridge or a dam. If your project is a functionally dependent use in a floodway, proceed to #3
- Yes—500-year flood plain (Zone B or X on FEMA maps or best information). **PROCEED to #2**
- Yes—100 Year flood plain (Zone A or V on FEMA maps or best information). **PROCEED to #3**
- Yes—Flood prone area. **PROCEED to #3**

2. For projects in the 500-year flood plain: Does your project involve a critical action, defined as an activity for which even a slight chance of flooding would be too great because it might result in loss of life, injury or property damage? Specific examples include:

- Structures or facilities that produce, use or store highly volatile, flammable, explosive, toxic or water-reactive materials.
- Structures or facilities that provide essential and irreplaceable records or utility or emergency services that may become lost or inoperative during flood and storm events (e.g., data storage centers, generating plants, principal utility lines, emergency operations centers including fire and police stations, and roadways providing sole egress from flood-prone areas).
- Structures or facilities that are likely to contain occupants who may not be sufficiently mobile to avoid loss of life or injury during flood or storm events, e.g. persons who reside in hospitals, nursing homes, convalescent homes, intermediate care facilities, board and care facilities, and retirement service centers. Housing for independent living for the elderly is not considered a critical action.

- No: STOP here. The project can proceed without further analysis. Record your determination and attach flood plain map and documentation that project does not involve a critical action.
- Yes: PROCEED to #3

3. Does your project meet one of the categories of proposed action for which Part 55 does not apply? (Below are several common exemptions—please see 24 CFR 55.12(c) for additional categories of proposed action)

- The approval of financial assistance for restoring and preserving the natural and beneficial functions and values of floodplains and wetlands but only other certain further conditions (see 24 CFR 55(c)(3)).

- A minor amendment to a previously approved action with no additional adverse impact on or from a floodplain.
- Approval of a project site, an incidental portion of which is situated in an adjacent floodplain, but only with certain further conditions (see 24 CFR 55.12(c)(6)).
- A project on any site in a floodplain for which FEMA has issued a final Letter of Map Amendment or Letter of Map Revision that removed the property from a FEMA-designated floodplain location.
- A project on any site in a floodplain for which FEMA has issued a conditional LOMA or LOMR if the approval is subject to the requirements and conditions of the conditional LOMA or LOMR.
- Special Projects directed to the removal of material and architectural barriers that restrict the mobility of and accessibility to elderly and persons with disabilities.

Yes: Stop here. Record your determination that the project is exempt from floodplain management regulations per 24 CFR 55.12(c). Maintain copies of all of the documents you have used to make your determination. Please note that you may still have to maintain flood insurance on the project per the Flood Disaster Protection Act.

No: Proceed to #4.

4. Does your project meet one of the categories of proposed action for which the 8-step decision making process does not apply? (Below are several common exemptions—please see 24 CFR 55.12(b) for additional categories of proposed action)

- Financial assistance for the purchasing, mortgaging or refinancing of existing one-to-four family properties under certain conditions (24 CFR 55(b)(1))
- Financial assistance for minor repairs or improvements on one-to-four-family properties that do not meet the thresholds for ‘substantial improvement’¹
- Disposition of individual HUD-acquired one-to-four-family properties.
- HUD guarantees under the Loan Guarantee Recovery Fund Program under certain conditions (see 24 CFR 55.12(b)(4)).
- Leasing an existing structure in the floodplain but only under certain conditions (see 24 CFR 55.12(b)(5))

Yes: Stop here. Record your determination that the project is exempt from the 8-step process as per 24 CFR 55.12(b). Maintain copies of all of the documents you have used to make your determination. Please note that you may still have to maintain flood insurance on the project per the Flood Disaster Protection Act. Please also note that notification of floodplain hazard requirements at 24 CFR 55.21 may apply.

No: Proceed to #5.

5. Does your project meet one of the categories of proposed action for which a limited 8-step process applies? (please see 24 CFR 55.12(a) for more details)

- Disposition of acquired multifamily housing projects or acquired one-to-four family properties where communities are in good standing in the NFIP program.
- HUD’s actions under the National Housing Act for purchase or refinance of existing multifamily housing projects, hospitals, nursing homes, assisted living facilities, board and care facilities, and intermediate care facilities, in communities that are in good standing under the NFIP.
- Actions under any HUD program involving the repair, rehabilitation, modernization, weatherization, or improvement of existing multifamily housing projects, nursing homes, assisted living facilities, board and care facilities, intermediate care facilities and one-to-four family properties in communities in the Regular Program of the NFIP and in good standing, units are not increased more than 20 percent, the action does not involve a conversion from nonresidential to residential land use, the action does not meet the thresholds for ‘substantial improvement’¹ and the footprint of the structure and paved areas is not significantly increased.
- Actions under any HUD program involving the repair, rehabilitation, modernization, weatherization, or improvement of existing nonresidential buildings and structures in communities in the Regular Program of the NFIP and in good standing, the action does not meet the thresholds for ‘substantial improvement’¹ and the footprint of the structure is not significantly increased.

Yes: Complete the 5-step decision-making process for floodplains. You do not have to publish the notices in steps 2 or 7 or do an analysis of alternatives in Step 3. Analyze potential direct and indirect impacts (step 4); design or modify to minimize potential impacts (step 5); reevaluate the proposed action to determine if action is still practicable (step 6).

- If still practicable, document your analysis in the file and move forward.
- If not still practicable, either reject or modify project.

No: Proceed to #6.

6. Are there practicable alternatives to locating your project in the floodplain?

HUD strongly discourages use of funds for projects that do not meet an exemption in Part 55.12. Reject the Project Site or Request a Letter of Map Amendment or Revision (LOMA/R) from FEMA. If you decide to consider the project you must determine if there are alternatives by completing the 8-step decision-making process described in 24 CFR Section 55.20. Please note that requesting a LOMA/R or completing the 8 step process take time and resources. The 8-step decision-making process requires two public notice and comment periods.

You must also maintain flood insurance on the project per the Flood Disaster Protection Act.

Yes: Reject or modify project.

No: Document your analysis, including floodplain notices, in your Environmental Review Record. You must notify any private party participating in a financial transaction for the property of the hazards of the floodplain location before the execution of documents completing the transaction. (24 CFR Section 55.21)

DISCLAIMER: This document is intended as a tool to help HUD Region X grantees and HUD staff complete environmental requirements. This document is subject to change. This is not a policy statement, and the Floodplain Executive Order and Regulations take precedence over any information found in this document.

¹ Substantial Improvement means any repair, reconstruction, modernization or improvement of a structure, the cost of which equals or exceeds 50% of the market value of the structure either before the improvement or repair started or if the structure has been damaged before the damage occurred OR any repair reconstruction etc. that results in an increase of more than 20% of dwelling units or peak number of customers and employees (24 CFR 55.2(b)(8))

37.

Section 504

DCA Meeting Checklist

DCA Meeting Checklist

This checklist is comprised of questions designed to review the meeting preparation/arrangement organized by program offices in order to evaluate accessibility to individuals with disabilities.

What kind of meetings are initiated, convened and/or sponsored (with the exception of grants) by your program? Please choose all that apply

- In-house business meetings with staff and/or with members of the general public
- Panel (in-house) Access issues are discussed with policy and/or service groups
- Panel (outside the program location)
- Council/board (in-house)
- Council/board (outside the program location)
- Symposia/Seminars
- Workshops/Classes
- Conferences
- None
- Other (please specify)

Does your program ask meeting participants in advance about any needed physical or programmatic accommodations?

- Yes
- No
- I don't know
- Any additional comments:

Does your program offer to meet panelists/visitors with disabilities at the building's entrance and show them the location of the meeting room, rest room or other areas?

- Yes
- No
- I don't know
- Any additional comments

Does your program ensure that meetings are held in offices or other meeting spaces that are accessible to people with mobility impairments? (See Appendix A)

- Yes
- No
- I don't know

When requested, is your program able to provide any of the following communication techniques to make your written and visual materials (e.g. agenda, reports, panel books, power points or meeting proceedings) accessible to people with visual impairments? Please choose all that apply:

- Materials in large print
- Braille materials
- Recorded materials
- Qualified readers
- Material on discs
- Computer bulletin boards
- Audio descriptions of visual presentations
- Support materials provided to participants for review prior to meeting
- None
- I don't know
- We have never had this request but if requested we are able to provide the following:

When requested, is your program able to provide any of the following communication techniques to make your meetings accessible to individuals who are deaf or hard-of-hearing? Please choose all that apply:

- Qualified sign language interpreters
- Assistive listening systems
- Captioned audio-visual material
- Sign language and/or orally interpreted audiovisual material
- Communication Access Real time Translation or CART (where everything that is said is "captioned" live)
- None
- I don't know
- Other (please specify) or additional comments:

While learning and mental disabilities are very distinct from one another, many accommodations for these two disability types overlap. When requested is your program able to provide any of the following communication techniques to make your meetings accessible to people with learning or mental disabilities? Please choose all that apply:

- Short, direct and clear presentations
- Pictures that supplement written materials when possible
- Recording of meeting for review following the meeting
- Support materials (e.g. agenda, outline of presentation) prior to meeting
- None
- We have never had this request but if requested we are able to provide the following:

When planning meetings outside of the agency or when making hotel accommodations, does your program seek spaces that are accessible to persons with the following disabilities? Please choose all that apply:

- Mobility Impairments
- Visual Impairments
- Hearing Impairments
- Speech Impairments
- None
- I don't know
- Other type of impairments or additional comments:

When planning meetings outside of your location, do you offer communication techniques to ensure that the meetings are accessible to participants with the following disabilities? Please choose all that apply:

- Mental or Learning Disabilities
- Visual Impairments
- Hearing Impairments
- Speech Impairments
- None
- I don't know
- Other disability type(s) (please specify) or additional comments:

When planning meetings outside of your location, do you assure that any local organizers make necessary accessibility arrangements and offer communication techniques to ensure that the meeting are accessible to participants with the following disabilities? Please choose all that apply:

- Mobility Impairments
- Visual impairments
- Hearing Impairments
- Speech Impairments
- Mental or Learning Disabilities
- None
- I don't know
- Other disability type(s) (please specify) or additional comments:

How does your office notify the general public that accommodations for people with disabilities are available upon request at public meetings? Please choose all that apply:

- Notice provided to websites that are utilized by people with disabilities

On our website

Posted in our office location(s)

We don't notify the general public about accommodations

I don't know

Other notice format(s) (please specify) or any additional comments:

Appendix A
Accessible Meeting Facilities Checklist

Name of Facility (hotel, restaurant, state, city or county facility):		
Address:		City:
Phone #:	Email:	Zip Code:
Surveyor's Name:		Survey Date:
Phone #:	Email:	Office/Agency:

Building Exterior

Off-Street Parking/Passenger Loading Zone

- Number of accessible parking spaces, (see Appendix A) # Required
_____ Spaces _____
- _____ At least one van space, 96"space with 96"access aisle/132"space with 60", 114"vertical clearance)
- _____ Sign at parking space, International Access Symbol, white on blue, "Van Accessible" for van space
- _____ Built-up curb ramps do not project into access and parking spaces.
- _____ Level Slope < 1:48, firm, and non-slip surface. Slope < 1:48
- _____ Curb-cut, ramp or level area to walkway
- _____ If surface unpaved, then size of gravel < 0.3 inches
- _____ Closest parking space to accessible entrance. Crosses vehicular traffic lane? Y _____ N _____
- _____ Directional signage to accessible entrance, at non-accessible entrance
- _____ Passenger drop off or loading zone with accessible route or travel to building

Proximity to Public Transportation

- Bus stop within 1-2 blocks. Approximate Distance _____ Bus available evenings Y _____ N _____
- _____ Level, firm, non-slip surface from bus stop to primary accessible building entrance, maximum slope of 1:12
- _____ Curb cut, ramp, or level area to walkway (see *Walkways*). Note: handrails required if slope > 1:20 and the rise is >6"

Walkways

- _____ 44" minimum exterior width
- _____ Max. slope of 1:12 (Up to 1:8 permissible for rises < 3" Up to 1:10 for rises < 6") preferably 1" to 20" (can carry a latte in your lap and go down ramp without spilling)
- _____ Level (slope > 1:20) or ramped from parking to primary accessible entrance
- _____ Level, firm, non-slip surface with no drop-offs, grass or soil meet sidewalk
- _____ Walkways free of obstructions that protrude > 4" (higher than 27" or < 80")
- _____ Walkways free of grating openings larger than 1/2", openings perpendicular to path of travel.
- _____ Threshold 1/4" maximum. or 1/2" if beveled

Building Exterior (Cont'd)

ramps (exterior)

- _____ Maximum slope of 1':12' (no more than 30' between landings); slope 1':20' (40' between landings)
- _____ Landings at top and bottom of run, Landings shall be level and be 60" in direction of travel
- _____ Graspable handrails provided, 34"- 38" high (Slope 1:20, or rise < 6" no handrails required.)
- _____ Handrails 1-1/2" diameter and 1-1/2" from wall
- _____ Firm, non-slip surface
- _____ 44" minimum exterior width

Stairways

- _____ Graspable handrails provided on both sides, 34" - 38" high, properly secured
- _____ Handrails 1-1/2" diameter and 1-1/2" from wall
- _____ Uniform riser height and tread width
- _____ 5' x 5' level landings on top and bottom
- _____ Contrast on stairs and landings
- _____ Adequate lighting on stairs
- _____ No open risers (steps). No hanging stairwells, unless cane detectable barriers are provided underneath.

Entrances (exterior)

- _____ At least one primary entrance accessible, door 32" clear opening
- _____ Threshold height 1/4" maximum, 1/2" if beveled. If not, actual height is _____
- _____ An 18" clear maneuvering space at the pull side of the door
- _____ Level and unobstructed area 5' x 5' both sides of door
- _____ Lever or loop-type door handles
- _____ Door opening pressure 8.5 lbs. maximum, or Automatic door openers
- _____ Alternate accessible entrance for a revolving door
- _____ Sign indicating accessible entrance
- _____ Directional signage at inaccessible entrances designating the accessible entrance

Building Interior

Interior Doors and Corridors

- _____ Firm, non-slip surface (no loose or deep pile carpet, maximum pile thickness < 1/2")
- _____ Doors have a minimum clear opening width of 32"
- _____ An 18" clear maneuvering space at the pull side of the door
- _____ Lever or loop-type handles, path to meeting room
- _____ Door pressure 5 lbs. Maximum, or Automatic door
- _____ Corridors have a clear width of 36"
- _____ Wall-mounted objects protruding 4" or greater (located within 27" - 80" from the floor) have barriers detectable by individuals using a white cane. Wall mounted objects protruding less than 4" or higher than 80" from the floor, no detectable barrier required
- _____ Adequate lighting in corridors, provide uniform illumination

Ramps (interior)

- _____ Maximum slope of 1':12' (no more than 30' of rise between level landings)
- _____ 5' x 5' level landings on top and bottom
- _____ Grasable handrails provided, 34" - 38" high
- _____ Handrails 1-1/2" diameter and 1-1/2" from wall
- _____ Firm, non-slip surface
- _____ 36" minimum interior width

Elevators

- _____ Door has 36" minimum clear opening
- _____ Size of elevator floor at least 54" x 68"
- _____ Serves all floors and public meeting areas
- _____ Highest control buttons 48" maximum (54" built before 2002), emergency controls 35"
- _____ Audible and visible signals, hallway and elevator interior
- _____ Controls have raised Arabic numerals and Braille identification
- _____ Exterior call buttons 35" max
- _____ Floor levels indicated on door jambs by raised numerals placed no more than 60" high
- _____ Elevator doors remain fully open for 5 seconds minimum
- _____ Visible and audible signal provided at each entrance to indicate which car is answering a call

Building Interior (Cont'd)

Water Fountains (where provided)

- _____ At least one fountain on accessible route of travel
- _____ Maximum spout no higher than 36" from floor
- _____ Spout located at front of unit with water projecting parallel
- _____ Hand operated control (push or lever) within 5" of the front of the fountain
- _____ 27" clear knee space
- _____ If no knee space, then at least 30" x 48" clear floor space provided for parallel approach

Public Restrooms

Women Men (One restroom may be accessible while another is not, check both)

- _____ _____ On accessible route of travel from or to meeting room
- _____ _____ At least one accessible stall in each restroom. Or unisex restroom available
- _____ _____ Ambulatory accessible toilet stalls (required when six or more water closets are available in a restroom)
- _____ _____ High contrast, non-glare sign, raised and Braille between 48" - 60" from floor, located on latch side of door
- _____ _____ Signs at inaccessible restrooms giving directions to accessible restrooms
- _____ _____ Entry 32" minimum clear width
- _____ _____ Accessible stall doors 32" minimum clear width
- _____ _____ Door pressure 5 lbs. maximum
- _____ _____ Stall width 60" wide x 56" wall mounted, 60" x 59" floor mounted toilet
- _____ _____ Minimum 48" width next to toilet on one side
- _____ _____ Grab bars side and back, 33" - 36" above and parallel to floor
- _____ _____ Grab bars 1-1/2" diameter and 1-1/2" from wall
- _____ _____ Toilet seat 17" - 19" high
- _____ _____ 5' x 5' diameter clear floor space to turn around (by mirrors or sink area)
- _____ _____ Bottom of mirror, top of shelf, towel and all other types of dispensers at 40" maximum from floor
- _____ _____ Soap and towel dispensers and hand dryer adjacent to the sink
- _____ _____ 27" clear knee space under basin
- _____ _____ Insulation of exposed pipes under sinks

Meeting Rooms and Common Use Areas

Meeting Rooms – Room # / Name of room: _____

(please complete for each meeting room to be used)

- _____ Capacity
- _____ High contrast signage with non-glare finish, Raised and Braille at 48"- 60", latch side of door
- _____ Ramps for raised platforms, speaking areas
- _____ Top of table 28" - 34" from floor
- _____ Clear knee space for tables (minimum 27" high x 30" wide x 19" deep)
- _____ Public Address System with Assistive Listening equipment
- _____ Assistive Listening Equipment (identified by signage)
- _____ Low noise level (inside and outside)
- _____ Meeting and other functions provided in nonsmoking areas
- _____ Firm, non-slip surface (no loose or deep pile carpet)
- _____ If Audible, then visible alarm system

Event Set-up

- _____ If a stage or raised dais is used, it is accessible via ramp or lift.

Fixed Seating Only (auditorium)

- _____ For auditoriums, integrated wheelchair seating, a minimum of one, for 4-25 seats
- _____ Number of wheelchair spaces required _____
(See Appendix A Wheelchair Spaces Required in Assembly Areas)
- _____ Minimum space 33" x 48" for rear or forward access, 33" x 60" for side access
- _____ Unobstructed viewing position from wheelchair seating
- _____ Aisles at least 36" having seating on one side of aisle, 42" with seating on both sides
- _____ Integrated seating, people using wheelchairs can sit next others, accessible seating dispersed through out auditorium.

Meeting Rooms and Common Use Areas (Cont'd)

Common Use Areas

Restaurant /coffee shops, gift shops, ATM, lobby, vending machines, copy machines and other common use areas accessible to persons with disabilities. (entrance, seating, counter height, reach range, 48")

Problem Areas:

- Audible alarm system
- Visible alarm system
- Maintenance/remodeling at time of meeting