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Many of these documents can be found on DCA’s website at the following URL:

<https://www.dca.ga.gov/node/3741/documents/10>

# CDBG AWARD PACKAGE CHECKLIST

DCA will only accept a **complete and properly executed** award package. Please follow this checklist to ensure all forms are completed accurately. Grant administrators should review the award package for accuracy. Incomplete forms or forms with errors will result in the return of the entire award package for resubmission.

## Within 30 Days of Award:

### Part I:

- \_\_\_\_\_ **Carefully read and review ALL information received.**
- \_\_\_\_\_ **Execute the Statement of Award, General Conditions, Special Conditions, and the Statement of Revision (if applicable)**
  - All forms must be signed by the Chief Elected Official or Authorized Designee
  - Attest signature and affix the local governments official seal where indicated
- \_\_\_\_\_ **Review and retain the Budget Summary for your local records**
- \_\_\_\_\_ **Upload the Statement of Award, General Conditions, Special Conditions, and the Statement of Revision (if applicable) to the eCivis portal**

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### Part II:

- \_\_\_\_\_ **Complete the Authorized Signature Card (Instructions are noted on the bottom of the form)**
  - Be sure to indicate whether 1 or 2 signatures are required for drawdown requests
  - Provide up to 4 approvers with titles and signatures
  - Form must be signed by the Chief Elected Official ONLY
- \_\_\_\_\_ **Supplier (Vendor) Management Form (Rev. 4/2022)**
  - Use the attached sample as a guide
  - Leave the State of Georgia Liaison Section (Section 1) BLANK.
  - Leave the Liaison fields blank at the bottom of page 2 (For DCA Use Only)
  - **The Supplier Name must exactly match the Banking Letter and W-9 form (Section 2)**
  - Check the "Check here if this account can only be used for SPECIFIC purpose" box and enter the grant number referenced in the subject of this email in the "Describe specific purpose" box (Section 3)
  - Check the "Add New Bank Account" box in Section 4
  - **The State Accounting Office will CALL to verify the account.** Carefully select who can verify this information and provide the contact information and availability of this person as indicated on the sample.
- \_\_\_\_\_ **Banking Letter**
  - Use the attached sample as a guide. Please use the exact wording.
  - Must be placed on bank letterhead and signed by a bank official
  - **Legal Business Name on the Account must exactly match the W-9 form and the Vendor Management Form**
- \_\_\_\_\_ **W-9 Form (Rev. October 2018)**
  - **Line 1 – Business name must exactly match the Bank Letter and the Supplier Management Form**
  - Line 2 – Only if different from #1
  - Line 3 – Check the "Other" box and enter "City Government" or "County Government" whichever applies
  - Line 4 – Leave Blank
  - Lines 5 & 6 – Enter complete address of City/County Government
  - Line 7 – Leave Blank
  - Part I – Taxpayment Identification Number – Enter Employer Identification Number
  - Part II – Certification – Form should be signed by Authorized Official for the Local Government and dated.
- \_\_\_\_\_ **Email copy of all forms in Part II of the award package to [CDBG.Biz@dca.ga.gov](mailto:CDBG.Biz@dca.ga.gov)**
- \_\_\_\_\_ **Retain one copy of the entire award package for the local grant file**



# SUPPLIER (VENDOR) MANAGEMENT FORM

Agency Vendor Liaisons **MUST** review this form to ensure the supplier has completed the appropriate highlighted sections 2-5.

Agency Vendor Liaisons **MUST** complete Section 1 the "AGENCY LIAISON USE ONLY" section prior to submission to SAO.

## SECTION 1 – STATE OF GEORGIA-AGENCY LIAISON USE ONLY

### CHECK ONE AND ENTER ID NUMBER

<input type="checkbox"/>	Newly Assigned Supplier ID	
<input type="checkbox"/>	Existing TeamWorks Supplier ID	

### SPECIFY THE TYPE OF ACTION(S) REQUESTED BY THE SUPPLIER (VENDOR)

<input type="checkbox"/>	Change Bank Acct - Enter Loc#		<i>(Required for Bank Changes)</i>				
<input type="checkbox"/>	Change Address – Enter Addr ID#		<i>(Required for Address Changes)</i>				
<input type="checkbox"/>	Replace Invoicing Address	Loc#	Addr ID#	<input type="checkbox"/>	Replace Remittance Address	Loc#	Addr ID#
<input type="checkbox"/>	HCM Vendor						
<input type="checkbox"/>	Statewide Contract <b>(DOAS Use Only)</b>						
<input type="checkbox"/>	Classification Change ( <b>circle one</b> ) Attorney, Gov Non-State of GA, HCM, Non-Supplier, Student, Supplier Minority, Supplier Non-minority						
<input type="checkbox"/>	Other <i>(Provide Details in Section 6 and Initial)</i>						

## SECTION 2 – SUPPLIER IDENTIFICATION (Complete all applicable fields) **SUPPLIER USE ONLY**

FEI/SSN/TIN NUMBER: \_\_\_\_\_

SUPPLIER NAME: \_\_\_\_\_

PAYMENT ALT NAME: (IF PAYABLE TO A DIFFERENT NAME) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ DRIVERS LICENSE #: \_\_\_\_\_ DL STATE: \_\_\_\_\_

PRIMARY#: \_\_\_\_\_ EXT: \_\_\_\_\_ SECONDARY#: \_\_\_\_\_ EXT: \_\_\_\_\_

LANDLINE  CELL  (USED FOR IDENTITY VERIFICATION) \_\_\_\_\_ LANDLINE  \_\_\_\_\_ CELL  (USED FOR IDENTITY VERIFICATION) \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

## SECTION 3 – BANK ACCOUNT INFORMATION (REQUIRED FOR ALL NEW SUPPLIERS OR BANKING CHANGES/ADDS FOR EXISTING SUPPLIERS) **SUPPLIER USE ONLY**

ROUTING #           ACCOUNT #

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

Check here if this account can only be used for a SPECIFIC PURPOSE. \_\_\_\_\_  
Describe specific purpose

### ACCOUNTS RECEIVABLE NOTIFICATION

PYMT REMIT EMAIL: \_\_\_\_\_

PYMT REMIT EMAIL: \_\_\_\_\_

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

Printed Name of Company Officer \_\_\_\_\_ Signature of Company Officer \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 4 – SPECIFY TYPE OF ACTION(S). CHECK ALL THAT APPLY TO THIS REQUEST.**

<input type="checkbox"/>	Deactivate Supplier Profile <i>(Enter justification in Section 6)</i>		
<input type="checkbox"/>	Reactivate Supplier Profile		
<input type="checkbox"/>	Add <b>New</b> Bank Account <b>(Must complete Section 3)</b>		
<input type="checkbox"/>	Change <b>Existing</b> Bank Account <b>(Must complete Sections 1 &amp; 3)</b>		
<input type="checkbox"/>	FEI/TIN Change <b>(Cannot be changed if 1099 applicable)</b>		
<input type="checkbox"/>	Supplier (Business) Name Change		
<input type="checkbox"/>	Add <b>Additional</b> Business Address <b>(Must complete Section 2)</b>		
<input type="checkbox"/>	Change <b>Existing</b> Business Address <b>(Must complete Sections 1 &amp; 2)</b>		
<input type="checkbox"/>	Non- 1099 Applicable	<input type="checkbox"/>	1099 Applicable
<input type="checkbox"/>	1099-M	Enter Code	<input type="checkbox"/> <i>(Required for Form 1099-M)</i>
<input type="checkbox"/>	1099-N	Code	<input type="checkbox"/> 01 <i>(01 is the only code available for the 1099-NEC)</i>
<input type="checkbox"/>	1099 ADDR ID#	<input type="checkbox"/>	<i>(Enter Address ID # where to mail 1099)</i>
<input type="checkbox"/>	Other <i>(Provide Details in Section 6)</i>		

**SECTION 5 – TYPE OF BUSINESS (Check All That Apply)**

<b>BUSINESS CERTIFICATIONS – CHECK ALL THAT APPLY</b>				<b>MINORITY BUSINESS ENTERPRISE (51% Owned):</b>					
<input type="checkbox"/>	*Small Business	<input type="checkbox"/>	Women Owned	<input type="checkbox"/>	Hispanic – Latino	<input type="checkbox"/>	African American	<input type="checkbox"/>	Native American
<input type="checkbox"/>	GA Resident Business	<input type="checkbox"/>	Minority Business Certified	<input type="checkbox"/>	Asian American	<input type="checkbox"/>	Pacific Islander	<input type="checkbox"/>	Not Applicable

\*Based on Georgia law (OCGA 50-5-21) (3) "Small Business" means any business which is independently owned and operated. Additionally, such business must either have 300 or less employees OR \$30 million or less in gross receipts per year.

**SECTION 6 – ADDITIONAL SUPPLIER COMMENTS (Required if the "Other" or "Deactivate" boxes are checked in Section 1)**

**By my signature, I certify that all reasonable effort has been made to submit information that is complete, accurate, true, and is associated with the supplier's name and Tax ID listed below.**

Liaison Name: \_\_\_\_\_ Agency BU#: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_



# SUPPLIER (VENDOR) MANAGEMENT FORM

## INSTRUCTIONS FOR SUPPLIERS

### SECTION 1- AGENCY LIAISON USE ONLY

This section MUST be completed in its entirety unless otherwise indicated in the description boxes below.

New Assigned Supplier ID	Required, if the supplier is unapproved. Select the checkbox and enter the Supplier ID Number.
Existing TeamWorks Supplier ID	Required, if the supplier is approved or inactive. Select the checkbox and enter the Supplier ID Number.
Change Bank Acct – LOC#	Required, if the request is to change the supplier’s existing bank information. Select the checkbox and enter the Location in TeamWorks to change.
Change Address - #	Required, if the request is to change the supplier’s existing address. Select the checkbox and enter the Address ID number in TeamWorks to change.
Replace Invoicing Address	This option is required to change a Location’s Invoice Address. Select the checkbox and enter the Location # and the new AddrID#
Replace Remittance Address	This option is required to change a Location’s Remittance Address. Select the checkbox and enter the Location # and the new AddrID#
HCM Vendor	Required, if the request is for an HCM supplier. Select the checkbox.
Statewide Contract (DOAS Use Only)	This option is required for DOAS only. Select the checkbox if the supplier is under an SWC or to identify a supplier as an SWC vendor.
Classification Change	Required, if the request is to change the supplier’s current Classification. Circle the new Classification.
Other	Only select this option if the request is not listed in Section 4. Must provide details in Section 6.

**SECTION 2 – SUPPLIER IDENTIFICATION (SUPPLIER USE ONLY)**

This section MUST be completed in its entirety unless otherwise indicated in the description boxes below.

SUPPLIER NAME	Required. If requesting a name change, enter the <b>new</b> supplier’s name.
FEI/SSN/TIN	Required. If requesting a TIN change, enter the <b>new</b> FEI/TIN and include an <b>updated</b> W9.
PAYMENT ALT NAME	Optional. <b>SUBMIT AS AN ADDRESS REQUEST</b> 1. Complete if payments should use a different name than is indicated above. 2. If requesting to change the Payment ALT name, enter the <b>new</b> ALT name. 3. <b>Do not</b> add the same name that is in the Additional Name field in TeamWorks.
ADDRESS/CITY/STATE/ZIP/COUNTRY	Required. If requesting to change address, enter the <b>new</b> address.
DRIVER’S LICENSE #/DL STATE	Optional (For individuals only).
PHONE NUMBERS	Required. Enter the direct number to the authorized business contact person.
CONTACT EMAIL	Optional.

**SECTION 3- BANK ACCOUNT INFORMATION (SUPPLIER USE ONLY)**

This section MUST be completed in its entirety, for all new suppliers and banking changes/additions for existing suppliers. Payments will be made electronically via the Automated Clearing House (ACH).

ROUTING #	Required. Must be 9-digits.
BANK ACCOUNT #	Required.
GENERAL BANK ACCOUNT	Required. Select if <u>ALL PAYMENTS</u> from <u>ALL AGENCIES</u> should be deposited to the account provided.
SPECIFIC PURPOSE	Required. Select if bank account should be designated for <u>Specific Purpose</u> such as grants, operating accts, Pre-K, etc.
PYMT REMIT EMAIL	Optional, but <b>Recommended</b> to receive notification of payment(s) processed. Enter the email address where to send payment notifications. To add or change a payment remit email address for existing bank information, submit as a bank change request.
PRINTED NAME OF COMPANY OFFICER	Required.
SIGNATURE OF COMPANY OFFICER	Required. Must be the electronic signature embedded in the VMF or an ink signature. Stamps, script fonts, etc. are unacceptable.
DATE	Required. This date cannot be more than 60 days old from the date SAO receives the VMF.

**SECTION 4- SPECIFY TYPE OF ACTION(S)**

Select all items that pertain to this request. **If no selection is made, the form will be rejected.**

DEACTIVATE SUPPLIER PROFILE	Select if requesting to deactivate a supplier profile. A justification <b>MUST</b> be provided in Section 6.
REACTIVATE SUPPLIER PROFILE	Select if requesting to reactivate an inactive supplier profile. If the supplier was previously denied approval, select this option.
ADD NEW BANK ACCOUNT	Select when requesting to add bank account information to your profile. <b>Must also complete Section 3 of the form.</b>
CHANGE EXISTING BANK ACCOUNT	Select if requesting to <b>change</b> the current banking information on your profile. <b>Must also complete Section 3 of the form with new bank information.</b>
FEI/TIN CHANGE	Select if changing FEIN/TIN. Enter the <b>new number</b> in Section 2 and <b>submit the current updated W9.</b> <i><b>*If 1099 applicable, the FEI/TIN cannot be changed*</b></i>
SUPPLIER (Business) NAME CHANGE	Select if changing supplier/business name. Enter the <b>new name</b> in Section 2 and <b>submit the current updated W9.</b>
ADD ADDITIONAL ADDRESS	Select if adding an <i>additional</i> business address. Enter the additional address in Section 2 of the form.
CHANGE EXISTING ADDRESS	Select if changing current business address. Enter the <b>new address</b> in Section 2 of the form.
NON – 1099 APPLICABLE	Select to change a supplier that is currently 1099 applicable to non-1099 applicable.
1099 APPLICABLE	Select to change a supplier that is currently <b>NOT</b> 1099 applicable to a 1099 supplier.
1099-M/ENTER CODE	Required, if requesting to make a supplier 1099 applicable who will receive a 1099-M (excluding non-employee compensation). Enter the appropriate code in the Code field.
1099-N/CODE	Required, if requesting to make a supplier 1099 applicable who will receive a 1099-NEC for Non-employee Compensation. '01' is the only valid code the 1099-N.
1099 ADDR ID#	Enter the Addr ID number where to mail the Supplier's 1099.
OTHER	Select if the requested action is <i>not</i> listed in Section 4. <b>Must provide request details in Section 6.</b>

**SECTION 5- TYPE OF BUSINESS**

This section should only be completed if applicable. Please review the category definitions below.

<b>BUSINESS CERTIFICATIONS</b>	
SMALL BUSINESS	Based on Georgia law (OCGA 50-5-21) (3) "Small business" means any business which is independently owned and operated. Additionally, such business must have either less than 300 employees OR less than \$30 million in gross receipts per year.
GEORGIA RESIDENT BUSINESS	Based on Georgia law (OCGA 50-5-121) (2) "Georgia resident business" means any business that regularly maintains a place from which business is physically conducted in Georgia for at least one year prior to any bid or proposal to the state or a new business that is domiciled in Georgia and which regularly maintains a place from which business is physically conducted in Georgia; provided, however, that a place from which business is conducted shall not include a post office box, a leased private mailbox, site trailer, or temporary structure.
MINORITY BUSINESS CERTIFIED	Companies desiring to certify as a "minority business enterprise" or a "minority subcontractor" may do so by first submitting an application for the Disadvantaged Business Enterprise (DBE) Certification to GDOT. Only suppliers who have successfully completed the DBE certification process and registered in Team Georgia Marketplace are listed as a "Certified Minority Business Enterprises".
WOMEN-OWNED	Women-owned businesses are not considered minority businesses in the State of Georgia.

**SECTION 6 -ADDITIONAL SUPPLIER COMMENTS**

This section MUST be completed to "Deactivate" a profile or address if "Other" is selected in Section 4.

Liaison Name	Required. Enter only the name of the certified Agency Liaison submitting the request.
Agency B/U	Required. Enter the Agency's 5-digit Business Unit number.
Signature	Required. Must be the electronic signature embedded in the VMF or an ink signature. Stamps, script fonts, etc. are unacceptable.
Date	Required. The date entered is the date the Agency Liaison signed the VMF. This date cannot be prior to the signature date of the supplier in Section 3.
Email	Required. Enter the Agency Liaison's email address.
Phone	Required. Enter the Agency Liaison's phone number.



# SUPPLIER (VENDOR) MANAGEMENT FORM

Agency Vendor Liaisons **MUST** review this form to ensure the supplier has completed the appropriate highlighted sections 2-5.

Agency Vendor Liaisons **MUST** complete Section 1 the "AGENCY LIAISON USE ONLY" section prior to submission to SAO.

## SECTION 1 – STATE OF GEORGIA-AGENCY LIAISON USE ONLY

### CHECK ONE AND ENTER ID NUMBER

<input type="checkbox"/>	Newly Assigned Supplier ID	
<input type="checkbox"/>	Existing TeamWorks Supplier ID	

### SPECIFY THE TYPE OF ACTION(S) REQUESTED BY THE SUPPLIER (VENDOR)

<input type="checkbox"/>	Change Bank Acct - Enter Loc#		<i>(Required for Bank Changes)</i>				
<input type="checkbox"/>	Change Address – Enter Addr ID#		<i>(Required for Address Changes)</i>				
<input type="checkbox"/>	Replace Invoicing Address	Loc#	Addr ID#	<input type="checkbox"/>	Replace Remittance Address	Loc#	Addr ID#
<input type="checkbox"/>	HCM Vendor						
<input type="checkbox"/>	Statewide Contract <b>(DOAS Use Only)</b>						
<input type="checkbox"/>	Classification Change ( <b>circle one</b> ) Attorney, Gov Non-State of GA, HCM, Non-Supplier, Student, Supplier Minority, Supplier Non-minority						
<input type="checkbox"/>	Other <i>(Provide Details in Section 6 and Initial)</i>						

## SECTION 2 – SUPPLIER IDENTIFICATION (Complete all applicable fields) SUPPLIER USE ONLY

FEI/SSN/TIN NUMBER: 123456789 (must match W-9)

SUPPLIER NAME: City of Dreams ( must match W-9 and bank letter)

PAYMENT ALT NAME: (IF PAYABLE TO A DIFFERENT NAME) \_\_\_\_\_

ADDRESS: 123 Main Street ( must match W-9 and bank letter)

CITY: Dreams STATE: GA ZIP CODE: 31234

COUNTRY: USA DRIVERS LICENSE #: N/A DL STATE: N/A

PRIMARY#: # of person who can verify acct EXT: \_\_\_\_\_ SECONDARY#: # of person who can verify acct EXT: \_\_\_\_\_

LANDLINE  CELL  (USED FOR IDENTITY VERIFICATION) LANDLINE  CELL  (USED FOR IDENTITY VERIFICATION)

CONTACT EMAIL: Name and email address of person who can verify account information

## SECTION 3 – BANK ACCOUNT INFORMATION (REQUIRED FOR ALL NEW SUPPLIERS OR BANKING CHANGES/ADDS FOR EXISTING SUPPLIERS) SUPPLIER USE ONLY

ROUTING #	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	ACCOUNT #	<u>1</u>	<u>234567890123456789</u>
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Check here if General Bank Account can be used by ALL State of Georgia agencies making payments.

Check here if this account can only be used for a SPECIFIC PURPOSE. Enter Grant Award Number Here

Describe specific purpose

### ACCOUNTS RECEIVABLE NOTIFICATION

PYMT REMIT EMAIL: Enter email address for payment notification alerts

PYMT REMIT EMAIL: \_\_\_\_\_

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

Enter name of CEO or Finance Director \_\_\_\_\_ Enter Date \_\_\_\_\_

Printed Name of Company Officer \_\_\_\_\_ Signature of Company Officer \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 4 – SPECIFY TYPE OF ACTION(S). CHECK ALL THAT APPLY TO THIS REQUEST.**

<input type="checkbox"/>	Deactivate Supplier Profile <i>(Enter justification in Section 6)</i>		
<input type="checkbox"/>	Reactivate Supplier Profile		
<input checked="" type="checkbox"/>	Add <b>New</b> Bank Account <b>(Must complete Section 3)</b>		
<input type="checkbox"/>	Change <b>Existing</b> Bank Account <b>(Must complete Sections 1 &amp; 3)</b>		
<input type="checkbox"/>	FEI/TIN Change <b>(Cannot be changed if 1099 applicable)</b>		
<input type="checkbox"/>	Supplier (Business) Name Change		
<input type="checkbox"/>	Add <b>Additional</b> Business Address <b>(Must complete Section 2)</b>		
<input type="checkbox"/>	Change <b>Existing</b> Business Address <b>(Must complete Sections 1 &amp; 2)</b>		
<input type="checkbox"/>	Non- 1099 Applicable	<input type="checkbox"/>	1099 Applicable
<input type="checkbox"/>	1099-M	Enter Code	<input type="checkbox"/> <i>(Required for Form 1099-M)</i>
<input type="checkbox"/>	1099-N	Code	<input type="text" value="01"/> <i>(01 is the only code available for the 1099-NEC)</i>
<input type="checkbox"/>	1099 ADDR ID#	<input type="text"/>	<i>(Enter Address ID # where to mail 1099)</i>
<input type="checkbox"/>	Other <i>(Provide Details in Section 6)</i>		

**SECTION 5 – TYPE OF BUSINESS (Check All That Apply)**

<b>BUSINESS CERTIFICATIONS – CHECK ALL THAT APPLY</b>				<b>MINORITY BUSINESS ENTERPRISE (51% Owned):</b>					
<input type="checkbox"/>	*Small Business	<input type="checkbox"/>	Women Owned	<input type="checkbox"/>	Hispanic – Latino	<input type="checkbox"/>	African American	<input type="checkbox"/>	Native American
<input type="checkbox"/>	GA Resident Business	<input type="checkbox"/>	Minority Business Certified	<input type="checkbox"/>	Asian American	<input type="checkbox"/>	Pacific Islander	<input type="checkbox"/>	Not Applicable

\*Based on Georgia law (OCGA 50-5-21) (3) "Small Business" means any business which is independently owned and operated. Additionally, such business must either have 300 or less employees OR \$30 million or less in gross receipts per year.

**SECTION 6 – ADDITIONAL SUPPLIER COMMENTS (Required if the "Other" or "Deactivate" boxes are checked in Section 1)**

The State Accounting Office (SAO) will call the person identified in Section 2 to verify for account number and routing number. This is for verification purposes. If this person is only available on specific days of the week, please indicate those days and times.  
 Example: John Doe (123) 456-7890 - Available Monday and Wednesday from 8am to 3pm

**By my signature, I certify that all reasonable effort has been made to submit information that is complete, accurate, true, and is associated with the supplier's name and Tax ID listed below.**

Liaison Name: DO NOT ENTER ANYTHING HERE IN THIS SECTION Agency BU#: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

# BANK LETTERHEAD

## Exhibit A Sample Bank Letter

Date: (Date of Vendor Visit)

TO WHOM IT MAY CONCERN:

Please accept this letter as confirmation for the following account in order to direct electronic payments such as wires and ACH's into the account as necessary. This is a non-interest bearing bank account and will contain only CDBG grant funds.

Account Number:

ABA/Routing Number:

Legal Business Name on Account:

Address:

Please let me know if you have any further questions or require any additional information.

Sincerely,

Name  
Contact information

## Authorized Signature Card For Drawdown of CDBG Funds

Name of Recipient:	Award Number:
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CHECK ONE:

ONLY ONE SIGNATURE REQUIRED ON PAYMENT VOUCHERS

or

ANY TWO SIGNATURES REQUIRED TO SIGN OR COUNTERSIGN

### SIGNATURES OF INDIVIDUALS AUTHORIZED TO DRAW ON THE CITED LETTER OF CREDIT

Typed Name:	Typed Name:
Job Title:	Job Title:
Signature:	Signature:

Typed Name:	Typed Name:
Job Title:	Job Title:
Signature:	Signature:

I CERTIFY THAT THE SIGNATURES ABOVE ARE OF THE INDIVIDUALS AUTHORIZED TO DRAW PAYMENT UNDER THE GRANT CITED ABOVE:

Typed Name:

Title:

SIGNATURE OF Authorizing Official ( <i>Recipient</i> )	DATE
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### INSTRUCTIONS

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

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

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



By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

**Note:** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

**Foreign person.** If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

## Backup Withholding

**What is backup withholding?** Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

**Payments you receive will be subject to backup withholding if:**

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

## What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

## Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

## Penalties

**Failure to furnish TIN.** If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

**Civil penalty for false information with respect to withholding.** If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

**Criminal penalty for falsifying information.** Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

**Misuse of TINs.** If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

## Specific Instructions

### Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

**Note: ITIN applicant:** Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or “doing business as” (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity’s name as shown on the entity’s tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a “disregarded entity.” See Regulations section 301.7701-2(c)(2)(iii). Enter the owner’s name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner’s name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on line 2, “Business name/disregarded entity name.” If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

### Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

### Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

### Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

#### Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys’ fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 5 <sup>2</sup>
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

<sup>1</sup> See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

**Exemption from FATCA reporting code.** The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

**Note:** You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

### Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

### Line 6

Enter your city, state, and ZIP code.

## Part I. Taxpayer Identification Number (TIN)

**Enter your TIN in the appropriate box.** If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

**Note:** See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

**How to get a TIN.** If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at [www.SSA.gov](http://www.SSA.gov). You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at [www.irs.gov/Businesses](http://www.irs.gov/Businesses) and clicking on Employer Identification Number (EIN) under Starting a Business. Go to [www.irs.gov/Forms](http://www.irs.gov/Forms) to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to [www.irs.gov/OrderForms](http://www.irs.gov/OrderForms) to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

**Note:** Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

## Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

**Signature requirements.** Complete the certification as indicated in items 1 through 5 below.

**1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.**

You must give your correct TIN, but you do not have to sign the certification.

**2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.**

You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

**3. Real estate transactions.**

You must sign the certification. You may cross out item 2 of the certification.

**4. Other payments.**

You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

**5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.**

You must give your correct TIN, but you do not have to sign the certification.

**What Name and Number To Give the Requester**

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account <sup>1</sup>
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor <sup>2</sup>
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee <sup>1</sup>
b. So-called trust account that is not a legal or valid trust under state law	The actual owner <sup>1</sup>
6. Sole proprietorship or disregarded entity owned by an individual	The owner <sup>3</sup>
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity <sup>4</sup>
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

<sup>1</sup> List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

\*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

**Secure Your Tax Records From Identity Theft**

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

**Protect yourself from suspicious emails or phishing schemes.**

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to [phishing@irs.gov](mailto:phishing@irs.gov). You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at [spam@uce.gov](mailto:spam@uce.gov) or report them at [www.ftc.gov/complaint](http://www.ftc.gov/complaint). You can contact the FTC at [www.ftc.gov/idtheft](http://www.ftc.gov/idtheft) or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see [www.IdentityTheft.gov](http://www.IdentityTheft.gov) and Pub. 5027.

Visit [www.irs.gov/IdentityTheft](http://www.irs.gov/IdentityTheft) to learn more about identity theft and how to reduce your risk.

## Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

# INSTRUCTIONS FOR PREPARING REQUEST FOR DRAWDOWN OF CDBG FUNDS

## Please Mail Drawdowns only (no other correspondence) To:

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

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

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

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

### BLOCK 3:

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

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

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

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



# Georgia Department of Community Affairs CDBG Quarterly Reporting

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# Georgia Department of Community Affairs

## CDBG Quarterly Reporting

### Overview of Reporting

The Georgia Department of Community Affairs (DCA) requires reports on financial activity and project accomplishments from all grantees. There are three separate types of quarterly reports:

- **Activity Report** – *Directly entered into eCivis*
- **CDBG Contracts & Accomplishment Reports** – *Uploaded to eCivis/GrAAM as a file*
- **Financial Activity Report** – *Directly entered into eCivis*

**Activity Reports** are assigned and accessed through the eCivis grants management portal (GrAAM). This report covers the reporting period, narrative, and activity goals.

The reporting periods and deadlines are:

- January - March (due April 30)
- April - June (due July 31)
- July - September (due October 31)
- October - December (due January 31)

The first quarterly report is due after the end of the first full quarter in which you received your grant. No report is necessary for the first partial quarter. As an example, if you receive your award in October, you do **NOT** submit a report for the October through December quarter. Your first report should be submitted by the end of April and cover any grant activity to that point.

A **final** Activity and Contract & Accomplishments Report is due 30 days after the first quarter in which all drawdowns have been made, all expenses have been paid, and all accomplishments have been completed. The “final” status should be indicated in the narrative in the Activity Report and by the “Final Report” checkbox found on the CDBG Contracts & Accomplishments Report.

**CDBG Contracts & Accomplishment Reports** require recipients to report any contracting and section 3 activity, leverage, and accomplishments. The accomplishments section provides a cross-sectional analysis of goals by activity, and includes the separate reporting areas of People, Jobs, and Housing. This report should be uploaded any time there is a new contract, or People, Jobs, or Housing are reported.

To comply with Section 3 regulations [24 CFR 75.25(a)] , Recipients are required to report the total number of labor hours, the total amount of Section 3 worker hours, and the total amount of Section 3 Target worker hours quarterly, with a cumulative report occurring on the 2nd Quarterly report (period ending 6/30). The cumulative reporting period is from July 1 of each year to June 30 of the following year.

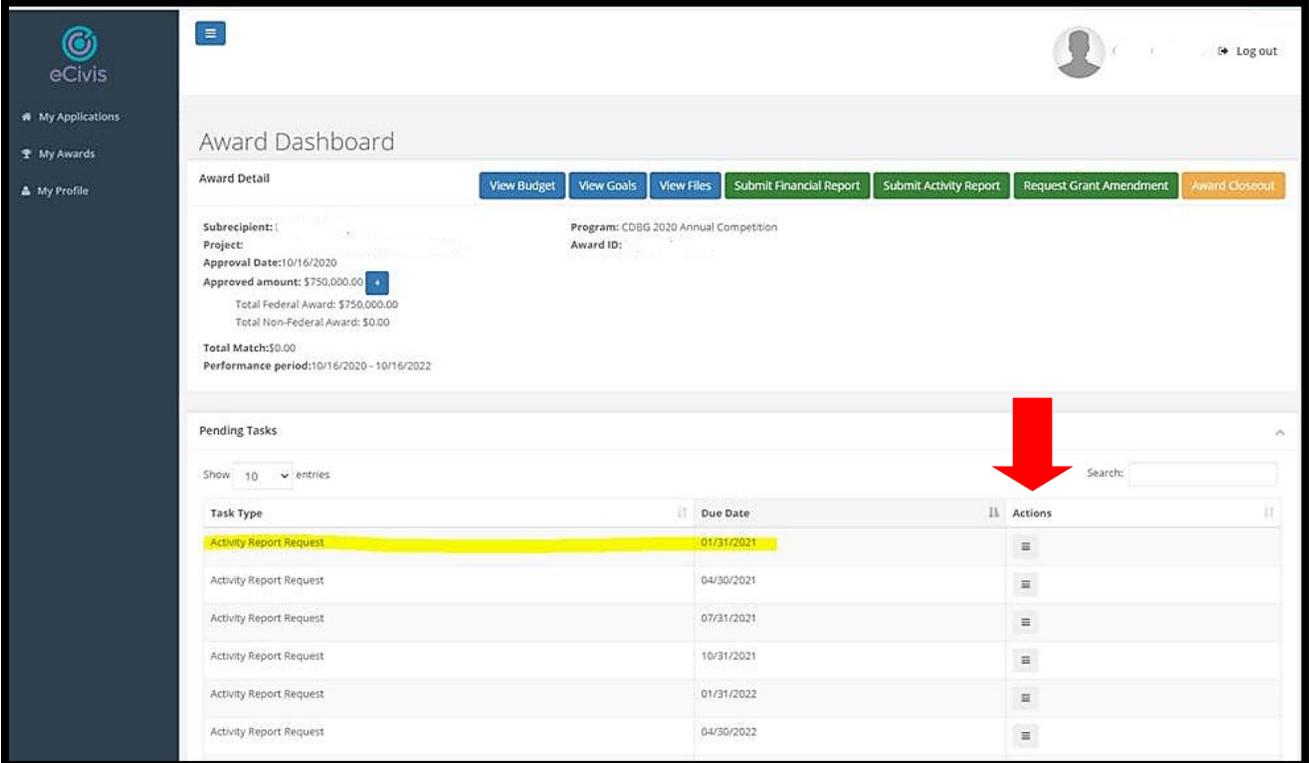
# Georgia Department of Community Affairs CDBG Quarterly Reporting

**Financial Activity Reports** are required for projects without a single draw request submission occurring in the reporting quarter. This report may be used to confirm budgetary balances and to provide a narrative regarding any project related activities, updates, and delays in the project's progression.

## Instructions

### Activity Report

1. The report can be accessed through the Award Dashboard:



The screenshot shows the eCivis Award Dashboard. The left sidebar contains navigation links for My Applications, My Awards, and My Profile. The main content area is titled "Award Dashboard" and includes a "Award Detail" section with buttons for View Budget, View Goals, View Files, Submit Financial Report, Submit Activity Report, Request Grant Amendment, and Award Closeout. Below this is a "Pending Tasks" section with a table of tasks. The first row is highlighted in yellow, and a red arrow points to the "Actions" column of this row.

Task Type	Due Date	Actions
Activity Report Request	01/31/2021	[Menu Icon]
Activity Report Request	04/30/2021	[Menu Icon]
Activity Report Request	07/31/2021	[Menu Icon]
Activity Report Request	10/31/2021	[Menu Icon]
Activity Report Request	01/31/2022	[Menu Icon]
Activity Report Request	04/30/2022	[Menu Icon]

2. Select submit report in the "Actions" menu.

3. Enter the quarter you are reporting on, in the field labeled "Report Period":

- January - March (due April 30)
- April - June (due July 31)
- July - September (due October 31)
- October - December (due January 31)

# Georgia Department of Community Affairs CDBG Quarterly Reporting

The screenshot displays the 'Activity Report' interface. At the top, there is a navigation bar with a menu icon, a user profile icon, and a 'Log out' button. Below this, the page title 'Activity Report' is shown. The main content area is divided into sections: 'Award Detail' with a 'Back to Award Detail' button, and 'Activity Report' with a 'Reporting Period' field. Below the reporting period field is a 'Report Narrative' field with a rich text editor toolbar containing icons for bold, italic, underline, list, and other formatting options. The 'Report Narrative' field is currently empty.

#### 4. Enter the following information the “Report Narrative” field:

- Identify the report number.
- Provide a brief narrative description of work in progress during the reporting period. For example: During this period the environmental clearance has been obtained, 10 applicants for rehabilitation have been screened, and 2 housing inspections have taken place." Use the Project Implementation Schedule included in your application as the basis for reporting on benchmarks.
- Provide a brief narrative description of all other supporting efforts that have begun, been partially implemented, or completed during this period. Include quantifiable data whenever appropriate: Other expenditures of funds, including local match and leverage contributions, should be shown here.
- If applicable, information concerning problems encountered or are anticipated that may impact the project as originally proposed in the grant application. **If applicable, indicate “final” activity report and indicate that no other accomplishment / activity reports are due until the Final Financial Report.**

## Georgia Department of Community Affairs CDBG Quarterly Reporting

5. In the Activity Report Metrics, enter the units in the input fields situated to the right of the appropriate CDBG activity:

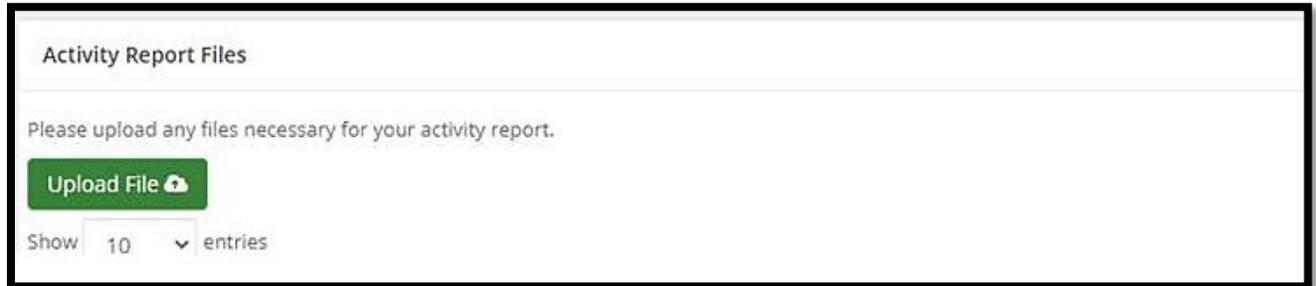
**Activity Report Metrics**

Please enter metrics to describe progress on your goals.

a. Acquisition, Disposition - Number of Structures:	<input type="text" value="0.00"/>	(0.00)
b. Acquisition, Disposition - Number of Parcels:	<input type="text" value="0.00"/>	(0.00)
c. Clearance - Number of Structures:	<input type="text" value="0.00"/>	(0.00)
d. Clearance - Number of Parcels:	<input type="text" value="0.00"/>	(0.00)
e. Public Building - Number of Facilities:	<input type="text" value="0.00"/>	(0.00)
f. Public Building - Number of Persons Served:	<input type="text" value="0.00"/>	(0.00)
g. Public Building - Number of Low/Moderate Income Persons:	<input type="text" value="0.00"/>	(0.00)
h. Water and Sewer Facilities - Number of Persons Served:	<input type="text" value="0.00"/>	(0.00)
i. Water and Sewer Facilities - Number of Low/Moderate Income Persons:	<input type="text" value="0.00"/>	(0.00)
j. Street and Flood/Drainage Improvements - # of Persons Served:	<input type="text" value="0.00"/>	(0.00)

## Georgia Department of Community Affairs CDBG Quarterly Reporting

### 6. Attach the CDBG Contracts & Accomplishments Report



The screenshot shows a web interface titled "Activity Report Files". Below the title, there is a text prompt: "Please upload any files necessary for your activity report." A green button labeled "Upload File" with a cloud icon is positioned below the text. At the bottom of the interface, there is a "Show" label followed by a dropdown menu set to "10" and the word "entries".

### 7. Submit the report



The screenshot shows a web interface with a light gray background. In the top right corner, there are two buttons: "Previous" and "Next". In the bottom right corner, there are two buttons: "Submit Report" (highlighted with a red border) and "Cancel".

## CDBG Contracts & Accomplishment Reports

This report can be accessed online at [Accomplishment Reporting | Georgia Department of Community Affairs \(ga.gov\)](https://ga.gov) . It should be attached to the Activity Report in GrAAM/eCivis. There are three (3) types of reports to choose from – People, Jobs, or Housing. Generally, unless the project is multi-activity, Recipients will submit only one (1) of the three (3) types of reports:

- People - for activities that benefit an entire area (e.g., target area) or benefit a limited clientele (e.g., health center).
- Jobs - for economic development activities. Report total full-time and full-time-equivalent jobs. Also, report here if any jobs created or retained with CDBG funds were subsequently lost (Jobs lost data is not reported on the Accomplishment Detail tabs).
- Housing - for activities that benefit particular housing units (reported as units).

# Georgia Department of Community Affairs

## CDBG Quarterly Reporting

### Section 1: General Information

Enter information for the award - Recipient Name, Grant Number, Contact Person, Telephone Number, and E-mail address.

The Quarter End Date is the last day of the quarterly reporting period which the report covers. Report Number corresponds to the quarter end date. The first quarterly report for a grant should cover the first full quarter after the award date. If this is the Final Report for the grant, indicate by checking the Final Report checkbox. Please keep in mind that the Final Report is due 30 days after the first quarter in which all drawdowns have been made, all expenses have been paid, and all accomplishments have been completed.

### Section II: Contracts/Subcontracts & Labor

This section is to be used by Recipients to report all contracts and subcontracts awarded during **the reporting period**. To avoid duplication, contracts and subcontracts should only be reported once, when awarded.

- Enter the contractors' (firms or organizations that contract directly with the Recipient) and subcontractors' (firms or organizations that contract with contractors) names and addresses. Enter the contractors' and subcontractors' Employer (IRS) Number. This number is also known as the *Federal Employer Tax Number*.
- *Section 3 Classification*: This section is used to capture required Section 3 information. For both prime contractors and subcontractors, you will need to check "yes" if, they are a Section 3 business. A Section 3 business is defined as:
  - i. 51% or more owner by low or very-low-income persons.
  - ii. 75% or more labor hours are performed by low or very-low-income persons.
  - iii. 25% or more owned by current residents of public housing or Section 8-assisted housing.
- Enter the total dollar amount of the contracts or subcontracts and the CDBG portion of those contracts or subcontracts.
- Enter the numeric code (1 through 3, shown on form) that best indicates the contractor's or subcontractor's type of trade or service. The "other" category includes consultants, professional services and all other activities except construction and education/training activities.

## Georgia Department of Community Affairs CDBG Quarterly Reporting

- Enter the Racial/Ethnic Code. This is used to designate the racial/ethnic character of the business entity receiving a contract or subcontract. To be classified in a particular racial/ethnic category, a business entity must be 51% or more owned and controlled by the racial/ethnic group members of the category. When a business is not 51% or more owned and controlled by a single racial/ethnic group, enter the code for the group that seems most appropriate. Enter the code (1 through 5, as shown on the form) that indicates the ethnic background of the contractor/subcontractor.
- Indicate by checking "yes" if the contractor or subcontractor is a Women-Owned Business.

### **Section 3 – Labor Hours & Efforts**

To comply with Section 3 regulations[24 CFR 75.25(a)] , the Recipient must report the following information quarterly, with a cumulative report occurring on the 2nd Quarterly report (ending 6/30). The cumulative reporting period is from July 1 of each year to June 30 of the following year.

- The total amount of labor hours completed during the reporting quarter.
- The total amount of labor hours performed by Section 3 **target** workers during the reporting quarter.
  - A Section 3 Target Worker is: Employed by a Section 3 business concern, OR Living within the service area or the neighborhood of the project, as defined in 24 CFR 75.5, OR a YouthBuild Participant.
- The total amount of labor hours performed by Section 3 workers during the reporting quarter.
  - A section 3 worker is: A low or very low-income worker, OR employed by a Section 3 business concern, OR a YouthBuild participant.

The labor hours reported must include the total number of labor hours worked on a Section 3 project, including labor hours worked by any contractors and subcontractors [24 CFR 75.25(a)(3)].

In order to meet Section 3 reporting requirements, Recipients may report labor hours by Section 3 workers and Targeted Section 3 workers from professional services **without** including labor hours from professional services in the total number of labor hours worked for the project [24 CFR 75.25(a)(4)].

- In the table, indicate which efforts the Recipient has executed to recruit or provide training and opportunities to Section 3 Businesses and Workers by selecting the checkbox to the left. *The two most typical "efforts" are listed in bold font.*

# Georgia Department of Community Affairs

## CDBG Quarterly Reporting

### Section 3 – Efforts

Please indicate which efforts the Recipient has executed to recruit or provide training and opportunities to Section 3 Businesses and Workers by checking all that apply.	
<input type="checkbox"/>	<b>Outreach efforts to generate job applicants who are CDBG Funded workers</b>
<input type="checkbox"/>	Direct, on-the-job training (including apprenticeships)
<input type="checkbox"/>	Indirect training such as arranging for, or paying tuition for, off-site training
<input type="checkbox"/>	Technical assistance to help Section 3 workers compete for jobs (e.g., resume assistance, coaching)
<input type="checkbox"/>	<b>Outreach efforts to identify and secure bids from Section 3 business concerns</b>
<input type="checkbox"/>	Technical assistance to help Section 3 business concerns understand and bid on contracts
<input type="checkbox"/>	Division of contracts into smaller jobs to facilitate participation by Section 3 business concerns
<input type="checkbox"/>	Provided or connected residents with assistance in seeking employment including: drafting resumes, finding job opportunities, connecting residents to job placement services.
<input type="checkbox"/>	Held one or more job fairs
<input type="checkbox"/>	Provided or connected residents with supportive services that can provide direct services or referral services
<input type="checkbox"/>	Provided or connected residents with supportive services that provide one or more of the following: work readiness health screenings, interview clothing, uniforms, test fees, transportation
<input type="checkbox"/>	Assisted residents with finding childcare
<input type="checkbox"/>	Assisted residents to apply for/or attend community college or a four-year educational institution
<input type="checkbox"/>	Assisted residents to apply for/ or attend vocational/technical training
<input type="checkbox"/>	Assisted residents to obtain financial literacy training and/or coaching
<input type="checkbox"/>	Bonding assistance, guaranties, or other efforts to support viable bids from Section 3 business concerns
<input type="checkbox"/>	Provided or connected residents with training on computer use or online technologies
<input type="checkbox"/>	Other, specify:

### Section III: Performance Measurement

#### Report leverage

- Public leverage: enter the -amounts in the appropriate category(ies) (Federal, State, and/or Local). The total public leverage amount will be calculated. Do not include CDBG funds as leverage.
- Private leverage: enter the total private leverage amount.

#### *Accomplishment Reporting*

DCA is often asked for information from Congress, HUD, the Governor's Office, the state legislature, or the general public concerning program accomplishments on a grant or project basis (a grant or project may involve more than one activity). Providing the data called for in this section allows DCA to provide this information. This data is required from each Recipient on a quarterly basis, both for the quarter being reported and for the period from inception of the grant through the quarter being reported.

The categories for reporting these accomplishments are: People, Jobs, and Housing

- People - for activities that benefit an entire area (e.g., target area in an infrastructure project) or benefit a limited clientele (e.g., health center).

## Georgia Department of Community Affairs CDBG Quarterly Reporting

- Jobs - for economic development activities. Report total full-time and full-time-equivalent jobs. Also, report here if any jobs created or retained with CDBG funds were subsequently lost (Jobs lost data is not reported on the Accomplishment Detail tabs).
- Housing - for activities that benefit particular housing units (reported as units).

Note: The data provided in this section should be an unduplicated count across all DCA-approved activities undertaken by the grant for the categories provided, i.e., people, jobs, and housing (units addressed). In some cases, this can result in the total counts differing from the totals on the Accomplishment Reports.

For example, if a household of five is benefited by a water activity (P-03J-01), a sewer activity (P-03J-02), and a street activity (P-03K-01) during the reporting period (all activities accounted for under the "Total People This Grant" block), the data entry should be "5" rather than "15". If the same household of five also receives a benefit under a housing rehabilitation activity (H-14A-01), the data entry should be "5" for Total People This Grant and "1" for Total Housing This Grant.

**Hint:** For target area projects, all people in the target area will generally benefit from the one or more DCA-approved CDBG infrastructure activities and the approved match and leverage associated with those activities, so by the end of the grant, the unduplicated count will usually be the target area population(s).

The CDBG Accomplishment Detail Report covers accomplishment details at the activity level. Please enter this information as accomplishments take place.

### *Performance Certification*

An important part of the report certification is the agreement by the recipient that accomplishments for the quarter have submitted accurately. If no accomplishments occurred during the reporting period, please select the check box indicating such.

### *Grant Administrator*

Indicate the date the report is completed.

### **Definitions - Activity Levels**

#### DCA Activity

An eligible CDBG activity designated by DCA's 6-character alpha-numeric code. See the DCA Applicants' Manual for further information on DCA's activity numbering system.

# Georgia Department of Community Affairs

## CDBG Quarterly Reporting

### HUD Activity

An eligible CDBG activity designated by HUD's 2- or 3-character alpha- numeric code. This Code is found in the middle of the DCA Activity Code. For example, for the DCA Activity Code A-21A-00, the HUD Activity Code is 21A. A listing of all HUD Activity Codes and their descriptions can be found in Appendix A attached to these instructions. The Accomplishment Reports are prepared on the basis of HUD activities. Please note that Accomplishment Reports should cover only the HUD activities specified on the project budget.

### **Activity Benefit Types**

L/M-Low and Moderate: LM Income level is defined as 80% or less of Area Median Income. (See the DCA CDBG Recipients' Manual for income data.)

L/M Income Area Benefit (LMA): A LM Income Area Benefit Activity is carried out in a specific geographic area. It is critical that the target area<sup>1</sup> determined by the Recipient be the entire area served by the DCA-approved activities and that at least 70 percent of the residents are low- and moderate-income. Most often, LMA projects relate to public infrastructure activities.

L/M Income Limited Clientele (LMC): A UM Income Limited Clientele Activity provides benefits to a specific group of persons rather than everyone in an area generally. At least 70 percent of the beneficiaries of the activity must be UM income persons.

L/M Income Housing (LMH): A LM Income Housing activity assists in the acquisition, construction, or improvement of permanent, residential structures occupied by LIM income persons.

L/M Income Jobs (LMJ): A UM Income Jobs activity is one which creates or retains permanent jobs, at least 51 percent of which, on a full time equivalent (FTE) basis, are either held by L/M income persons or considered to be available to LM income persons.

National Objectives: Three broad purposes outlined in the Housing and Community Development Act of 1974:

- Benefit to Low- and Moderate- Income Persons;
- Prevention or Elimination of Slums or Blight; and
- Meeting Urgent Needs.

All CDBG activities, in order to be eligible, must achieve one or more of the aforementioned national objectives. LMA, LMS, LMH, and LMJ activities are all carried out to meet the National Objective of benefit to low- and moderate-income persons.

# Georgia Department of Community Affairs

## CDBG Quarterly Reporting

### *People Accomplishment Report*

Please fill in this section at any point when people are benefited under either an LMA or LMC DCA-approved HUD Activity, or when leverage has been received for the activity. Please fill out the requested information as completely as possible.

You will be reporting only on activities specified in your award budget; use the activity codes from this budget as appropriate.

Please complete an activity report line for every activity that has had accomplishments during the quarter. It is possible that more than one People activity line will be required per quarter, even for the same grant.

For example, if a grant covers both sewer and drainage activities and accomplishments during the quarter resulted from both of those activities, two People activity lines will be required—one for the HUD Activity Code 03J (water and sewer) and one for HUD Activity Code 03K (streets and drainage).

#### **Race/Ethnicity:**

Use the People Race section to report racial and ethnic background of people benefiting from each activity.

For both LMC and LMA activities, please report the number of people benefiting by the racial and ethnic breakdown provided. Note that Hispanic is not considered a race, but an ethnicity that modifies a race. For Hispanic individuals, please choose a base race first. Then enter the number of people who are Hispanic and enter the category code for the base race. A list of the available racial categories is given in Appendix B.

#### **Income Level:**

Use the People Income section to report income level of people benefiting from each activity.

For both LMC and LMA activities, report the number of people benefiting by the four income categories provided:

- extremely low income (30% or less),
- low income (31% to 50%),
- moderate income (51% to 80%),
- or non LMI income (81% or greater).

Important: For LMC Activities, if the activity is limited to assisting one or more of the groups of persons that are presumed to be low- and moderate-income, the number of persons benefiting should be reported under the following income categories:

## Georgia Department of Community Affairs CDBG Quarterly Reporting

Abused children	extremely low income
Battered spouses	low income
Severely disabled adults	low income
Homeless persons	extremely low income
Illiterate adults	low income
Persons with AIDS	low income
Migrant farm workers	low income
Elderly	moderate income

Some clientele may qualify in more than one of the above categories. The Recipient should only mark accomplishments in the income categories which are the focus of LMC activities. For example, a building project serving Disabled Adults has program participants which also qualify as elderly. The project's primary focus is Disabled Adults. Therefore, accomplishments would only be reported for Disabled Adults.

### ***Jobs Accomplishment Report***

Please fill in this section at any point when jobs are retained or created, or when leverage has been received for the activity. Please fill out the requested information as completely as possible.

Job Creation/Retention:

Indicate the number of jobs created and/or retained on the Jobs Create/Retain section.

Full-Time Jobs:

- Full Time (F/T)-a position that the local company considers full time. This number includes all jobs regardless of income level.
- Full Time-Low Mod (F/T-LM)-a position filled by a low- and moderate- income person or that otherwise meets HUD's tests for reporting the position as low- and moderate-income.

Part-Time Jobs:

Part Time Jobs (PIT Jobs)-the number of individual part-time jobs. A job is part-time if regular working hours are less than 40 hours per week. This number includes all jobs regardless of income level.

- Part Time Hours (PIT Hours)-the number of hours worked in a regular work- week by employees in new or retained part-time jobs. This number includes hours for all jobs regardless of income level.
- Part Time Low Mod Hours (P/T-LM Hours) --the number of hours worked in a regular work-week by employees in new or retained part-time jobs that meet HUD's tests for low- and moderate-income.

## Georgia Department of Community Affairs CDBG Quarterly Reporting

Jobs will be either created or retained as a result of the CDBG project.

- Created jobs are new jobs that are created as a result of the project. Report created jobs only once, in the quarter when they were created and filled. Because income level and ethnicity data are required for each reported job, you cannot report a new job until it has been filled. **Once a job has been reported, do not report it again.** No matter how many different employees hold the job, the only one that should be reported is the first employee to be hired. **You do not need to report any adjustments if jobs are lost after having been created and reported.**
- Retained jobs are jobs that already exist at the beginning of the project and would have been eliminated without the assistance provided by the project. The employer(s) should provide the required information on these jobs before the project begins. Report retained jobs only once, on the first quarterly report for the project. Once a job has been reported, do not report it again. No matter how many different employees hold the job, the only one that should be reported is the one holding the job at the start of the project.

Example:

Company X has committed to retain 6 jobs. Over the course of the first year; 46 new jobs are created: 25 in the first quarter, 7 in the second quarter, and 14 in the fourth quarter. Unfortunately, 2 of the retained jobs and 1 of the jobs that had been created are eliminated in the third quarter. The report would look like this:

	<i>Retained</i>	<i>Created</i>	<i>Cumulative Total</i>
<i>1st Quarter</i>	<i>6</i>	<i>25</i>	<i>31</i>
<i>2nd Quarter</i>	<i>0</i>	<i>7</i>	<i>38</i>
<i>3rd Quarter</i>	<i>0</i>	<i>0</i>	<i>38</i>
<i>4th Quarter</i>	<i>0</i>	<i>14</i>	<i>52</i>
<i>Total</i>	<i>6</i>	<i>46</i>	<i>52</i>

Note that the lost jobs are not reported or counted in the totals on the Jobs Accomplishments report.

Racial and income data on this report is summarized from the information gathered on the individual Employee Confidential Income Release Form and the Employer Confidential Information Release Form Summary. These surveys may be obtained from DCA's EIP Program Manager at (404) 679-3174 or through DCA's web site at:

## Georgia Department of Community Affairs CDBG Quarterly Reporting

<https://www.dca.ga.gov/node/3900>

### Example:

Company X has hired 7 employees for new jobs. Of these employees, five work 40 hours per week, one works 20 hours per week, and one works 30 hours per week. Three of the employees working 40 hours per week meet HUD's tests for LMI, as does the employee working 30 hours per week. None of the other employees are considered LMI.

### Race/Ethnicity:

Use the Jobs Race section to report racial and ethnic background of employees in all retained or newly-created jobs. This section covers each individual job, whether full-time or part-time. Information should be provided for the first person hired in a newly-created job, or the employee currently holding a retained job.

A list of the available racial categories is given in Appendix B. Note that any racial or ethnic category may also be categorized as Hispanic, if applicable. If some or all employees in a racial category are Hispanic, enter the category code in the Race # field and the number of Hispanic employees in the Hispanic A field. Use the Hispanic B and associated Race # fields to report Hispanic employee count for a second category.

### Income Level:

Use the Jobs Income section to report income level of employees in each retained or newly-created job. This section covers each individual job, whether full-time or part-time.

Please indicate the income break out for the total jobs created and retained (extremely low, low, moderate, or non LMI). Information should be provided for the first person hired in a newly-created job, or the employee currently holding a retained job.

Tip: In accordance with 24 CFR570.483(b)(4)(v), should the project and subrecipient business(es) facility(ies) be located in a census tract and/or block group with a population in poverty equal to or greater than 20% (except for downtown business districts which must be 30%) as determined most recent decennial census information, it may be presumed that all jobs created and/or retained will be held by LMI persons. An income break-out for the jobs is not required to be collected in this case, so the low-income level category may be indicated on the report, until otherwise directed by HUD through DCA.

Please report the number of jobs created and retained that will receive health benefits, and how many of the jobs were filled by people who were unemployed prior to accepting one of the newly created or retained jobs.

# Georgia Department of Community Affairs

## CDBG Quarterly Reporting

### Job Type:

Use the Jobs Type section to indicate the type of each retained or newly-created job, according to the categories provided. This section covers each individual job, whether full-time or part-time.

### *Housing Accomplishments Report*

Housing accomplishment data, unlike the other reports in this series, must be submitted for each household assisted.

### Page 1 – Household Racial Data

For each household being assisted, please enter the street address and zip code. Also identify the unit number of the unit that is being assisted. The unit number is taken from the CDBG map showing housing units to be assisted on the original DCA map submitted with the application. If there are any questions about the unit number, please contact your Field Services Representative.

Enter the amount of CDBG funds used per household.

### Race/Ethnicity:

In reporting racial data, use the information that applies to the head of the household. Any racial or ethnic category may be categorized as Hispanic, if applicable. Use the appropriate race codes as listed in Appendix B.

### Page 2 – Activity Type

Enter the household information as instructed for Page 1.

Please identify

- The amount of CDBG funds used per household
- The head of household income category
- The type of resident status
- The number of household members and the number of bedrooms
- The unit type (stick-built, modular, or manufactured housing unit)
- The activity type (rehabilitation, reconstruction, direct homebuyer assistance, homebuyer development, or other)
- Whether the household can be classified as female head of household, elderly, or handicapped 504
  - A household can be classified as "elderly" if: 1) the head, spouse, or sole member is 62 years of age or older; 2) two or more persons who are at least 62 years of age live together; or 3) one or more persons who are at least 62 years of age live with one or more live-in aides.

## Georgia Department of Community Affairs CDBG Quarterly Reporting

- Whether the unit being assisted has been made accessible to Section 504 standards as a result of the project. Information on 504 standards can be obtained by consulting the following website:  
<https://www.access-board.gov/guidelines-and-standards>
- If the unit being assisted has been brought up to code as a result of the project, and whether the code is a local or state code or whether the code is HUD's Housing Quality Standards. For information on HUD's Housing Quality Standards, please consult HUD's regulations at 24 CFR Part 982.401. A copy may be obtained at the following web page: <https://www.govinfo.gov/content/pkg/CFR-2010-title24-vol4/pdf/CFR-2010-title24-vol4-sec982-401.pdf>
- Whether or not the unit being assisted has been brought up to the international Building Code (IBC) energy standards or meets Energy Star Standards as a result of the project For information on the IBC and EnergyStar, please consult the following web pages: <https://www.iccsafe.org> and <https://www.energystar.gov/>
- Whether or not the unit has been made lead-safe as a result of the project. ("Lead-safe" means that the unit meets all requirements defined in 24 CFR Part 35.)

### **Financial Activity Report**

Projects without expenditures within the previous quarter will be required to submit a financial activity report.

1. The report can be accessed through the Award Dashboard.
2. Select "Submit Financial Report":

# Georgia Department of Community Affairs CDBG Quarterly Reporting

**Award Dashboard**

**Award Detail** [View Budget](#) [Submit Financial Report](#)

Subrecipient: Kelly Young Program: AZ911 FY20 Grant-TEST 2  
Project: Test 1  
Approval Date: 01/04/2019  
Approved amount: \$100,000.00 +  
Total Federal Award: \$0.00  
Total Non-Federal Award: \$0.00  
Total Match: \$0.00  
Performance period: N/A - N/A

The Award Detail provides a summary of the award information:

**Award Detail** [Back to Award Detail](#)

AZ911 FY20 Grant-TEST 2 **Awarded**  
Awarded by: Arizona Sub Recipient Portal  
Approved amount: \$100,000.00  
Match type:  
Cash match: \$0.00  
In-Kind match: \$0.00  
Performance period: N/A

The Award Financial Overview is not editable, but will update itself depending on the amounts that are submitted in the Financial Report Details. This area is a summary of the total award spent and the total award amount remaining.

**Award Financial Overview**

This overview will update in real time as you complete your financial request. The data here reflects all submitted spending reports, even those still in the approval process.

	Spend	Match	Spend + Match
Award Total Spend	\$ 0.00	\$ 0.00	\$ 0.00
	0.00 %	0.00 %	
Award Remaining	\$ 100,000.00	\$ 0.00	\$ 100,000.00

3. In the Financial Report Details, click inside the Reporting Period text box and provide the dates of the reporting period then click apply:

## Georgia Department of Community Affairs CDBG Quarterly Reporting

Financial Report Details

Reporting Period: \*

07/01/2019 - 08/24/2019

07/01/2019 08/24/2019 **Apply** Cancel

< Jul 2019 Aug 2019 >

Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
30	1	2	3	4	5	6	28	29	30	31	1	2	3
7	8	9	10	11	12	13	4	5	6	7	8	9	10
14	15	16	17	18	19	20	11	12	13	14	15	16	17
21	22	23	24	25	26	27	18	19	20	21	22	23	24
28	29	30	31	1	2	3	25	26	27	28	29	30	31
4	5	6	7	8	9	10	1	2	3	4	5	6	7

- Enter the amounts in the appropriate category under the Spend and Match columns. Spend is the amount of grant funds spent. Match is the amount of match funds spent. Recipients can only report in categories they are awarded in.

Financial Report Details

Reporting Period: \*

07/01/2019 - 08/24/2019

Category	Spend	Match	Spend + Match	Award Remaining				
1. Personnel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00				
2. Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00				
3. Travel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00				
4. Equipment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00				
5. Supplies	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00				
6. Contractual	\$ 0.00	\$ 0.00	\$ 0.00	\$ 275,000.00				
7. Construction	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00				
8. Other	\$ 0.00	\$ 0.00	\$ 0.00	\$ 10,000.00				
Program Income	<table border="1"> <thead> <tr> <th>Received</th> <th>Expended</th> </tr> </thead> <tbody> <tr> <td>\$ 0.00</td> <td>\$ 0.00</td> </tr> </tbody> </table>		Received	Expended	\$ 0.00	\$ 0.00		
Received	Expended							
\$ 0.00	\$ 0.00							
Report Total	\$ 0.00	\$ 0.00	\$ 0.00					
	0.00 %	0.00 %						

- The Spend+Match and Award Remaining columns will automatically calculate the costs when you update the Spend and Match amounts. Additionally, the Report

## Georgia Department of Community Affairs CDBG Quarterly Reporting

Totals will automatically calculate to provide a breakdown of the amounts and percentages of funds used in the Reporting period:

Reporting Period:

Category	Spend	Match	Spend + Match	Award Remaining
1. Personnel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
2. Fringe Benefits	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
3. Travel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
4. Equipment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
5. Supplies	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
6. Contractual	\$ 50,000.00	\$ 0.00	\$ 50,000.00	\$ 225,000.00
7. Construction	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
8. Other	\$ 5,000.00	\$ 0.00	\$ 5,000.00	\$ 5,000.00
Program Income	Received	Expended		
	\$ 0.00	\$ 0.00		
<b>Report Total</b>	Spend	Match	Spend + Match	
	\$ 55,000.00	\$ 0.00	\$ 55,000.00	
	100.00 %	0.00 %		

6. Please ensure the checkbox preceding “Reimbursement Request” and “This is my final report” **remains blank**.

Report Total	Spend	Match	Spend + Match
	\$ 55,000.00	\$ 0.00	\$ 55,000.00
	100.00 %	0.00 %	
<input checked="" type="checkbox"/> Reimbursement Request*	<input type="text" value="\$ 55,000.00"/>		
<input type="checkbox"/> This is my final report			

7. Include a narrative regarding any project related activities, updates, and delays in the project’s progression.

# Georgia Department of Community Affairs CDBG Quarterly Reporting

The screenshot shows a web form titled "Financial Report Narrative". Below the title is a text area with a rich text editor toolbar containing icons for undo, redo, heading (H1, H2, H3), bold, italic, underline, bulleted list, numbered list, link, and unlink. The text area is currently empty.

8. Click on Upload Files to attach a document:

The screenshot shows the "Financial Report Files" section. It includes an "Upload File" button with a cloud icon, which is highlighted with a red box. Below this is a search bar and a table with columns for "File Name", "File Size", and "Actions". The table is currently empty, with the message "No files are available for download" displayed. At the bottom, it says "Showing 0 to 0 of 0 entries" and has "Previous" and "Next" buttons.

9. Select "Submit Report" and click on the warning page to send the report to the funding agency:

The screenshot shows the "Submit Report" button in the top right corner, highlighted with a red box. Below it is a warning dialog box with a blue border and a close button (X) in the top right. The dialog box contains the text "Warning!" in red, followed by "Are you sure you want to submit your financial report? This will send the contents of this form to the grantor for approval." At the bottom of the dialog box, there are "Cancel" and "OK" buttons, with the "OK" button highlighted by a red box.

# Georgia Department of Community Affairs CDBG Quarterly Reporting

## Appendix A: CDBG Matrix Codes

HUD CODE	HUD CODE TITLE	TYPE
01	Acquisition of Real Property	
02	Disposition of Property	
03	Public Facilities and Improvements (other)-includes domestic violence shelters, group homes, and senior centers as well as site development	People
03A	Senior Centers	People
03B	Handicapped Centers	People
03C	Homeless Facilities (not operating costs)	People
03D	Youth Centers--includes boys and girls clubs and other at-risk facilities	People
03E	Neighborhood Facilities	People
03F	Parks, Playgrounds and Other Rec. Facilities	People
03G	Parking Facilities	People
03J	Water/Sewer Improvements	People
03K	Street Improvements-includes drainage	People
03L	Pedestrian Walkways	People
03M	Child Care Centers-includes head start facilities	People
03O	Fire Protection Facilities and Equipment	People
03P	Health Facilities-includes mental health facilities	People
03Q	Abused and Neglected Children Facilities	People
03S	Facilities for Aids Patients (not operating)	People
04	Clearance and Demolition	
05	Public Services (General)- includes homebuyer education	
05H	Employment Training	
06	Interim Assistance	
08	Relocation Payments and Assistance	
09	Loss of Rental Income	
12	Housing - Construction	
13	Downpayment/Closing Cost Assistance	
14A	Rehabilitation or Reconstruction of Private Properties	
14C	Rehabilitation of Public Residential Structures	
14E	ED-Commercial and Industrial Facilities	
15	Code Enforcement	
178	ED- Public Facilities and Improvements	
17C	ED Acquisition	
18A	ED Direct Financial Assistance to Private For-Profits	
20	Planning	
21A	General Program Administration	
X00	Other (Describe)	

Georgia Department of Community Affairs  
CDBG Quarterly Reporting

**Appendix B: Race/Ethnicity Code**

CODE	DESCRIPTION
11	White
12	Black
13	Asian
14	Native American
15	Pacific Islander
16	Native American / White
17	Asian / White
18	Black / White
19	Native American / Black
20	Other Multiracial

**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**SECTION I: GENERAL INFORMATION**

Recipient Name:		Grant Number:		Report No:		Quarter End:		Final Report:	
Contact Person:				Telephone Number:				E-mail:	

**SECTION II: CONTRACTS/SUBCONTRACTS & LABOR FOR THIS QUARTER**

Contractor/Subcontractor Name	Address	City, State, Zip	Prime Contractor ID #	Sec 3	Subcontractor ID #	Sec 3	Total Amt. Contract/Sub	CDBG Part	Trade Code	Race Code	Women Owned

**Trade Codes:** 1 = New Construction, 2 = Education/Training, 3 = Other

**Racial/Ethnic Codes:** 1 = White, 2 = Black, 3 = Native American, 4 = Hispanic, 5 = Asian

Part 75 defines a Section 3 Business as: 51% or more owned by low or very-low income persons, OR 75% or more labor hours are performed by low or very low-income persons, OR 25% or more owned by current residents of public housing, or Section 8-assisted housing.

**Section 3 – Labor Hours** Please enter unreported hours. If submitting the 2nd Quarter report (ending 6/30) enter the cumulative hours as well. The cumulative reporting period is 7/01 - 6/30.

	Quarterly Hours	Annual Report - Quarter ending 6/30
Total Labor Hours		
Section 3 Target Worker		
Section 3 Worker Hours		

**A Section 3 Target Worker is:** Employed by a Section 3 business concern, OR Living within the service area or the neighborhood of the project, as defined in 24 CFR 75.5, OR a YouthBuild Participant.

**A section 3 worker is:** A low or very low-income worker, OR employed by a Section 3 business concern, OR a YouthBuild participant.

**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**Section 3 – Efforts**

Please indicate which efforts the Recipient has executed to recruit or provide training and opportunities to Section 3 Businesses and Workers by checking all that apply.	
<input type="checkbox"/>	<b>Outreach efforts to generate job applicants who are CDBG Funded workers</b>
<input type="checkbox"/>	Direct, on-the-job training (including apprenticeships)
<input type="checkbox"/>	Indirect training such as arranging for, or paying tuition for, off-site training
<input type="checkbox"/>	Technical assistance to help Section 3 workers compete for jobs (e.g., resume assistance, coaching)
<input type="checkbox"/>	<b>Outreach efforts to identify and secure bids from Section 3 business concerns</b>
<input type="checkbox"/>	Technical assistance to help Section 3 business concerns understand and bid on contracts
<input type="checkbox"/>	Division of contracts into smaller jobs to facilitate participation by Section 3 business concerns
<input type="checkbox"/>	Provided or connected residents with assistance in seeking employment including; drafting resumes, finding job opportunities, connecting residents to job placement services.
<input type="checkbox"/>	Held one or more job fairs
<input type="checkbox"/>	Provided or connected residents with supportive services that can provide direct services or referral services
<input type="checkbox"/>	Provided or connected residents with supportive services that provide one or more of the following: work readiness health screenings, interview clothing, uniforms, test fees, transportation
<input type="checkbox"/>	Assisted residents with finding childcare
<input type="checkbox"/>	Assisted residents to apply for/or attend community college or a four-year educational institution
<input type="checkbox"/>	Assisted residents to apply for/ or attend vocational/technical training
<input type="checkbox"/>	Assisted residents to obtain financial literacy training and/or coaching
<input type="checkbox"/>	Bonding assistance, guaranties, or other efforts to support viable bids from Section 3 business concerns
<input type="checkbox"/>	Provided or connected residents with training on computer use or online technologies
<input type="checkbox"/>	Other, specify:



**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
 QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**ACCOMPLISHMENTS REPORT - PEOPLE**

Matrix Code	HUD Activity	People Helped	Racial Data											Ethnicity		Income Data						
			White	Black	Asian	Native American	Pacific Islander	Native American/ White	Asian/ White	Black/ White	Native American/ Black	Other Multi-Racial	Asian Islander	Total from Race	Hispanic	Hispanic Base Race	Extremely Low Income	Low Income	Moderate Income	Non-Low/ Mod	Total Income Data	

**PERFORMANCE CERTIFICATION**

This certifies that

No Accomplishments occurred during this quarter.

All Accomplishments for this quarter have been reported accurately

**GRANT ADMINISTRATOR**

This Quarterly Report is complete:

Date Completed \_\_\_\_\_

**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**SECTION I: GENERAL INFORMATION**

Recipient Name:		Grant Number:		Report No:		Quarter End:		Final Report:	
Contact Person:				Telephone Number:				E-mail:	

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Contractor/Subcontractor Name	Address	City, State, Zip	Prime Contractor ID #	Sec 3	Subcontractor ID #	Sec 3	Total Amt. Contract/Sub	CDBG Part	Trade Code	Race Code	Women Owned

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**Racial/Ethnic Codes: 1 = White, 2 = Black, 3 = Native American, 4 = Hispanic, 5 = Asian**

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Total Labor Hours		
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Section 3 Worker Hours		

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**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT**

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<input type="checkbox"/>	Other, specify:



**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
 QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**ACCOMPLISHMENTS REPORT – JOBS**

						Racial Data											Ethnicity		Income Data								
Matrix Code	HUD Activity	Date	No. of Jobs	Full Time or Wkly Hrs	Created or Retained	White	Black	Asian	Native Am	Pacific Islander	Native Am./ White	Asian/ White	Black/ White	Native Am./ Black	Other Multi-Racial	Asian Islander	Total from Race	Hispanic	Hispanic Base Race	Extremely Low Income	Low Income	Mod Income	Non-Low/ Mod	Total Income Data	Job Category		

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**GRANT ADMINISTRATOR**

This Quarterly Report is complete:

Date Completed \_\_\_\_\_

**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**SECTION I: GENERAL INFORMATION**

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**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
QUARTERLY EXPENDITURES AND PROGRESS REPORT**

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<input type="checkbox"/>	Provided or connected residents with training on computer use or online technologies
<input type="checkbox"/>	Other, specify:





**GEORGIA DEPARTMENT OF COMMUNITY AFFAIRS  
 QUARTERLY EXPENDITURES AND PROGRESS REPORT**

**ACCOMPLISHMENTS REPORT – HOUSING (Pg. 2 of 2)**

						Income												Lead Based Paint			
Matrix Code	HUD Activity	Date	Unit Address	Unit #	CDBG \$	Head of Household Income Category	Resident Status	No. of Household Members	No. of Bedrooms	Unit Type	Activity	Female Head of Household	Elderly 62 or older	Handicapped 504	Met Code	Code Type	Energy Standards	Built Before 1978	Funds Used for Lead	Made Lead Safe	

**PERFORMANCE CERTIFICATION**

This certifies that

No Accomplishments occurred during this quarter.

All Accomplishments for this quarter have been reported accurately

**GRANT ADMINISTRATOR**

This Quarterly Report is complete:

Date Completed \_\_\_\_\_

ADJUSTMENT NOTICE

Award Serial No. \_\_\_\_\_ Adjustment No. \_\_\_\_\_ Award No. \_\_\_\_\_

Recipient \_\_\_\_\_

Co-Recipient \_\_\_\_\_

Type \_\_\_\_\_

Project \_\_\_\_\_

**TO THE RECIPIENT:**

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

**NATURE OF ADJUSTMENT:**

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

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

\_\_\_\_\_

## Georgia Department of Community Affairs CDBG Program Actual Accomplishments

Recipient: \_\_\_\_\_  
 Grant #: \_\_\_\_\_  
 Reviewed by: \_\_\_\_\_

Prepared by: \_\_\_\_\_  
 Date: \_\_\_\_\_

Activity	Measure	Actual Accomplishments
<b>Acquisition, Disposition</b>	# of Structures	
	# of Parcels	
<b>Clearance</b>	# of Structures	
	# of Parcels	
<b>Public Building</b>  <b>Type:</b>	# of Facilities	
	# of Persons Served	
	# of Low & Moderate Income	
<b>Water &amp; Sewer Facilities</b>	# of Persons Served	
	# of Low & Moderate Income	
<b>Street &amp; Flood/Drainage Improvements</b>	# of Persons Served	
	# of Low & Moderate Income	
<b>Other Public Facilities</b>  <b>Type:</b>	# of Persons Served	
	# of Low & Moderate Income	
<b>Public Services</b>	# of Persons Served	
	# of Low & Moderate Income	
<b>Relocation Assistance</b>	# of Businesses Relocated	
	# of Households Relocated	
<b>Housing Downpayment Assistance</b>	# of Housing Units	
	# of Persons Served	
<b>Housing Rehabilitation &amp; Reconstruction</b>	# of Housing Units	
	# of Persons Served	
<b>Public Housing Rehabilitation</b>	# of Housing Units	
	# of Persons Served	
<b>Housing Development</b>	# of Housing Units	
	# of Persons Served	
<b>Removal of Architectural Barriers</b>	# of Persons Served	
<b>Economic Development</b>	# of Businesses Assisted	
	# of Loans	
	# of Jobs Created	
	# of New Jobs for Low/Mod Persons	
	# of Jobs Retained	
	# of Retained Jobs for Low/Mod Persons	
	Private Investment:	

# **SAMPLE**

## SOURCE and APPLICATION OF FUNDS SCHEDULE

### Community Development Block Grant

---

Recipient Name

---

Grant Number

For the Period Ending: \_\_\_\_\_

(Cumulative)

- I. Total Fiscal Year \_\_\_ CDBG Funds Awarded to Recipient: \_\_\_\_\_
- II. Total Amount Drawdown by Recipient from DCA: \_\_\_\_\_
- III. Less CDBG Funds Expended by Recipient: \_\_\_\_\_
- IV. Amount of Fiscal Year \_\_\_\_\_ CDBG Funds held by Recipient: \_\_\_\_\_



**SAMPLE PUBLIC HEARING NOTICE  
COMMUNITY DEVELOPMENT BLOCK GRANT  
PROGRAM**

(Post Award Hearing)

The (City or County) of (name of City or County) will hold a PUBLIC HEARING on (Date/Time/Location) for the purpose of discussing the approved activities of the City's/County's Community Development Block Grant. On (date) the City/County was awarded a grant in the amount of \$                     to perform (list of activities) in the following location(s)                    .

The items to be discussed at the hearing include:

- The amount of funds received and a description of the activities
- The amount of funds available each activity and the amount of funds that will benefit low-and- moderate-income persons
- The plan, if applicable, to minimize or prevent displacement of persons and the plan to assist persons whom may be displaced
- Fair Housing laws and the City's/County's plan to further Fair Housing

The Public is invited to this Hearing to become informed of the project activities.

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

If you need an alternative format or language, please contact (                    ) at (phone number) or email                     .

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

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

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

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

(List accomplishments, benefit numbers, etc.)

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

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

The (City or County) of (name of City or County) is committed to providing all persons with equal access to its services, programs, activities; education and employment regardless of race, color, national origin, religion, sex, familial status, disability or age. For a reasonable accommodation please contact (\_\_\_\_\_) at: (phone number) or email \_\_\_\_\_. If you need an alternative format or language, please contact (\_\_\_\_\_) at: (phone number) or email\_\_\_\_\_.

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

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

# Sample- Spanish Post Award Public Hearing Notice

## MUESTRA DE AVISO AUDIENCIA PUBLICA PROGRAMA COMMUNITY DEVELOPMENT BLOCK GRANT (Audiencia después de subvención)

La/el (ciudad o condado) de (nombre de ciudad o condado) realizara una AUDIENCIA PUBLICA en (fecha/hora/lugar) para discutir las actividades aprobadas del Community Development Block Grant (Subvención en bloque para el desarrollo de la comunidad) de la ciudad/el condado. El (fecha) se adjudico a la ciudad/el condado una subvención de \$ \_\_\_\_\_ para llevar a cabo:(lista de actividades) en los siguientes sitios \_\_\_\_\_. Los temas que se exploraran durante la audiencia incluyen:

- La cantidad de fondos recibida y una descripción de las actividades
- La cantidad de fondos disponibles para cada actividad y la cantidad de fondos que beneficiara a personas de ingreso bajo y medio
- El plan, si precede, de minimizar o prevenir desplazamiento de personas y el plan para dar asistencia a personas que se podrían desplazar
- Las leyes de equidad de vivienda y los planes de la ciudad/el condado de promover equidad de vivienda

Se le invita al público a dar asistencia en esta audiencia para informarse sabré las actividades del Proyecto.

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

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

## **SAMPLE- Spanish Project Completion Public Hearing Notice**

### **DE AVISO DE AUDIENCIA PUBLICA PROGRAMA COMMUNITY DEVELOPMENT BLOCK GRANT (Audiencia de termino de proyecto)**

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

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

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

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

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

Si necesita un fórmate o idioma alternativo, por favor contacté a \_\_\_\_\_ al: (número telefónico) o envié un correo electrónico a \_\_\_\_\_.

Personas con discapacidades auditivas pueden contactarnos a nuestro número TDD (número AC+). [Los solicitantes quienes no tienen un teléfono TDD pueden considerar usar el *Georgia Relay Service*, al (TDD)

1-800-255-0056 o 1-800-255-0135 (Voz).]



If this is an Updated Report:

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

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

Grant #: \_\_\_\_\_

- 3) Certifying Official must sign below.

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

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

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

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

\_\_\_\_\_  
Signature of Certifying Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Typed or Printed Name and Title)

If this is an Updated Report:

1) Check this box,

2) Provide CDBG Recipient:

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

Grant #: \_\_\_\_\_

3) Certifying Official must sign below.

**PART IV – Interested Parties**

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

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

\_\_\_\_\_  
Signature of Certifying Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Typed or Printed Name and Title)

If this is an Updated Report:

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

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

Grant #: \_\_\_\_\_

- 3) Certifying Official must sign below.

**Part V – Expected Sources and Uses of All Funds**

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

Source	Use

**Part VI – CERTIFICATION**

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

\_\_\_\_\_  
(Signature of Certifying Official)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Typed or Printed Name and Title)

# Civil Rights Compliance Certification

Grant Recipient	Grant Number	Date		
		Yes	No	N/A
1. Has your government had any employment vacancies in the past three (3) months?		<input type="checkbox"/>	<input type="checkbox"/>	
2. If so, did you follow the equal employment opportunity guidelines in advertising the vacancies?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you have written employment and personnel policies available for review?		<input type="checkbox"/>	<input type="checkbox"/>	
4. Do you have employment records available?		<input type="checkbox"/>	<input type="checkbox"/>	
5. Is your employment data detailed enough to determine composition by?		<input type="checkbox"/>	<input type="checkbox"/>	
a. Sex		<input type="checkbox"/>	<input type="checkbox"/>	
b. Race		<input type="checkbox"/>	<input type="checkbox"/>	
c. Disability Status		<input type="checkbox"/>	<input type="checkbox"/>	
d. National Origin		<input type="checkbox"/>	<input type="checkbox"/>	
6. Is your position and salary information detailed enough to assess hiring, training, promotion, and compensation practices?		<input type="checkbox"/>	<input type="checkbox"/>	
7. Do your employment data support efforts to provide for equal employment opportunities?		<input type="checkbox"/>	<input type="checkbox"/>	
8. Have any civil rights complaints been filed against your government (within the past five years)?		<input type="checkbox"/>	<input type="checkbox"/>	
a. If so, has the complaint been satisfied?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. If you answered yes to #8, provide the following information in the space provided. Add additional pages if necessary.		<ul style="list-style-type: none"> <li>Describe the complaint(s) and include the date of the complaint;</li> <li>State if the complaint(s) has any relation to a CDBG project and if so, which CDBG project;</li> <li>Describe the steps your government has taken to satisfy the complaint, and;</li> <li>Provide complaint's current status (e.g., withdrawn, currently under Federal/State/Local review, mediation, etc.)</li> </ul>		
9. As needed, please provide additional clarification for any of the above questions.				
<b>The undersigned hereby certifies that the information contained in this Civil Rights Compliance Certification is correct to the best of his or her knowledge.</b>				
<b>Chief Elected Official Signature</b>		<b>Title</b>		<b>Date</b>
<b>Preparer Signature</b>		<b>Title</b>		<b>Date</b>

**STATE OF GEORGIA**  
**Georgia Department of Community Affairs (DCA)**

**REQUEST FOR REASONABLE ACCOMMODATION**

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

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

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

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

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

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No.: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

Program Name \_\_\_\_\_

Other (please specify):  
\_\_\_\_\_  
\_\_\_\_\_

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

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

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

\_\_\_\_\_  
\_\_\_\_\_

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

Please specify:

\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Yes

No

If yes, specify:

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

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

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I request that all information pertaining to my accommodation request:

Be kept confidential

Not be kept confidential

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

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

**Review and Action**

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

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

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

Requested Accommodation granted on \_\_\_\_\_ (Date).

Requested Accommodation denied on \_\_\_\_\_ (Date) because:

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Other action taken (explain) on \_\_\_\_\_ (Date).

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Notification to applicant concerning action taken on \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of DCA Official)

**STATE OF GEORGIA**  
**Georgia Department of Community Affairs (DCA)**

**REASONABLE ACCOMMODATION REQUEST**

**Documentation in Support of Request: Health Care Professional Information**

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

*Release* is also attached.

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

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

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

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

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\_\_\_\_\_  
Health Care Professional name  
(please print)

\_\_\_\_\_  
Professional license or specialty

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**STATE OF GEORGIA  
Georgia Department of Community Affairs (DCA)**

**REASONABLE ACCOMMODATION REQUEST**

**Documentation in Support of Request: Release**

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

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Telephone/E-mail

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

# DCA Meeting Checklist

This checklist is comprised of questions designed to evaluate the venue’s accessibility to individuals with disabilities.

## Accessible Meeting Facilities Checklist

Name of Facility (hotel, restaurant, state, city or county facility):	
Address:	City, State & Zip code:
Phone :	Email:
Surveyor’s Name:	Survey Date:
Phone:	Email:
Office:	Agency:

### Building Exterior

#### *Off-Street Parking/Passenger Loading Zone*

- \_\_\_\_\_ Number of accessible parking spaces, (see Appendix A) # Required Spaces
- \_\_\_\_\_ At least one van space, (96" space with 96" access aisle or 132"space with 60", 114" vertical clearance)
- \_\_\_\_\_ Sign at parking space, International Access Symbol, white on blue, “Van Accessible” for van space.
- \_\_\_\_\_ Built-up curb ramps do not project into access and parking spaces.
- \_\_\_\_\_ Level Slope < 1:48, firm, and non-slip surface. Slope < 1:48

- \_\_\_\_\_ Curb-cut, ramp or level area to walkway
- \_\_\_\_\_ If surface unpaved, then size of gravel < 0.3 inches
- \_\_\_\_\_ Closest parking space to accessible entrance. Crosses vehicular traffic lane?
- \_\_\_\_\_ Directional signage to accessible entrance, at non-accessible entrance
- \_\_\_\_\_ Passenger drop off or loading zone with accessible route or travel to building

***Proximity to Public Transportation***

- Bus stop within 1-2 blocks. Approximate Distance: \_\_\_\_\_
- Bus available evenings: ( Please Circle) Yes or No
- Level, firm, non-slip surface from bus stop to primary accessible building entrance, maximum slope of 1:12
- Curb cut, ramp, or level area to walkway (see Walkways). Note: handrails required if slope > 1:20 and the rise is >6"

***Walkways***

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

***Ramps (exterior)***

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

## **Building Exterior (Cont'd)**

### ***Stairways***

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

### ***Entrances (exterior)***

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

- Alternate accessible entrance for a revolving door
- Sign indicating accessible entrance
- Directional signage at inaccessible entrances designating the accessible entrance

## **Building Interior**

### ***Interior Doors and Corridors***

- Firm, non-slip surface (no loose or deep pile carpet, maximum pile thickness < 1/2")
- Doors have a minimum clear opening width of 32"
- An 18" clear maneuvering space at the pull side of the door
- Lever or loop-type handles, path to meeting room
- Door pressure 5 lbs. Maximum, or Automatic door

### ***Interior Doors and Corridors Continued:***

- Corridors have a clear width of 36"
- Wall-mounted objects protruding 4" or greater (located within 27" - 80" from the floor) have barriers detectable by individuals using a white cane. Wall mounted objects protruding less than 4" or higher than 80" from the floor, no detectable barrier required
- Adequate lighting in corridors, provide uniform illumination

### ***Ramps (interior)***

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

**Elevators**

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

**Building Interior (Cont'd)**

**Water Fountains (where provided)**

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

**Public Restrooms**

<b>Women</b>	<b>Men</b>	<b>(One restroom may be accessible while another is not, check both)</b>
<input type="checkbox"/>	<input type="checkbox"/>	On accessible route of travel from or to meeting room
<input type="checkbox"/>	<input type="checkbox"/>	At least one accessible stall in each restroom. Or unisex restroom available

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

**Meeting Rooms and Common Use Areas**

**Meeting Rooms – Room # / Name of room:** \_\_\_\_\_

(please complete for each meeting room to be used)

- Capacity
- High contrast signage with non-glare finish, Raised and Braille at 48"- 60", latch side of

door

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

#### ***Event Set-up***

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

#### ***Fixed Seating Only (auditorium)***

- For auditoriums, integrated wheelchair seating, a minimum of one, for 4-25 seats
- Number of wheelchair spaces required \_\_\_\_\_
- (See Appendix A Wheelchair Spaces Required in Assembly Areas)
- Minimum space 33" x 48" for rear or forward access, 33" x 60" for side access
- Unobstructed viewing position from wheelchair seating

#### ***Fixed Seating Continued***

- Aisles at least 36" having seating on one side of aisle, 42" with seating on both sides
- Integrated seating, people using wheelchairs can sit next others, accessible seating dispersed throughout auditorium.

#### ***Common Use Areas***

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

Problem Areas:

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Audible alarm system

Visible alarm system

Maintenance/remodeling at time of meeting

# DCA Meeting Checklist

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

***What kind of meetings are initiated, convened and/or sponsored (with the exception of grants) by your program?***

***Please choose all that apply***

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

- Notice provided to websites that are utilized by people with disabilities
- Notice published in meeting announcements, brochures, press releases or other publications
- Notice provided to organizations and agencies of and for individuals with disabilities
- On our website
- Posted in our office location(s)
- We don't notify the general public about accommodations
- I don't know
- Other notice format(s) (please specify) or any additional comments:

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**U.S. Department of Housing and Urban  
Development**

451 Seventh Street, SW  
Washington, DC 20410  
www.hud.gov  
espanol.hud.gov

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

**Project Information**

**Project Name:**

**Responsible Entity:**

**Grant Recipient** (if different than Responsible Entity):

**State/Local Identifier:**

**Preparer:**

**Certifying Officer Name and Title:**

**Consultant** (if applicable):

**Project Location:**

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

**Level of Environmental Review Determination:**

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

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

**Funding Information**

Grant Number	HUD Program	Funding Amount

**Estimated Total HUD Funded Amount:**

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

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

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

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

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

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

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

Law, Authority, or Factor	Mitigation Measure

Preparer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Title/Organization: \_\_\_\_\_

Responsible Entity Agency Official Signature:

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

Name/Title: \_\_\_\_\_

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



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## **Environmental Review for Activity/Project that is Categorically Excluded Subject to Section 58.5**

**Pursuant to 24 CFR 58.35(a)**

### **Project Information**

**Project Name:**

**Responsible Entity:**

**Grant Recipient** (if different than Responsible Entity):

**State/Local Identifier:**

**Preparer:**

**Certifying Officer Name and Title:**

**Grant Recipient** (if different than Responsible Entity):

**Consultant** (if applicable):

**Direct Comments to:**

**Project Location:**

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

**Level of Environmental Review Determination:**

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

### **Funding Information**

Grant Number	HUD Program	Funding Amount

**Estimated Total HUD Funded Amount:**

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

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

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

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

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

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

**Field Inspection** (Date and completed by):

**Summary of Findings and Conclusions:**

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

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

Law, Authority, or Factor	Mitigation Measure

**Determination:**

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

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

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

Preparer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Title/Organization: \_\_\_\_\_

Responsible Entity Agency Official Signature:

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

Name/Title: \_\_\_\_\_

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



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

## **Project Information**

**Project Name:**

**Responsible Entity:**

**Grant Recipient** (if different than Responsible Entity):

**State/Local Identifier:**

**Preparer:**

**Certifying Officer Name and Title:**

**Grant Recipient** (if different than Responsible Entity):

**Consultant** (if applicable):

**Direct Comments to:**

**Project Location:**

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

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

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

**Funding Information**

<b>Grant Number</b>	<b>HUD Program</b>	<b>Funding Amount</b>

**Estimated Total HUD Funded Amount:**

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

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

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

<b>Compliance Factors:</b> Statutes, Executive Orders, and Regulations listed at 24	Are formal compliance steps or	Compliance determinations
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CFR §58.5 and §58.6	mitigation required?	
<b>STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 and 58.6</b>		
<b>Airport Hazards</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
24 CFR Part 51 Subpart D		
<b>Coastal Barrier Resources</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Coastal Barrier Resources Act, as amended by the Coastal Barrier Improvement Act of 1990 [16 USC 3501]		
<b>Flood Insurance</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Flood Disaster Protection Act of 1973 and National Flood Insurance Reform Act of 1994 [42 USC 4001-4128 and 42 USC 5154a]		
<b>STATUTES, EXECUTIVE ORDERS, AND REGULATIONS LISTED AT 24 CFR 50.4 &amp; 58.5</b>		
<b>Clean Air</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Clean Air Act, as amended, particularly section 176(c) & (d); 40 CFR Parts 6, 51, 93		
<b>Coastal Zone Management</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Coastal Zone Management Act, sections 307(c) & (d)		
<b>Contamination and Toxic Substances</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
24 CFR Part 50.3(i) & 58.5(i)(2)		
<b>Endangered Species</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
Endangered Species Act of 1973, particularly section 7; 50 CFR Part 402		
<b>Explosive and Flammable Hazards</b>	Yes No <input type="checkbox"/> <input type="checkbox"/>	
24 CFR Part 51 Subpart C		

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

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

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

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

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

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

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

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

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

**Additional Studies Performed:**

**Field Inspection** (Date and completed by):

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

**List of Permits Obtained:**

**Public Outreach** [24 CFR 50.23 & 58.43]:

**Cumulative Impact Analysis** [24 CFR 58.32]:

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

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

**Summary of Findings and Conclusions:**

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

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

Law, Authority, or Factor	Mitigation Measure

**Determination:**

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

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

Preparer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Title/Organization: \_\_\_\_\_

\_\_\_\_\_  
 Certifying Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Title: \_\_\_\_\_

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

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

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

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

*Date of Notice*

*Name of Responsible Entity [RE]*

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

*City, State, Zip Code*

*Telephone Number of RE*

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

#### REQUEST FOR RELEASE OF FUNDS

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

#### FINDING OF NO SIGNIFICANT IMPACT

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

## PUBLIC COMMENTS

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

## ENVIRONMENTAL CERTIFICATION

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

## OBJECTIONS TO RELEASE OF FUNDS

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

*Name and Title of RE Certifying Officer*

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

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

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

## Sample Notice of Intent to Request a Release of Funds

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

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### NOTICE OF INTENT TO REQUEST RELEASE OF FUNDS

*Date of Notice*

*Name of Responsible Entity [RE]*

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

*City, State, Zip Code*

*Telephone Number of RE*

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

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

### PUBLIC COMMENTS

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

## ENVIRONMENTAL CERTIFICATION

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

## OBJECTIONS TO RELEASE OF FUNDS

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

*Name and Title of RE Certifying Officer*

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

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

# Request for Release of Funds and Certification

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

OMB No. 2506-0087  
(exp. 03/31/2020)

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

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

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

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

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

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

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

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

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

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

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Signature of Certifying Officer of the Responsible Entity

Title of Certifying Officer

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Date signed

**X**

Address of Certifying Officer

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

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

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Signature of Authorized Officer of the Recipient

Title of Authorized Officer

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Date signed

**X**

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

## Tribal Consultation Letter Template – Part 58

[Letterhead of the Responsible Entity]

Date

[Name], [Title]  
[Name of Tribe]  
[Address]

Re: Name and address of project  
HUD Program

Dear [Title] [Last Name],

The [name of HUD grantee] is considering funding the project listed above with federal funds from the U.S. Department of Housing and Urban Development (HUD). Under HUD regulation 24 CFR 58.4, the [name of HUD grantee] has assumed HUD's environmental review responsibilities for the project, including tribal consultation related to historic properties. Historic properties include archeological sites, burial grounds, sacred landscapes or features, ceremonial areas, traditional cultural places and landscapes, plant and animal communities, and buildings and structures with significant tribal association.

[Name of HUD grantee] will conduct a review of this project to comply with Section 106 of the National Historic Preservation Act and its implementing regulations 36 CFR Part 800. We would like to invite you to be a consulting party in this review to help identify historic properties in the project area that may have religious and cultural significance to your tribe, and if such properties exist, to help assess how the project might affect them. If the project might have an adverse effect, we would like to discuss possible ways to avoid, minimize or mitigate potential adverse effects.

[Summarize and include known info from SHPO and other sources including non-confidential information from other tribes]

To meet project timeframes, if you would like to be a consulting party on this project, can you please let us know of your interest within 30 days? If you have any initial concerns with impacts of the project on religious or cultural properties, can you please note them in your response?

Enclosed is a map that shows the project area and, if applicable, an additional area of potential indirect effects. The project consists of [insert project description].

More information on the Section 106 review process is available at <http://www.onecpd.info/environmental-review/historic-preservation/>.

HUD's process for tribal consultation under Section 106 is described in a Notice available at <https://www.onecpd.info/resource/2448/notice-cpd-12-006-tribal-consultation-under-24-cfr-part-58>.

If you do not wish to consult on this project, can you please inform us? If you do wish to consult, can you please include in your reply the name and contact information for the tribe's principal representative in the consultation? Thank you very much. We value your assistance and look forward to consulting further if there are historic properties of religious and cultural significance to your tribe that may be affected by this project.

Sincerely,

Name  
Title  
Phone  
E-mail  
FAX

cc: [THPO]

schedule a substance in schedule I on a temporary basis. Such an order may not be issued before the expiration of 30 days from (1) the publication of a notice in the **Federal Register** of the intention to issue such order and the grounds upon which such order is to be issued, and (2) the date that notice of a proposed temporary scheduling order is transmitted to the Assistant Secretary of HHS. 21 U.S.C. 811(h)(1).

Inasmuch as section 201(h) of the CSA directs that temporary scheduling actions be issued by order and sets forth the procedures by which such orders are to be issued, the DEA believes that the notice and comment requirements of section 553 of the Administrative Procedure Act (APA), 5 U.S.C. 553, do not apply to this temporary scheduling action. In the alternative, even assuming that this action might be subject to section 553 of the APA, the Deputy Administrator finds that there is good cause to forgo the notice and comment requirements of section 553, as any further delays in the process for issuance of temporary scheduling orders would be impracticable and contrary to the public interest in view of the manifest urgency to avoid an imminent hazard to the public safety.

Further, the DEA believes that this temporary scheduling action final order is not a "rule" as defined by 5 U.S.C. 601(2), and, accordingly, is not subject to the requirements of the Regulatory Flexibility Act (RFA). The requirements for the preparation of an initial regulatory flexibility analysis in 5 U.S.C. 603(a) are not applicable where, as here, the DEA is not required by section 553 of the APA or any other law to publish a general notice of proposed rulemaking. Additionally, this action is not a significant regulatory action as defined by Executive Order 12866 (Regulatory Planning and Review), section 3(f), and, accordingly, this action has not been reviewed by the Office of Management and Budget (OMB).

This action will not have substantial direct effects on the States, on the relationship between the national government and the States, or on the distribution of power and responsibilities among the various levels of government. Therefore, in accordance with Executive Order 13132 (Federalism) it is determined that this action does not have sufficient federalism implications to warrant the preparation of a Federalism Assessment.

Pursuant to section 808(2) of the Congressional Review Act (CRA), "any rule for which an agency for good cause finds...that notice and public procedure thereon are impracticable, unnecessary,

or contrary to the public interest, shall take effect at such time as the Federal agency promulgating the rule determines." It is in the public interest to schedule these substances immediately because they pose a public health risk. This temporary scheduling action is taken pursuant to section 811(h), which is specifically designed to enable the DEA to act in an expeditious manner to avoid an imminent hazard to the public safety from new or designer drugs or abuse of those drugs. Section 811(h) exempts the temporary scheduling order from standard notice and comment rulemaking procedures to ensure that the process moves swiftly. For the same reasons that underlie section 811(h), that is, the DEA's need to move quickly to place these substances into schedule I because they pose a threat to public health, it would be contrary to the public interest to delay implementation of the temporary scheduling order. Therefore, in accordance with section 808(2) of the CRA, this order shall take effect immediately upon its publication.

**List of Subjects in 21 CFR Part 1308**

Administrative practice and procedure, Drug traffic control, Reporting and recordkeeping requirements.

Under the authority vested in the Attorney General by section 201(h) of the CSA, 21 U.S.C. 811(h), and delegated to the Deputy Administrator of the DEA by Department of Justice regulations, 28 CFR 0.100, Appendix to Subpart R, the Deputy Administrator hereby intends to order that 21 CFR part 1308 be amended as follows:

**PART 1308—SCHEDULES OF CONTROLLED SUBSTANCES**

- 1. The authority citation for part 1308 continues to read as follows:

**Authority:** 21 U.S.C. 811, 812, 871(b), unless otherwise noted.

- 2. Section 1308.11 is amended by adding paragraphs (h)(12), (13), and (14) to read as follows:

**§ 1308.11 Schedule I.**

\* \* \* \* \*

(h) \* \* \*

(12) 2-(4-iodo-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine, its optical, positional, and geometric isomers, salts and salts of isomers—7538 (Other names: 25I-NBOMe; 2C-I-NBOMe; 25I; Cimbi-5)

(13) 2-(4-chloro-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine, its optical, positional, and geometric isomers, salts and salts of isomers—7537 (Other

names: 25C-NBOMe; 2C-C-NBOMe; 25C; Cimbi-82)

(14) 2-(4-bromo-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine, its optical, positional, and geometric isomers, salts and salts of isomers—7536

(Other names: 25B-NBOMe; 2C-B-NBOMe; 25B; Cimbi-36)

Dated: November 7, 2013.

**Thomas M. Harrigan,**  
Deputy Administrator.

[FR Doc. 2013-27315 Filed 11-14-13; 8:45 am]

**BILLING CODE 4410-09-P**

**DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT**

**24 CFR Parts 50, 55, and 58**

[Docket No. FR-5423-F-02]

RIN 2501-AD51

**Floodplain Management and Protection of Wetlands**

**AGENCY:** Office of the Secretary, HUD.

**ACTION:** Final rule.

**SUMMARY:** This final rule revises HUD's regulations governing the protection of wetlands and floodplains. With respect to wetlands, the rule codifies existing procedures for Executive Order 11990 (E.O. 11990), Protection of Wetlands. HUD's policy has been to require the use of the 8-Step Process for floodplains for wetlands actions performed by HUD or actions performed with HUD financial assistance. This rule codifies this wetlands policy and improves consistency and increases transparency by placing the E.O. 11990 requirements in regulation. In certain instances, the new wetlands procedures will allow recipients of HUD assistance to use individual permits issued under section 404 of the Clean Water Act (Section 404 permits) in lieu of 5 steps of the E.O. 11990's 8-Step Process, streamlining the wetlands decisionmaking processes. With respect to floodplains, with some exceptions, the rule prohibits HUD funding (e.g., Community Development Block Grants, HOME Investment Partnerships Program, Choice Neighborhoods, and others) or Federal Housing Administration (FHA) mortgage insurance for construction in Coastal High Hazard Areas. In order to ensure maximum protection for communities and wise investment of Federal resources in the face of current and future risk, this final rule also requires the use of preliminary flood maps and advisory base flood elevations where the Federal Emergency

Management Agency (FEMA) has determined that existing Flood Insurance Rate Maps (FIRMs) may not be the “best available information” for floodplain management purposes. This change in map usage requirements brings HUD’s regulations into alignment with the requirement in Executive Order 11988 that agencies are to use the “best available information” and will provide greater consistency with floodplain management activities across HUD and FEMA programs. The rule also streamlines floodplain and wetland environmental procedures to avoid unnecessary processing delays. The procedures set forth in this rule would apply to HUD and to state, tribal, and local governments when they are responsible for environmental reviews under HUD programs.

**DATES:** Effective December 16, 2013.

**FOR FURTHER INFORMATION CONTACT:**

Danielle Schopp, Director, Office of Environment and Energy, Office of Community Planning and Development, Department of Housing and Urban Development, 451 7th Street SW., Room 7250, Washington, DC 20410–8000. For inquiry by phone or email, contact Jeremiah Sanders, Environmental Review Division, Office of Environment and Energy, Office of Community Planning and Development, at 202–402–4571 (this is not a toll-free number) or at [Jerimiah.J.Sanders@hud.gov](mailto:Jerimiah.J.Sanders@hud.gov). Persons with hearing or speech impairments may access this number through TTY by calling the Federal Relay Service at 800–877–8339 (this is a toll-free number).

**SUPPLEMENTARY INFORMATION:**

**I. Background**

*A. The December 12, 2011, Proposed Rule*

Federal departments and agencies (agencies) are charged by E.O. 11990, entitled Protection of Wetlands, dated May 24, 1977 (42 FR 26961) and Executive Order 11988 (E.O. 11988), entitled “Floodplain Management,” dated May 24, 1977 (42 FR 26951), with incorporating floodplain management goals and wetland protection considerations in their respective planning, regulatory, and decisionmaking processes. A floodplain refers to the lowland and relatively flat areas adjoining inland and coastal waters including flood-prone areas of offshore islands that, at a minimum, are subject to a one percent or greater chance of flooding in any given year (often referred to as the “100-year” flood). Wetlands refers to those areas that are inundated by surface or ground water with a frequency sufficient to support, and under normal

circumstances does or would support, a prevalence of vegetative or aquatic life that requires saturated or seasonally saturated soil conditions for growth and reproduction. Wetlands generally include swamps, marshes, bogs, and similar areas, such as sloughs, potholes, wet meadows, river overflows, mud flats, and natural ponds.

On December 12, 2011, HUD proposed revising its regulations governing floodplain management (76 FR 77162, as corrected by 76 FR 79145) to codify the procedures applicable to wetlands authorized by E.O. 11990. The procedures authorized by E.O. 11990, which focus on protection of wetlands, require the completion of an 8-step process referred to as the “8-Step Process” of evaluation, public notice, environmental review, and evaluation of alternatives. This review and evaluation process is similar to the process required for protection of floodplains under E.O. 11988, Floodplain Management, which is already codified in HUD regulations, (See 24 CFR 55.20).

The 8-Step Process is administered by HUD, state governments, units of general local government, or tribal governments. Step 1 requires a determination regarding whether or not the proposed project to be developed with HUD financial assistance will be in a wetland. If the project is in a wetland, Step 2 requires that public notice be issued to inform interested parties that a proposal to consider an action in a wetland has been made. Following this notice, Step 3 requires the identification and evaluation of practicable alternatives to avoid locating the project in a wetland. Step 4 requires the identification and evaluation of the potential direct and indirect impacts associated with the occupancy or modification of wetlands. Step 4 also requires the identification of the potential direct support of wetlands development, such as housing or public-service structures that require additional investment such as food service or parking, and indirect support of wetlands development that can be caused by infrastructure, such as water and waste water systems for the development that could induce further development due to proximity to the wetland. Step 5 requires an analysis of practicable modifications and changes to the proposal to minimize adverse impacts to the wetlands and to the project as a result of its proposed location in wetlands. Under Step 6, the practicable alternatives developed under Step 3 are evaluated. If there is no practicable alternative to the proposed wetland development, Step 7 requires a second notice to be issued to the public

stating that the decision has been made and providing details associated with the decision. After this second notice, Step 8 implements the action, including any mitigating measures established during the decisionmaking process. The December 12, 2011, rule also proposed requiring appropriate compensatory mitigation for adverse impacts to more than one acre of wetlands.

The December 12, 2011, rule also proposed streamlining the wetlands decisionmaking process by allowing HUD and HUD’s recipients of assistance to use permits issued under section 404 of the Clean Water Act (33 U.S.C. 1344) (Section 404) in lieu of performing the first 5 steps of the 8-Step Process. Section 404 of the Clean Water Act establishes a program to regulate the discharge of dredged or fill material into waters of the United States, including wetlands. Activities in waters of the United States regulated under this program include fill for development, water resource projects (such as dams and levees), infrastructure development (such as highways and airports) and mining projects. Section 404 requires a permit before dredged or fill material may be discharged into waters of the United States, unless the activity is exempt from Section 404 regulation (e.g., certain farming and forestry activities). In order to obtain a permit, an applicant must show that it has: (1) Taken steps to avoid wetland impacts, (2) minimized potential impacts on wetlands, and (3) provided compensation for any remaining unavoidable impacts.

The use of Section 404 permits was proposed to reduce costs and the processing time for complying with parts of the 8-Step Process. The proposed rule provided that if the applicant had obtained an individual Section 404 permit and submitted the permit with its application for a HUD program, then HUD or a responsible entity assuming HUD’s authority need complete only the last 3 steps of the 8-Step Process. The rule also proposed to streamline project approvals by expanding the use of the current “5-Step Process” for repairs, rehabilitations, and improvements to facilitate rehabilitation of certain residential and nonresidential properties.

Several other changes were proposed by the December 12, 2011, rule including a proposal to require the use of FEMA’s preliminary flood maps and advisory base flood elevations in post-disaster situations where the FEMA has determined that the official FIRMs may not be the most up-to-date information. In addition, the proposed rule suggested exempting certain activities, such as

leasing some already insured structures, allowing entities to adopt previous reviews performed by a responsible entity or HUD, and modifying a categorical exclusion from review under the National Environmental Policy Act of 1969 (NEPA). Further, the rule proposed prohibiting HUD funding or FHA mortgage insurance for the construction of new structures in Coastal High Hazard Areas. The rule also proposed to encourage nonstructural floodplain management, when possible, to encourage resiliency. When HUD or a recipient analyzes alternatives, the nonstructural alternative should be chosen if all other factors are considered to be equal. For a full discussion of the proposed rule, please see the December 12, 2011 **Federal Register** (76 FR 77162).

#### *B. Solicitation of Specific Comment on Requiring That Critical Actions Be Undertaken at the 500-Year Base Flood Elevation*

HUD's proposed rule also solicited specific comment regarding a potential change to § 55.20(e), Step 5 of the "Decisionmaking process" to require that all new construction of "critical actions" in the 100- or 500-year floodplain be elevated to the 500-year base flood elevation. While HUD received comments on this issue, which will be discussed later in this preamble, HUD has decided not to make any changes to address this issue at this time. HUD will continue to research the impact of allowing critical actions below the 500-year base flood elevation.

#### *C. This Final Rule*

This final rule follows publication of the December 12, 2011, proposed rule. HUD received four public comments, which are detailed in the section of this preamble labeled "Discussion of Public Comments received on the December 12, 2011 Proposed Rule," and is making several changes in response to public comment. In addition, HUD is making selected changes in the final rule to provide greater consistency between the regulatory text, the intent expressed in the proposed rule preamble language, paragraph 2(b) of E.O. 11990, and other codified HUD regulations. HUD is also revising § 55.20(a) to make it more consistent with the preamble of the proposed rule and the requirements of E.O. 11990. Section 55.28 is also revised to make it more consistent with the preamble of the proposed rule and section 404 of the Clean Water Act.

A summary of key changes in the final rule from the proposed rule follow.

#### *Changes made in response to public comments.*

- Clarification of § 55.1(c)(3), which describes the exceptions to the prohibition on HUD financial assistance for noncritical actions in high hazard areas, to allow "infrastructure" improvements and reconstruction following destruction caused by a disaster in Coastal High Hazard Areas. This change is intended to reduce confusion. It also narrows the proposed prohibition and makes HUD's policies for grantees more consistent with FEMA policies. Section 55.11(c) is also revised to make the table in this section consistent with § 55.1(c)(3).

- Revision of the definition of Coastal High Hazard Areas in § 55.2(b)(1) to allow FEMA flood insurance studies to be used in addition to flood insurance maps in making the determinations of the boundaries of the Coastal High Hazard Areas, 100- and 500-year floodplains, and floodways. HUD is also clarifying that when available, the latest interim FEMA information, such as advisory base flood elevations or preliminary maps or studies, shall be used as the source of these designations.

- Modification of the definition of wetlands in § 55.2(b)(11) to cover manmade wetlands in order to ensure that wetlands built for mitigation would be preserved as natural wetlands would be preserved.

- Revision of the scope of assistance eligible for the 5-Step Process in § 55.12(a)(3) by providing that certain types of projects not be categorized as substantial improvements as defined by § 55.2(b)(10). Projects that are "substantial improvements" remain subject to the 8-Step Process, while projects that fall below that rehabilitation threshold are eligible for the 5-Step Process for the residential and nonresidential rehabilitations at § 55.12(a)(3) and (4). This will allow less costly housing units and those housing units damaged by events to receive expedited processing, while more costly and more severely damaged units will continue to be subject to the full 8-Step Process.

#### *Changes made to more closely align the regulatory text with the statutory language and the Executive Order.*

- Revision of § 55.12(c) to remove the exclusion from part 55 for HUD's implementation of the full disclosure and other registration requirements of the Interstate Land Sales Disclosure Act (15 U.S.C. 1701–1720) (ILSDA). Section 1061(b)(7) of the Dodd-Frank Wall Street Reform and Consumer Protection Act, 12 U.S.C. 5581(b)(7), transferred all of HUD's consumer protection functions under ILSDA to the Bureau of Consumer Financial Protection.

- Clarification of § 55.20(a), which describes Step 1 in the decisionmaking process. The change removes redundant language and clarifies that actions that result in new construction in a wetland are covered actions. The revised regulatory text is more consistent with E.O. 11990 and current policy to protect wetlands impacted by off-site actions. For example, it would now cover such situations as damming a stream, which could result in diking or impounding of wetlands offsite. This change will allow wetlands to be considered consistent with the hydrology of the land as opposed to the property boundaries that often do not reflect hydrological conditions. An estimated 275 8-Step Processes for wetlands and floodplains will be performed on HUD-assisted projects each year.

- Clarification of § 55.28(a)(2) to permit recipients of HUD assistance to use permits issued by state and tribal governments under section 404(h) of the Clean Water Act in lieu of 5 steps of the Executive Order's 8-Step Process. State agencies and tribes were specifically mentioned in the proposed rule preamble, and the terms are now included in the regulatory text to provide effective notice to affected parties that these entities are covered. Michigan and New Jersey currently exercise the authority under section 404(h) of the Clean Water Act to issue Section 404 permits.

## **II. Discussion of Public Comments Received on the December 12, 2011, Proposed Rule**

By the close of the public comment period on February 10, 2012, HUD received four public comments on the proposed rule. Comments were submitted by two individuals; a national, nonprofit organization representing state floodplain managers; and the Floodplain Management Branch of FEMA. The comments generally expressed support for the proposed rule, but several raised questions about the rule or offered suggestions for additional amendments. After careful consideration of the issues raised by the commenters, HUD has decided to adopt the regulatory amendments as proposed, with some minor changes as already discussed.

The following section of this preamble summarizes the significant issues raised by the commenters on the December 12, 2011, proposed rule and HUD's responses to these comments. To ease review of the comments, the comments and responses are presented in the sequence of the sections presented for proposed amendment in the proposed rule.

*Comment: Prohibit HUD funding or FHA multifamily mortgage insurance for construction of new structures in Coastal High Hazard Areas.* One commenter supported the prohibition on construction in Coastal High Hazard Areas (V Zones, one of the FEMA-defined Special Flood Hazard Areas in the 100-year Floodplain) that was contained in the proposed rule. The commenter stated that HUD may, under existing regulations, fund construction activities in the Coastal High Hazard Area as long as the structures meet FEMA regulations establishing acceptable construction standards. The commenter referenced HUD's current policy in relationship to current FEMA regulations in 44 CFR 60.3(e), "Floodplain management criteria for flood-prone areas" and stated that these minimal construction standards would still result in significant residual risk and an increased flood risk, particularly given the current sea level rise projections. Accordingly, the commenter supported HUD's proposal to completely eliminate HUD funding for construction in these areas.

Another commenter addressing this issue stated that the regulatory text of proposed § 55.1(c)(3), which lists some regulatory exceptions to the general prohibition on HUD assistance, was not clear as to the meaning of "an improvement of an existing structure" and "reconstruction." The commenter also stated that it was unclear as to whether some definitions would be retained. In addition, the commenter suggested minimization for V Zones and floodways, which are defined in § 55.2(b)(4).

*HUD Response.* HUD appreciates these comments. In response, HUD has decided to clarify § 55.1(c)(3), which would prohibit the use of HUD financial assistance with respect to most noncritical actions in Coastal High Hazard Areas, by removing reference to improvements to existing "structures" and "structures" destroyed by disasters. HUD is making this clarification since HUD's proposed rule prohibited new construction of structures, a term that is defined by FEMA regulations at 44 CFR 9.4 to mean walled or roofed buildings, including mobile homes and gas or liquid storage tanks. HUD believes that referencing the term "structures" could be misinterpreted as limiting improvements of projects that are not structures under the FEMA regulations, such as roads and utility lines. Such an interpretation does not accurately describe current HUD regulations and policies or accurately portray the intent of the proposed rule changes. Namely, HUD has been interpreting currently

codified § 55.1(c)(3) to allow infrastructure reconstruction in V Zones. HUD has changed the language to "existing construction (including improvements)" to better describe the eligible activities and in order to make the provision more consistent with § 55.1(c)(3)(ii), which uses the term "existing construction." Under the same rationale, HUD has changed the § 55.1(c)(3) language from "reconstruction of a structure destroyed by a disaster" to "reconstruction following destruction caused by a disaster." HUD made the change to follow the intent of the proposed rule, which was not to limit reconstruction to structures alone. Additionally, these changes are consistent with the intent of the preamble to the December 12, 2011, proposed rule, which expresses HUD's goal of aligning HUD's development standards with those of FEMA grant programs.

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

*Comment: The "Coastal High Hazard Area" definition is confusing and seems to address multiple topics.* A commenter stated that too many references were made within the "Coastal High Hazard Area" definition at § 55.2(b)(1). The commenter also stated that the "Coastal High Hazard Area" definition is not consistent with that of the National Flood Insurance Program (NFIP). In addition, the commenter expressed concern as to whether other terms from the codified regulations not mentioned in the proposed rule would be retained.

*HUD Response.* HUD has decided to retain the current definition of "Coastal High Hazard Area" in order to maintain consistency with HUD's preexisting codified environmental regulations. This definition is also consistent with FEMA's "Coastal High Hazard Area" definition at 44 CFR 9.4, which is used for FEMA grant programs. Terms are retained as indicated in the proposed rule.

*Comment: Require the use of preliminary flood maps, Flood Insurance Studies, and Advisory Base Flood Elevations where they may be deemed best available data.* A commenter stated that HUD's requirement to use updated and preliminary data where existing official published data, such as FIRMs, is not the "best available information" is a useful course of action. The commenter also stated that past experience has shown that flood events frequently highlight the inadequacy of older flood

maps and studies. A commenter also recommended the use of Flood Insurance Studies (FIS).

*HUD Response.* HUD agrees with this comment and will, in the interest of public safety, require the use of the latest interim FEMA information. HUD has also added a reference to FIS at § 55.2(b)(1). In addition, HUD clarifies that, when available, the latest interim FEMA information, such as an Advisory Base Flood Elevation or preliminary map or study, is the best available information for the designation of flood hazard areas or equivalents. If FEMA information is unavailable or insufficiently detailed, other Federal, state, or local data may be used as "best available information" in accordance with E.O. 11988.

*Comment: Mitigation banking should not be used in an urban area and this term should be restricted to areas of open space and significant environmental areas.* Mitigation banking means the restoration, creation, enhancement, and, in exceptional circumstances, preservation of wetlands and/or other aquatic resources expressly for the purpose of providing compensatory mitigation in advance of authorized impacts to similar resources. A commenter stated that mitigation banking could be a "check the box" analysis.

*HUD Response.* HUD declines to adopt the commenter's recommendation, although HUD agrees that mitigation banking, or compensatory mitigation as defined in the rule, is not appropriate for all sites. Due to the various different state and local mitigation programs around the United States, HUD supports the flexibility to allow state and local governments to determine what is best for projects. For this reason, the definition of compensatory mitigation at § 55.2(b)(2) will remain broad as presented in the proposed rule.

*Comment: The proposed definition of wetlands does not include manmade wetlands.* The commenter stated that the Environmental Protection Agency (EPA) and United States Army Corps of Engineers (USACE) programs often create wetlands, and these wetlands are not covered by the definition.

*HUD Response.* HUD has clarified the definition based on the commenter's recommendation. The definition in the proposed rule is the definition that is stated in E.O. 11990. HUD has added a sentence to the regulatory text of § 55.2(b)(11) to ensure that the definition covers manmade wetlands under compensatory programs. The definition of wetlands at § 55.2(b)(11)

now includes “constructed wetlands” in the final regulatory text.

*Comment: The Department of Fish and Wildlife should be involved in wetlands protection.* One commenter stated that consultation with, or permit approvals from, the “Department of Fish and Wildlife” should be involved with wetlands protection.

*HUD Response.* HUD has decided not to revise the proposed rule language. HUD encourages its employees and recipients of financial assistance from HUD to consult with the United States Fish and Wildlife Service (USFWS). If the HUD employee or responsible entity wants to challenge the USFWS National Wetlands Inventory (NWI) maps, they must consult with the USFWS, under § 55.2(b)(11)(ii-iv). In addition, all federal requirements (including Section 404 permits) and state and local laws apply to HUD assistance.

*Comment: HUD should include all available sources in wetlands evaluations.* One commenter stated that all sources should be used in the wetlands evaluation and not just federal sources.

*HUD Response.* HUD declines to adopt the commenter’s recommendation. The final rule encourages the use of other sources in the wetlands evaluation after using the NWI maps as primary screening. HUD does not require, but recommends, other sources as well as the NWI maps. At § 55.2(b)(11)(iii), the regulatory text states: “As secondary screening used in conjunction with NWI maps, HUD or the responsible entity is encouraged to use the Department of Agriculture, Natural Resources Conservation Service (NRCS) National Soil Survey (NSS) and any state and local information concerning the location, boundaries, scale, and classification of wetlands within the action area.”

*Comment: Opposition to HUD’s broadening the use of the 5-Step Process for repairs, rehabilitations, and improvements.* One commenter opposed HUD’s proposal to broaden use of the 5-Step Process which eliminates the consideration of alternatives at Step 3, and the two notices at Step 2 and Step 7. The commenter stated that applications of the 5-Step Process as provided in the proposed rule would increase the possible risk to federal investments in these floodplain areas. The commenter also stated opposition to placing some critical actions under the 5-Step Process; for example, making hospitals and nursing homes, which are critical facilities that must be operable and accessible during flood events, eligible for the 5-Step Process. A commenter also questioned what was

meant by the terminology not “significantly increasing the footprint or paved areas.”

*HUD Response.* HUD declines to accept all of these recommendations, but has made some changes. HUD has found that the 5-Step Process has worked well for repairs, rehabilitations, and improvements under HUD mortgage insurance programs, and that using the full 8-Step Process for these activities has not resulted in significant differences in comments or project outcomes.

HUD has revised the proposed expansion of types of assistance subject to the 5-Step Process by requiring in paragraph (a)(3) and (a)(4) of § 55.12 that a project be below a threshold of a “substantial improvement” to be eligible for the 5-Step Process for residential and nonresidential rehabilitations.

“Substantial improvement” is generally defined as any repair, reconstruction, modernization, or improvement of a structure, the cost of which equals or exceeds 50 percent of the market value of the structure either: (1) before the improvement is started; or (2) if the structure has been damaged and is being restored, before the damage occurred. Setting the substantial improvement criteria as a threshold will allow less costly repairs and less damaged housing units to be subject to expedited processing, while more costly repairs and more severely damaged units will continue to be subject to the full 8-Step Process.

In general, HUD has not received public comments during its administration of the 8-Step notice and comment process for the vast majority of HUD or HUD-assisted projects that have not risen to the level of substantial improvements. However, the public remains welcome to inspect the full environmental review record developed on floodplain impacts, or any other aspect of environmental reviews.

HUD considers an increase in the footprint up to 10 percent not to be significant. This is consistent with the policy regarding reconstruction in V Zones under § 55.1(c)(3).

*Comment: Exemption of certain activities from the 8-Step Process for floodplain management compliance.* One commenter opposed the proposed exemptions for leasing structures (except those that are in floodways or Coastal High Hazard Areas, and critical actions in either the 100-year or 500-year floodplains), special projects to increase access for those with special needs, and activities involving ships or waterborne vessels. However, the commenter supported the exemption for

activities that preserve or enhance natural and beneficial functions of floodplains.

*HUD Response.* HUD declines to adopt the commenter’s recommendation to delete the exemptions proposed in the proposed rule, but appreciates the commenter’s statement supporting the proposed exemption of activities that preserve or restore beneficial functions.

HUD has found that the 8-Step Process has not been beneficial for projects that only allow access for those with special needs or involving ships and waterborne vessels due to the activities’ lack of impacts or alternatives. HUD supports greater participation in the National Flood Insurance Program. The exception for leasing requires the purchase of flood insurance for the structure. HUD also believes that the economic costs of the premiums and the financial protection of the property through insurance are adequate mitigation where the building is not owned by HUD or the recipient of financial assistance.

*Comment: Environmental justice is an unresolved issue.* One commenter questioned how environmental justice was addressed by HUD.

*HUD Response.* HUD is charged with addressing environmental justice under Executive Order 12898, Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations (dated February 11, 1994 (59 FR 7629)). Executive Order 12898 requires Federal agencies to ensure that consideration is given to disproportionately high and adverse health and environmental effects on minority and low-income populations. This analysis is done on a site-by-site basis by determining the concentration of minority and low-income populations and then analyzing environmental and health risks in the area. Environmental justice is an integral part of HUD’s mission. HUD works with multiple stakeholders and other Federal agencies in its efforts to assure environmental justice concerns are addressed and are part of the environmental review for HUD-assisted projects. HUD recently published a final strategy on environmental justice. (See Department of Housing and Urban Development Summary of Public Comments, Response to Public Comments, and Final 2012–2015 Environmental Justice Strategy, dated April 16, 2012 (77 FR 22599)). For a copy of that notice see the following Web site: [http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/sustainable\\_housing\\_communities](http://portal.hud.gov/hudportal/HUD?src=/program_offices/sustainable_housing_communities). HUD requires consideration of environmental justice as part of the floodplain management

process at § 55.20(c)(2)(ii). Additional background information on environmental justice and links can be found at the following Web site: [http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/comm\\_planning/environment/review/justice](http://portal.hud.gov/hudportal/HUD?src=/program_offices/comm_planning/environment/review/justice).

*Comment: HUD should include birds, fish, and wildlife in the floodplain evaluation.* A commenter suggested that HUD include language specifying that effects on birds, fish, and wildlife be included in the final rule.

*HUD Response.* HUD believes that the proposed rule already included this language. The rule includes an evaluation of “Living resources such as flora and fauna” at § 55.20(d)(1)(ii). Fauna is typically interpreted to include all birds, fish, and wildlife of an area.

*Comment: Infiltration and stormwater capture and reuse should have standards as they can be subject to contamination or disease.* The commenter stated that oil and gas contamination as well as avian disease should be addressed and suggested that HUD impose standards.

*HUD Response.* HUD declines to adopt the commenter’s recommendation. HUD relies on other Federal, state, and local agencies to regulate water quality issues. Typically, stormwater capture and reuse involves a cistern to store the water pending reuse. This storage isolates the water from groundwater. In addition, this water is normally not used for human consumption. Instead, the water is most often used for toilets or landscaping. For these reasons, stormwater standards are beyond the scope of this rule and are unnecessary.

Infiltration, as used in this rule, relates only to flooding and is not meant to address industrial or other contamination issues. Any contamination issues should be addressed during the environmental review regulated under the processes established by § 50.3(i) or § 58.5(i)(2). If contamination issues cannot be sufficiently remediated, the project and HUD financial assistance should be cancelled, and these techniques should not be used under § 55.20(c)(1).

*Comment: The evacuation plans and routes established by HUD are not feasible or enforceable.* The commenter stated that the plans and routes were not feasible or enforceable, and that the responsible party for the evacuation plans and routes for critical actions was not clearly identified.

*HUD Response.* HUD declines to adopt any changes to the regulations as these issues are already addressed. Depending on the program, either HUD employees or state or local authorities

are responsible for approving these routes and plans. All routes and plans are included in the environmental record and subject to public review and monitoring by HUD staff. Further, the current language has been in the regulation for at least 18 years and has produced a number of evacuation plans for subject properties. HUD will continue to monitor its own employees and state and local authorities and to provide guidance regarding evacuation plans and routes. HUD also encourages its employees’ involvement with local emergency response staff to attain higher levels of preparedness and safety.

*Comment: Allow HUD or a responsible entity to adopt previous review processes that were performed by another responsible entity or HUD.* One commenter supported the provision in the proposed rule that allows reviews performed by HUD or a responsible entity under E.O. 11988 and E.O. 11990 to be adopted by HUD or a different responsible entity for the same project.

*HUD Response.* HUD agrees with the commenter and believes this provision will eliminate duplication and speed processing for projects receiving assistance from multiple programs.

*Comment: Use permits issued under section 404 of the Clean Water Act for E.O. 11990, Protection of Wetlands, purposes.* A commenter supported explicitly allowing HUD and HUD’s recipients of assistance to use permits issued by state and tribal governments under section 404 of the Clean Water Act (33 U.S.C. 1344) (Section 404) in lieu of performing the first 5 steps of the 8-Step Process.

*HUD Response.* HUD agrees with this comment and this provision remains in the final rule. HUD has changed the text of the rule to explicitly allow Section 404 permits issued by state and tribal governments under programs approved by EPA. HUD also discussed this policy in the preamble of the proposed rule, and accordingly, inclusion of specific language on state and tribal governments in the final rule language is consistent with the preamble of the proposed rule.

*Comment: HUD should allow USACE nationwide permits issued under the authority provided by Section 404 to be used in lieu of 5 steps.* One commenter requested that nationwide permits under Section 404 be allowed to be used in place of 5 of the steps of the 8-Step Process.<sup>1</sup> The commenter also requested

that these permits be allowed to substitute for 5 steps in the 8-Step Process for floodplains.

*HUD Response.* HUD cannot adopt the commenter’s recommendation as it is inconsistent with the requirements of E.O. 11988 to provide two notices to the public, it focuses on wetlands as opposed to floodplains, and it would not result in adequate permitting. Further, while HUD agrees that many wetlands are in 100-year floodplains, HUD is also aware of many wetlands that are not in floodplains. HUD does not believe that wetlands outside of the 100-year floodplain are rare on a nationwide basis and believes that the Department must provide for these situations in the rule.

HUD, therefore, cannot allow the abbreviated 3-Step Process to substitute for the 8-Step Process in floodplains, because E.O. 11988 requires two notices at sec. 2(a)(2) and (4) instead of just one notice as required by E.O. 11990. As a result, the single notice under the 3-Step Process would be insufficient for E.O. 11988 purposes. In addition, the USACE Section 404 permitting process does not provide notice or analysis regarding floodplain impacts, so the permitting process would not adequately address the 5 steps, for which HUD is allowing the permit, to substitute for the purposes of floodplains and E.O. 11988.

HUD has also chosen not to allow nationwide permits at this time because the permits are not as site-specific in nature as individual permits. While HUD supports the use of nationwide permits, it has chosen not to allow these permits to substitute for 5 steps of the process. HUD believes that the more intense review under individual permits is a better starting point to begin this process. If HUD and grantees encounter the anticipated high degree of success with the streamlined process provided by this rule using individual permits, HUD will consider expanding this streamlined process to nationwide permits. Additionally, any mitigation under the nationwide permit could be used as part of HUD’s 8-Step Process for E.O. 11990 compliance.

*Comment: HUD should allow applicants to forego 5 steps of the 8-Step Process for wetlands before a Section 404 permit is secured.* One commenter stated that it is an unreasonable hardship on the applicant to require the acquisition of a wetlands permit prior to

adverse effects on the aquatic environment. The NWP’s authorize a variety of activities, such as aids to navigation, utility lines, bank stabilization activities, road crossings, stream and wetland restoration activities, residential developments, mining activities, commercial shellfish aquaculture activities, and agricultural activities.

<sup>1</sup> USACE issues nationwide permits (NWP’s) to authorize certain activities that require Department of the Army permits under Section 404 of the Clean Water Act and/or Section 10 of the Rivers and Harbors Act of 1899. The NWP’s authorize activities that have minimal individual and cumulative

entering the abbreviated 3-Step wetlands process.

*HUD Response.* The 3-Step Process is only applicable when a permit has been granted. If the permit has not yet been granted, the public would not have access to supporting documentation that was necessary for the permit. This information is necessary for HUD to adequately perform the 8-Step Process and for HUD to provide adequate notice to the public as required by E.O. 11990 at sec. 2(b) and NEPA. For these reasons, HUD will require the full 8-Step Process unless a Section 404 permit has been issued prior to the environmental review.

*Comment: HUD should not modify the Categorical Exclusion (CatEx) from environmental review under NEPA for minor rehabilitation of one- to four-unit residential properties by removing the qualification that the footprint of the structure may not be increased in a floodplain or wetland.* Two commenters objected to the proposed removal of the footprint qualification for the categorical exclusion for minor rehabilitation of one- to four-unit residential properties. One commenter recognized that this may seem like a trivial matter, but the expansion can increase risk to the property or adjacent properties and may increase the base flood elevation level.

*HUD Response.* HUD declines to adopt the commenters' recommendations, and will retain the proposed language to remove the footprint qualification in the final rule. HUD assistance for minor rehabilitations in a floodplain or wetland will remain subject to E.O. 11988 and E.O. 11990 8-Step-process review, unless 24 CFR 55.12(b)(2) or another exception applies. However, a full environmental assessment will no longer be required unless extraordinary circumstances indicate the potential of significant environmental impact. HUD has found that a full environmental assessment has not been productive in the past. Further, this change will subject rehabilitations of one- to four-unit properties to the same review level as new construction of one- to four-unit buildings, which are currently categorically excluded at 24 CFR 58.35(a)(4), instead of requiring a greater level of review.

### III. Comment on Solicitation of Views on Requirement That Critical Actions Be Undertaken at the 500-Year Base Flood Elevation

*Comment: HUD should require that critical actions be elevated to the 500-year floodplain level.* The commenter supported HUD's potential change submitted for public comment requiring

that all new construction of "critical actions" in the 100- or 500-year floodplain level be elevated to the 500-year base flood elevation. The commenter supported making this change because those actions, such as funding a community wastewater facility, can be among the most significant investments a community will make. Further, such type of facility must be operable during and after a flood event. The commenter also supported, as HUD requested comment on, consistency with the Water Resources Council guidance on critical actions.

*HUD Response.* HUD appreciates the commenter's support. HUD has decided, however, not to make any changes to address moving "critical actions" at this time. HUD intends to gather more data to analyze factors such as, perhaps, costs and benefits, safety, and project viability. HUD will continue to research the impact of allowing critical actions below the 500-year base flood elevation, and, if adequate data is available, propose changes to HUD regulations at § 55.20(e).

### IV. Findings and Certifications

#### Regulatory Review—Executive Orders 12866 and 13563

Under Executive Order 12866 (E.O. 12866) (Regulatory Planning and Review), a determination must be made whether a regulatory action is significant and, therefore, subject to review by the Office of Management and Budget (OMB) in accordance with the requirements of the order.

Executive Order 13563 (E.O. 13563) (Improving Regulations and Regulatory Review) directs executive agencies to analyze regulations that are "outmoded, ineffective, insufficient, or excessively burdensome, and to modify, streamline, expand, or repeal them in accordance with what has been learned." E.O. 13563 also directs that, where relevant, feasible, and consistent with regulatory objectives, and to the extent permitted by law, agencies are to identify and consider regulatory approaches that reduce burdens and maintain flexibility and freedom of choice for the public. This rule was determined to be a "significant regulatory action" as defined in section 3(f) of E.O. 12866 (although not an economically significant regulatory action, as provided under section 3(f)(1) of the Executive Order).

As discussed in this preamble, this rule revises HUD's regulations for the protection of wetlands and floodplains to incorporate existing procedures for E.O. 11990 Protection of Wetlands and,

in certain instances, to allow recipients of HUD assistance to use permits issued under section 404 of the Clean Water Act in lieu of 5 steps of E.O. 11990's 8-Step Process. With respect to floodplains, with some exceptions, the rule prohibits HUD funds or mortgage insurance for the construction of new structures in Coastal High Hazard Areas. The rule thus streamlines processes and codifies procedures that are currently addressed in guidance.

### Regulatory Impact Analysis

The Office of Management and Budget (OMB) reviewed this regulation under E.O. 12866 (entitled "Regulatory Planning and Review"). The regulation has been determined to be a "significant regulatory action," as defined in section 3(f) of E.O. 12866, but not economically significant, as provided in section 3(f)(1) of the Executive Order.

The majority of the regulatory changes made by this rule will have minor economic effects. The primary purpose of this rule is to streamline the existing procedures pertaining to floodplain management and protection of wetlands. However, two changes proposed by HUD are anticipated to have some economic effect. These two changes are: (1) HUD's streamlining the approval process for rehabilitations, repairs, and improvements of HUD-funded properties in floodplains and wetlands; and (2) HUD's prohibiting new construction that would either be funded by HUD or have mortgages insured by FHA in Coastal High Hazard Areas. The streamlined process for rehabilitations will lower costs for projects, which could induce more improvement activities. The prohibition of new construction in Coastal High Hazard Areas could affect the siting of properties, but these projects are rarely proposed or approved even in the absence of a prohibition.

#### Streamlined Procedures for Minor Repairs and Improvements of Properties in Floodplains

HUD or responsible entities reviewing proposals for rehabilitations, repairs, and improvements to multifamily properties located in floodplains are required to follow the 8-Step Process to minimize the impact to floodplains. This rule abbreviates the process for these proposals because the process no longer requires public notices or the consideration of alternatives for floodplain Executive order compliance. The benefits of this change arise from the reduced compliance costs associated with the eliminated steps. Total labor compliance costs for the entire 8-Step Process have been estimated at \$320 per

project. A more detailed step-by-step cost estimate is not available.

Without precise estimate concerning the costs of the specific steps eliminated, HUD ran Monte Carlo simulations to estimate the percentage reduction in costs. Any one step is assumed to have a cost of either 0 and 1 units of effort. Fixed costs are assumed to equal the number of steps less variable costs so that all of the randomized cost functions result in the same total cost. Expected variable costs are equal to 4 units  $\frac{1}{2} \times 8$ ). Eliminating 3 steps could result in a reduction of between 0 and 3 units of effort. Of the eight possible combinations, a reduction of 1.5 is the average. Thus, the average reduction in total costs would be 18.75 percent, which we observe in simulations. The median and mode of our distribution is often lower, however, and equal to 12.5 percent. For this reason we use a range of between 10 and 15 percent as a measure of central tendency.

If eliminating the 3 steps saves 10 to 15 percent of the total labor cost of compliance, then each rehabilitation project would save between \$32 and \$48. Costs to publish the notices would be added to this amount for the overall cost of compliance. The precise number of proposed rehabilitation, repair, and improvement projects is not available, although the overall number is estimated through a survey of HUD field staff to be less than 100 annually. Although the reduced compliance costs could, on the margin, induce an increase in the requests for funding, that increase is unlikely considering that the cost of these projects generally range from thousands to millions of dollars. For this analysis, HUD estimates an annual total of 100 projects, including the induced projects. One hundred such projects would produce benefits ranging from \$3,200 and \$4,800 plus minimal costs of publication. Since these assessments rarely lead to a different outcome for rehabilitation, repair, and improvement projects, the lost benefits (additional public notice) of not conducting a full floodplain assessment—the cost of this provision—are negligible. These publication steps are typically not costly beyond the publication costs due to HUD providing notice templates to HUD staff and recipients.

#### *Prohibition on New Construction in Coastal High Hazard Areas*

Prohibiting new construction in Coastal High Hazard Areas would force developers to locate HUD-funded or FHA-insured properties out of hazard areas subject to high velocity waters.

This prohibition would not affect developments that are destroyed by floods and that need to be rebuilt. Existing property owners interested in developing in Coastal High Hazard Areas would either incur transaction costs from selling the existing property and purchasing an alternative site, or obtain a more expensive source of funding/assistance. HUD would prefer to mitigate existing units from storm damage rather than increase the number of units in these areas. In addition, increasing the footprint of structures in Coastal High Hazard Areas can prevent open spaces from absorbing the storm surge and increase debris that will be carried inland causing additional damage to preexisting structures.

Based on HUD's records, it is extremely rare for HUD to fund, or provide mortgage insurance for, a new construction proposal in these coastal areas. HUD found only one project that had been completed in a Coastal High Hazard Area, and one additional project was recently under review but never built. These projects were approximately 6 years apart.

The benefits are not expected to be significant because only very few properties appear to be affected (2 over 6 years). Calculating the benefits (as measured by the reduction in expected damage) would require an extensive analysis of weather data. Additionally, the use of sea walls and dunes has effectively removed areas from V Zones<sup>2</sup> in many areas by protecting structures from storm surge. This type of approach would eliminate some risk and lower flood insurance costs while allowing the land to be developed with HUD funds. However, it would be difficult to estimate the number of seawalls and dunes, if any, that would be built due to this rule change. HUD believes that this provision will not have a significant impact. For developers preferring to build in V Zones, this rule would require them to acquire an alternate source of funding or mortgage insurance or relocate to a potentially less preferable location.

#### *Preference for Nonstructural Alternatives*

When HUD or recipients analyze alternatives, the nonstructural alternative should be chosen if all other factors are considered to be equal. This complies with E.O. 11988's purpose of avoiding floodplain development. This provision is intended to focus on resiliency in the 8-Step Process.

<sup>2</sup> Coastal areas with a 1 percent or greater chance of flooding and an additional hazard associated with storm waves.

The provision is advisory and is not a binding requirement. If a decisionmaker were to avoid floodplain development, the cost savings associated with not purchasing flood insurance, floodproofing or elevating, or creating and maintaining a levee would result in cost savings. In addition, threats to safety and investment would also decrease as the hazard area is avoided. This provision helps HUD accomplish its mission of supplying safe, decent, and affordable housing.

#### *Use of Individual Permits Under Section 404 of the Clean Water Act for HUD Executive Order 11990 Processing Where All Wetlands Are Covered by the Permit*

This final rule permits recipients of HUD assistance to use permits issued by state and tribal governments under section 404 of the Clean Water Act in lieu of 5 steps of the E.O. 11990 8-Step Process. Specifically, the rule permits applicants that have obtained an individual Section 404 permit to submit it with his or her application for a HUD program. By doing so, HUD or the responsible entity assuming HUD's authority would only need to complete the last 3 steps of the 8-Step Process. HUD expects that this provision would apply to fewer than five projects a year since recipients generally complete an environmental review prior to obtaining a Section 404 permit or general or nationwide permit. As a result, HUD has determined that the costs and benefits of eliminating these steps, specifically the reduced delay of one notice and cost of documenting other steps, would be minimal.

Accordingly, this regulation is expected to create an annual economic impact ranging from \$3,200 to \$4,800, which are avoided costs resulting from a streamlined approval process for rehabilitations of properties located in floodplains. Thus, the implementation of this rule will not create an impact exceeding the \$100 million threshold established by E.O. 12866.

The docket file is available for public inspection in the Regulations Division, Office of General Counsel, Department of Housing and Urban Development, 451 7th Street SW., Room 10276, Washington, DC 20410-0500. Due to security measures at the HUD Headquarters building, please schedule an appointment to review the docket file by calling the Regulations Division at 202-402-3055 (this is not a toll-free number). Individuals with speech or hearing impairments may access this number via TTY by calling the Federal Relay Service at 800-877-8339 (this is a toll-free number).

### Regulatory Flexibility Act

The Regulatory Flexibility Act (RFA) (5 U.S.C. 601 *et seq.*) generally requires an agency to conduct a regulatory flexibility analysis of any rule subject to notice and comment rulemaking requirements, unless the agency certifies that the rule would not have a significant economic impact on a substantial number of small entities. This final rule will not have a significant economic impact on a substantial number of small entities.

As discussed more fully in the Background section of the preamble, this final rule is largely a procedural rule that codifies HUD's existing policies and procedures implementing E.O. 11990, Protection of Wetlands. The goal of E.O. 11990 is to prevent adverse impacts associated with the destruction or modification of wetlands. E.O. 11990 establishes a uniform set of requirements designed to meet this goal, which are applicable to both large and small entities that propose to use HUD financial assistance in wetlands. HUD is codifying these procedures in 24 CFR part 55 to increase consistency and transparency in these processes and to reduce confusion when working with other Federal agencies. The rule also broadens the use of the abbreviated 8-Step Process, also known as the 5-Step Process, used by HUD and responsible entities when considering the impact on floodplains in connection with the repair of existing structures. Specifically, the rule authorizes the use of the abbreviated process for all of HUD's rehabilitation programs. The current regulations limit the use of the abbreviated process to repairs financed under HUD's mortgage insurance programs. Finally, the rule requires the use of preliminary flood maps and advisory base flood elevations where FEMA has determined that existing FIRMs may not be the best available information.

Section 601 of the Regulatory Flexibility Act defines the term "small entity" to include small businesses, small organizations, and small governmental jurisdictions. HUD asserts that this rule would neither increase the incidence of floodplain and wetlands assessments nor increase the burdens associated with carrying out such an assessment. As discussed above, the focus of this rule is to codify procedures for protection of wetlands that are already in place. The rule would not prohibit HUD support of activities in floodplains or wetlands (except for certain activities in Coastal High Hazard Areas), but would create a consistent departmental policy governing such

support. HUD's codification of these procedures will neither increase the incidence of floodplain and wetlands assessment nor increase the burdens of carrying out an assessment. The rule also streamlines floodplain and wetland environmental review procedures to avoid unnecessary processing delays. As described in HUD's Regulatory Impact Analysis, the benefits of HUD's streamlined floodplain and wetland review will provide a beneficial cost impact on entities of all sizes and decrease burdens on both large and small entities.

This final rule contains several other provisions that will reduce administrative burden for entities of all sizes. It removes the footprint qualification for the categorical exclusion for minor rehabilitation of one- to four-unit residential properties and, to avoid unnecessary delays, exempts leasing from the 8-Step Process for floodplain management where the building is insured with the National Flood Insurance Program and not located in a floodway or Coastal High Hazard Area. Exemptions are also added for special projects directed to the removal of material and architectural barriers that restrict the mobility of and accessibility to elderly and persons with disabilities, and activities that involve ships or waterborne vessels. The rule also exempts from review activities that restore and preserve natural and beneficial functions of floodplains and wetlands. Together, these changes will reduce administrative burdens and unnecessary delays and assist communities that choose to engage in actions beneficial to floodplains and wetlands.

In HUD's December 12, 2011, proposed rule, HUD certified that this rule would not have a significant economic impact on a substantial number of small entities and invited public comment on HUD's certification. HUD received no comment in response to its certification. Therefore, the undersigned has determined that the rule will not have a significant economic impact on a substantial number of small entities.

### Environmental Impact

A Finding of No Significant Impact (FONSI) with respect to environment was made at the proposed rule stage in accordance with HUD regulations at 24 CFR part 50, which implement section 102(2)(C) of NEPA (42 U.S.C. 4332(2)(C)). The FONSI remains applicable to this final rule and is available for public inspection at [www.regulations.gov](http://www.regulations.gov) under docket number FR-5423-F-02. The FONSI is

also available for public inspection between the hours of 8 a.m. and 5 p.m., weekdays, in the Regulations Division, Office of General Counsel, Room 10276, Department of Housing and Urban Development, 451 7th Street SW., Washington, DC 20410. Due to security measures at the HUD Headquarters building, please schedule an appointment to review the FONSI by calling the Regulations Division at 202-708-3055 (this is not a toll-free number). Individuals with speech or hearing impairments may access this number via TTY by calling the Federal Relay Service at (800) 877-8339 (this is a toll-free number).

### E.O. 13132 Federalism

E.O. 13132 (entitled "Federalism") prohibits an agency from publishing any rule that has federalism implications if the rule either imposes substantial direct compliance costs on state and local governments and is not required by statute, or preempts state law, unless the agency meets the consultation and funding requirements of section 6 of the Order. This rule does not have federalism implications and would not impose substantial direct compliance costs on state and local governments nor preempt state law within the meaning of the Order.

### Unfunded Mandates Reform Act

Title II of the Unfunded Mandates Reform Act of 1995 (2 U.S.C. 1531-1538) (UMRA) establishes requirements for Federal agencies to assess the effects of their regulatory actions on state, local, and tribal governments, and on the private sector. This rule does not impose any Federal mandates on any state, local, or tribal governments, or on the private sector, within the meaning of UMRA.

### Paperwork Reduction Act

The information collection requirements contained in this rule have been submitted to OMB for review and approval under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520 *et seq.*). The information collection requirement for Floodplain Management and Wetland Protection is assigned OMB control number 2506-0151. The information collection requirements in this final rule include largely preexisting information collection requirements. However, the preexisting information collection requirements are being revised to reduce the paperwork burden. Specifically, the information collection requirements reflect a slight decrease to the paperwork burden as a result of revising the scope of assistance eligible for the streamlined 5-Step

Process. Under the rule, recipients' actions under any HUD program for the repair, rehabilitation, modernization, or improvement of existing multifamily housing projects are eligible for the 5-Step Process for residential and nonresidential rehabilitations as long as the action does not meet the threshold of substantial improvement under § 55.2(b)(10). Similarly, financial

assistance for weatherizations and floodplain and wetland restoration activities would also be granted the use of the shortened 5-Step Process. These changes will allow for expedited processing and a decreased amount of analysis for projects that have no or little adverse impact or have beneficial effects.

The sections in this rule that contain the current information collection requirements and the upcoming revisions that are awaiting OMB approval, as well as the estimated adjusted burden of the pending revisions, are set forth in the following table.

CFR Section	Number of respondents	Total annual responses	Average hours per response	Total annual burden hours	Total annual cost (\$40/hr)
§ 55.20 Decisionmaking process .....	275	1	8	2200	\$88,000
§ 55.21 Notification of floodplain hazard .....	300	1	1	300	12,000
Totals .....	575	2	9	2500	100,000

All estimates include the time for reviewing instructions, searching existing data sources, gathering or maintaining the needed data, and reviewing the information. The docket file is available for public inspection. For information on, or a copy of, the paperwork package submitted to OMB, contact Colette Pollard at 202-708-0306 (this is not a toll-free number) or via email at *Colette.Pollard@hud.gov*. In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520), an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless the collection displays a valid OMB control number.

**List of Subjects**

*24 CFR Part 50*

Environmental impact statements.

*24 CFR Part 55*

Environmental impact statements, Floodplains, Wetlands.

*24 CFR Part 58*

Community development block grants, Environmental impact statements, Grant programs—housing and community development, Reporting and recordkeeping requirements.

Accordingly, for the reasons stated in the preamble above, HUD amends 24 CFR parts 50, 55, and 58 as follows:

**PART 50—PROTECTION AND ENHANCEMENT OF ENVIRONMENTAL QUALITY**

■ 1. The authority citation for part 50 is revised to read as follows:

**Authority:** 42 U.S.C. 3535(d) and 4332; and Executive Order 11991, 3 CFR, 1977 Comp., p. 123.

■ 2. In § 50.4, revise paragraphs (b)(2) and (3) to read as follows:

**§ 50.4 Related federal laws and authorities.**

\* \* \* \* \*

(b) \* \* \*  
 (2) HUD procedure for the implementation of Executive Order 11988 (Floodplain Management), (3 CFR, 1977 Comp., p. 117)—24 CFR part 55, Floodplain Management and Protection of Wetlands.

(3) HUD procedure for the implementation of Executive Order 11990 (Protection of Wetlands), (3 CFR, 1977 Comp., p. 121)—24 CFR part 55, Floodplain Management and Protection of Wetlands.

\* \* \* \* \*

**PART 55—FLOODPLAIN MANAGEMENT AND PROTECTION OF WETLANDS**

■ 3. The authority citation for part 55 is revised to read as follows:

**Authority:** 42 U.S.C. 3535(d), 4001-4128 and 5154a; E.O. 11988, 42 FR 26951, 3 CFR, 1977 Comp., p. 117; E.O. 11990, 42 FR 26961, 3 CFR, 1977 Comp., p. 121.

■ 4. Revise the part heading for part 55 to read as set forth above.

■ 5. Amend § 55.1 as follows:

- a. Revise paragraph (a);
- b. Redesignate paragraph (b) as paragraph (b)(1);
- c. Add paragraph (b)(2); and
- d. Revise paragraphs (c)(1), (c)(3) introductory text, and (c)(3)(i).

The revisions and addition read as follows:

**§ 55.1 Purpose and basic responsibility.**

(a)(1) The purpose of Executive Order 11988, Floodplain Management, is “to avoid to the extent possible the long and short-term adverse impacts associated with the occupancy and modification of floodplains and to avoid direct or indirect support of floodplain development wherever there is a practicable alternative.”

(2) The purpose of Executive Order 11990, Protection of Wetlands, is “to avoid to the extent possible the long- and short-term adverse impacts associated with the destruction or modification of wetlands and to avoid direct or indirect support of new construction in wetlands wherever there is a practicable alternative.”

(3) This part implements the requirements of Executive Order 11988, Floodplain Management, and Executive Order 11990, Protection of Wetlands, and employs the principles of the Unified National Program for Floodplain Management. These regulations apply to all HUD (or responsible entity) actions that are subject to potential harm by location in floodplains or wetlands. Covered actions include the proposed acquisition, construction, demolition, improvement, disposition, financing, and use of properties located in floodplains or wetlands for which approval is required either from HUD, under any applicable HUD program, or from a responsible entity authorized by 24 CFR part 58.

(4) This part does not prohibit approval of such actions (except for certain actions in Coastal High Hazard Areas), but provides a consistent means for implementing the Department’s interpretation of the Executive Orders in the project approval decisionmaking processes of HUD and of responsible entities subject to 24 CFR part 58. The implementation of Executive Orders 11988 and 11990 under this part shall be conducted by HUD for Department-administered programs subject to environmental review under 24 CFR part 50 and by authorized responsible entities that are responsible for environmental review under 24 CFR part 58.

(5) Nonstructural alternatives to floodplain development and the destruction of wetlands are both favored and encouraged to reduce the loss of life and property caused by floods, and to restore the natural resources and functions of floodplains and wetlands. Nonstructural alternatives should be discussed in the decisionmaking process where practicable.

(b) \* \* \*

(2) Under section 582 of the National Flood Insurance Reform Act of 1994 (42 U.S.C. 5154a), HUD disaster assistance that is made available in a special flood hazard area may not be used to make a payment (including any loan assistance payment) to a person for repair, replacement, or restoration of damage to any personal, residential, or commercial property if:

(i) The person had previously received Federal flood disaster assistance conditioned on obtaining and maintaining flood insurance; and

(ii) The person failed to obtain and maintain the flood insurance.

(c) \* \* \*

(1) Any action other than a functionally dependent use or floodplain function restoration activity, located in a floodway;

\* \* \* \* \*

(3) Any noncritical action located in a Coastal High Hazard Area, unless the action is a functionally dependent use, existing construction (including improvements), or reconstruction following destruction caused by a disaster. If the action is not a functionally dependent use, the action must be designed for location in a Coastal High Hazard Area. An action will be considered designed for a Coastal High Hazard Area if:

(i) In the case of reconstruction following destruction caused by a disaster or substantial improvement, the work meets the current standards for V zones in FEMA regulations (44 CFR 60.3(e)) and, if applicable, the Minimum Property Standards for such construction in 24 CFR 200.926d(c)(4)(iii); or

\* \* \* \* \*

■ 6. Amend § 55.2 as follows:

■ a. Revise paragraph (a);

■ b. Revise paragraphs (b) introductory text and (b)(1);

■ c. Redesignate paragraphs (b)(2) through (6) and (7) and (8) as paragraphs (b)(3) through (7) and (9) and (10), respectively;

■ d. Add new paragraphs (b)(2) and (b)(8);

■ e. Revise newly designated paragraph (b)(9); and

■ f. Add paragraph (b)(11).

The revisions read as follows:

#### § 55.2 Terminology.

(a) With the exception of those terms defined in paragraph (b) of this section, the terms used in this part shall follow the definitions contained in section 6 of Executive Order 11988, section 7 of Executive Order 11990, and the Floodplain Management Guidelines for Implementing Executive Order 11988 (43 FR 6030, February 10, 1978), issued by the Water Resources Council; the terms “special flood hazard area,” “criteria,” and “Regular Program” shall follow the definitions contained in FEMA regulations at 44 CFR 59.1; and the terms “Letter of Map Revision” and “Letter of Map Amendment” shall refer to letters issued by FEMA, as provided in 44 CFR part 65 and 44 CFR part 70, respectively.

(b) For purposes of this part, the following definitions apply:

(1) *Coastal high hazard area* means the area subject to high velocity waters, including but not limited to hurricane wave wash or tsunamis. The area is designated on a Flood Insurance Rate Map (FIRM) or Flood Insurance Study (FIS) under FEMA regulations. FIRMs and FISs are also relied upon for the designation of “100-year floodplains” (§ 55.2(b)(9)), “500-year floodplains” (§ 55.2(b)(4)), and “floodways” (§ 55.2(b)(5)). When FEMA provides interim flood hazard data, such as Advisory Base Flood Elevations (ABFE) or preliminary maps and studies, HUD or the responsible entity shall use the latest of these sources. If FEMA information is unavailable or insufficiently detailed, other Federal, state, or local data may be used as “best available information” in accordance with Executive Order 11988. However, a base flood elevation from an interim or preliminary or non-FEMA source cannot be used if it is lower than the current FIRM and FIS.

(2) *Compensatory mitigation* means the restoration (reestablishment or rehabilitation), establishment (creation), enhancement, and/or, in certain circumstances, preservation of aquatic resources for the purposes of offsetting unavoidable adverse impacts that remain after all appropriate and practicable avoidance and minimization have been achieved.

Examples include, but are not limited to:

(i) *Permittee-responsible mitigation*: On-site or off-site mitigation undertaken by the holder of a wetlands permit under section 404 of the Clean Water Act (or an authorized agent or contractor), for which the permittee retains full responsibility;

(ii) *Mitigation banking*: A permittee’s purchase of credits from a wetlands mitigation bank, comprising wetlands that have been set aside to compensate for conversions of other wetlands; the mitigation obligation is transferred to the sponsor of the mitigation bank; and

(iii) *In-lieu fee mitigation*: A permittee’s provision of funds to an in-lieu fee sponsor (public agency or nonprofit organization) that builds and maintains a mitigation site, often after the permitted adverse wetland impacts have occurred; the mitigation obligation is transferred to the in-lieu fee sponsor.

\* \* \* \* \*

(8) *New construction* includes draining, dredging, channelizing, filling, diking, impounding, and related activities and any structures or facilities begun after the effective date of Executive Order 11990. (See section 7(b) of Executive Order 11990.)

(9) *100-year floodplain* means the floodplain of concern for this part and is the area subject to inundation from a flood having a one percent or greater chance of being equaled or exceeded in any given year. (See § 55.2(b)(1) for appropriate data sources.)

\* \* \* \* \*

(11) *Wetlands* means those areas that are inundated by surface or ground water with a frequency sufficient to support, and under normal circumstances does or would support, a prevalence of vegetative or aquatic life that requires saturated or seasonally saturated soil conditions for growth and reproduction. Wetlands generally include swamps, marshes, bogs, and similar areas such as sloughs, potholes, wet meadows, river overflows, mud flats, and natural ponds. This definition includes those wetland areas separated from their natural supply of water as a result of activities such as the construction of structural flood protection methods or solid-fill road beds and activities such as mineral extraction and navigation improvements. This definition includes both wetlands subject to and those not subject to section 404 of the Clean Water Act as well as constructed wetlands. The following process shall be followed in making the wetlands determination:

(i) HUD or, for programs subject to 24 CFR part 58, the responsible entity, shall make a determination whether the action is new construction that is located in a wetland. These actions are subject to processing under the § 55.20 decisionmaking process for the protection of wetlands.

(ii) As primary screening, HUD or the responsible entity shall verify whether the project area is located in proximity

to wetlands identified on the National Wetlands Inventory (NWI). If so, HUD or the responsible entity should make a reasonable attempt to consult with the Department of the Interior, Fish and Wildlife Service (FWS), for information concerning the location, boundaries, scale, and classification of wetlands within the area. If an NWI map indicates the presence of wetlands, FWS staff, if available, must find that no wetland is present in order for the action to proceed without further processing. Where FWS staff is unavailable to resolve any NWI map ambiguity or controversy, an appropriate wetlands professional must find that no wetland is present in order for the action to proceed without § 55.20 processing.

(iii) As secondary screening used in conjunction with NWI maps, HUD or the responsible entity is encouraged to use the Department of Agriculture, Natural Resources Conservation Service (NRCS) National Soil Survey (NSS) and any state and local information concerning the location, boundaries, scale, and classification of wetlands within the action area.

(iv) Any challenges from the public or other interested parties to the wetlands determinations made under this part must be made in writing to HUD (or the responsible entity authorized under 24 CFR part 58) during the commenting period and must be substantiated with verifiable scientific information. Commenters may request a reasonable extension of the time for the commenting period for the purpose of substantiating any objections with verifiable scientific information. HUD or the responsible entity shall consult FWS staff, if available, on the validity of the challenger's scientific information prior to making a final wetlands determination.

■ 7. In § 55.3, revise paragraphs (a)(1), (b)(1) and (2), and (c) and add paragraph (d) to read as follows:

**§ 55.3 Assignment of responsibilities.**

(a)(1) *The Assistant Secretary for Community Planning and Development (CPD)* shall oversee:

(i) The Department's implementation of Executive Orders 11988 and 11990 and this part in all HUD programs; and

(ii) The implementation activities of HUD program managers and, for HUD financial assistance subject to 24 CFR

part 58, of grant recipients and responsible entities.

\* \* \* \* \*

(b) \* \* \*

(1) Ensure compliance with this part for all actions under their jurisdiction that are proposed to be conducted, supported, or permitted in a floodplain or wetland;

(2) Ensure that actions approved by HUD or responsible entities are monitored and that any prescribed mitigation is implemented;

\* \* \* \* \*

(c) *Responsible Entity Certifying Officer.* Certifying Officers of

responsible entities administering or reviewing activities subject to 24 CFR part 58 shall comply with this part in carrying out HUD-assisted programs. Certifying Officers of responsible entities subject to 24 CFR part 58 shall monitor approved actions and ensure that any prescribed mitigation is implemented.

(d) *Recipient.* Recipients subject to 24 CFR part 58 shall monitor approved actions and ensure that any prescribed mitigation is implemented. Recipients shall:

(1) Supply HUD (or the responsible entity authorized by 24 CFR part 58) with all available, relevant information necessary for HUD (or the responsible entity) to perform the compliance required by this part; and

(2) Implement mitigating measures required by HUD (or the responsible entity authorized by 24 CFR part 58) under this part or select alternate eligible property.

■ 8. The heading for subpart B is revised to read as follows:

**Subpart B—Application of Executive Orders on Floodplain Management and Protection of Wetlands**

■ 9. Revise § 55.10 to read as follows:

**§ 55.10 Environmental review procedures under 24 CFR parts 50 and 58.**

(a) Where an environmental review is required under the National Environmental Policy Act of 1969 (NEPA) (42 U.S.C. 4321 *et seq.*), and 24 CFR part 50 or part 58, compliance with this part shall be completed before the completion of an environmental assessment (EA), including a finding of no significant impact (FONSI), or an

environmental impact statement (EIS), in accordance with the decision points listed in 24 CFR 50.17(a) through (h), or before the preparation of an EA under 24 CFR 58.40 or an EIS under 24 CFR 58.37. For types of proposed actions that are categorically excluded from NEPA requirements under 24 CFR part 50 (or part 58), compliance with this part shall be completed before the Department's initial approval (or approval by a responsible entity authorized by 24 CFR part 58) of proposed actions in a floodplain or wetland.

(b) The categorical exclusion of certain proposed actions from environmental review requirements under NEPA and 24 CFR parts 50 and 58 (see 24 CFR 50.20 and 58.35(a)) does not exclude those actions from compliance with this part.

■ 10. Revise § 55.11 to read as follows:

**§ 55.11 Applicability of Subpart C decisionmaking process.**

(a) Before reaching the decision points described in § 55.10(a), HUD (for Department-administered programs) or the responsible entity (for HUD financial assistance subject to 24 CFR part 58) shall determine whether Executive Order 11988, Executive Order 11990, and this part apply to the proposed action.

(b) If Executive Order 11988 or Executive Order 11990 and this part apply, the approval of a proposed action or initial commitment shall be made in accordance with this part. The primary purpose of Executive Order 11988 is "to avoid to the extent possible the long and short term adverse impacts associated with the occupancy and modification of floodplains and to avoid direct or indirect support of floodplain development wherever there is a practicable alternative." The primary purpose of Executive Order 11990 is "to avoid to the extent possible the long and short-term adverse impacts associated with the destruction or modification of wetlands and to avoid direct or indirect support of new construction in wetlands wherever there is a practicable alternative."

(c) The following table indicates the applicability, by location and type of action, of the decisionmaking process for implementing Executive Order 11988 and Executive Order 11990 under subpart C of this part.

TABLE 1

Type of proposed action (new reviewable action or an amendment) <sup>1</sup>	Type of proposed action			
	Floodways	Coastal high hazard areas	Wetlands or 100-year floodplain outside coastal high hazard area and floodways	Nonwetlands area outside of the 100-year and within the 500-year floodplain
Critical Actions as defined in § 55.12(b)(2).	Critical actions not allowed.	Critical actions not allowed.	Allowed if the proposed critical action is processed under § 55.20. <sup>2</sup>	Allowed if the proposed critical action is processed under § 55.20. <sup>2</sup>
Noncritical actions not excluded under § 55.12(b) or (c).	Allowed only if the proposed non-critical action is a functionally dependent use and processed under § 55.20. <sup>2</sup>	Allowed only if the proposed noncritical action is processed under § 55.20 <sup>2</sup> and is (1) a functionally dependent use, (2) existing construction (including improvements), or (3) reconstruction following destruction caused by a disaster. If the action is not a functionally dependent use, the action must be designed for location in a Coastal High Hazard Area under § 55.1(c)(3).	Allowed if proposed non-critical action is processed under § 55.20. <sup>2</sup>	Any noncritical action is allowed without processing under this part.

<sup>1</sup> Under Executive Order 11990, the decisionmaking process in § 55.20 only applies to Federal assistance for new construction in wetlands locations.

<sup>2</sup> Or those paragraphs of § 55.20 that are applicable to an action listed in § 55.12(a).

■ 11. Revise 55.12 to read as follows:

**§ 55.12 Inapplicability of 24 CFR part 55 to certain categories of proposed actions.**

(a) The decisionmaking steps in § 55.20(b), (c), and (g) (steps 2, 3, and 7) do not apply to the following categories of proposed actions:

(1) HUD's or the recipient's actions involving the disposition of acquired multifamily housing projects or "bulk sales" of HUD-acquired (or under part 58 of recipients') one- to four-family properties in communities that are in the Regular Program of National Flood Insurance Program and in good standing (i.e., not suspended from program eligibility or placed on probation under 44 CFR 59.24). For programs subject to part 58, this paragraph applies only to recipients' disposition activities that are subject to review under part 58.

(2) HUD's actions under the National Housing Act (12 U.S.C. 1701) for the purchase or refinancing of existing multifamily housing projects, hospitals, nursing homes, assisted living facilities, board and care facilities, and intermediate care facilities, in communities that are in good standing under the NFIP.

(3) HUD's or the recipient's actions under any HUD program involving the repair, rehabilitation, modernization, weatherization, or improvement of existing multifamily housing projects, hospitals, nursing homes, assisted living facilities, board and care facilities,

intermediate care facilities, and one- to four-family properties, in communities that are in the Regular Program of the National Flood Insurance Program (NFIP) and are in good standing, provided that the number of units is not increased more than 20 percent, the action does not involve a conversion from nonresidential to residential land use, the action does not meet the thresholds for "substantial improvement" under § 55.2(b)(10), and the footprint of the structure and paved areas is not significantly increased.

(4) HUD's or the recipient's actions under any HUD program involving the repair, rehabilitation, modernization, weatherization, or improvement of existing nonresidential buildings and structures, in communities that are in the Regular Program of the NFIP and are in good standing, provided that the action does not meet the thresholds for "substantial improvement" under § 55.2(b)(10) and that the footprint of the structure and paved areas is not significantly increased.

(b) The decisionmaking process in § 55.20 shall not apply to the following categories of proposed actions:

(1) HUD's mortgage insurance actions and other financial assistance for the purchasing, mortgaging or refinancing of existing one- to four-family properties in communities that are in the Regular Program of the NFIP and in good standing (i.e., not suspended from program eligibility or placed on

probation under 44 CFR 59.24), where the action is not a critical action and the property is not located in a floodway or Coastal High Hazard Area;

(2) Financial assistance for minor repairs or improvements on one- to four-family properties that do not meet the thresholds for "substantial improvement" under § 55.2(b)(10);

(3) HUD or a recipient's actions involving the disposition of individual HUD-acquired, one- to four-family properties;

(4) HUD guarantees under the Loan Guarantee Recovery Fund Program (24 CFR part 573) of loans that refinance existing loans and mortgages, where any new construction or rehabilitation financed by the existing loan or mortgage has been completed prior to the filing of an application under the program, and the refinancing will not allow further construction or rehabilitation, nor result in any physical impacts or changes except for routine maintenance; and

(5) The approval of financial assistance to lease an existing structure located within the floodplain, but only if;

(i) The structure is located outside the floodway or Coastal High Hazard Area, and is in a community that is in the Regular Program of the NFIP and in good standing (i.e., not suspended from program eligibility or placed on probation under 44 CFR 59.24);

(ii) The project is not a critical action; and

(iii) The entire structure is or will be fully insured or insured to the maximum under the NFIP for at least the term of the lease.

(c) This part shall not apply to the following categories of proposed HUD actions:

(1) HUD-assisted activities described in 24 CFR 58.34 and 58.35(b);

(2) HUD-assisted activities described in 24 CFR 50.19, except as otherwise indicated in § 50.19;

(3) The approval of financial assistance for restoring and preserving the natural and beneficial functions and values of floodplains and wetlands, including through acquisition of such floodplain and wetland property, but only if:

(i) The property is cleared of all existing structures and related improvements;

(ii) The property is dedicated for permanent use for flood control, wetland protection, park land, or open space; and

(iii) A permanent covenant or comparable restriction is placed on the property's continued use to preserve the floodplain or wetland from future development.

(4) An action involving a repossession, receivership, foreclosure, or similar acquisition of property to protect or enforce HUD's financial interests under previously approved loans, grants, mortgage insurance, or other HUD assistance;

(5) Policy-level actions described at 24 CFR 50.16 that do not involve site-based decisions;

(6) A minor amendment to a previously approved action with no additional adverse impact on or from a floodplain or wetland;

(7) HUD's or the responsible entity's approval of a project site, an incidental portion of which is situated in an adjacent floodplain, including the floodway or Coastal High Hazard Area, or wetland, but only if:

(i) The proposed construction and landscaping activities (except for minor grubbing, clearing of debris, pruning, sodding, seeding, or other similar activities) do not occupy or modify the 100-year floodplain (or the 500-year floodplain for critical actions) or the wetland;

(ii) Appropriate provision is made for site drainage that would not have an adverse effect on the wetland; and

(iii) A permanent covenant or comparable restriction is placed on the property's continued use to preserve the floodplain or wetland;

(8) HUD's or the responsible entity's approval of financial assistance for a

project on any nonwetland site in a floodplain for which FEMA has issued:

(i) A final Letter of Map Amendment (LOMA), final Letter of Map Revision (LOMR), or final Letter of Map Revision Based on Fill (LOMR-F) that removed the property from a FEMA-designated floodplain location; or

(ii) A conditional LOMA, conditional LOMR, or conditional LOMR-F if HUD or the responsible entity's approval is subject to the requirements and conditions of the conditional LOMA or conditional LOMR;

(9) Issuance or use of Housing Vouchers, Certificates under the Section 8 Existing Housing Program, or other forms of rental subsidy where HUD, the awarding community, or the public housing agency that administers the contract awards rental subsidies that are not project-based (i.e., do not involve site-specific subsidies);

(10) Special projects directed to the removal of material and architectural barriers that restrict the mobility of and accessibility to elderly and persons with disabilities;

(11) The approval of financial assistance for acquisition, leasing, construction, rehabilitation, repair, maintenance, or operation of ships and other waterborne vessels that will be used for transportation or cruises and will not be permanently moored.

(12) The approval of financial assistance for restoring and preserving the natural and beneficial functions and values of floodplains and wetlands, including through acquisition of such floodplain and wetland property, but only if:

(i) The property is cleared of all existing structures and related improvements;

(ii) The property is dedicated for permanent use for flood control, wetland protection, park land, or open space; and

(iii) A permanent covenant or comparable restriction is placed on the property's continued use to preserve the floodplain or wetland from future development.

■ 12. The heading for subpart C is revised to read as follows:

**Subpart C—Procedures for Making Determinations on Floodplain Management and Protection of Wetlands**

■ 13. Amend § 55.20 by revising the introductory text and paragraphs (a), (b) introductory text, (b)(3), (c), (d), (e), (f), (g)(1), and (h) to read as follows:

**§ 55.20 Decisionmaking process.**

Except for actions covered by § 55.12(a), the decisionmaking process

for compliance with this part contains eight steps, including public notices and an examination of practicable alternatives when addressing floodplains and wetlands. The steps to be followed in the decisionmaking process are as follows:

(a) *Step 1.* Determine whether the proposed action is located in the 100-year floodplain (500-year floodplain for critical actions) or results in new construction in a wetland. If the action does not occur in a floodplain or result in new construction in a wetland, then no further compliance with this part is required. The following process shall be followed by HUD (or the responsible entity) in making wetland determinations.

(1) Refer to § 55.28(a) where an applicant has submitted with its application to HUD (or to the recipient under programs subject to 24 CFR part 58) an individual Section 404 permit (including approval conditions and related environmental review).

(2) Refer to § 55.2(b)(11) for making wetland determinations under this part.

(3) For proposed actions occurring in both a wetland and a floodplain, completion of the decisionmaking process under § 55.20 is required regardless of the issuance of a Section 404 permit. In such a case, the wetland will be considered among the primary natural and beneficial functions and values of the floodplain.

(b) *Step 2.* Notify the public and agencies responsible for floodplain management or wetlands protection at the earliest possible time of a proposal to consider an action in a 100-year floodplain (or a 500-year floodplain for a Critical Action) or wetland and involve the affected and interested public and agencies in the decisionmaking process.

\* \* \* \* \*

(3) A notice under this paragraph shall state: The name, proposed location, and description of the activity; the total number of acres of floodplain or wetland involved; the related natural and beneficial functions and values of the floodplain or wetland that may be adversely affected by the proposed activity; the HUD approving official (or the Certifying Officer of the responsible entity authorized by 24 CFR part 58); and the phone number to call for information. The notice shall indicate the hours of HUD or the responsible entity's office, and any Web site at which a full description of the proposed action may be reviewed.

(c) *Step 3.* Identify and evaluate practicable alternatives to locating the proposed action in a 100-year floodplain

(or a 500-year floodplain for a Critical Action) or wetland.

(1) Except as provided in paragraph (c)(3) of this section, HUD's or the responsible entity's consideration of practicable alternatives to the proposed site selected for a project should include:

(i) Locations outside and not affecting the 100-year floodplain (or the 500-year floodplain for a Critical Action) or wetland;

(ii) Alternative methods to serve the identical project objective, including feasible technological alternatives; and

(iii) A determination not to approve any action proposing the occupancy or modification of a floodplain or wetland.

(2) Practicability of alternative sites should be addressed in light of the following:

(i) Natural values such as topography, habitat, and hazards;

(ii) Social values such as aesthetics, historic and cultural values, land use patterns, and environmental justice; and

(iii) Economic values such as the cost of space, construction, services, and relocation.

(3) For multifamily projects involving HUD mortgage insurance that are initiated by third parties, HUD's consideration of practicable alternatives should include a determination not to approve the request.

(d) *Step 4.* Identify and evaluate the potential direct and indirect impacts associated with the occupancy or modification of the 100-year floodplain (or the 500-year floodplain for a Critical Action) or the wetland and the potential direct and indirect support of floodplain and wetland development that could result from the proposed action.

(1) *Floodplain evaluation:* The focus of the floodplain evaluation should be on adverse impacts to lives and property, and on natural and beneficial floodplain values. Natural and beneficial values include:

(i) Water resources such as natural moderation of floods, water quality maintenance, and groundwater recharge;

(ii) Living resources such as flora and fauna;

(iii) Cultural resources such as archaeological, historic, and recreational aspects; and

(iv) Agricultural, aquacultural, and forestry resources.

(2) *Wetland evaluation:* In accordance with Section 5 of Executive Order 11990, the decisionmaker shall consider factors relevant to a proposal's effect on the survival and quality of the wetland. Among these factors that should be evaluated are:

(i) Public health, safety, and welfare, including water supply, quality,

recharge, and discharge; pollution; flood and storm hazards and hazard protection; and sediment and erosion;

(ii) Maintenance of natural systems, including conservation and long-term productivity of existing flora and fauna; species and habitat diversity and stability; natural hydrologic function; wetland type; fish; wildlife; timber; and food and fiber resources;

(iii) Cost increases attributed to wetland-required new construction and mitigation measures to minimize harm to wetlands that may result from such use; and

(iv) Other uses of wetlands in the public interest, including recreational, scientific, and cultural uses.

(e) *Step 5.* Where practicable, design or modify the proposed action to minimize the potential adverse impacts to and from the 100-year floodplain (or the 500-year floodplain for a Critical Action) or the wetland and to restore and preserve its natural and beneficial functions and values.

(1) Minimization techniques for floodplain and wetland purposes include, but are not limited to: the use of permeable surfaces, natural landscape enhancements that maintain or restore natural hydrology through infiltration, native plant species, bioswales, evapotranspiration, stormwater capture and reuse, green or vegetative roofs with drainage provisions, and Natural Resource Conservation Service conservation easements. Floodproofing and elevating structures, including freeboard above the required base flood elevations, are also minimization techniques for floodplain purposes.

(2) Appropriate and practicable compensatory mitigation is recommended for unavoidable adverse impacts to more than one acre of wetland. Compensatory mitigation includes, but is not limited to: permittee-responsible mitigation, mitigation banking, in-lieu fee mitigation, the use of preservation easements or protective covenants, and any form of mitigation promoted by state or Federal agencies. The use of compensatory mitigation may not substitute for the requirement to avoid and minimize impacts to the maximum extent practicable.

(3) Actions covered by § 55.12(a) must be rejected if the proposed minimization is financially or physically unworkable. All critical actions in the 500-year floodplain shall be designed and built at or above the 100-year floodplain (in the case of new construction) and modified to include:

(i) Preparation of and participation in an early warning system;

(ii) An emergency evacuation and relocation plan;

(iii) Identification of evacuation route(s) out of the 500-year floodplain; and

(iv) Identification marks of past or estimated flood levels on all structures.

(f) *Step 6.* Reevaluate the proposed action to determine:

(1) Whether the action is still practicable in light of exposure to flood hazards in the floodplain or wetland, possible adverse impacts on the floodplain or wetland, the extent to which it will aggravate the current hazards to other floodplains or wetlands, and the potential to disrupt the natural and beneficial functions and values of floodplains or wetlands; and

(2) Whether alternatives preliminarily rejected at Step 3 (paragraph (c)) of this section are practicable in light of information gained in Steps 4 and 5 (paragraphs (d) and (e)) of this section.

(i) The reevaluation of alternatives shall include the potential impacts avoided or caused inside and outside the floodplain or wetland area. The impacts should include the protection of human life, real property, and the natural and beneficial functions and values served by the floodplain or wetland.

(ii) A reevaluation of alternatives under this step should include a discussion of economic costs. For floodplains, the cost estimates should include savings or the costs of flood insurance, where applicable; flood proofing; replacement of services or functions of critical actions that might be lost; and elevation to at least the base flood elevation for sites located in floodplains, as appropriate on the applicable source under § 55.2(b)(1). For wetlands, the cost estimates should include the cost of filling the wetlands and mitigation.

(g) *Step 7.* (1) If the reevaluation results in a determination that there is no practicable alternative to locating the proposal in the 100-year floodplain (or the 500-year floodplain for a Critical Action) or the wetland, publish a final notice that includes:

(i) The reasons why the proposal must be located in the floodplain or wetland;

(ii) A list of the alternatives considered in accordance with paragraphs(c)(1) and (c)(2) of this section; and

(iii) All mitigation measures to be taken to minimize adverse impacts and to restore and preserve natural and beneficial functions and values.

\* \* \* \* \*

(h) *Step 8.* Upon completion of the decisionmaking process in Steps 1 through 7, implement the proposed action. There is a continuing

responsibility on HUD (or on the responsible entity authorized by 24 CFR part 58) and the recipient (if other than the responsible entity) to ensure that the mitigating measures identified in Step 7 are implemented.

§ 55.21 [Amended]

- 14. Amend § 55.21 by removing the term “grant recipient” and adding in its place the term “responsible entity.”
■ 15. Revise § 55.24 to read as follows:

§ 55.24 Aggregation.

Where two or more actions have been proposed, require compliance with subpart C of this part, affect the same floodplain or wetland, and are currently under review by HUD (or by a responsible entity authorized by 24 CFR part 58), individual or aggregated approvals may be issued. A single compliance review and approval under this section is subject to compliance with the decisionmaking process in § 55.20.

§ 55.25 [Amended]

- 16. Amend § 55.25 as follows:
■ a. Remove, in paragraph (c), the term “grant recipient” and add in its place the term “responsible entity;” and
■ b. Remove in paragraph (d)(2) the term “grant recipients” and add in its place the term “responsible entities.”
■ 17. In § 55.26, revise the introductory text and paragraph (a) to read as follows:

§ 55.26 Adoption of another agency’s review under the executive orders.

If a proposed action covered under this part is already covered in a prior review performed under either or both of the Executive Orders by another agency, including HUD or a different responsible entity, that review may be adopted by HUD or by a responsible entity authorized under 24 CFR part 58, provided that:

(a) There is no pending litigation relating to the other agency’s review for floodplain management or wetland protection;

\* \* \* \* \*

- 18. Amend § 55.27 as follows:
■ a. Revise paragraph (a);
■ b. Remove, in paragraph (b), the term “grant recipient” and add, in its place, the words “responsible entity” and;
■ c. Remove, in paragraph (c), the term “grant recipients” and add, in its place, the words “responsible entities”.

The revision reads as follows:

§ 55.27 Documentation.

(a) For purposes of compliance with § 55.20, the responsible HUD official who would approve the proposed action (or Certifying Officer for a responsible entity authorized by 24 CFR part 58) shall require that the following actions be documented:

(1) When required by § 55.20(c), practicable alternative sites have been considered outside the floodplain or wetland, but within the local housing market area, the local public utility service area, or the jurisdictional boundaries of a recipient unit of general local government, whichever geographic area is most appropriate to the proposed action. Actual sites under review must be identified and the reasons for the nonselection of those sites as practicable alternatives must be described; and

(2) Under § 55.20(e)(2), measures to minimize the potential adverse impacts of the proposed action on the affected floodplain or wetland as identified in § 55.20(d) have been applied to the design for the proposed action.

\* \* \* \* \*

- 19. Add § 55.28 to read as follows:

§ 55.28 Use of individual permits under section 404 of the Clean Water Act for HUD Executive Order 11990 processing where all wetlands are covered by the permit.

(a) Processing requirements. HUD (or the responsible entity subject to 24 CFR part 58) shall not be required to perform the steps at § 55.20(a) through (e) upon adoption by HUD (or the responsible entity) of the terms and conditions of a Section 404 permit so long as:

(1) The project involves new construction on a property located outside of the 100-year floodplain (or the 500-year floodplain for critical actions);

(2) The applicant has submitted, with its application to HUD (or to the recipient under programs subject to 24 CFR part 58), an individual Section 404 permit (including approval conditions) issued by the U.S. Army Corps of Engineers (USACE) (or by a State or Tribal government under Section 404(h) of the Clean Water Act) for the proposed project; and

(3) All wetlands adversely affected by the action are covered by the permit.

(b) Unless a project is excluded under § 55.12, processing under all of § 55.20 is required for new construction in wetlands that are not subject to section 404 of the Clean Water Act and for new construction for which the USACE (or a

State or Tribal government under section 404(h) of the Clean Water Act) issues a general permit under Section 404.

PART 58—ENVIRONMENTAL REVIEW PROCEDURES FOR ENTITIES ASSUMING HUD ENVIRONMENTAL RESPONSIBILITIES

- 20. The authority citation for part 58 continues to read as follows:

Authority: 12 U.S.C. 1707 note; 42 U.S.C. 1437o(i)(1) and (2), 1437x, 3535(d), 3547, 4332, 4852, 5304(g), 11402, and 12838; E.O. 11514, 3 CFR, 1966–1970, Comp., p. 902, as amended by E.O. 11991, 3 CFR, 1977 Comp., p.123.

- 21. In § 58.5, revise paragraph (b)(2) to read as follows:

§ 58.5 Related federal laws and authorities.

\* \* \* \* \*

(b) \* \* \*

(2) Executive Order 11990, Protection of Wetlands, May 24, 1977 (42 FR 26961), 3 CFR, 1977 Comp., p. 121, as interpreted in HUD regulations at 24 CFR part 55, particularly sections 2 and 5 of the order.

\* \* \* \* \*

- 22. In § 58.6, add paragraph (a)(4) to read as follows:

§ 58.6 Other requirements.

\* \* \* \* \*

(a) \* \* \*

(4) Flood insurance requirements cannot be fulfilled by self-insurance except as authorized by law for assistance to state-owned projects within states approved by the Federal Insurance Administrator consistent with 44 CFR 75.11.

\* \* \* \* \*

- 23. In § 58.35, revise paragraph (a)(3)(i) to read as follows:

§ 58.35 Categorical exclusions.

\* \* \* \* \*

(a) \* \* \*

(3) \* \* \*

(i) In the case of a building for residential use (with one to four units), the density is not increased beyond four units, and the land use is not changed;

\* \* \* \* \*

Dated: November 6, 2013.

Mark Johnston,

Deputy Assistant Secretary for Special Needs.

[FR Doc. 2013–27427 Filed 11–14–13; 8:45 am]

BILLING CODE 4210–67–P



This Worksheet was designed to be used by those “Partners” (including Public Housing Authorities, consultants, contractors, and nonprofits) who assist Responsible Entities and HUD in preparing environmental reviews, but legally cannot take full responsibilities for these reviews themselves. Responsible Entities and HUD should use the RE/HUD version of the Worksheet.

## Floodplain Management (CEST and EA) – PARTNER

<https://www.hudexchange.info/environmental-review/floodplain-management>

1. Does [24 CFR 55.12\(c\)](#) exempt this project from compliance with HUD’s floodplain management regulations in Part 55?

Yes

Provide the applicable citation at [24 CFR 55.12\(c\)](#) here. If project is exempt under [55.12\(c\)\(6\)](#) or [\(8\)](#), provide supporting documentation.

[Click here to enter text.](#)

→ If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to the Worksheet Summary below. Continue to the Worksheet Summary.

No → Continue to Question 2.

2. Provide a FEMA/FIRM map showing the site.

The Federal Emergency Management Agency (FEMA) designates floodplains. The [FEMA Map Service Center](#) provides this information in the form of FEMA Flood Insurance Rate Maps (FIRMs).

Does your project occur in a floodplain?

No → Continue to the Worksheet Summary below.

Yes

Select the applicable floodplain using the FEMA map or the best available information:

Floodway → Continue to Question 3, Floodways

Coastal High Hazard Area (V Zone) → Continue to Question 4, Coastal High Hazard Areas

500-year floodplain (B Zone or shaded X Zone) → Continue to Question 5, 500-year Floodplains

100-year floodplain (A Zone) → The 8-Step Process is required. Continue to Question 6, 8-Step Process

3. Floodways

Is this a functionally dependent use?

Yes

The 8-Step Process is required. Work with HUD or the RE to assist with the 8-Step Process.  
→ *Continue to Worksheet Summary.*

- No → *Federal assistance may not be used at this location unless an exception in 55.12(c) applies. You must either choose an alternate site or cancel the project.*

**4. Coastal High Hazard Area**

**Is this a critical action such as a hospital, nursing home, fire station, or police station?**

- Yes → *Critical actions are prohibited in coastal high hazard areas unless an exception in 55.12(c) applies. You must either choose an alternate site or cancel the project.*

- No

**Does this action include new construction that is not a functionally dependent use, existing construction (including improvements), or reconstruction following destruction caused by a disaster?**

- Yes, there is new construction of something that is not a functionally dependent use.  
New construction must be designed to FEMA standards for V Zones at 44 CFR 60.3(e) (24 CFR 55.1(c)(3)(i)).

→ *Continue to Question 6, 8-Step Process*

- No, this action concerns only existing construction.

Existing construction must have met FEMA elevation and construction standards for a coastal high hazard area or other standards applicable at the time of construction.

→ *Continue to Question 6, 8-Step Process*

**5. 500-year Floodplain**

**Is this a critical action?**

- No → *If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to the Worksheet Summary below. Continue to the Worksheet Summary below.*

- Yes → *Continue to Question 6, 8-Step Process*

**6. 8-Step Process.**

**Is this 8-Step Process required? Select one of the following options:**

- 8-Step Process applies.

This project will require mitigation and may require elevating structure or structures. See the link to the HUD Exchange above for information on HUD's elevation requirements.

→ *Work with the RE/HUD to assist with the 8-Step Process. Continue to Worksheet Summary.*

- 5-Step Process is applicable per 55.12(a)(1-3).

**Provide the applicable citation at 24 CFR 55.12(a) here.**

[Click here to enter text.](#)

→ *Work with the RE/HUD to assist with the 5-Step Process. Continue to Worksheet Summary.*

- 8-Step Process is inapplicable per 55.12(b)(1-4).

**Provide the applicable citation at 24 CFR 55.12(b) here.**

Click here to enter text.

→ *If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to the Worksheet Summary below.*

**Worksheet Summary**

Provide a full description of your determination and a synopsis of the information that it was based on, such as:

- Map panel numbers and dates
- Names of all consulted parties and relevant consultation dates
- Names of plans or reports and relevant page numbers
- Any additional requirements specific to your program or region

**Include all documentation supporting your findings in your submission to HUD.**



**U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT**  
WASHINGTON, DC 20410-1000

This Worksheet was designed to be used by those “Partners” (including Public Housing Authorities, consultants, contractors, and nonprofits) who assist Responsible Entities and HUD in preparing environmental reviews, but legally cannot take full responsibilities for these reviews themselves. Responsible Entities and HUD should use the RE/HUD version of the Worksheet.

## Wetlands (CEST and EA) – Partner

<https://www.hudexchange.info/environmental-review/wetlands-protection>

**1. Does this project involve new construction as defined in Executive Order 11990, expansion of a building’s footprint, or ground disturbance?**

The term "new construction" includes draining, dredging, channelizing, filling, diking, impounding, and related activities and construction of any any structures or facilities.

No → *If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to the Worksheet Summary below.*

Yes → *Continue to Question 2.*

**2. Will the new construction or other ground disturbance impact a wetland as defined in E.O. 11990?**

No → *If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to the Worksheet Summary below. Provide a map or any other relevant documentation to explain your determination.*

Yes → *Work with HUD or the RE to assist with the 8-Step Process.* *Continue to Question 3.*

**3. Does Section 55.12 state that the 8-Step Process is not required?**

No, the 8-Step Process applies.

This project will require mitigation and may require elevating structure or structures. See the link to the HUD Exchange above for information on HUD’s elevation requirements.

→ *Work with the RE/HUD to assist with the 8-Step Process. Continue to Worksheet Summary.*

5-Step Process is applicable per 55.12(a).

**Provide the applicable citation at 24 CFR 55.12(a) here.**

Click here to enter text.

→ *Work with the RE/HUD to assist with the 5-Step Process. This project may require mitigation or alternations. Continue to Worksheet Summary.*

8-Step Process is inapplicable per 55.12(b).

**Provide the applicable citation at 24 CFR 55.12(b) here.**

Click here to enter text.

→ If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to Worksheet Summary.

8-Step Process is inapplicable per 55.12(c).

**Provide the applicable citation at 24 CFR 55.12(c) here.**

[Click here to enter text.](#)

→ If the RE/HUD agrees with this recommendation, the review is in compliance with this section. Continue to Worksheet Summary.

### **Worksheet Summary**

Provide a full description of your determination and a synopsis of the information that it was based on, such as:

- Map panel numbers and dates
- Names of all consulted parties and relevant consultation dates
- Names of plans or reports and relevant page numbers
- Any additional requirements specific to your program or region

**Include all documentation supporting your findings in your submission to HUD.**

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

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

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

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

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

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

**Date:**

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

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

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

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

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

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

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

**Date:**

Georgia Department of Community Affairs Office of Grant Administration 60 Executive Park South, NE Atlanta, Georgia 30329	Request for Determination and Response to Request (Davis-Bacon Act as amended and Related Statutes)  Wage Determination under the Davis-Bacon and related act. (This decision is effective from the date of publication in the Federal Register without limitation as to time.)
--	--

Name, Address and Phone Number to Which a Copy of This Determination is to be Mailed (Other than Grant Recipient)	CDBG Recipient (City/County)	Grant Number
Name	Name	Project Name
Street/Box	Title (Mayor/County Commissioner)	County
City/State/Zip	Street/Box	Date of this Request
E-mail Address/Telephone Number	City/State/Zip	Area Code/Phone Number

Check Type of Work <input type="checkbox"/> Water/Sewer <input type="checkbox"/> Drainage <input type="checkbox"/> Street <input type="checkbox"/> Buildings Estimated Total Cost	Estimated Cost _____ _____ _____ _____	Estimated Advertising Date: _____ Estimated Date of Bid Opening: _____ Estimated Date of Contract Award: _____ Estimated Construction Start Date: _____
--	--	--

**To Be Completed by Georgia Department of Community Affairs**

Approving DCA Representative: \_\_\_\_\_

Wage Decision Number (s): \_\_\_\_\_

\_\_\_\_\_

**REQUEST for 10 DAY WAGE RATE CHECK**  
(Prior to Bid Opening for Wage Determination)

CDBG Recipient Name \_\_\_\_\_

Requested by \_\_\_\_\_

CDBG Grant # \_\_\_\_\_

Email Address \_\_\_\_\_

Current Wage Rate \_\_\_\_\_

Wage Classification \_\_\_\_\_

County Location of Project \_\_\_\_\_

Bid Date \_\_\_\_\_

---

(To Be Completed by DCA)

Most Recent Wage Rate Available \_\_\_\_\_

Date of Publication \_\_\_\_\_

Date Decision Mailed \_\_\_\_\_

Approving DCA Representative \_\_\_\_\_

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

**Request for Clearance of Prime Contractor**

\_\_\_\_\_

CDBG Recipient

\_\_\_\_\_

Grant Number

\_\_\_\_\_

Name

\_\_\_\_\_

Title (Mayor/Commissioner)

\_\_\_\_\_

Address

\_\_\_\_\_

City, State, Zip

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

Submitted by:

Cleared by DCA Staff:

\_\_\_\_\_

Signature and Date

\_\_\_\_\_

Signature and Date

*CC Form To:*

\_\_\_\_\_

Name

\_\_\_\_\_

Address

\_\_\_\_\_

City, State, Zip

\_\_\_\_\_

E-Mail Address

**NOTICE OF CONTRACT ACTION, PRIME CONTRACTORS**  
*Community Development Block Grant*

**REPORT #** \_\_\_\_\_

**Attach itemized bid tabulation**

Contract(s) No: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Grantee: \_\_\_\_\_  
 Grant Number: \_\_\_\_\_  
 Submitted by: \_\_\_\_\_  
 Phone No: \_\_\_\_\_  
 Date Submitted: \_\_\_\_\_

**RETURN TO:**  
 CDBG Administrative Secretary  
 GA. Dept. of Community Affairs  
 60 Executive Park South, NE  
 Atlanta, Georgia 30329-2231

	Contract 1	Contract 2	Contract 3
1. Activity Number			
2. Architect/Engineer Name			
3. Description of Work			
4. Wage Dec.# / Mod. #			
5. Bid Date			
6. Date of Contract Execution			
7. Contract Amount			
8. Contractor			
Contractor Address			
Contractor Address			
9. Construction Start Date			
10. Estimated Completion Date			

**INSTRUCTIONS:**

- Complete this form each time a contract is executed. This also applies to multiple contracts.  
 Form should be submitted within 7 days of contract execution.
- Include appropriate information for all contracts each time form is submitted.
- Number reports beginning with #1. Mark last report "Final".
- Submit "Request for Clearance of Prime Contractor" separately.
- Certified bid tabulation must be attached.**





# United States Department of Labor

## Wage and Hour Division

### Instructions For Completing Payroll Form, WH-347

- [WH-347](#) (PDF)

OMB Control No. 1235-0008, Expires 04/30/2021.

**General:** Form WH-347 has been made available for the convenience of contractors and subcontractors required by their Federal or Federally-aided construction-type contracts and subcontracts to submit weekly payrolls. Properly filled out, this form will satisfy the requirements of Regulations, Parts 3 and 5 (29 C.F.R., Subtitle A), as to payrolls submitted in connection with contracts subject to the Davis-Bacon and related Acts.

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) requires contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) Regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Under the Davis-Bacon and related Acts, the contractor is required to pay not less than prevailing wage, including fringe benefits, as predetermined by the Department of Labor. The contractor's obligation to pay fringe benefits may be met either by payment of the fringe benefits to bona fide benefit plans, funds or programs or by making payments to the covered workers (laborers and mechanics) as cash in lieu of fringe benefits.

This payroll provides for the contractor to show on the face of the payroll all monies to each worker, whether as basic rates or as cash in lieu of fringe benefits, and provides for the contractor's representation in the statement of compliance on the payroll (as shown on page 2) that he/she is paying for fringe benefits required by the contract and not paid as cash in lieu of fringe benefits. Detailed instructions concerning the preparation of the payroll follow:

**Contractor or Subcontractor:** Fill in your firm's name and check appropriate box.

**Address:** Fill in your firm's address.

**Payroll No.:** Beginning with the number "1", list the payroll number for the submission.

**For Week Ending:** List the workweek ending date.

**Project and Location:** Self-explanatory.

**Project or Contract No.:** Self-explanatory.

**Column 1 - Name and Individual Identifying Number of Worker:** Enter each worker's full name and an individual identifying number (e.g., last four digits of worker's social security number) on each weekly payroll submitted.

**Column 2 - No. of Withholding Exemptions:** This column is merely inserted for the employer's convenience and is not a requirement of Regulations, Part 3 and 5.

**Column 3 - Work Classifications:** List classification descriptive of work actually performed by each laborer or mechanic. Consult classification and minimum wage schedule set forth in contract specifications. If additional classifications are deemed necessary, see Contracting Officer or Agency representative. An individual may be shown as having worked in more than one classification provided an accurate breakdown or hours worked in each classification is maintained and shown on the submitted payroll by use of separate entries.

**Column 4 - Hours worked:** List the day and date and straight time and overtime hours worked in the applicable boxes. On all contracts subject to the Contract Work Hours Standard Act, enter hours worked in excess of 40 hours a week as "overtime".

**Column 5 - Total:** Self-explanatory

**Column 6 - Rate of Pay (Including Fringe Benefits):** In the "straight time" box for each worker, list the actual hourly rate paid for straight time worked, plus cash paid in lieu of fringe benefits paid. When recording the straight time hourly rate, any cash paid in lieu of fringe benefits may be shown separately from the basic rate. For example, "\$12.25/.40" would reflect a \$12.25 base hourly rate plus \$0.40 for fringe benefits. This is of assistance in correctly computing overtime. See "Fringe Benefits" below. When overtime is worked, show the overtime hourly rate paid plus any cash in lieu of fringe benefits paid in the "overtime" box for each worker; otherwise, you may skip this box. See "Fringe Benefits" below. Payment of not less than time and one-half the basic or regular rate paid is required for overtime under the Contract Work Hours Standard Act of 1962 if the prime contract exceeds \$100,000. In addition to paying no less than the predetermined rate for the classification which an individual works, the contractor must pay amounts predetermined as fringe benefits in the wage decision made part of the contract to approved fringe benefit plans, funds or programs or shall pay as cash in lieu of fringe benefits. See "FRINGE BENEFITS" below.

**Column 7 - Gross Amount Earned:** Enter gross amount earned on this project. If part of a worker's weekly wage was earned on projects other than the project described on this payroll, enter in column 7 first the amount earned on the Federal or Federally assisted project and then the gross amount earned during the week on all projects, thus "\$163.00/\$420.00" would reflect the earnings of a worker who earned \$163.00 on a Federally assisted construction project during a week in which \$420.00 was earned on all work.

**Column 8 - Deductions:** Five columns are provided for showing deductions made. If more than five deduction are involved, use the first four columns and show the balance deductions under "Other" column; show actual total under "Total Deductions" column; and in the attachment to the payroll describe the deduction(s) contained in the "Other" column. All deductions must be in accordance with the provisions of the Copeland Act Regulations, 29 C.F.R., Part 3. If an individual worked on other jobs in addition to this project, show actual deductions from his/her weekly gross wage, and indicate that deductions are based on his gross wages.

**Column 9 - Net Wages Paid for Week:** Self-explanatory.

**Totals** - Space has been left at the bottom of the columns so that totals may be shown if the contractor so desires.

**Statement Required by Regulations, Parts 3 and 5:** While the "statement of compliance" need not be notarized, the statement (on page 2 of the payroll form) is subject to the penalties provided by 18 U.S.C. § 1001, namely, a fine, possible imprisonment of not more than 5 years, or both. Accordingly, the party signing this statement should have knowledge of the facts represented as true.

**Items 1 and 2:** Space has been provided between items (1) and (2) of the statement for describing any deductions made. If all deductions made are adequately described in the "Deductions" column above, state "*See Deductions column in this payroll.*" *See "FRINGE BENEFITS" below for instructions concerning filling out paragraph 4 of the statement.*

**Item 4 FRINGE BENEFITS - Contractors who pay all required fringe benefits:** If paying all fringe benefits to approved plans, funds, or programs in amounts not less than were determined in the applicable wage decision of the Secretary of Labor, show the basic cash hourly rate and overtime rate paid to each worker on the face of the payroll and check paragraph 4(a) of the statement on page 2 of the WH-347 payroll form to indicate the payment. Note any exceptions in section 4(c).

**Contractors who pay no fringe benefits:** If not paying all fringe benefits to approved plans, funds, or programs in amounts of at least those that were determined in the applicable wage decision of the Secretary of Labor, pay any remaining fringe benefit amount to each laborer and mechanic and insert in the "straight time" of the "Rate of Pay" column of the payroll an amount not less than the predetermined rate for each classification plus the amount of fringe benefits determined for each classification in the application wage decision. Inasmuch as it is not necessary to pay time and a half on cash paid in lieu of fringe benefits, the overtime rate shall be not less than the sum of the basic predetermined rate, plus the half time premium on basic or regular rate, plus the required cash in lieu of fringe benefits at the straight time rate. In addition, check paragraph 4(b) of the statement on page 2 the payroll form to indicate the payment of fringe benefits in cash directly to the workers. Note any exceptions in section 4(c).

#### **Use of Section 4(c), Exceptions**

Any contractor who is making payment to approved plans, funds, or programs in amounts less than the wage determination requires is obliged to pay the deficiency directly to the covered worker as cash in lieu of fringe benefits. Enter any exceptions to section 4(a) or 4(b) in section 4(c). Enter in the Exception column the craft, and enter in the Explanation column the hourly amount paid each worker as cash in lieu

of fringe benefits and the hourly amount paid to plans, funds, or programs as fringe benefits. The contractor must pay an amount not less than the predetermined rate plus cash in lieu of fringe benefits as shown in section 4(c) to each such individual for all hours worked (unless otherwise provided by applicable wage determination) on the Federal or Federally assisted project. Enter the rate paid and amount of cash paid in lieu of fringe benefits per hour in column 6 on the payroll. See paragraph on "Contractors who pay no fringe benefits" for computation of overtime rate.

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**Public Burden Statement:** We estimate that it will take an average of 55 minutes to complete this collection of information, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection of information, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

**Note:** In order to view, fill out, and print PDF forms, you need Adobe® Acrobat® Reader® version 5 or later, which you may download for free at <https://www.adobe.com/downloads.html>.

# Record of Employee Interview

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

OMB Approval No. 2501-0009  
(exp.01/31/2021)

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

1a. Project Name			2a. Employee Name		
1b. Project Number			2b. Employee Phone Number (including area code)		
1c. Contractor or Subcontractor (Employer)			2c. Employee Home Address & Zip Code		
			2d. Verification of identification? Yes <input type="checkbox"/> No <input type="checkbox"/>		
3a. How long on this job?	3b. Last date on this job before today?	3c. No. of hours last day on this job?	4a. Hourly rate of pay?	4b. Fringe Benefits?	4c. Pay stub?
				Vacation Yes <input type="checkbox"/> No <input type="checkbox"/> Medical Yes <input type="checkbox"/> No <input type="checkbox"/> Pension Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Your job classification(s) (list all) --- continue on a separate sheet if necessary					
6. Your duties					
7. Tools or equipment used					
8. Are you an apprentice or trainee? Y <input type="checkbox"/> N <input type="checkbox"/>					
9. Are you paid for all hours worked? Y <input type="checkbox"/> N <input type="checkbox"/>					
10. Are you paid at least time and 1/2 for all hours worked in excess of 40 in a week? Y <input type="checkbox"/> N <input type="checkbox"/>					
11. Have you ever been threatened or coerced into giving up any part of your pay? Y <input type="checkbox"/> N <input type="checkbox"/>					
12a. Employee Signature			12b. Date		
13. Duties observed by the Interviewer (Please be specific.)					
14. Remarks					
15a. Interviewer name (please print)		15b. Signature of Interviewer		15c. Date of interview	

## Payroll Examination

16. Remarks	
17a. Signature of Payroll Examiner	17b. Date

<b>Record of Employee Interview Instructions</b>	<b>U.S. Department of Housing and Urban Development Office of Labor Relations</b>	OMB Approval No. 2501-0009 (exp. 10/31/2010)
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### Instructions

#### General:

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

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

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

#### Completing the form HUD-11

Items 1a - 1c: Self-explanatory

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

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

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

Items 8 – 12b: Self-explanatory

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

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

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

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

# Historial de Entrevista del Empleado

Departamento de Vivienda y  
Desarrollo Urbano de EE.UU.  
Oficina de Relaciones Laborales

Aprobación de OMB No. 2501-0009  
(exp.01/31/2021)

Se estima que la tarea de recolección de esta información pública es de aproximadamente 15 minutos por respuesta, incluso el tiempo para examinar instrucciones, buscar fuentes de datos existentes, recopilar y mantener datos necesarios, y completar y examinar la recopilación de la información. Esta agencia no puede recopilar esta información y no se requiere que usted llene este formulario, a menos que éste exhiba un número de control válido de la Oficina de Administración y Presupuesto (OMB, por sus siglas en inglés. La información que se recopila tiene la finalidad de garantizar la conformidad a las normas laborales Federales mediante entrevistas con obreros de construcción. La información recopilada asistirá a HUD a conducir el monitoreo de conformidad; la información se usará para examinar la veracidad de los informes de nómina certificados presentados por el patrón. **Información confidencial.** La información recopilada en este formulario es considerada confidencial y está protegida por la Ley de Privacidad. La Ley de Privacidad requiere que estos archivos se mantengan con salvaguardas administrativas, técnicas, y físicos apropiados para garantizar su seguridad y confidencialidad. Además, estos archivos deberán ser protegidos contra cualquier amenaza anticipada o riesgos a su seguridad o integridad, que podría causar daño sustancial, vergüenza, inconveniencias, o injusticias a cualquier individuo de quien se mantiene la información. **La información recopilada aquí es voluntaria y cualquier información proporcionada será mantenida como confidencial.**

1a. Nombre del proyecto			2a. Nombre del empleado		
1b. Número del proyecto			2b. Número de teléfono del empleado (incluso prefijo local)		
1c. Contratista o subcontratista (Patrón)			2c. Dirección residencial del empleado y código postal		
			2d. ¿Verificación de identificación? Sí <input type="checkbox"/> No <input type="checkbox"/>		
3a. ¿Cuánto tiempo en este trabajo?	3b. ¿Último día en este trabajo antes de hoy?	3c. ¿No. de horas en su ultimo día en este trabajo?	4a. ¿Salario por hora?	4b. ¿Beneficios complementarios? Vacaciones Sí <input type="checkbox"/> No <input type="checkbox"/> Médicos Sí <input type="checkbox"/> No <input type="checkbox"/> Pensión Sí <input type="checkbox"/> No <input type="checkbox"/>	4c. ¿Talónario de paga? Sí <input type="checkbox"/> No <input type="checkbox"/>
5. Clasificación(es) de su trabajo(s) (enumere todas) --- continúe en una página separada si es necesario					
6. Sus deberes					
7. Herramientas o equipo usado					
8. ¿Es aprendiz?		S <input type="checkbox"/> N <input type="checkbox"/>	10. ¿Le pagan al menos tiempo y medio por todas las horas trabajadas superior a 40 horas semanales?		S <input type="checkbox"/> N <input type="checkbox"/>
9. ¿Le pagan todas las horas trabajadas?		S <input type="checkbox"/> N <input type="checkbox"/>	11. ¿Alguna vez ha sido amenazado o coaccionado a entregar parte de su paga?		S <input type="checkbox"/> N <input type="checkbox"/>
12a. Firma del empleado			12b. Fecha		
13. Deberes observados por el entrevistador (Por favor sea específico.)					
14. Comentarios					
15a. Nombre del entrevistador (use letra de imprenta)		15b. Firma del entrevistador		15c. Fecha de la entrevista	

## Examinación de Nómina

16. Comentarios	
17a. Firma del examinador de nómina	17b. Fecha

## Instrucciones

### Generalidades:

Este formulario será utilizado por personal de HUD y agencias locales a fin de anotar toda información recopilada durante las entrevistas en sitio con obreros y mecánicos empleados en proyectos sujetos a requisitos de pago de salario vigente federal. Por lo general, el personal que efectúe entrevistas en sitio y use este formulario será personal de HUD e inspectores de construcción con comisión, personal de la Oficina de Relaciones Laborales de HUD, e inspectores de contratos de la agencia de normas laborales local.

La información recopilada en este formulario HUD-11 es evaluada para su conformidad general y comparada con informes de nóminas certificados presentados por el empleador correspondiente. La comparación examina la veracidad de los informes de nómina y puede ser crítica para la exitosa conclusión de gestiones de cumplimiento en caso de existir violaciones a las normas laborales. La meticulosidad y exactitud de la información recopilada durante las entrevistas es trascendental.

Tenga en cuenta que tanto la entrevista misma y la información recopilada en el formulario HUD-11 se consideran ser de carácter confidencial. Las entrevistas se deberán efectuar en forma individual y en privado. Todos los trabajadores y mecánicos empleados en el sitio de trabajo deben ser puestos a disposición para las entrevistas a petición del entrevistador. Sin embargo, la participación del empleado es voluntaria. Las entrevistas serán conducidas en una manera y lugar que sean conducentes a los objetivos de la entrevista y ocasionen el menor inconveniente al patrón(nes) y empleado(s).

### Instrucciones para rellenar el formulario HUD-11

Líneas 1a - 1c: Auto aclaratorio

Líneas 2a – 2d: Anote el nombre completo del empleado, un número telefónico donde se le pueda contactar, y su dirección residencial. Muchos trabajadores de construcción usan una dirección temporal en la localidad del proyecto y tienen una dirección más permanente en algún otro lugar a donde se les puede enviar correspondencia. Si puede, obtenga una dirección más permanente. Pida al empleado algún tipo de identificación (por ej., licencia de conducir) para verificar su nombre.

Líneas 3a – 4c: Anote las respuestas del empleado. Pregunte a los empleados si tienen un talonario de paga con ellos; si no, determine si el talonario de paga concuerda con la información provista por el empleado.

Líneas 5 – 7: Asegúrese de que las respuestas del empleado sean específicas. Por ejemplo, la clasificación de trabajo (#5) debe identificar el tipo de oficio que desempeña (por ej., carpintero, electricista, plomero) – respuestas tales como “jornalero” o “mecánico” no ayudan para nuestros propósitos.

Líneas 8 – 12b: Auto explicatorio

Líneas 13 – 15c: Estos asuntos representan alguna de la información más importante que se puede recopilar durante una entrevista en sitio. Por favor sea específico en cuanto a los deberes que según su observación desempeñó el empleado. Quizás sea más fácil hacer estas observaciones antes de iniciar la entrevista. Por favor anote cualquier comentario que pueda ser de importancia. Por ejemplo, si el empleado entrevistado estaba trabajando con un equipo, ¿cuántos trabajadores tenía el equipo? ¿Se mostraba el empleado evasivo?

El nivel de precisión garantizado está directamente relacionado al grado que la(s) entrevista(s) u otras observaciones pueden indicar que existen posibles violaciones. Si las entrevistas indican que puede haber paga de salario insuficiente relacionado a algún particular oficio (s), se recomienda al entrevistador conducir entrevistas con tantos trabajadores en ese oficio(s) estén disponibles.

Líneas 16 – 17b: Inicialmente, la información en el formulario HUD-11 puede ser examinada para conformidad general. Por ejemplo, ¿está la clasificación de trabajo y el salario declarado por el empleado compatible con las clasificaciones y tasas de salario en la decisión de salario aplicable? ¿Concuerdan los deberes observados por el entrevistador con la clasificación de trabajo?

Una vez se reciben los informes de nómina certificados correspondientes, se hará una comparación de la información anotada en el formulario HUD-11 con los informes de nómina. Cualquier discrepancia entre la información del formulario HUD-11 y la del informe de nómina será anotada en la línea 16, Comentarios. Si se hacen observaciones de discrepancias se deberán tomar pasos de seguimiento para resolver las discrepancias.

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

CDBG Recipient: \_\_\_\_\_

Grant Number: \_\_\_\_\_

Project Name: \_\_\_\_\_ Project Completion Date: \_\_\_\_\_

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

Yes, or No.

2. If yes, provide the following information:

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

\$ \_\_\_\_\_

b) Method of restitution (check one):

Paid by contractor, or

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

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

Signed by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_







# "OTHER DEDUCTIONS" AUTHORIZATION TO MAKE OTHER DEDUCTIONS

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

PROJECT NUMBER: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

These deductions are voluntary and are listed below:

Deduction	Amount
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date