

Exhibit 7

Monitoring Checklists



DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Monitoring Checklists - Introduction

PURPOSE: The Monitoring Checklists in this Exhibit to HCD's Monitoring Plan establish standards and provide guidance as well as present a key tool for monitoring subrecipients under the State of California's Disaster Recovery Programs.

As explained in the Monitoring Plan, monitoring is an integral management control technique. It is the method that HCD uses to assess the quality of performance over time and promptly resolve the findings of audits and other reviews. Monitoring provides information about subrecipients that is critical for making informed judgments about program effectiveness and management efficiency. It also helps in identifying instances of fraud, waste and abuse. Monitoring is the principal means by which HCD:

- Ensures that CDBG-DR funded programs and activities are carried out efficiently, effectively, and in compliance with applicable laws and regulations;
- Assists subrecipients/contractors in improving their performance, developing or increasing capacity, and augmenting their management and technical skills; and
- Stays abreast of the efficacy of CDBG-DR administered grant programs within the communities these programs serve.

The general guidance in the following Monitoring Checklists is designed to be used by HCD staff and is consistent with HUD monitoring policies and expectations under the CDBG-DR grant awards to State.

APPROACH TO MONITORING: As indicated above, HCD staff should view monitoring, not as a once a year or periodic exercise, but as an ongoing process involving continuous communication and evaluation. Such a process involves frequent telephone/email contacts, written communications, analysis of reports and audits, and periodic meetings. It is the responsibility of HCD staff to keep fully informed concerning subrecipient and/or contractors/vendors compliance with program requirements and the extent to which technical assistance is needed.

The overriding goal of monitoring is to determine compliance, prevent/identify deficiencies and design corrective actions to improve or reinforce subrecipient and/or contractors/vendors performance. As part of this process, HCD staff should be alert for fraud, waste and mismanagement or situations with potential for such abuse.

Where possible, any identified deficiencies in need of corrective action should be handled through discussion, negotiation, technical assistance or alternative means and in a manner that builds capacity. Monitoring also provides opportunities to identify accomplishments as well as successful management, implementation, and evaluation techniques of subrecipients and/or contractors/vendors that might be replicated by other subrecipients and/or contractors/vendors.

DEFINITIONS: The following terms used in the Monitoring Plan are repeated below with any explicit exceptions noted in a particular monitoring checklist.

- 1) *Beneficiary*. The person(s), entity(ties), or organization(s) benefiting from the activity, project or program, e.g., a low-income family. (Note: Some checklists use the term “client” or “participant.”)
- 2) *Concern*. A deficiency in program performance not based on a statutory, regulatory or other program requirement. Sanctions or corrective actions are not authorized for concerns. However, HCD should bring the concern to the subrecipient’s and/or contractor/vendor’s attention and, if appropriate, may *recommend* (but cannot require) actions to address concerns and/or provide technical assistance.
- 3) *Finding*. A deficiency in program performance based on a statutory, regulatory or program requirement for which sanctions or other corrective actions are authorized. Such sanctions or actions are generally subject to HCD discretion, within prescribed parameters discussed in the Monitoring Plan.
- 4) *Monitoring Basis for Conclusions*. The determination reached regarding a performance based upon the monitoring results. Conclusions may be positive or negative.
- 5) *Methodology*. In the context of using a monitoring checklist, this refers to the necessary approach to conduct review with a monitoring checklist, including specific instructions a monitor will take to arrive at a basis for a conclusion.
- 6) *N/A*. Not applicable.
- 7) *Objective*. In the context of a monitoring checklist, the specific purpose or reason for a monitoring review and use of its related monitoring checklist particularly in regard to a programmatic topic, e.g. housing rehabilitation, or technical area, e.g. environmental review.
- 8) *Sources*. In the context of a monitoring checklist, this refers to documents that should be reviewed to answer the checklist’s questions and thereby determine a conclusion about compliance with the relevant standards or requirements.
- 9) *Subrecipient*. The direct recipient of the HCD funding under the California CDBG-DR program. (Note: Certain checklists also use the term “local jurisdiction”, which refers to the city or county that is the direct recipient, often when questions ask about the unit of local government’s system’s and/or policies.)

ORGANIZATION OF CHECKLISTS: Each set of the Monitoring Checklists covers a specific program or activities, broken down into sections, with specific instructions for use of the tool. For example, the Financial Management Checklists include Accounting, Internal Controls, Program Income and Reporting.

Introductory text provides specific, pertinent information to facilitate effective monitoring of the program or activities. This information frames the scope of the review and explains instructions for use of the tool including:

Objective

Why does the checklist raise questions covering that particular section of the specific program or technical area and what is the specific purpose or reason for the review?

Sources

What documents should be reviewed to answer the checklist questions and thereby determine a conclusion about compliance with the relevant standards or requirements?

Methodology

How must the monitor conduct the review with the checklist, that is, what are the specific instructions or approaches to arrive at a basis for a conclusion?

Each section of the Monitoring Checklists contains those questions whose answers are necessary or appropriate to monitor program activities that appear either to pose an element of Federal compliance risk (as identified through HCD's risk assessment process) or to evaluate other measures of performance. All questions that address requirements contain the citation for the source of the requirement (statute, regulation, Federal Register Notice, or grant agreement).

Consistent with the Monitoring Plan, if the reviewed files do not meet the applicable requirement, the monitor must make a finding of noncompliance. Other questions may not address requirements but are included to assist the reviewer in understanding the subrecipient's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in issuing a "Concern" for the potential of noncompliance in the future if not addressed and remedied, but not yet determined with a degree of deficiency that would raise the issue to the level of a "Finding."

APPLICABILITY: The above information and general instructions contained in this document apply to all monitoring checklists used in connection with the current version of the HCD Monitoring Plan initially prepared in 2020. (The current list of Monitoring Checklists appears in the following Table of Contents.)

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DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Financial Monitoring Review: Checklists

Subrecipient Name: Program Name: Project Name/Project Identifier: Subrecipient Agreement Number: Applicable Appropriations and Grant Number(s): Monitoring Review Date:
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A. FINANCIAL MANAGEMENT – ACCOUNTING

OBJECTIVE

To ensure that the jurisdiction’s accounting records conform with Federal financial management standards under 2 CFR Part 200 as applicable to allocation(s) of CDBG-DR funds to the jurisdiction

SOURCES

- Subrecipient agreement (or equivalent legal document)
- Chart of accounts
- General ledger and subsidiary ledgers
- Financial reports (submitted to the HCD)
- Supporting documentation
- Inventory of assets

METHODOLOGY

- Trace jurisdiction’s general ledger to its financial statements
- Review project files for documentation
- Examine inventory of assets

1. Use of this Checklist corresponds to applicable CDBG-DR requirements shaped, in part, by the related <i>Federal Register</i> Notice and waivers, alternative requirements, or terms and special conditions applicable to the grant award		
a. Are there any waivers or alternative requirements published in association with the <i>Federal Register</i> for the CDBG-DR Program that would impact the financial management of this grant?	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
		N/A
b. Are there any terms or special conditions related to financial management required by the subrecipient agreement(s) encumbering the funds?	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
		N/A

c. Has the program participant taken steps to implement these waivers, alternative requirements, terms or special conditions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

2. Do the jurisdiction's accounting records identify CDBG-DR awards from HCD, received and expended, by specifying, as applicable, the program title and number, award identification number and year, and HCD's name as the awarding agency? (This requirement is addressed through the existence of a chart of accounts.) [2 CFR 200.302(b)(1)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

3. The jurisdiction's accounting records must identify adequately the source and application of funds for CDBG-DR funded activities. (Compliance with this requirement is evident when a financial management system accounts for a HUD program in a separate accounting fund called a Special Revenue Fund).	
a. Do the jurisdiction's accounting records contain information on CDBG-DR grant awards, authorizations, encumbrance, unencumbered balances, assets, expenditures, etc.? [2 CFR 200.302(b)(3)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

b. Does the jurisdiction maintain adequate source documentation? To determine, select a sample of accounting entries and check determine whether they are supported by invoices, contracts, or purchase orders. (Describe sample payment below) [2 CFR 200.302(b)(3)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions	

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does condition require corrective action?*
- *What is preliminary decision? Choose an item.*

Voucher	Amount of Funds	Compliant (Y/N)?	Comments

c. Does the jurisdiction's system provide for comparison of expenditures with budget amounts for each CDBG-DR award?
 [2 CFR 200.302(b)(5)]
 NOTE: This is demonstrated by entries in accounting records of the amounts budgeted for activities to be undertaken and in turn facilitates preparation of financial statements that provide for such comparison.

Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does condition require corrective action?*
- *What is preliminary decision? Choose an item.*

d. Does the jurisdiction enter an encumbrance in its accounting records when contracts are executed or purchase orders issued?
 [2 CFR 200.302(b)(3)]

Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does condition require corrective action?*
- *What is preliminary decision? Choose an item.*

e. Does the jurisdiction identify expenditures in its accounting records according to eligible activity classifications specified in the statute, regulations, or subrecipient agreement that clearly identify the use of program funds for eligible activities?
 [2 CFR 200.302(b)(3)]

Yes No N/A

Describe Basis for Conclusions

<ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	
f. Do reviewed files document that no improper payments of CDBG-DR funds were made (i.e., any payment that should not have been made or was made in an incorrect amount, unsupported by invoices, contractors, or purchase orders; or payments made for services not received)?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	
g. Does the jurisdiction maintain adequate control over all funds, property, and other assets to ensure they are used solely for authorized purposes? [2 CFR 200.302(b)(4)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

B. INTERNAL CONTROLS

OBJECTIVE

To assess the adequacy of the jurisdiction's internal controls; safeguards of protected personally identifiable information; existence of an organizational chart; and practice of segregating duties and responsibilities

SOURCES

- Policies and procedures
- Record of assessment
- Organizational chart
- Job descriptions

METHODOLOGY

- Review policies and procedures
- Discuss assessment
- Determine existence of organizational chart
- Examine procedures and job descriptions to assess practice of segregating duties

<p>1. The jurisdiction must establish and maintain effective internal control over the CDBG-DR award that provides reasonable assurance that the jurisdiction is managing the Federal funding in compliance with Federal statutes, regulations, and the terms and conditions of the award.</p> <p>NOTE: The definitions of internal control for this review are intentionally broad. The evaluation of the effectiveness of the jurisdiction's internal control system likewise must cover a broad range of considerations. Further, the audit requirements in Subpart F of 2 CFR Part 200 include procedures to evaluate the auditee's internal control system. Therefore, questions below are limited to areas not specifically addressed elsewhere.</p>			
<p>a. Has the jurisdiction performed a self-assessment of its internal control system? [2 CFR 200.303(a)]</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 			
<p>b. Does the jurisdiction take reasonable measures to safeguard protected personally identifiable information (PII) and other information that HUD designates as sensitive, consistent with applicable Federal, State, and local laws regarding privacy and obligations of confidentiality? Note: Confirm the existence of a written policy protecting PII and other information.</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

[2 CFR 200.303(e)]		
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 		
c. Does the local jurisdiction have an organization chart that sets forth the actual lines of responsibility for CDBG-DR awards?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 		
d. Are duties and responsibilities segregated (to the extent practicable) so that no one individual has complete authority over a financial transaction? For example, do the local jurisdiction's procedures preclude one person from issuing purchase orders, receiving merchandise, and approving payment vouchers?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 		

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

C. PROGRAM INCOME

OBJECTIVE

To ascertain whether the jurisdiction is separately accounting for and tracking any income generated from program activities

SOURCES

- Subrecipient agreement (or equivalent legal document)
- Chart of accounts
- General ledger and subsidiary ledgers
- Financial reports (submitted to the HCD)

METHODOLOGY

- Check subrecipient agreement
- Trace jurisdiction's general ledger to its financial statements
- Review project files or reports for documentation

<p>1. Are revenue-generating activities (e.g., housing rehabilitation loans) authorized by the subrecipient agreement and are they being undertaken by the subrecipient? If so, answer questions in this section. Otherwise, indicate that the questions are not applicable and move on to the following section.</p>			
<p>a. Has the jurisdiction established revenue accounts to record program income? [2 CFR 200.303(a)]</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>b. If the jurisdiction has an activity generating program income that is only partially Federally-assisted, does it have a system for ensuring that the program income is properly prorated to reflect the percentage of Federal program funds used? [2 CFR 200.303(a)]</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>c. Has the jurisdiction disbursed program income (other than program income deposited in revolving funds) in payment of program costs prior to making further payment requests to HCD? [2 CFR 200.303(a)]</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 			

<p>2. A subrecipient which is authorized to use program income is expected to have a system for tracking that program income it generates? If the jurisdiction handles program income, continue to answer questions in this section. Otherwise, indicate that the questions are not applicable and move on to the following section.</p>			
<p>a. Does the jurisdiction ensure that such income is reported in a timely and accurate manner to HCD? [2 CFR 200.303(a)]</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>b. Upon expiration of any agreements between HCD and the subrecipient, does the jurisdiction have a system for ensuring:</p> <p>i. the timely and accurate transfer of any funds to be returned to HCD; and/or</p> <p>ii. the timely and accurate transfer of outstanding loans or accounts receivable to HCD? [2 CFR 200.303(a)]</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 			

<p><i>Name of Grantee:</i></p>	<p><i>Grant #(s):</i></p>
<p><i>Name(s) of HCD Reviewer(s):</i></p>	<p><i>Review Date:</i></p>

D. REPORTING

OBJECTIVE

To determine the timeliness, completeness and accuracy of the jurisdiction's reports to HCD within the period of performance of the CDBG-DR funded program or activities; identify when the jurisdiction was to have started reporting progress on those funded activities according to the subrecipient agreement; and only respond to the questions below for allowable costs charged within that time period (i.e, not before the start date nor after the end date specified).

SOURCES

- Subrecipient agreement
- Expenditure reports
- Related accounting records

METHODOLOGY

- Review subrecipient agreement for period of performance and schedule of work
- Examine expenditure reports for financial information as well as unit counts and beneficiaries
- Check amounts, dates of invoices and reimbursements
- Reconcile information contained in accounting records with reports

<p>1. The jurisdiction is responsible for reporting progress to HCD on a quarterly basis throughout the period of performance as specified in the subrecipient agreement. Such information is entered into DRGR by HCD and reported in the State's Quarterly Progress Reports (QPRs) to HUD. [2 CFR 200.302(b)(2)]</p>	
<p>a. Does the jurisdiction demonstrate that its systems and/or procedures ensure that accurate information is collected and reported to HCD for the State to enter into DRGR and that such systems and/or procedures comply with Federal policies and requirements governing reporting? [Applicable <i>Federal Register</i> Notices]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	
<p>b. Has the jurisdiction submitted timely and complete information as requested by HCD for it to submit the State's Quarterly Progress Reports in DRGR? [Applicable <i>Federal Register</i> Notices]?</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> 	

<ul style="list-style-type: none"> • <i>What is preliminary decision?</i> Choose an item. 	
c. Does the information reviewed in the jurisdiction's accounting records regarding expenditures reconcile with reports submitted to HCD for the time period covered by the State's Quarterly Progress Report (QPRs)? [2 CFR 200.302(b)(2)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision?</i> Choose an item. 	



DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Environmental Review: Checklists

Subrecipient Name:
Program Name:
Project Name/Project Identifier:
Subrecipient Agreement Number:
Applicable Appropriations and Grant Number(s):
Monitoring Review Date:

A. ENVIRONMENTAL REVIEW RECORD – GENERAL PROGRAM OVERVIEW

Objective

To review subrecipient's policies and procedures for conducting an environmental review on all HUD-assisted projects, including projects funded partially or in full by CDBG-DR, and all projects implemented or funded by a California public agency, or that require discretionary approval by a public agency to ensure conformity with related Federal and State guidance

Sources

- Applicable Federal Register Notices
- Subrecipient's core program policies where ERR guidelines should reside
- Any additional ERR-specific subrecipient policies and procedures

Methodology

- Review general core files for the source documentation.
- Examine proper subrecipient internal control features and if they have been established for conducting, submitting, and approving ERRs.
- Provide an assessment of those controls by answering the questions below.

1. Use of this checklist corresponds to applicable CDBG-DR requirements shaped, in part, by the related *Federal Register* Notice and waivers, alternative requirements, or terms and special conditions applicable to the grant award.

<p>a. Would any waivers or alternative requirements published in association with the <i>Federal Register</i> for the CDBG-DR Program that would impact the environmental requirements of this grant affect or apply to the monitored subrecipient? Waivers and alternative requirements include, but may not be limited to:</p> <ul style="list-style-type: none"> a. 83 FR 5852 – Section VI.A.2.f. (<i>Obligation and Expenditure of Funds</i>) b. 83 FR 5859 – Section VI.A.24.a.-f. (<i>Environmental Requirements</i>) c. 83 FR 40319 – Section IV.A.7. (<i>Clarification of the Environmental Review Requirements</i>) d. 83 FR 40321 – Section IV.C.14. (<i>Discipline and Accountability in the Environmental Review and Permitting of Infrastructure Projects</i>) 	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>b. Are there any terms or special conditions related to environmental review submission and completion required by the subrecipient agreement(s)?</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>c. Has the subrecipient taken steps to implement these waivers, alternative requirements, terms or special conditions within their policies and procedures?</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
<p>2. Does the subrecipient have an environmental review process in place to ensure that all applicable Federal and State environmental requirements are met? [24 CFR § 58.14]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
<p>3. If the subrecipient is responsible for completing all or certain portions of ERRs, does the subrecipient have an individual with expertise in environmental regulations, to aid in ensuring continuing environmental compliance? [24 CFR § 58.11, 24 CFR § 58.12]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>

<p>a. Is there evidence that the staff person(s) designated by the subrecipient lacks knowledge or training on environmental review requirements for the CDBG-DR programs?</p> <p>NOTE: Briefly describe below the subrecipient's system for carrying out its environmental review responsibilities (e.g., including conditions such as staff changes that could impact its ability to carry out its environmental responsibilities).</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
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<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
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<p>4. Are subrecipient policies or procedures in place mandating that an environmental review be conducted? [24 CFR § 58.4(a)-(b)(1)]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
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<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
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<p>5. Are subrecipient policies or procedures in place mandating that a proper Notice/Certification be obtained prior to commitment of funds? [24 CFR § 58.22]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
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<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
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<p>6. Has the subrecipient or any of its activities been monitored for environmental compliance by the State or HUD during the last twelve months? [24 CFR § 58.18(a)(1)(i), 24 CFR § 58.77(c) and (d), 83 FR 5854 – Section VI.A.5.]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
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<p>a. If the answer above is “yes,” did the Monitor completing the ERR review determine that the subrecipient conducts compliant</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
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<p>environmental processing and environmental reviews for projects included in CDBG-DR the Action Plan?</p>	
<p>b. If the answer to 6.a. is “no,” are all outstanding environmental noncompliant findings or concerns resolved? <i>Note:</i> If outstanding issues still exist which should be taken into consideration (i.e., to determine if systemic deficiencies exist for the purposes of providing technical assistance, etc.) during the course of this review, outline below.</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<p>7. Does this review indicate any need for follow-up monitoring or technical assistance? If yes, briefly describe the need(s) below.</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<p><i>Name of Grantee:</i></p>	<p><i>Grant#(s):</i></p>
<p><i>Name(s) of HCD Reviewer(s):</i></p>	<p><i>Review Date:</i></p>

B. ENVIRONMENTAL REVIEW RECORD – ACTIVITY/PROJECT OVERVIEW

Objective

To review subrecipient’s activity-level environmental review file, regarding projects funded partially or in full by CDBG-DR, and all projects implemented or funded by a California public agency, or that require discretionary approval by a public agency to ensure activity- or project-specific compliance with Federal and State environmental requirements

Sources

- Official Resolutions or Designations of Authority for Responsible Entity (RE) and Lead Agency (LA)
- Environmental Review Records for **all** applicable Program activity(ies)
- Environmental approvals for **all** applicable Program activity(ies)
 - Notice of Intent to Request for Release of Funds (NOI/RROF), including the notice of Finding of No Significant Impact (FONSI)
 - Authority to Use Grant Funds (AUGF)
 - Notice of Exemption (NOE)
 - Categorical Exclusion, Subject to or Not Subject to 58.5

Methodology

- Review project files for the source documentation.
- Examine documentation to determine if the applicable environmental files contain the required regulatory requirements as outlined within the checklist below.
- The review scope mostly focuses on environmental record completeness and approval processes in relation to the obligation of costs to the activity(ies).

<p>1. Does the subrecipient engage in large complex projects that require full environmental assessments, for example, new construction, large scale rehabilitation of residential or commercial structures, re-use of industrial structures and properties for non-industrial uses? [24 CFR § 58.36]</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<p>2. For the project records reviewed, were there separate ERRs for each project? [24 CFR § 58.38]</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
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Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<p>3. Does the ERR review for each activity contain project description, including boundaries (where applicable) and reference all activities included as part of the overall project? [24 CFR § 58.38]</p>	Activity 1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<p>4. Does the ERR review contain Findings of No Significant Impact (FONSI)? [24 CFR § 58.38]</p>	Activity 1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<p>5. Did the ERR contain a Proof of Publication of a Notice of Intent/Request for the Release of Funds (NOI/RROF) specifying project type, a copy of the Request for Release of Funds and Certification (Form HUD-7015.16), a fully signed Certification of Categorical Exclusion, or a fully signed Certificate of</p>	Activity 1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

<p>Exemption, along with notations of the sufficient identification of the source of funds, in an amount sufficient to cover all activities? [24 CFR § 58.38]</p>	<p>Activity 3</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>a. If yes, is there clear indication within the NOI/RROF, Certificate, or Certification on who the Responsible Entity (RE) is?</p>	<p>Activity 1</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
	<p>Activity 2</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
	<p>Activity 3</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 		
<p>6. Does a review of the RROF raise any concerns, such as:</p> <ul style="list-style-type: none"> • An RROF processed after a project has begun; and/or • In cross-checking between the DRGR and the related CDBG-DR Action Plan, a project which is underway for which no RROF has been processed? <p>Note: This includes other “choice-limiting actions,” such as entering into a contract to purchase a property for the specific intent of the activity, even if it includes a transaction with no CDBG-DR funding. [24 CFR § 58.22(a)]</p>	<p>Activity 1</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
	<p>Activity 2</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
	<p>Activity 3</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 		
<p>7. Were funds only obligated (choice limiting activities performed) after the signed and dated Authority to Use Grant Funds (Form HUD-7015.16), Request for Release of Fund (RROF), or Categorical Exclusion (if applicable)?</p>	<p>Activity 1</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>

<p>[24 CFR § 58.22, unless exceptions apply – see 24 CFR § 58.22(f), 24 CFR § 58.34, or 24 CFR § 58.35(b)]</p> <p>NOTE: Note the date of the Authority to Use Grant Funds, Notice of Release of Funds, Certificate of Exemption, or Certification of Categorical Exclusion was received, which should come before the date first costs were obligated under a choice-limiting action, e.g., contract execution, land acquisition/purchase, purchase order dates, etc. Records must show that no grant funds were obligated or spent prior to receipt of Release of Funds or equivalent:</p> <ul style="list-style-type: none"> • Soft Cost Funds Obligated: [Activity 1, Activity 2, Activity 3] • Hard Cost Funds Obligated: • Request for Release of Funds: • Authority to Use Grant Funds (or equivalent): • Categorical Exclusion (if applicable): 	Activity 2	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	Activity 3	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 		

<p>8. Was the NOI/RROFs disseminated and/or published before the certification(s) was signed by the State or the subrecipient? [24 CFR § 58.43, 24 CFR § 58.45, and 24 CFR § 58.70]</p> <p>a. For publication, was the comment period (starting the day after publication) at least 15 full days?</p> <p>b. If FONSI/NOI RROF was posted and disseminated, was the comment period at least 18 full days?</p> <p>c. If FONSI/NOI RROF was posted and disseminated, was there a distribution list?</p>	Activity 1	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	Activity 2	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	Activity 3	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 		

<p>9. Do the ERRs reviewed contain the Form HUD-7015.16, “Authority to Use Grant Funds,” signed and dated by HUD, or an equivalent letter issued by HUD, indicating that 15 (or 18, if applicable) days were allowed for objections? [24 CFR § 58.38]</p> <p>a. Did the subrecipient or State receive any public comments?</p> <p>b. If so, did the subrecipient respond to and address all the comments prior to submitting the Request for Release of Funds and Certification to the State?</p> <p>c. Were all comments and responses in the Environmental Review Record and supported by recognized authoritative sources where appropriate?</p>	Activity 1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<p>10. Do the ERRs reviewed contain documentation of written determinations in cases in which the subrecipient claim that a project/activity is “categorically excluded” or “exempt”? [24 CFR 58.34(b) or 24 CFR 58.35(d)]</p>	Activity 1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 2	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
	Activity 3	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<p>11. For projects or activities that are “exempt” or “categorically excluded” do the documents contain all appropriate signatures?</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
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Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<p>12. Does the State receive: public notices, RROFs and certifications from recipients pursuant to 24 CFR 58.71; accept objections from the public, inform other agencies; and comply with the requirements of 24 CFR 58.18 regarding releases of funds?</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>a. For the period reviewed, did the State receive any objections to Requests for Release of Funds (RROF)?</p>	
<p>b. If the State received objections, did it consider objections which claimed that grantees/recipients were in noncompliance with any of the provisions of Part 58 pursuant to the permissible bases for objections? [24 CFR 58.75]</p>	
<p>c. If objections were received, did the State forward them to the grantees/recipients for written reply?</p>	
<p>d. If objections were forwarded to grantees/recipients for reply, did the responses address the noncompliance issues raised?</p>	
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
<p>13. Does the ERR reviewed contain documentation to support that applicable Federal Laws and authorities listed at 24 CFR 58.5 and 24 CFR 58.6 have been specifically addressed and recognized authoritative sources used to support conclusions? [24 CFR 58.38]</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	
<p>14. If mitigating measures were required for projects/activities during the time period reviewed, were the measures included in the ERR as part of the actions pertaining to the environmental review? [24 CFR 58.38]</p>	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> 	

- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<i>Name of Grantee:</i>	<i>Grant#(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

C. ENVIRONMENTAL REVIEW RECORD – STATUTORY REVIEW

Objective

To determine the specific regulatory compliance of each Environmental Review Record with Federal and State environmental statutes when specific activities trigger 24 CFR § 58.36 and 58.37 for projects funded partially or in full by CDBG-DR, and all projects implemented or funded by a California public agency, or that require discretionary approval by a public agency

Sources

- Environmental Review Records for **all** applicable Program activity(ies)
- Statutory Review Checklist
- Compliance Review Checklist as applicable.

Methodology

- Review project files for the source documentation.
- Examine documentation to determine if the applicable environmental files contain the required regulatory requirements as outlined within the checklist below, including if documentation of the appropriate action or measures were taken to address individual environmental impacts.
- The review scope mostly focuses on environmental record completeness and documentation in relation to individual environmental conditions.

<p>1. Is the project located in a Flood Plain and/or wetlands? If no, skip to Question #5</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>2. If new construction, does the ERR contain evidence of compliance with:</p> <p>a. Section 2(a) of E.O. 11988 on floodplain management b. Section 2 and 5 of E.O. 11990 on the protection of wetlands (new construction)</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>3. If new construction, does the ERR contain evidence that the subrecipient complied with HUD regulations in 24 CFR 55 or equivalent public notice and decision-making procedures under E.O. 11990?</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>4. If new construction, is there evidence that the subrecipient considered all practicable alternatives to locating projects in floodplains or wetlands?</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>5. Does the subrecipient have copies of any published “Notice Providing Opportunity for Early Public Review” in accordance with 24 CFR 55.20(a) or E.O. 11990?</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>6. Does the ERR do the following:</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>

	Yes	No	N/A
<p>a. Identify appropriate sources for each statute, E.O., and Regulation</p> <p>b. Documentation of all consultations made including correspondence with California Historical Resources & Information Systems (<i>CHRIS</i>) and the State Historic Preservation Officer (<i>SHPO</i>)</p> <p>c. Showing Compliance with all statutes including steps followed to mitigate any secondary level compliance findings If applicable, evidence of compliance with all steps required for the 8-step decision-making process.</p>			
7. If applicable, did the ERR meet all requirements for compliance with Flood Plain Management 24 CFR 55 and E.O. 11988	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
8. If applicable, did the ERR meet all requirements for compliance with Wetland Protection E.O. 11990	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
9. If applicable, did the ERR meet all requirements for compliance with Coastal Zone Management Act	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
10. If applicable, did the ERR meet all requirements for compliance with Sole Source Aquifers (Safe Drinking Water Act) [40 CFR 149]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
11. If applicable, did the ERR meet all requirements for compliance with Endangered Species 50 CFR 402	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
12. If applicable, did the ERR meet all requirements for compliance with Wild Scenic Rivers	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
13. If applicable, did the ERR meet all requirements for compliance with the Clean Air Act Section 176(c),(d), and 40 CFR 6, 51, and 93	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
14. If applicable, did the ERR meet all requirements for compliance with Farmland Protection Policy Act 7 CFR 658	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
15. If applicable, did the ERR meet all requirements for compliance with Environmental Justice E.O. 12898	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
16. If applicable, did the ERR meet all requirements for compliance with Noise Abatement and Control [24 CFR 51B]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
17. If applicable, did the ERR meet all requirements for compliance Explosive and Flammable Operations [24 CFR 51C]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

<p>18. If applicable, did the ERR meet all requirements for compliance with Hazardous, Toxic or Radioactive Materials and Substances [24 CFR 58.5(i)(2)]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>19. If applicable, did the ERR meet all requirements for compliance with Airport Clear Zones and Accident Potential Zones [24 CFR 51D]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<i>Name of Grantee:</i>	<i>Grant#(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

D. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA) REVIEW

Objectives

To review subrecipient's activity-level environmental review files for specific compliance with distinct state environmental requirements under the California Environmental Quality Act (CEQA) in accordance with 24 CFR § 58.14

Sources

- Environmental Review Records for all applicable Program activity(ies)

Methodology

- Review project files for the source documentation.
- Examine documentation to determine if the applicable environmental files contain the required regulatory requirements as outlined within the checklist below, including if documentation of the appropriate action or measures were taken to address individual environmental impacts.
- The review scope mostly focuses on environmental record completeness and documentation in relation to individual environmental conditions.

1. Did the agency produce an initial study (IS) per CEQA guidelines, Article 5?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
2. Does the IS include project information, project description, including all phases, a description of environmental factors potentially affected, determination, and an evaluation of environmental impacts?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
3. Does the IS determine a Negative Declaration or a Mitigated Negative Declaration?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
4. Does the IS determine an Environmental Impact Report is necessary?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
5. Did the lead agency include a Notice of Exemption (NOE) in the ERR?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
6. Does the NOE include a description that supports the exemption, a finding cited from CEQA guidelines that the project is exempt, and a statement to support the finding?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
7. Was the NOE sent to the Office of Planning and Research?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
8. If the IS determined a Negative Declaration, was it filed with the California State Clearinghouse?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
9. If applicable, did the Negative Declaration include: a. A description and title of the project,	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

b. project location, c. the proposed finding that the project will not have a significant impact d. An attached copy of the IS which documents reason to support the finding, e. If applicable, mitigation measures.	Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<i>Name of Grantee:</i>	<i>Grant#(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

E. RECORD KEEPING REVIEW

Objective

To determine specific regulatory compliance with federal recordkeeping requirements, per 83 FR 5856 – Section VI.A.16. (Recordkeeping), 24 CFR § 570.490, and 24 CFR § 570.493 for environmental review files on all HUD-assisted projects

Sources

- Various Environmental Review Record policies and procedures general files
- Environmental Review Records for **all** applicable Program activity(ies)

Methodology

- Review core/program and project files for the organization of the source documentation.
- Examine documentation to determine if the applicable environmental files are available and easily located and ordered in a manner which is generally consistent with recordkeeping requirements below.
- The review scope mostly focuses on environmental record file structure and organization which ensures all appropriate and correct environmental documentation is easily found.

1. Did the subrecipient have a complete and accurate Environmental Review File?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
a. Has the subrecipient maintained specific records of all environmental reviews and actions for the individual activities under review?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Were all Environmental Review documents easy to locate and access?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Does the Environmental Review file contain plans and specs or other required environmental project description?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Are all the documents in the Environmental Review File original documents and signatures?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. If the subrecipient – during the ERR process – received any complaints, were the complaints documented and addressed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
6. If the project is located in a floodplain, does the subrecipient have flood insurance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
a. If yes, is the flood insurance current and cover any additional flood insurance requirements?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

b. If no, is the subrecipient in the process of getting flood insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
c. If no, is the subrecipient within the 30-day period prior to flood insurance being active?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<i>Name of Grantee:</i>	<i>Grant#(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>



DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Procurement Monitoring Review: Checklists

Subrecipient Name: Program Name: Project Name/Project Identifier: Subrecipient Agreement Number: Applicable Appropriations and Grant Number(s): Monitoring Review Date:
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A. GENERAL POLICY & COMPETITION

OBJECTIVE

To determine if the subrecipient is complying with all Procurement requirements while administering programs with CDBG-DR funds. Ensure that procurement procedures follow requirements as outlined within 2 CFR §200, and that awards are given in accordance with said standards

SOURCES

- Procurement Policy
- Contracts
- Subrecipient Agreement
- Request for Proposals
- Request for Qualifications (for architectural & engineering)

METHODOLOGY

- Review sampling of subrecipient's procured contracts
- Review Policies & Procedures
- Review Documentation and Activities related to Procurement
- Check subrecipient's history/track record of procured contracts.
- Review Subrecipient Agreement
- Examine adopted state/local procurement procedures (if applicable)
- Review subrecipient's solicitations; ensure that requirements are clearly stated
- Check that the use of prequalified lists are up to date
- Review Documentation and Activities related to Procurement

2. Ensure that performance requirements, liquidated damages, and period-of-performance are incorporated into the reviewed contract/agreement.	
a. Procured Contracts Reviewed <ul style="list-style-type: none"> • Procurement 1 • Procurement 2 • Procurement 3 	
b. Are performance requirements and penalties (liquidated damages) incorporated into the reviewed contract or agreement?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

c. Do the Agreements reviewed clearly state the period of performance or the date of completion?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

3. Determine if the subrecipient is utilizing procurement policies that maintain clear and acceptable oversight mechanisms of its contracted vendors.	
a. Does the Subrecipient have written procurement policies and procedures? [2 CFR §200.318(a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b. Does the Subrecipient have policies and procedures specifying the acceptable methods of procurement? [2 CFR §200.318(a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
c. Does the Subrecipient use its own documented procurement procedures which reflect applicable state and local laws which conform to Federal law? [2 CFR §200.318(a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
d. Is the Subrecipient maintaining oversight to ensure contractors perform in accordance with the contracts or purchase orders, requiring they follow applicable procurement policies and procedures? [2 CFR §200.318(b)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
e. Does the Subrecipient have policies providing standards of conduct covering conflicts of interest for employees engaged in selection, award, and administration of contracts? [2 CFR §200.318(c)(1)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
f. Do policies and procedures avoid the acquisition of unnecessary or duplicate items? [2 CFR §200.318(d)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
g. Was the contract awarded to a responsible contractor under the terms and conditions of the proposed procurement? [2 CFR §200.318(h)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
h. Has the Subrecipient ensured that awards are not made to any party that has been excluded, disqualified or otherwise ineligible? [2 CFR §200.318(h), Also see 2 CFR §200.213]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<p>4. Ensure that the subrecipient is following full and open competitions among prospective vendors and bidders in securing products and services. Confirm that the subrecipient is conducting fair and clearly expressed competitive procurement practices.</p>			
<p>a. Was the procurement conducted with a full and open competition? (Excluding: Unreasonable requirements placed on firms; Unnecessary experience and excessive bonding, noncompetitive pricing practices, noncompetitive contracts, organizational conflicts of interest, specifying a brand name) 2 CFR §200.319(a)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>b. Does the procurement prohibit the use of statutorily or administratively imposed state, local, or tribal geographical preferences in the evaluation of bids or proposals? 2 CFR §200.319(b)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>c. Are there written procedures for procurements that ensure solicitations provide a clear and accurate description of the technical requirements for the material, product, or service to be procured? 2 CFR §200.319(c)(1)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>d. Does the solicitation identify all requirements that must be fulfilled and all other factors to be used in evaluating bids and proposals? 2 CFR §200.319(c)(2)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>e. Does the Subrecipient utilize prequalified lists? (Previously procured and vetted contractors, in which federal procurement guidelines were followed, that can be invited to bid or propose on future procurements)? 2 CFR §200.319(d)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>f. Are all prequalified lists current and include an adequate number of qualified sources? 2 CFR §200.319(d)</p>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			

<p><i>Name of Grantee:</i></p>	<p><i>Grant #(s):</i></p>
<p><i>Name(s) of HCD Reviewer(s):</i></p>	<p><i>Review Date:</i></p>

B. CONTRACT COST & PRICING

OBJECTIVE

To determine if the subrecipient is complying with Contract Costs and Price requirements while administering programs with CDBG-DR funds

SOURCES

- Contracts
- Cost Estimating Tools & Procedures
- Independent Estimates
- Cost Analysis
- Price Analysis
- Bid Proposals

METHODOLOGY

- Review Policy & Procedures
- Review price analysis procedures
- Ensure that contract and price correspond to the subrecipient's award record and original budget/allocation of funding
- Check that subrecipient has obtained a breakdown of proposed costs

1. Ensure that complete and thorough cost analyses and estimates are conducted and prioritized as a key component in the subrecipient's selection process.			
a. Was a cost or price analysis performed in connection with every procurement in excess of \$250,000? (This includes contract modifications) [2 CFR §200.323(a)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Was profit negotiated as a separate element of the price of each contract? [2 CFR §200.323(b)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Were independent estimates made before receiving bids or proposals? [2 CFR §200.323(c)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Is contract pricing always based on a method other than the "cost-plus-a-percentage-of-cost" method? [2 CFR §200.323(d)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

C. PROCUREMENT METHODS

OBJECTIVE

To determine if the subrecipient is complying with federal requirements when using accepted CDBG-DR Procurement Methods: *Micro-Purchases, Small Purchases, Sealed Bids, Competitive Proposals, and Non-Competitive Proposals*. Ensure that the proper method of procurement is being used, and that cost thresholds are respected

SOURCES

- Procurement Policy & Procedures
- Request for Proposals
- Bid Proposals

METHODOLOGY

- Review Policy & Procedures
- Examine the costs of goods/services provided; ensure consistency with federal cost thresholds
- Check that subrecipient has obtained a breakdown of proposed costs
- Review name of vendor, contractor and/or subcontractor, date of procurement, funding source, contract price, description of procured goods/services

1. MICRO-PURCHASES

a. Does the purchase price of supplies or services exceed \$10,000? [2 CFR §200.320(a), 2 CFR §200.67]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b. Were the micro-purchases distributed fairly amongst qualified suppliers? [2 CFR §200.320(a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

2. SMALL PURCHASES

a. Are there simple and informal procurement methods for securing services, supplies, or other property that do not cost more than \$250,000? [2 CFR §200.320(b)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b. Were there price or rate quotations obtained from an adequate number of qualified sources (at least 3 or more)? [2 CFR §200.320(b)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

3. SEALED BIDS

a. Is there a formal sealed bid process in place?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Was the contract awarded to the responsible bidder who is conforming to all the conditions of the invitation for bid (IFB) and was the lowest in price? [2 CFR §200.320(c)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Is there a complete specification and accurate description of the service available? [2 CFR §200.320(c)(1)(i)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. Were there at least three or more responsible bidders for each procurement? (If no explain) [2 CFR §200.320(c)(1)(ii)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
e. Does the procurement lend itself to a firm, fixed price contract, and was the selection of the bidder made based on price? [2 CFR §200.320(c)(1)(iii)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
f. Were the Invitation for Bids (IFB) publicly advertised, solicited from an adequate number of suppliers, and provided sufficient time to for suppliers to respond? [2 CFR §200.320(c)(2)(i)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
g. Does the IFB, including specifications and attachments, define the items or services for bidders to properly respond? [2 CFR §200.320(c)(2)(ii)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
h. Were all bids opened publicly at the time and place referenced on the IFB? [2 CFR §200.320(c)(2)(iii)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
i. Was contract awarded in writing, at a firm fixed price, to the lowest responsible bidder? [2 CFR §200.320(c)(2)(iv)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
j. Is there a documented reason for any rejected bid? [2 CFR §200.320(c)(2)(v)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

4. COMPETITIVE PROPOSALS

a. Is this procurement method used when conditions are not appropriate for the use of sealed bids? [2 CFR 200.320(d)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Was the Request for Proposals (RFP) publicized? [2 CFR §200.320(d)(1)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Were the proposals solicited by an adequate number of qualified sources? [2 CFR §200.320(d)(2)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. Is there a written method for conducting technical evaluations of the submitted proposals? [2 CFR §200.320(d)(3)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
e. Was the contract awarded to the responsible firm whose proposal was most advantageous, after price and other factors were considered? [2 CFR §200.320(d)(4)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
f. For proposals involving architectural/engineering professional services, were contractors evaluated with respect to factors other than price, and was the most qualified firm selected in negotiation of fair and reasonable compensation? [2 CFR §200.320(d)(5)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
g. For procurement of architectural/engineering (A/E) professional services, is there a maintained list of qualified offerors that can respond to the RFP? [2 CFR §200.320(d)(5)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

5. NON-COMPETITIVE PROPOSALS

a. Was the item only available from one single source? [2 CFR §200.320(f)(1)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Was there an emergent or exigent need for the requirement that restricted a competitive solicitation? [2 CFR §200.320(f)(2)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Has HUD authorized the non-competitive proposal in response to a written request? [2 CFR §200.320(f)(3)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. After solicitation was it found that competition was determined inadequate? (e.g. only one proposal) [2 CFR §200.320(f)(4)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

D. BONDING

OBJECTIVE

To determine if the subrecipient is complying with Bonding requirements while administering programs with CDBG-DR funds

SOURCES

- Subrecipient Agreement

METHODOLOGY

- Review Policy & Procedures
- Review Contract Value
- Calculate performance and payment bonds as correlated to the contract price
- Review subrecipient's determination that bidder(s) is prepared to execute a contract within the time specified for the bid amount

1. Confirm that the use of performance and payment bonds are in correlation to the contract price.			
a. For contracts or subcontracts exceeding \$250,000, was there a bid guarantee from each bidder, at 5% of the bid price? [2 CFR §200.325(a)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Is there a performance bond for 100% of the contract price? [2 CFR §200.325(b)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is there a payment bond for 100% of the contract price? 2 [CFR §200.325(b)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

E. AFFIRMATIVE OUTREACH

OBJECTIVE

To determine if the subrecipient is complying with Procurement requirements regarding Small, Minority and/or Women-Owned Business Enterprises, and Labor Surplus Firms while administering programs with CDBG-DR funds

SOURCES

- Procurement Policy & Procedures
- Bid Solicitations
- Request for Proposals

METHODOLOGY

- Review Policy & Procedures
- Examine procurement procedures to ensure that M/WBE participation is encouraged
- Review procedures to confirm that Small Business pools were used in selection
- Review Documentation and Activities related to Procurement

1. Ensure that procurement practices are inclusive of all eligible candidates, and that M/WBE and labor surplus firms are provided fair consideration.			
a. Were all necessary affirmative steps taken to ensure that M/WBE and labor surplus area firms are used when possible? [2 CFR §200.321(a)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Are there solicitation lists that include these specific businesses, and were they solicited whenever they are potential sources? [2 CFR §200.321(b)(1)(2)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Were total requirements divided, when economically feasible, into smaller tasks to permit maximum participation by Small, Minority, and Women businesses? [2 CFR §200.321(b)(3)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Were delivery schedules established where the requirement permits, which encourages participation by Small, Minority, and Women businesses? [2 CFR §200.321(b)(4)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
e. Were services and assistance utilized from organizations such as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce? [2 CFR §200.321(b)(5)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
f. If subcontracts were granted, was the prime contractor required to take the affirmative steps above? [2 CFR §200.321(b)(6)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions			
<ul style="list-style-type: none"> • <i>What is reviewed and found?</i> 			

- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

F. CONTRACT PROVISIONS

OBJECTIVE

To determine if the subrecipient is complying with Contract Provisions as provided within 2 CFR 200.326 and 2 CFR 200 while administering programs with CDBG-DR funds. Ensure that all applicable provisions are included and adhered to within the subrecipient's contracts and subcontracts

SOURCES

- Subrecipient Agreement

METHODOLOGY

- Review Policy & Procedures
- Review Plan
- Review Documentation and Activities related to Procurement

1. Ensure that all applicable provisions are included and adhered to within the subrecipient's contracts and subcontracts.			
a. Remedies - Is the contract more than the more than \$25,000 and addresses remedies in instances where contract terms are breached?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Termination for Cause and Convenience - Does the contract exceed \$10K and address termination for cause?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Equal Employment Opportunity - Is this contract a "federally assisted construction contract"? [41 CFR §60]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Davis Bacon Act and Copeland Anti-Kickback Act – (Applies to construction contracts that exceed \$2,000) [29 CFR Part 5]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
e. Contract Work Hours and Safety Standards Act - Was the contract awarded more than \$100,000 and involves the employment of mechanics or laborers? [29 CFR Part 5]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
f. Rights to Inventions Made Under a Contract or Agreement [37 CFR Part 401]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
g. Clean Air Act and the Federal Water Pollution Control Act (Applicable if the contract exceeds \$150,000)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
h. Debarment and Suspension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
i. Byrd Anti-Lobbying Amendment (Applicable to any contractor who applies or BIDs on an award of \$100,000 or more)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
j. Procurement of Recovered Materials (All entities must comply with Section 6002 of the Solid Waste Disposal Act)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
k. Additional FEMA Requirements (Changes Clause and Access to Records)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A

l. DHS Seal, Logo, and Flags	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
m. Compliance with Federal Law, Regulations, and Executive Orders	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
n. No Obligation by Federal Government	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
o. Program Fraud and False or Fraudulent Statements or Related Acts	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

G. RECORD KEEPING

OBJECTIVE

To determine if the subrecipient is complying with all federal Procurement Documentation requirements. Ensure that records are being maintained adequately while reflecting clearly detailed procedures

SOURCES

- Procurement Policy & Procedures
- Recordkeeping Procedures
- System of Record
- Procurement Files

METHODOLOGY

- Review Policies & Procedures
- Confirm that subrecipient is properly documenting purchasing activities and decisions
- Review records including, but not limited to, files on the rationale for selecting the methods of procurement used, selection of contract type, the contractor selection/rejection process, and the basis for the cost or price of a contract. Records should also include a justification for lack of competition when competitive bids or offers are not obtained, and the basis for the award cost or price

1. Ensure that purchases are effectively documented from the identification of the need through final payment for goods or services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
a. Does the Subrecipient maintain records sufficiently detailing the history and methods of procurement? [2 CFR §200.318(i)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Is there documentation reflecting the selection of contract type? [2 CFR §200.318(i)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is there documentation reflecting contractor selection or rejection? [2 CFR §200.318(i)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Is there documentation reflecting the basis of the contract price? [2 CFR §200.318(i)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
e. Has a time and materials contract been used? [2 CFR §200.318(j)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
f. Are there procedures for settlement of issues put in place for protests and disputes? [2 CFR §200.318(k)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions			
<ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> 			

<ul style="list-style-type: none">• <i>What is the preliminary decision? Choose an item.</i>	
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<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>



DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Fair Housing and Equal Opportunity: Checklists

Subrecipient Name: <input type="text"/> Program Name: <input type="text"/> Project Name/Project Identifier: <input type="text"/> Subrecipient Agreement Number: <input type="text"/> Applicable Appropriations and Grant Number(s): <input type="text"/> Monitoring Review Date: <input type="text"/>
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A. FAIR HOUSING

OBJECTIVE

To determine if the subrecipient is complying with all requirements of Fair Housing and Equal Opportunity requirements while administering programs with CDBG-DR funds

Fair Housing prohibits discrimination in the sale, rental, and financing of housing based on race, color, national origin, religion, sex, familial status, and disability. The act has 2 main purpose – prevent discrimination and reverse housing segregation.

SOURCES

- Fair Housing Policy
- Fair Housing Marketing Strategy
- subrecipient Website
- Fair Housing Information

METHODOLOGY

- Review policy and procedures
- Review Plan
- Review Documentation and Activities related to Fair Housing

1. Has the subrecipient adopted Fairing Housing Policies and Procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
a. Does the subrecipient's Fair Housing Policy require regular assessment of available housing stock for Low Income Individuals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Does the Fair Housing Policy Require the subrecipient to host and/or sponsor fair housing events?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Does the subrecipient's Fair Housing Policy contain a complaint process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A

<ul style="list-style-type: none"> Does the complaint process allow for anonymous complaints? 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<ul style="list-style-type: none"> Are all methods of filing a complaint active? <i>Examples: phone line is working, email addresses are valid</i> 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<ul style="list-style-type: none"> Does the website contain appropriate contact methods to file a complaint? 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
2. Has the subrecipient appointed a Fair Housing Coordinator?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
3. Has the subrecipient hosted/sponsored a Fair Housing event recently?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
4. Is the subrecipient hosting/sponsoring Fair Housing events in compliance with its policy?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> <i>What is reviewed and found?</i> <i>How does that compare to requirements?</i> <i>Does condition require corrective action?</i> <i>What is preliminary decision? Choose an item.</i> 	

5. Has the subrecipient adopted a Fair Housing Marketing Plan?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
a. Does the Fair Housing Marketing Plan require identifying the segments of the eligible population which are least likely to apply for housing without special outreach efforts?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Does the Fair Housing Marketing Plan outline an outreach program which includes special measures designed to attract those groups identified as least likely to apply and other efforts designed to attract persons from the total eligible population?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Does the Fair Housing Marketing Plan specify the particular means of advertising to reach a target group and the reasoning behind the particular type of advertising?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. Does the Fair Housing Marketing Plan set "milestones" or "participation level" to determine/define success of the Fair Housing Marketing strategy?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> <i>What is reviewed and found?</i> <i>How does that compare to requirements?</i> <i>Does condition require corrective action?</i> 	

- *What is preliminary decision?* Choose an item.

6. Has the subrecipient completed an Analysis of Impediments to Fair Housing Choice? [24 CFR 91.325(a)(1)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
a. If the answer is “Yes” when was the Analysis of Impediments completed? <i>Indicate, if current, in relation to Consolidated Plan, and record date in the Basis for Conclusion</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b. If any impediments were discovered, did the subrecipient take actions to address the impediments identified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision?</i> Choose an item. 	

7. Does the subrecipient have a Certification to Further Affirmative Action Fair Housing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
a. Does the subrecipient maintain data on the extent to which each racial and ethnic group and single-headed household (by gender of household head) applied for, participated in, or benefited from, any area and/or direct benefit programs or activities Funded in whole or in part with CDBG funds? [24 CFR 570.506(g)(2)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
b. Are race and ethnicity data maintained on Form HUD-27061, “Racial and Ethnic Data Reporting Form?”	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision?</i> Choose an item. 	

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

B. EQUAL EMPLOYMENT OPPORTUNITY (EEO)

OBJECTIVE

To determine if the subrecipient is complying with all requirements of Equal Employment Opportunity regulations and requirements while administering programs administered with CDBG-DR funds

EEO was designed to prohibit job discrimination for reasons of race, religion, color, national origin, and sex. The law requires that the most competent applicants be hired, and the most competent employees be promoted.

SOURCES

- Equal Employment Opportunity Policy
- Equal Opportunity Reports
- subrecipient Website
- Equal Opportunity Information

METHODOLOGY

- Review policy and procedures
- Review Plan
- Review Documentation and Activities related to Equal Opportunity

1. Has the subrecipient adopted an Equal Employment Opportunity Policy?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
a. Does the Equal Employment Opportunity Policy require the subrecipient to assess employment impediments?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Does the subrecipient have and EEO complaint process for individuals who believe they have been discriminated against?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Has the subrecipient displayed and/or made available a complaint filing line for individuals to lodge complaints regarding EEO violations?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	
2. Does the subrecipient have EEO rights information available at its office?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
a. Does the subrecipient keep data regarding employment data for Race and National Origin on the Equal Employment Opportunity Form (EEO-4)?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

<p>b. Is the subrecipient completing and submitting the EEO-4 form in a timely manner?</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<p>3. Did the subrecipient document actions undertaken to assure equal employment opportunity to all persons regardless of race, color, national origin, sex or disability for its CDBG-funded subrecipients? [24 CFR 570.506(g)(3)]</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

<p><i>Name of Grantee:</i></p>	<p><i>Grant #(s):</i></p>
<p><i>Name(s) of HCD Reviewer(s):</i></p>	<p><i>Review Date:</i></p>

C. SECTION 504

OBJECTIVE

To determine if the subrecipient is complying with all requirements of Section 504 regulations and requirements while administering programs administered with CDBG-DR funds.

Section 504 of the Rehabilitation Act of 1973 is American Legislation that guarantees certain rights to people with disabilities.

SOURCES

- Section 504 Policy
- Section 504 Reports
- subrecipient Website
- Section 504 Information

METHODOLOGY

- Review policy and procedures
- Review Plan
- Review Documentation and Activities related to Section 504

1. Has the subrecipient adopted a Section 504 Policy?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
2. For program participants or subrecipients with 15 or more employees, does it have a formal, written grievance procedure for resolution of complaints alleging discrimination based on disability? (If yes, obtain copy for FHEO review of due process standards.) [24 CFR 8.53(b)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
3. Has the subrecipient completed a self-assessment?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
4. If the self-assessment indicates 504 improvements are needed, has the subrecipient taken steps – or in the process of taking steps – to resolve any issues identified?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
5. Is there documentation to show steps that the subrecipient has undertaken to attract persons with disabilities, such as: making buildings more accessible to persons with physical disabilities; home visits to assist applicants for program benefits in filling out applications; supplying sign language interpreters for public meetings on issues relating to the participant's programs? [24 CFR 8.54(b) and (c)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

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<p>6. Does a review of the program participant's and/or subrecipient policies and records indicate that programs or activities are readily accessible to, and usable by, persons with disabilities? [24 CFR 8.4, 24 CFR 8.20, 24 CFR 8.21(c)(2)]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>7. Has the program participant taken steps to ensure effective communication with applicants, beneficiaries, and members of the public who have hearing, vision, or speech impairments using:</p> <ul style="list-style-type: none"> i. Qualified sign language and oral interpreters? ii. Readers? iii. Use of tapes? iv. Braille materials? v. TTD? <p>[24 CFR 8.6]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>8. If the answer to "a" above is "no," describe the method(s) used by the program participant to facilitate effective communication.</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

<p><i>Name of Grantee:</i></p>	<p><i>Grant #(s):</i></p>
<p><i>Name(s) of HCD Reviewer(s):</i></p>	<p><i>Review Date:</i></p>

D. WOMEN AND MINORITY OWNED BUSINESS

OBJECTIVE

To determine if the subrecipient is complying with all requirements of MBE/WBE regulations and requirements while administering programs administered with CDBG-DR funds

SOURCES

- Policies and Procedures
- Evidence of searches for Women and Minority Owned Business during procurement and hiring process
- Data illustrating the percentage of Women and Minority Owned Businesses
- Reporting requirements by HUD or Federal and/or State agencies

METHODOLOGY

- Review Policies and Procedures
- Review for evidence of Women and Minority Owned Business searches
- Review reporting requirements

<p>1. Does the subrecipient have records showing:</p> <p>(a) The race and ethnicity of each business entity receiving a contract or subcontract of \$25,000 or more paid, or to be paid, with CDBG funds;</p> <p>(b) Data indicating which of these entities are women's business enterprises as defined in Executive Order 12138; and</p> <p>(c) The amount of the contracts or subcontracts? [24 CFR 570.506(g)(6)]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>2. Does the subrecipient maintain documentation of affirmative steps to assure that minority business and women's business enterprises had an equal opportunity to obtain or compete for contracts and subcontracts as sources of supplies, equipment, construction and services? [24 CFR 570.506(g)(6)]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A</p>
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

Name of Grantee:	Grant #(s):
Name(s) of HCD Reviewer(s):	Review Date:

E. SECTION 3

OBJECTIVE

To determine if the subrecipient is complying with all requirements of Section 3 regulations and requirements while administering programs administered with CDBG-DR funds

Section 3 is a means by which HUD fosters local economic development, neighborhood economic improvement, and individual self-sufficiency. Section 3 is the legal basis for providing jobs for residents and awarding contracts to businesses in areas receiving certain types of HUD financial assistance.

SOURCES

- Section 3 Policy and Plan
- Section 3 Activities
- Section 3 Reporting/data

METHODOLOGY

- Review Section 3 Policy and Plan to determine if minimum standards are met
- Review advertisements for compliance with Section 3 requirements
- Review to ensure Section 3 activities are being held
- Ensure reporting standards are being followed

1. Has the subrecipient adopted a Section 3 policy and plan?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
a. Does the policy cover how Section 3 residents are to be notified about employment and training opportunities generated by the subrecipient or its contractors as a result of the expenditure of covered financial assistance? [24 CFR 135.32(a)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Does the policy cover how Section 3 business concerns are to be notified about contracting (or subcontracting) opportunities by the subrecipient or its contractors involving covered financial assistance? [24 CFR 135.32(a)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Does the policy cover how potential contractors for covered projects of covered funds are to be notified about their requirements pursuant to Section 3? [24 CFR 135.32(d) and 24 CFR 135.32(f)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. Does the policy cover, how covered contractors are to be monitored for compliance with requirements of Section 3? [24 CFR 135.32(d) and 24 CFR 135.32(f)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
2. Has the subrecipient appointed a Section 3 Coordinator?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

3. Has the subrecipient taken steps to host/sponsor events for Section 3 residents and businesses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Has the subrecipient taken steps to facilitate meeting the minimum numerical goals for employment and contracting opportunities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 			

5. Does the subrecipient conduct Section 3 Job Training Activities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
a. Does the subrecipient's records indicate the total number of training positions generated by the subrecipient or contractors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
b. Does the subrecipient's records indicate the training positions generated by the subrecipient or its contractors identified above?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
c. Does the subrecipient's records include descriptions of how the subrecipient and its contractors determined the eligibility for Section 3 residents? [24 CFR 135.34(b)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
d. Does the subrecipient's records indicate whether the minimum numerical goal for employment was met by the subrecipient or its contractors (30% of the aggregate number of new hires was Section 3 residents) [24 CFR 135.30(b)(3)(iii)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
e. Does the subrecipient records indicate if the minimum numerical goal for employment was not met, did the subrecipient provide an explanation of why it was not feasible to meet the goal? [24 CFR 135.30(d)(2)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 			
6. Does the subrecipient conduct Section 3 Construction Activities?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
a. Do the subrecipient's records indicate the total dollar amount of covered construction contracts generated as a result of the expenditure of covered financial assistance? [24 CFR 135.30(c)(1)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

b. Do the subrecipient's records cover how the subrecipient or its contractors determined the eligibility of Section 3 business concerns?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

1. Do the records indicate that the subrecipient is following the updated reporting/tracking requirements?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
a. Are Section 3 jobs being tracked by hours instead of per individual?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Does the documentation indicate that the Subrecipient is meeting or on the way to meet the required bench marks? ** Notate the current % of hours**	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Do the total number of hours for Section 3 individuals – to include any special sub-sets – meet at least 25% of total labor hours? ** This information can be – should be – found within Section 3 reporting records. **	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. If the Subrecipient is not on track to meet the required number of hours, is there a plan to meet the hours?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
e. If bench marks are not being met and the subrecipient is unable to meet the benchmark, was a report to describe the methods created and either sent to HCD and/or HUD which describes the activities engaged in order to solicit opportunities for Section 3 individuals and/or businesses?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

Name of Grantee:	Grant #(s):
Name(s) of HCD Reviewer(s):	Review Date:

F. RECORD KEEPING

OBJECTIVE

To establish that the subrecipient is complying with all record keeping requirements while administering programs administered with CDBG-DR funds

SOURCES

- Records
- Reports

METHODOLOGY

- Review records to determine if records are complete and accurate
- Ensure that records are being maintained for the State of California required timeframe

<p>1. After reviewing the subrecipient's Fair Housing files does the records contain – at a minimum – the following:</p> <ul style="list-style-type: none"> a. Fair Housing Policy and Fair Housing Marketing Plan b. Evidence of Fair Housing events are being hosted and/or sponsored by the subrecipients or its developers c. Records supporting the subrecipient is regularly evaluating the area's housing stock and obstacles in gaining affordable housing d. Policy requires files are to be maintained five (5) years after HUD grant close-out with HCD 	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>2. After reviewing the subrecipient's Section 504 files does the records contain – at a minimum – the following:</p> <ul style="list-style-type: none"> a. Section 504 Assurance b. Section 504 self-assessment c. Section 504 records indicating any identified 504 evaluations are corrected d. Policy requires files are to be maintained five (5) years after HUD grant close-out with HCD 	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>
<p>3. After reviewing the subrecipient's EEO documents does the records contain – at a minimum – the following:</p> <ul style="list-style-type: none"> a. Evidence that the subrecipient has advertised individual's rights within their office and have information to provide to individuals who believe they have been discriminated against? b. The subrecipient has methods for contacting the California EEO Commission c. Policy that requires files are to be maintained five (5) years after HUD grant close-out with HCD 	<p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A </p>

<p>4. After reviewing the subrecipient's MBE/WBE documents does the records contain – at a minimum – the following:</p> <ul style="list-style-type: none"> a. Evidence of the subrecipient taking active efforts to hire MBE/WBE when reasonable and feasible b. Is there evidence that the subrecipient is searching for MBE/WBE businesses to contract with, up to soliciting them to apply for upcoming contracts c. Is the subrecipient maintaining reports to justify efforts taken to hire MBE/WBE when feasible d. Does the Policy require files are to be maintained five (5) years after HUD grant close-out with HCD 	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does condition require corrective action?</i> • <i>What is preliminary decision? Choose an item.</i> 	

<p><i>Name of Grantee:</i></p>	<p><i>Grant #(s):</i></p>
<p><i>Name(s) of HCD Reviewer(s):</i></p>	<p><i>Review Date:</i></p>



DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Labor Standard Monitoring Review: Checklists

Subrecipient Name: Program Name: Project Name/Project Identifier: Subrecipient Agreement Number: Applicable Appropriations and Grant Number(s): Monitoring Review Date:
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H. Labor Standards Administration

OBJECTIVE

Ensure that Labor Standards are being met in a manner that provides a level of assurance that Davis Bacon Requirements will be met throughout the project.

SOURCES

- Labor Standard/Labor Compliance Officer Appointment
- Contracts with contractors and subcontractors
- Interviews

METHODOLOGY

- Review files and documentation

1. Has the Subrecipient appointed a Labor Standards Officer (LSO) to ensure the project(s) meet all Federal and State labor standards?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Does the appointed LSO have knowledge or training in federal and state labor standards? <i>(Document questions related to experience, training, and future trainings applicable to labor standards)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Has the LSO informed the contractors of their responsibilities regarding labor compliance? <i>(Typically found within the contract. Additionally, can be documented in Pre-Construction meeting minutes.)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Did the LSO confirm with contractors that sub-contractors have been informed on their responsibilities regarding labor compliance?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Does the LSO have a process in place for ensuring that all laborer and mechanics employed by the contractors and subcontractors are paid the appropriate prevailing wage rate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> 			

- *What is the preliminary decision? Choose an item.*

1. Is there evidence that the LSO has posted all appropriate notifications in an easy to access spot at the construction site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. Does the bulletin board/post included the executed wage decision for the project?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. Is there sufficient evidence to support that the LSO is conducting employee interviews? <i>Ensure that employee interviews are conducted to meet the Department of Labor's (DOL) requirements</i> <i>Interviews must meet the minimum requirements:</i> <ul style="list-style-type: none"> - <i>Must interview workers from every contractor and subcontractor</i> - <i>Must have a representative sample of every classification working on the job site</i> - <i>Monitoring should ask the LSO – if possible – if the interviews were confidential</i> 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
4. Does the LSO have a review process in place for reviewing the Certified Payroll Reports (CPRs)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
5. Is the LSO maintaining a log of the CPR review and documenting issues and actions taken to resolve any identified issues?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			

1. Did this project require any Additional Classification Requests?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
2. If yes, was the request for Additional Classification submitted to either HCD or DOL in a timely manner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
3. If Additional Classifications were requested after the worker started work, were impacted CPRs corrected and was the worker paid the appropriate amount of restitution and applicable fringe benefits owed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<p>Describe Basis for Conclusions</p> <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			

Name of Grantee:	Grant #(s):
Name(s) of HCD Reviewer(s):	Review Date:

I. Certified Payroll Review

OBJECTIVE

To determine if the review process for CPRs by the LSO is appropriate to ensure that Davis Bacon requirements are met.

SOURCES

- Executed Wage Decision
- Sample of Weekly Certified Payrolls from selected contractors
- Payroll Deduction Authorization Forms (PDA)
- Employee Interviews of sampled workers

METHODOLOGY

- Conduct a representative sample size of 5-10% of weekly payrolls per contractor.

1. Contractor Name: Click or tap here to enter text.			
a. Are CPRs being submitted timely for all workers and any subcontractors, being paid weekly under the contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Do the CPRs indicate that the contractor/subcontractor workers are being paid timely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Are the CPRs being signed by an authorized person? <i>Either an authorized signer or an individual who has been granted – and has documentation – authorization to sign on behalf of the company?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Does the CPR's Statement of Compliance contain an original signature?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
2. Review the CPR sample size – as set in the methodology – for the following questions:			
a. Are the sampled CPRs numbered correctly? <i>CPRs must have a start and final notated on it</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Are workers appropriate classified in CPRs? <i>Reference any Employee interviews or other documentation to ensure classification is corrected.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is the prevailing wage – to include any applicable fringe benefits – accurately calculated to ensure correct payment of wages?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Are deductions -if applicable – being correctly deducted from weekly pay based on the PDA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
e. Is the Statement of Compliance correctly filled out on the CPRs sampled? <i>If form WH-347 form was not used, the statement of compliance on the CPRs include all statements in the WH-347 form</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A

f. If the sampled CPRs indicate overtime was worked was OT hours and fringe benefits – as applicable – calculated appropriately? <i>(Rate of pay – to include fringe benefits – at time and a half)</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 	

1. Contractor Name: Click or tap here to enter text.	
a. Are CPRs being submitted timely for all workers and any subcontractors, being paid under the contract?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Do the CPRs indicate that the contractor/subcontractor workers are being paid timely?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Are the CPRs being signed by an authorized person? <i>Either an authorized signer or an individual who has been granted – and has documentation – authorization to sign on behalf of the company?</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
2. Review the CPR sample size – as set in the methodology – for the following questions:	
a. Are the sampled CPRs numbered correctly?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
b. Are workers appropriate classified in CPRs? <i>Reference any Employee interviews or other documentation to ensure classification is corrected.</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
c. Is the prevailing wage – to include any applicable fringe benefits – accurately calculated to ensure correct payment of wages?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
d. Are deductions -if applicable – being correctly deducted from weekly pay based on the PDA?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
e. Is the Statement of Compliance correctly filled out on the CPRs sampled?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
f. If the sampled CPRs indicate overtime was worked was OT hours and fringe benefits – as applicable – calculated appropriately?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
g. Were any compliance issues noted by the LSO?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
h. If compliance issues were noted, was restitution required?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
i. Were correct processes for restitution and/or corrected CPRs followed?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A

Describe Basis for Conclusions

- *What is reviewed and found?*
- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

1. Contractor Name: Click or tap here to enter text.			
a. Are CPRs being submitted timely for all workers and any subcontractors, being paid under the contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Do the CPRs indicate that the contractor/subcontractor workers are being paid timely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Are the CPRs being signed by an authorized person? <i>Either an authorized signer or an individual who has been granted – and has documentation – authorization to sign on behalf of the company?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
2. Review the CPR sample size – as set in the methodology – for the following questions:			
a. Are the sampled CPRs numbered correctly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Are workers appropriate classified in CPRs? <i>Reference any Employee interviews or other documentation to ensure classification is corrected.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is the prevailing wage – to include any applicable fringe benefits – accurately calculated to ensure correct payment of wages?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Are deductions -if applicable – being correctly deducted from weekly pay based on the PDA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
e. Is the Statement of Compliance correctly filled out on the CPRs sampled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
f. If the sampled CPRs indicate overtime was worked was OT hours and fringe benefits – as applicable – calculated appropriately?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
g. Were any compliance issues noted by the LSO?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
h. If compliance issues were noted, was restitution required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
i. Were correct processes for restitution and/or corrected CPRs followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions			
<ul style="list-style-type: none"> • <i>What is reviewed and found?</i> 			

- *How does that compare to requirements?*
- *Does the condition require corrective action?*
- *What is the preliminary decision? Choose an item.*

1. Contractor Name: Click or tap here to enter text.			
a. Are CPRs being submitted timely for all workers and any subcontractors, being paid under the contract?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Do the CPRs indicate that the contractor/subcontractor workers are being paid timely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Are the CPRs being signed by an authorized person? <i>Either an authorized signer or an individual who has been granted – and has documentation – authorization to sign on behalf of the company?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
2. Review the CPR sample size – as set in the methodology – for the following questions:			
a. Are the sampled CPRs numbered correctly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Are workers appropriate classified in CPRs? <i>Reference any Employee interviews or other documentation to ensure classification is corrected.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is the prevailing wage – to include any applicable fringe benefits – accurately calculated to ensure correct payment of wages?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
d. Are deductions -if applicable – being correctly deducted from weekly pay based on the PDA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
e. Is the Statement of Compliance correctly filled out on the CPRs sampled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
f. If the sampled CPRs indicate overtime was worked was OT hours and fringe benefits – as applicable – calculated appropriately?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
g. Were any compliance issues noted by the LSO?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
h. If compliance issues were noted, was restitution required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
i. Were correct processes for restitution and/or corrected CPRs followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions <ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			

<i>Name of Grantee:</i>	<i>Grant #(s):</i>
<i>Name(s) of HCD Reviewer(s):</i>	<i>Review Date:</i>

J. Forced Account Labor

OBJECTIVE

To determine if forced account labor – if used – was performed properly.

SOURCES

- Time keeping sheets
- Supporting Justification
- HCD Approval

METHODOLOGY

- Review the files to determine if Forced Account Labor was appropriate.

1. Did the subrecipient use Forced Account Labor for any work Davis Bacon related work?			
a. Is there sufficient justification by the subrecipient for the use of Forced Account Labor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
b. Does the project meet the prerequisites for Forced Account Labor? <i>Forced Account Labor prerequisites:</i> * Reasonable evidence that construction will cost substantially less than if it were done under contract or that competitive bids cannot be obtained from competent contractors. * Subrecipient must have the equipment, supervisory skills, a substantial portion of the required workforce, and record keeping system. * The legal counsel for the governing body must make a finding that the project is permissible in accordance with State laws and does not constitute a major project nor include construction of a building.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
c. Is there evidence of HCD's approval for the use of Forced Account Labor on this project in the files?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	N/A
Describe Basis for Conclusions			
<ul style="list-style-type: none"> • <i>What is reviewed and found?</i> • <i>How does that compare to requirements?</i> • <i>Does the condition require corrective action?</i> • <i>What is the preliminary decision? Choose an item.</i> 			