

Grantee Workshop

FY 2023 Public Facilities

Housekeeping

- **Exits**
- **Fire Drill**
- **Snacks/Cafeteria**
- **Restrooms**
- **What question would you like answered?**

Office of Community Development – Local Government Assistance Staff

Traci Watts, Director

Heather Paul, Assistant Director, Citizen Participation

Fenishia Favorite, Policy and Program Coordinator, Labor, ERR

Jeff Tessier, Engineer

**Denease McGee, Program Manager, Procurement, Civil Rights, Financial
Management**

Janelle Dickey, Financial Manager, Economic Development, Audits

William Hall, Procurement

Andrea Scott, Community Development Specialist

Liza Bergeron, Community Development Specialist 3, Acquisition

Teresa Holley, Community Development Specialist

Office of Community Development-Local Government Assistance Programs

Economic Development

Clearance Program

Local Government Assistance Program (LGAP)

Community Water Enrichment Funds (CWEF)

Water Sector Program

Recovery Housing Program

Resources...

Follow us on Facebook – Facebook.com/LaOCD



Watch us on YouTube– Search OCD-LGA

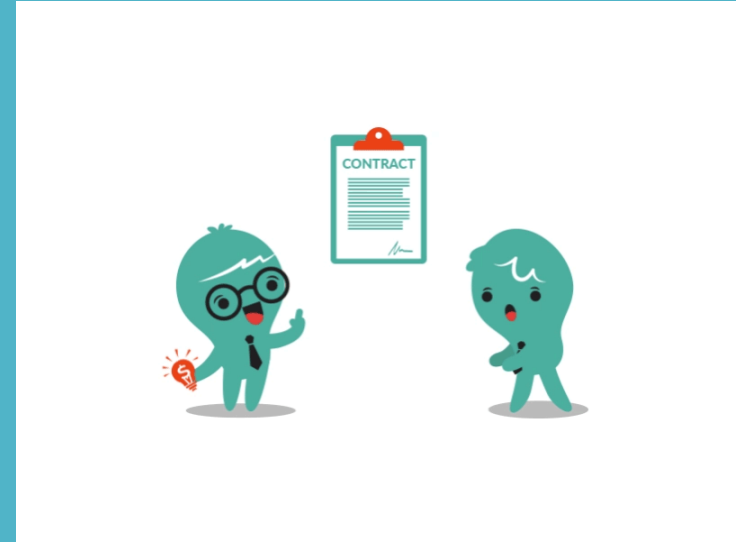


HUD Exchange - <https://www.hudexchange.info/>

OCD_LGA- <https://www.doa.la.gov/doa/ocd-lga/>

Coffee Talk- Monthly online technical assistance opportunity (link available on OCD-LGA website)

Grant Agreement Conditions



Presented By:
Janelle Dickey

**“Authorization to Incur Costs, Application
Revisions, and Grant Agreement Transmittal”
letter dated May 8, 2024**

5 Month Deadline: October 8, 2024

Authorization to Incur Costs

- Authorizes administration costs (if applicable)
- Permits Environmental Review Record (ERR) to begin
- Permits Plans & Specifications to be prepared
- Describes penalties for not meeting deadlines

If there will be a problem with the time frame, contact your grant representative early to request an extension of time

**DO NOT ADVERTISE FOR BIDS OR BEGIN
CONSTRUCTION AT THIS TIME.**



Transmittal of Blank Grant Agreement

- Sign the Grant Agreement and return with original signatures- **DO NOT DATE.**
- Additional forms/information needed to process the grant agreement:
 1. Electronic Funds Transfer (EFT) – Contact the Office of Statewide Reporting and Accounting Policy (OSRAP) at DOA-OSRAP-EFT@la.gov or 225-342-1097 for the enrollment form. Do not use an existing form.
 2. Voided Check or other form of Banking Detail – **Send with EFT Form to OSRAP.**
 3. Send confirmation to our office of the submission to OSRAP.

4. Authorized Signature Form

A-3: AUTHORIZED SIGNATURE FORM	
AUTHORIZED SIGNATURE FORM for the LOUISIANA COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM	
Authorized Signatures for Requests for Payment	
Name/Address of Grantee Organization <div style="background-color: #ccccff; height: 40px; width: 100%;"></div> (1)	Contract Number <div style="background-color: #ccccff; height: 20px; width: 60%;"></div> (2)
SIGNATURES OF INDIVIDUALS AUTHORIZED TO DRAW ON THE CITED CONTRACT FUNDS ANY TWO SIGNATURES REQUIRED TO SIGN OR COUNTERSIGN	
Typed Name and Signature <div style="background-color: #ccccff; height: 20px; width: 80%;"></div> (3)	Typed Name and Signature <div style="background-color: #ccccff; height: 20px; width: 80%;"></div> (4)
Typed Name and Signature <div style="background-color: #ccccff; height: 20px; width: 80%;"></div> (5)	Typed Name and Signature <div style="background-color: #ccccff; height: 20px; width: 80%;"></div> (6)
I CERTIFY THAT THE SIGNATURES ABOVE ARE OF THE INDIVIDUALS AUTHORIZED TO DRAW PAYMENT VOUCHERS FOR THE CITED CONTRACT FUNDS <div style="background-color: #ccccff; height: 20px; width: 80%;"></div> (7)	APPROVED <div style="background-color: #ccccff; height: 20px; width: 80%;"></div> (8)
Date and Signature of Authorized Official	Date and Signature of OCD-LGA Director

— IMPORTANT — NO ERASURES OR CORRECTIONS MAY APPEAR ON THIS FORM

INSTRUCTIONS FOR AUTHORIZED SIGNATURE FORM

Line

- 1 Insert name and address including zip code of the City/Parish receiving funds.
- 2 Leave blank, State staff will insert contract number here.
- 3-6 These blocks are for the typed name and signature of individuals who are authorized to sign the Community's Request for Payments. Two signatures are required on each request, it is a good idea to have three or four people authorized to sign. Remember also that the individual who certifies the signatures on line 7 may not be one of the authorized persons on lines 3 through 6.
- 7 Signature and Date of Individual certifying the signatures in lines 3 through 6. This is normally the Chief Executive Officer (Mayor or President of the Police Jury). If, however, the Mayor wishes to sign the Requests for Payment, he/she would sign once in lines 3 through 6 and somebody else can certify the signatures in line 7. If someone other than the Chief Executive Officer certifies the signatures in line 7, this form must be accompanied by a resolution of the governing body authorizing him/her to certify the signatures.
- 8 Leave Blank

Authorized Signature Form (Continued)

- One (1) Authorized Signature Form (ASF) – list at least 2 people who will sign the Requests for Payment.
- The authorized official signs & dates the ASF (same person cannot certify signatures and be a signor as well).
- Make sure the typed signatures exactly match the written signatures including initials.
- Send a council resolution if the authorized official is not the mayor or parish president.
- Mail the original (wet ink) ASF to our office.

Correction fluid/tape is NOT allowed.

5. Vendor Information Form – **Include bank information.**

A-4: VENDOR INFORMATION FORM

Louisiana Community Development Block Grant Program

In order for payments to be processed, the following information along with a completed IRS Form W-9 must be submitted to the Office of Community Development (OCD).

Name of Grantee: _____

Remittance Address:

Parish: _____

Contact Person: _____

Phone: _____

Fax: _____

E-mail Address: _____

Name of Bank: _____

Non-interest Bearing Bank Account Number: _____

Please return this form and the completed IRS Form W-9 to OCD or fax a copy to (225) 342-1947.

CDBG Use Only

Application #: _____

Sent to
OSRAP: _____

Supplier #: _____

6. W-9 Form – Be sure to sign the form.

<p>Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service</p>	<p>Request for Taxpayer Identification Number and Certification</p> <p>▶ Go to www.irs.gov/FormW9 for instructions and the latest information.</p>	<p>Give Form to the requester. Do not send to the IRS.</p>																					
<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.</p> <p>2 Business name/disregarded entity name, if different from above</p> <p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input type="checkbox"/> C Corporation</p> <p><input type="checkbox"/> S Corporation</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶ _____</p> <p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p> <p>5 Address (number, street, and apt. or suite no.) See instructions.</p> <p>6 City, state, and ZIP code</p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>																						
<p>Part I Taxpayer Identification Number (TIN)</p> <p>Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i>, later.</p> <p>Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.</p>																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Social security number</td> </tr> <tr> <td style="text-align: center;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table> </td> </tr> <tr> <td style="text-align: center;">OR</td> </tr> <tr> <td style="text-align: center;">Employer identification number</td> </tr> <tr> <td style="text-align: center;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table> </td> </tr> </table>			Social security number	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-	OR	Employer identification number	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-
Social security number																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-															
-	-	-	-																				
OR																							
Employer identification number																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> <td style="width: 25%; height: 20px;"> </td> </tr> <tr> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> <td style="text-align: center;">-</td> </tr> </table>					-	-	-	-															
-	-	-	-																				
<p>Part II Certification</p> <p>Under penalties of perjury, I certify that:</p> <ol style="list-style-type: none"> The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and I am a U.S. citizen or other U.S. person (defined below); and The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. <p>Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.</p>																							
<p>Sign Here</p>	<p>Signature of U.S. person ▶ _____</p>	<p>Date ▶ _____</p>																					
<p>General Instructions</p> <p>Section references are to the Internal Revenue Code unless otherwise noted.</p> <p>Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.</p> <p>Purpose of Form</p> <p>An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.</p> <ul style="list-style-type: none"> Form 1099-INT (interest earned or paid) Form 1099-DIV (dividends, including those from stocks or mutual funds) Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) Form 1099-S (proceeds from real estate transactions) Form 1099-K (merchant card and third party network transactions) Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) Form 1099-C (canceled debt) Form 1099-A (acquisition or abandonment of secured property) <p>Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.</p> <p><i>If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.</i></p>																							

Application Revisions and Additional Items

- Revisions to Application
- Financial Management Questionnaire (FMQ), Current Surety Bonds
- Fair Housing Assurance
- Section 504 Assurance
- Residential Antidisplacement and Relocation Assistance Plan, Resolution, and Certification
- Performance Schedule
- Procurement Policy, Procedures, and Resolution(s)
- Environmental Review Record (ERR) – **must receive authority from OCD-LGA to publish final notice(s) and request release of funds by deadline**
- Plans & Specs and Final Cost Estimate – must only be submitted to OCD-LGA by deadline

Other Documentation As Requested

- Acquisition Timeline (if applicable)
- Sam.gov Registration
- Verification of Professional Services Eligibility form
- Firm commitments for other project funds (if applicable)

•Instructions for each item is included in the letter.

Where are the forms?

LOUISIANA
DIVISION OF ADMINISTRATION

DIVISION OFFICES ▾ STATE EMPLOYEES ▾ VENDORS ▾ RESOURCES ▾ 🔍

GRANT MANAGEMENT

Home / Division Offices / Office of Community Development - Local Government Assistance / LCDBG Programs / Grant Management - Forms and Handbooks

OCD-LGA News
LCDBG Programs
LCDBG Plans and Reports
2015-2019
2020-2024
Public Facilities
Clearance Program
Economic Development
Sustainable Water Management Consolidation Planning Grant
Make a Difference
Grant Management - Forms and Handbooks
2021 Grantee Handbook Exhibits
2023 LCDBG Grantee Handbook and Exhibits
Grantee Handbook and Exhibits
Section A
Section B
Section C
Section D
Section E
Section F
Forms and Information
Grant Awards and Rankings
LGAP and CWF Programs
American Rescue Plan Act
Recovery Housing Program
Staff Directory
FAQs

GRANT MANAGEMENT FORMS

[Financial Management Questionnaire](#)

[Request for Payment Form \(RFP\)](#)

- [OCD-LGA's RFP Review Checklist](#) - Use this form as a tool to check your RFP and invoices.

[Performance Schedule](#)

[Monitoring Checklist \(grants FY 2019 forward\)](#)

[Desktop Review \(grants FY 2019 forward\)](#)

[Monitoring Checklist \(grants FY 2017-FY 2018\)](#)

Note: All other grant management forms can be found under the Grantee Handbook for the grant year. Please remember when completing the Closeout Package to use closeout documents from the most recent Grantee Handbook.

GRANTEE HANDBOOKS

[2024 Grantee Handbook and Exhibits](#)

[2023 Grantee Handbook and Exhibits](#)

[2022 Grantee Handbook](#)

[2021 Grantee Handbook](#)

- [2021 Grantee Handbook Exhibits](#)

[2020 Grantee Handbook](#)

- [2020 Grantee Handbook Exhibits](#)

[2019 Grantee Handbook](#)

<https://www.doa.la.gov/doa/ocd-lga/lcdbg-programs/grant-management-forms-and-handbooks/>

Risk Analysis

Based on various factors, the Grantee has been identified as either a high, medium, or low risk.

- 1. High Risk** – the OCD-LGA will make an on-site technical assistance visit prior to conducting the monitoring of this grant.
- 2. Medium Risk** – The Grantee can request an on-site technical assistance visit prior to the date that OCD-LGA schedules to monitor this grant.
- 3. Low Risk** – Technical assistance will be provided on an as needed basis.

Purpose of the technical assistance is to ensure that all compliance areas are adhered to as required.

Financial Management



Presented By:
Janelle Dickey

Financial Management Section of Grantee Handbook

- Complete requirements and forms are in the FY 2023 Grantee Handbook beginning on page 16.

Accounting

- Source Documentation – maintain evidence of receipt and expenditures of LCDBG funds paid to contractors and other parties (invoices, checks, bank statements).
- The grantee should utilize a separate governmental fund for the recordation of LCDBG funding; either a Capital Projects fund or a Special Revenue fund.
- *CDBG regulations specifically require that financial reporting establish that funds were used for an eligible activity and **clearly** establish that funds were not used for ineligible purposes. (ex. General Government or Operating and Maintenance expenses are **not eligible expenses**).*

Cash Management and Payments

2 CFR 200.305



Bank Account

- Separate bank account should be used for LCDBG funds.
- Bank account utilized for other CDBG projects funded through our office may also be used.
- Designated account must be used for all transactions including deposits & payments to vendors.
- Must be a non-interest bearing account.
- Use pre-numbered checks, not counter checks.
- Two signatures are required on all checks (only individuals authorized per FMQ) – DO NOT PRE-SIGN.
- Write the LCDBG Grant Agreement (contract) number on the check.

Clearing Account

- Prior **written approval** must be obtained for use of a “general” or “central” bank account.
- All invoices must be paid in advance.
- Checks must clear prior to reimbursement.
- Separate financial statements for LCDBG funds must still be produced.

Internal Controls and Bonding

2 CFR 200.303

2 CFR 200.304

LCDBG Financial Management Questionnaire

02-012014

Grantee: _____ Number of employees: _____

1. List those who will perform the following LCDBG financial management functions. Include title

a) Signs contracts:

_____ Title: _____

b) Receives invoices:

_____ Title: _____

c) Approves payment of invoices:

_____ Title: _____

_____ Title: _____

d) Prepares Requests for Payment:

_____ Title: _____

e) Signs Requests for Payment (*minimum of two required*):

_____ Title: _____

_____ Title: _____

_____ Title: _____

_____ Title: _____

f) Records transactions:

_____ Title: _____

g) Maintains custody of checkbook:

_____ Title: _____

_____ Title: _____

h) Signs checks (*minimum of two required*): Must be covered by bond or fidelity policy.

_____ Title: _____

_____ Title: _____

_____ Title: _____

_____ Title: _____

i) Reconciles bank statements:

_____ Title: _____

j) Prepares fiscal year end financial statements:

_____ Title: _____

2. Identify by title the individuals who are covered by a bond or insurance and the amounts. Include Mayor or Parish President if involved in signing checks (1.h).

Attach a copy of the bond(s) or insurance policy(s).

Title: _____	Amount: _____
Title: _____	Amount: _____
Title: _____	Amount: _____
Title: _____	Amount: _____

3. Identify name of company that issued the bond or insurance policy:

Issue date: _____	Expiration date: _____
Issue date: _____	Expiration date: _____

4. What is your fiscal year end date? _____

5. The most recent audit covered what period? _____

Identify name of firm that prepared the audit: _____

6. Name and telephone number of local official to contact regarding this questionnaire:



_____	_____	_____
<i>Name</i>	<i>Title</i>	<i>Phone #</i>

I certify that this information is true to the best of my knowledge.

Signature _____

Title: _____

Date: _____

Financial Management Questionnaire (FMQ)

- List the people who will perform various financial duties.
- At least two people authorized to sign *Requests for Payments* (RFPs) – should match the ASF.
- At least two people authorized to sign checks. They should be the only ones signing checks, and must be bonded or covered by a fidelity policy. *Should also correspond with bank authorized signors.*
- Person responsible for preparing fiscal year-end financial statements should have the skills and knowledge to apply Generally Accepted Accounting Principles (GAAP).
- If there are changes in personnel, a new FMQ must be submitted for approval, along with current bonding.

Surety Bond/Insurance Policy

- **The individuals authorized to sign checks must be covered by a Surety Bond or other Fidelity Insurance policy.**
- Include a copy of the Surety Bond/Insurance Policy that specifically identifies the persons and/or positions insured with the Financial Management Questionnaire.
- **Documentation must show that the insurance or bonding is current** – This can be shown by either a current certificate, current invoice and proof of payment, or written documentation from insurance provider.
- Documentation of current bonding is also needed each time the FMQ is updated, and at monitoring.

Audit Requirements

2 CFR Part 200 Subpart F

“...standards ...for the audit of non-Federal entities expending
Federal awards.”

Yes, CDBG funds are Federal Funds

Audit Requirements

2 CFR 200.501

“*Single audit.* A non-Federal entity that expends \$750,000 or more during the non-Federal entity's fiscal year in Federal awards must have a single audit conducted...”

\$750,000 in total Federal expenditures, not just CDBG.

Other Types of Financial Reports

- Annual audit if revenue received was \$500,000 or more.
- Review/Attestation if revenue received was \$200,000 or more but less than \$500,000.
- Annual Compilation if revenue received was more than \$75,000 but less than \$200,000.
- Annual Sworn Financial Statements if revenue received was \$75,000 or less.

Audit Requirements

2 CFR 200.508

It is the grantee's responsibility to:

- Procure or otherwise arrange for the audit.
- Prepare appropriate financial statements, including the schedule of expenditures of Federal awards (if applicable).
- Provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information.
- Promptly follow up and take corrective action on audit findings.

Audit Requirements

- LCDBG funds should be reported in a Capital Projects fund or a Special Revenue fund.
- LCDBG revenue and program expenditures must be clearly identified.
- LCDBG funds utilized for each project should be separately identified.
- LCDBG funds **should not** be transferred and expensed from another fund. The Capital Projects or Special Revenue fund should be utilized for the recordation of all LCDBG revenue and expenditures.

General Ledger Chart Accounts

A-6: GENERAL LEDGER CHART OF ACCOUNTS

LOUISIANA COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

REVENUE

Increases in net current assets and are recognized in the accounting period in which they become measurable and available.

- Cr **Intergovernmental Revenues**
Revenues from other governments in the form of grants.
- Cr **LCDBG Program Revenue**
Revenue earned when allowable and allocable expenditures are incurred for an eligible activity of the program and reimbursable from funds obligated in the grant agreement with OCD.
- Cr **Local Revenue**
Other local government funds transferred on a permanent basis to the CDBG program to provide additional financing of the program.
- Cr **LCDBG Program Income** (24 CFR 570.489(e))
Gross income generated by the grantee through the use of CDBG funds.

EXPENDITURES

Decreases in net current financial resources. Expenditures include disbursements and accruals of the current period. Expenditures do not include encumbrances. Allowable and allocable costs can only be incurred for eligible activities as defined by Section 105(a) of the HCDA and 24 CFR 570 Subpart C and are specified in the approved budget of the grant agreement.

- Dr **Administration** (24 CFR 570.206)
Costs incurred for the purpose of general administration and management of the program. Costs may be incurred by employees of the grantee per 2 CFR 200.430 or independent contractor per 2 CFR 200.459 and procured per 2 CFR 200.320.
- Dr **Acquisition** (24 CFR 570.201(a))
Costs incurred for the purpose of obtaining the use of real property to carry out the program.
- Dr **Engineering** (*Public Facilities and Improvements* 24 CFR 570.201(c))
Costs incurred for design necessary to carry out the program and is considered part of "Construction" eligible activity below. Costs may be incurred by employees of the grantee per 2 CFR 200.430 or by an independent contractor per 2 CFR 200.459 and procured per 2 CFR 200.320.
- Dr **Construction** (*Public Facilities and Improvements* 24 CFR 570.201(c); *Economic Development* 24 CFR 570.203(a))
Costs incurred for the construction, reconstruction, rehabilitation or installation of public facilities and improvements and excluding ineligible costs as defined in 24 CFR 570.207(b)(2).
- Dr **For Profit Business Assistance** (24 CFR 570.203(b) *Economic Development*). The provision of assistance to a private for-profit business, including, but not limited to, grants, loans, loan guarantees, interest supplements, technical assistance, and other forms of support, for any activity where the assistance is appropriate to carry out an economic development project.
- Dr **Rehabilitation Activities** (24 CFR 570.202(b)(6)) Connection of residential structures to water distribution lines or local sewer collection lines.
- Dr **Clearance/Demolition** (24 CFR 570.201(d))
Costs incurred for the purpose of clearance, demolition, removal of buildings, and facilities improvements.
- Dr **Planning** (24 CFR 570.205)
Costs incurred for the purpose of gathering data, preparation of studies, and identification of actions for the purpose implementing future community development projects.

ASSETS

CURRENT ASSETS

Resources that are available or can readily be made available to meet the cost of operations or to pay current liabilities.

Dr **Cash**

Available bank deposits (non-interest bearing checking accounts) and currency, coin, and reimbursement checks to be disbursed within 3 working days of receipt.

Dr **Grant Revenue Receivable**

Amounts due to the grantee from OCD for eligible costs incurred for the program.

Dr **Due from Other Funds**

An asset account reflecting amounts owed to the CDBG program by a grantee's other funds. This account includes only short-term obligations on an open account.

LIABILITIES

CURRENT LIABILITIES

Those obligations which are payable within one year from current assets or current resources.

Cr **Accounts Payable**

Amounts owed to vendors or organizations for goods and/or services furnished to the CDBG program. Accounts Payable does not include amounts due to other agencies, funds, or other governments.

Cr **Contracts Payable**

Amounts due to contractors for public improvements on work done for the grantee's CDBG program are to be recorded as Contracts Payable.

Cr **Due to Other Funds**

A liability account reflecting amounts owed by the CDBG to another fund when other funds advance resources to pay for eligible and allocable CDBG program costs.

Cr **Retainage Payable**

A liability reflecting amounts due on construction contracts not paid pending final inspection of the project or the lapse of a specified period, or both. The unpaid amount is usually a stated percentage of the contract price.

FUND BALANCE

Cr The difference between fund assets and fund liabilities. Governmental fund balances should be segregated into reserved and unreserved amounts.

**INITIAL
DOCUMENTS**

**JOURNAL
ENTRIES**

**GENERAL
LEDGER
ACCOUNTS**

RECORDED
IN ...

POSTED
TO ...

REPORTED
ON ...

Source
Documents

GENERAL
JOURNAL

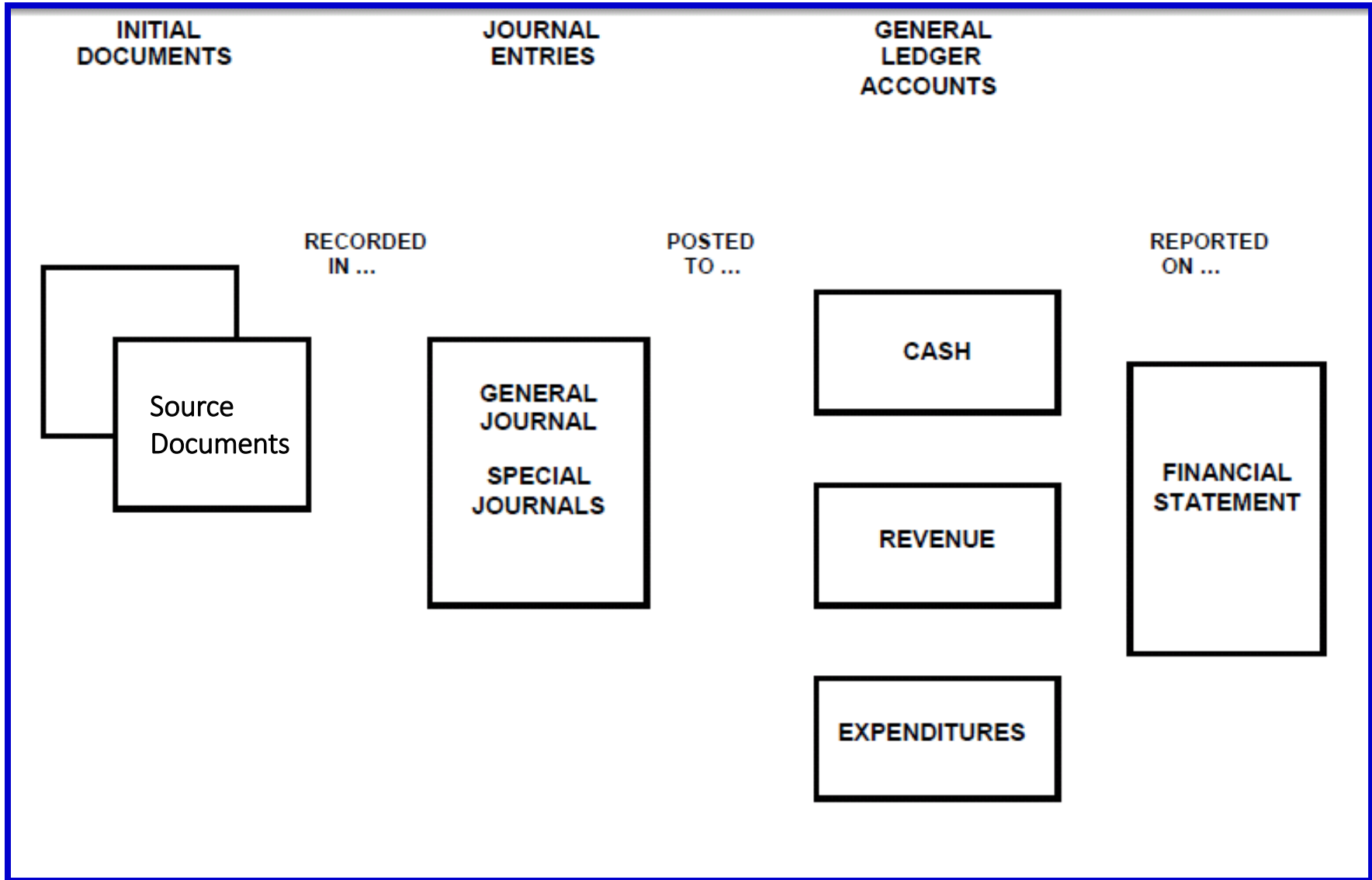
SPECIAL
JOURNALS

CASH

REVENUE

EXPENDITURES

FINANCIAL
STATEMENT



Examples of General Purpose Financial Statements

****UNAUDITED******CITY OF LIGHTS****CAPITAL PROJECTS FUND
STATEMENT OF REVENUES, EXPENDITURES & CHANGES IN FUND
BALANCE
FOR THE YEAR ENDED JUNE 30, 20_____****REVENUES:**

LCDBG Program	\$54,345
City	<u>7,455</u>
TOTAL Revenues	\$61,800

EXPENDITURES:

Administrative Services	\$12,500
Engineering Services	25,700
Project Construction	<u>23,800</u>
TOTAL Expenditures	\$61,800

EXCESS (DEFICIENCY)OF REVENUES OVER EXPENDITURES	- 0 -
---	--------------

FUND BALANCE, BEGINNING	- 0 -
--------------------------------	--------------

FUND BALANCE, ENDING	- 0 -
-----------------------------	--------------

****UNAUDITED****

CITY OF LIGHTS

**CAPITAL PROJECTS FUND
BALANCE SHEET
FOR THE YEAR ENDED JUNE 30, 20____**

ASSETS:

Cash	\$ 1,500
Grant Revenues Receivable	<u>18,450</u>
TOTAL ASSETS	\$19,950

LIABILITIES & FUND EQUITY:

Accounts Payable	\$17,370
Due to City	2,480
Unearned Revenue	<u>- 0 -</u>
TOTAL LIABILITIES	\$19,950
FUND BALANCE	- 0 -

TOTAL LIABILITIES AND

FUND EQUITY	<u>\$19,950</u>
--------------------	------------------------

Audit Requirements

- Grantee will be placed on the Louisiana Legislative Auditor's (LLA) Non-Compliance List if the audit is not received by the LLA within 6 months of the fiscal year end date.
- If grantee is on LLA's Non-Compliance List, they cannot receive CDBG funds.
- Note: If extension has been granted by the LLA, send a copy of LLA's approval to the LGR.


Requests for Payment (RFP)

**Requesting Program Funds From the
Office of Community Development-Local
Government Assistance (OCD-LGA)**

Request for Payment Form

Available On-line at:

<https://www.doa.la.gov/doa/oed-lga/lcdbg-programs/grant-management/>

 LOUISIANA
DIVISION OF ADMINISTRATION

DIVISION OFFICES ▾ STATE EMPLOYEES ▾ VENDORS ▾ RESOURCES ▾ 🔍

GRANT MANAGEMENT

Home / Division Offices / Office of Community Development - Local Government Assistance / LCDBG Programs / Grant Management - Forms and Handbooks

- OCD-LGA News
- LCDBG Programs
 - LCDBG Plans and Reports
 - 2015-2019
 - 2020-2024
 - Public Facilities
 - Clearance Program
 - Economic Development
 - Sustainable Water Management Consolidation Planning Grant
 - Make a Difference
 - Grant Management - Forms and Handbooks
 - 2021 Grantee Handbook Exhibits
 - 2023 LCDBG Grantee Handbook and Exhibits
 - Grantee Handbook and Exhibits
 - Section A
 - Section B
 - Section C
 - Section D
 - Section E
 - Section F
 - Forms and Information
 - Grant Awards and Rankings
 - LGAP and CWEF Programs
 - American Rescue Plan Act
 - Recovery Housing Program
 - Staff Directory
 - FAQs

GRANT MANAGEMENT FORMS

- [Financial Management Questionnaire](#)
- [Request for Payment Form \(RFP\)](#)
 - OCD-LGA's RFP Review Checklist - Use this form as a tool to check your RFP and invoices.
- [Performance Schedule](#)
- [Monitoring Checklist \(grants FY 2019 forward\)](#)
- [Desktop Review \(grants FY 2019 forward\)](#)
- [Monitoring Checklist \(grants FY 2017-FY 2018\)](#)

Note: All other grant management forms can be found under the Grantee Handbook for the grant year. Please remember when completing the Closeout Package to use closeout documents from the most recent Grantee Handbook.

GRANTEE HANDBOOKS

- [2024 Grantee Handbook and Exhibits](#)
- [2023 Grantee Handbook and Exhibits](#)
- [2022 Grantee Handbook](#)
- [2021 Grantee Handbook](#)
 - 2021 Grantee Handbook Exhibits
- [2020 Grantee Handbook](#)
 - 2020 Grantee Handbook Exhibits
- [2019 Grantee Handbook](#)

LOUISIANA CDBG/CDBG-CV REQUEST FOR PAYMENT (RFP)

A. Name, Address, and Telephone Number of Contractor (City/Parish)			B. Date of Request		
			D. Request #		
C. Contract Number(s) (Enter all if multiple contracts issued) / Program Year / CDBG or CDBG-CV Grant Representative					
E. Federal Employer ID	STATE USE ONLY	CV Funds Y N	Split Funding Y N		
F. Actual Delivery Date (A.D.D.) - The most recent date of delivery of services for each State fiscal year.			A.D.D. FY 1:		
			A.D.D. FY 2:		
1. Status of LCDBG/CDBG-CV Funds			Amount	State Use Only	IDIS Activity #
A. Amount Requested with this Request (Total from Line F below)			\$ -		
B. LCDBG/CDBG-CV Funds Received to Date					
C. LCDBG/CDBG-CV Funds Requested but not yet Received					
D. Subtotal (Total Line A through Line C)			\$ -		
E. Total Grant Amount (Amount of Contract)					
F. Remaining Balance (Subtract Line D from Line E)			\$ -		
2. Amount of Funds Requested by Activity			A.D.D. FY 1	A.D.D. FY 2	Amount
A. Public Works, Facilities, Site Improvements					
1. Sewer					
2. Streets					
3. Water (Potable)					
4. Other					
B. Rehabilitation					
C. Economic Development					
1. Commercial/Industrial Infrastructure Development					
2. Other					
D. Administration					
1. Pre-agreement Costs					
2. Public Facilities, Demonstrated Needs, & Economic Development					
3. Other					
E. Other					
F. Total					
3. Certification					
I certify that this Request for Payment has been drawn in accordance with the terms and conditions of the contract for the grant or loan and that the amount for which drawn is proper for payment to the drawer at the drawer's bank. I also certify that the data reported above is correct and that the amount of the Request for Payment is not in excess of current needs. Approved and detailed invoices that equal or exceed the amount are attached.					
A. Date	Signature				Title
B. Date	Signature				Title
4. Approval (State Use Only)					
A. Reviewed By					Date
B. Approved By					Date
PAYMENTS CAN BE VERIFIED ONLINE AT: https://wwwcfprd.doa.louisiana.gov/vendsearch/index2.cfm					
Please sign in blue ink.			LaGov checked:		
			Date:		

Request for Payment Form

A: Name, address, and phone number

B: Date of the request

C: Contract numbers (all), Program year, OCD Grant Representative

D: Request number (if corrections are needed the request number will be the same, but a letter will be added. i.e., Request # 2A).

E: Federal Employer ID

F: This date should be the last date of the invoicing period. If period covered by invoices crosses more than 1 fiscal year, there will be an A.D.D. FY 1 (thru 6/30) and FY 2 (last date covered).

Request for Payment Form

1. **Status of LCDBG Funds:** Fill in the corresponding fields that apply to the grant when completing the RFP.
2. **Amount of Funds Requested by Activity:**
 - a. Dollar amount should be in the corresponding field that applies to your grant. i.e., sewer, water, streets, etc.
 - b. If applicable
 - c. If applicable
 - d. If applicable
 - e. If applicable
 - f. Total from all categories

Request for Payment Form

3. Certification Date, Signature, Title:

- Print 2 copies
- Sign both in blue ink only
- Signatures must match the Authorized Signature Form exactly as typed and signed, including middle initials and titles, (examples: Dr., Sr., or Jr.). Same persons must be listed with that responsibility on the Financial Management Questionnaire.
- If there is a personnel change, send a new Authorized Signature Form and Financial Management Questionnaire.

4. Approval: OCD-LGA

Mail original RFP forms to OCD-LGA, along with approved invoices.

Invoices

- Must be submitted with all Requests for Payment.
- Must identify the date the goods and/or services were received.
- For professional service and other contractor invoices, the vendor must state the time period covered by the invoice.
- If goods are provided, the vendor must identify the item quantities and unit costs.
- For professional services (2 CFR 200.459), the vendor must identify the task, the effort (in hours), and the hourly rate. *This should be based on the Cost Reasonableness spreadsheet included in the professional services contract.*

Use of percentage or stage of completion is only allowed for construction contracts.

Invoices

- If “other” money is covering part of the invoice, identify the LCDBG portion and the “other” portion.

Example:	City funds	\$ 5,000
	LCDBG funds	<u>\$ 8,000</u>
	Total	\$13,000


- Invoices must be signed, indicating approval, by the person listed with that responsibility on the Financial Management Questionnaire.

You can monitor deposits online at the Division of Administration (DOA) – Office of Statewide Reporting and Accounting Policy (OSRAP) website.


<https://www.doa.la.gov/doa/osrap/>

HERE'S HOW...

OSRAP – Click “Vendor Payments – LaGov”




LOUISIANA
DIVISION OF ADMINISTRATION

[DIVISION OFFICES](#) [STATE EMPLOYEES](#) [VENDORS](#) [RESOURCES](#) 


OFFICE OF STATEWIDE REPORTING AND ACCOUNTING
POLICY

[Home](#) / [Division Offices](#) / [Office of Statewide Reporting and Accounting Policy](#)


- Staff Directory
- AFR Packets
- Vendor Information
- Agency Information
- Statewide Cost Allocation
- Cash Management Improvement Act
- Policy and Procedures
- Annual Financial Report
- Memoranda
- Accounts Receivable




VENDOR INFORMATION




ANNUAL FINANCIAL REPORT



ACCOUNTS RECEIVABLE



AGENCY INFORMATION



CASH MANAGEMENT IMPROVEMENT ACT

OFFICE OF STATEWIDE REPORTING AND ACCOUNTING POLICY

The Office of Statewide Reporting and Accounting Policy is a service and control agency established within the Division of Administration to perform the following functions: publish the Comprehensive Annual Financial Report of the state of Louisiana and other statewide reports, interim reports to the Federal government, and other reports to the Commissioner of Administration.




The Commissioner of the Division of Administration is charged with establishing a uniform system of accounting in all state agencies (LRS 39:78). He has delegated to OSRAP the authority to establish and maintain accounting policies and procedures in compliance with state and federal laws, as well as, ensuring compliance with general accounting principles, pronouncements of the Governmental Accounting Standards Boards, and other accounting standards setting boards.

QUICK LINKS

- [Financial Reporting and Accounting Support Portal](#)
- [Vendor Payments - LaGov](#)
- [Office of State Procurement - LaGov New Vendor Registration](#)
- [Office of State Procurement - Vendor Number Search](#)

CONTACT US

Brian Fleming, CPA Director

-  225.342.0708
-  P.O. Box 94095
Baton Rouge, LA 70804
-  1201 N. Third St., Suite 6-130
Baton Rouge, LA 70802

Click on “Vendor Payment Inquiry”

STATE OF LOUISIANA

LaGov
Vendor
Portal

LaGov Vendor Self Service

User *

Password *

(Password is case sensitive)

[System Requirements](#)

Note: Do Not Attempt to Log On

Under Date Options, enter the **Date Range**. In the Selection Criteria section, enter the **Vendor Number** for the Project and the Grantee's **EIN or Federal Employer ID #** Click '**Execute Immediately**.'


Vendor Payment Listing

Save as Variant... Back Exit Cancel Help

Date Options


Invoice Date 01/01/2021 to 12/17/2021


Selection Criteria

Vendor Number 310112288 to 

EIN 726001761

** Enter Vendor Number and EIN without dashes **

Check Number to 

Document Number to 

Display

Layout

Execute

Execute Immediately

List of Payments

Vendor Payment Listing

Back Exit Cancel

Vendor	Name	Pymt Doc	EFT/Check Date	Check No	Check Amount	Cleared Date	Status
310112288	<input type="checkbox"/> CITY OF WESTLAKE	2000807904	08/31/2021	ACH	134,024.81	09/01/2021	CLEA...
	CITY OF WESTLAKE	2000826467	10/05/2021	ACH	68,596.77	10/06/2021	CLEA...
	CITY OF WESTLAKE	2000851087	11/09/2021	ACH	8,947.71	11/10/2021	CLEA...




Double click on any line for Additional Detail

Details ×

0310112288 CITY OF WESTLAKE 2000851087 Check No: ACH 8947.71

Payee Remittance Address		
P.O BOX 700	WESTLAKE	LA

Document Number: 5101465022	Invoice Gross	
Business Area: 107 DIVISION OF ADMINISTRATION	Telephone: 225-342-0700	
Vendor Invoice #: 2055277611	Comments: CDBG 2000552776	
Line Amount:	8947.71	

Receipt of Requested Funds

If the RFP is **processed** by Thursday afternoon, the money should be in the CDBG account the following Wednesday.

When expecting CDBG funds, monitor the CDBG account closely to see if funds were deposited.

3-Day Rule: Vendors must be paid within 3 business days of funds being deposited.

Program Income

24 CFR 570.489(e) & 24CFR 570.504

- Gross Income that is generated by the use of LCDBG funds.
For example: Interest earned on LCDBG funds incorrectly deposited into an interest bearing account.
- Contact the OCD for instructions if program income is received or if there is a possibility that it will be received.

Monitoring

For monitoring purposes – we need current & accurate financial records including:

- Chart of Accounts for either a Special Revenue Fund or Capital Projects Fund
- General Ledger (Including All Transactional Detail by Account)
- Statement of Revenues, Expenditures and Changes in Fund Balances
- Balance Sheet
- All Bank Statements within timeframe of LCDBG Account Activity – from award through closeout – and copies of all checks.
- Documentation of current bonding or other insurance for individuals signing checks.
- Checkbook

Contact Information

Janelle Dickey

Janelle.Dickey@la.gov

225-219-7278

QUESTIONS

The word "QUESTIONS" is rendered in large, bold, white 3D block letters with a slight drop shadow. It is centered and surrounded by a vibrant, multi-colored collage of question marks and geometric shapes. The question marks are in various colors including blue, yellow, green, pink, and orange. The geometric shapes include circles, squares, and rectangles in the same color palette. The overall composition is dynamic and visually busy, emphasizing the theme of inquiry.



Environmental Review Record

Presented By:
Fenishia Favorite

Federal Requirements

24 CFR Part 58

Each LCDBG (Louisiana Community Development Block Grant) Program participant must implement their program in compliance with the National Environmental Policy Act of 1969 (NEPA) and other applicable federal environmental laws.

For all projects, especially economic development projects, particular attention must be given to 24 CFR Part 58.32 – Project Aggregation.

Program Requirements

All contract conditions must be cleared within five months of the date of the Authorization to Incur Costs letter.

The Environmental Review Record (ERR) should be received by the State within five months of this date to ensure sufficient time for review.

The grantee's Chief Elected Official (CEO) will assume overall responsibility for the environmental review process.

The CEO must sign all certifications and findings.

The ERR must be submitted to this office with original signatures (NOT e-mailed)

If grant funds are used to prepare the ERR no correspondence should be dated before the Authorization to Incur Cost letter.

Project Description & Map

This should be the first step of the review process.

The description should be detailed and include all activities that will take place in the project.

Must include the words: “site-specific” or “not site-specific”

Map should show the exact location(s) of the project

The Project Description and Map will be sent with all correspondences

Project Description will also help Grantee determine the level of review.

Environmental Review Levels

Exempt

Environmental studies, project planning, and administrative costs

Categorically Excluded Not Subject to 58.5 – 58.35 (b)

Operating costs and equipment

Categorically Excluded Activities Subject to 58.5 – 58.35 (a)

Acquisition, repair, and improvements (less than 20%)

Activities Requiring an Environmental Assessment 58.36

New construction and substantial improvements (more than 20%)

Environmental Impact Statement – 58.37

Significant impact on environment

Certificate of Exemption

Must be included for all projects.

Signed, dated, CDBG must be checked, funding amount must be entered, Read selections and make sure they match the project (at least three boxes checked)

A-13: CERTIFICATION OF EXEMPTION FOR HUD FUNDED PROJECTS

Exemption Determination for Activities Listed at 24 CFR §58.34

Grant Recipient: _____ Project Name: _____
 Project Description (Include all actions which are either geographically or functionally related): _____
 Location: _____
 Funding Source: CDBG HOME ESG HOPWA EDI Capital Fund Operating Subsidy Hope VI Other
 Estimated Funding Amount: _____ Grant Number: _____
 I have reviewed and determined that the above-mentioned project is Exempt per 24 CFR §58.34 as follows:

<input type="checkbox"/>	58.349(a)(1). Environmental & other studies, resource identification & the development of plans & strategies;
<input type="checkbox"/>	58.34(a) (2) Information and financial services;
<input type="checkbox"/>	58.34(a) (3) Administrative and management activities;
<input type="checkbox"/>	58.34(a) (4) Public services that will not have a physical impact or result in any physical changes, including but not limited to services concerned with employment, crime prevention, child care, health, drug abuse, education, counseling, energy conservation and welfare or recreational needs;
<input type="checkbox"/>	58.34(a) (5) Inspections and testing of properties for hazards or defects;
<input type="checkbox"/>	58.34(a) (6) Purchase of insurance;
<input type="checkbox"/>	58.34(a) (7) Purchase of tools;
<input type="checkbox"/>	58.34(a) (8) Engineering or design costs;
<input type="checkbox"/>	58.34(a) (9) Technical assistance and training;
<input type="checkbox"/>	58.34(a) (10) Assistance for temporary or permanent improvements that do not alter environmental conditions and are limited to protection, repair, or restoration activities necessary only to control or arrest the effects from disasters or imminent threats to public safety including those resulting from physical deterioration;
<input type="checkbox"/>	58.34(a) (11) Payment of principal and interest on loans made or obligations guaranteed by HUD;
<input type="checkbox"/>	58.34(a) (12) Any of the categorical exclusions listed in §58.35(a) provided that there are no circumstances that require compliance with any other Federal laws and authorities cited in §58.5.

The responsible entity must also complete and attach the **58.6 Compliance Checklist**. By signing below the Responsible Entity officially determines in writing that all activities covered by this determination are Exempt and meets the conditions specified for such exemption under section 24 CFR §58.34. This document must be maintained in the ERR.

AUTHORIZED RESPONSIBLE ENTITY OFFICIAL:

_____	_____
Authorized Responsible Entity Signature	Date
_____	_____
Authorized Responsible Entity Name (printed)	Title (printed)

Compliance Documentation Checklist

Must be included with all projects.

Read questions thoroughly and confirm that all the answers fit the scope of the project according to the project description. Coastal Zone barrier map should be attached.

<https://www.fws.gov/ecological-services/habitat-conservation/cbra/maps/a/LA.pdf>

A-14: COMPLIANCE DOCUMENTATION CHECKLIST

Compliance Checklist for 24 CFR §58.6, Other Requirements

Complete for all projects, including Exempt (§58.34), Categorically Excluded Subject to §58.5 [§58.35(a)], Categorically Excluded Not Subject to §58.5[§58.35(b)], and Projects Requiring Environmental Assessments (§58.36). Must be completed for each individual property address included within the project description.

Project Name: _____

1. §58.6(A) AND (B) FLOOD DISASTER PROTECTION ACT OF 1973, AS AMENDED; NATIONAL FLOOD INSURANCE REFORM ACT OF 1994

- a. *Does the project involve: Formula grants made to states, State-owned property, small loans (\$5,000 or less), assisted leasing that is not used for repairs, improvements, or acquisition?*

Yes No

If Yes, compliance with this section is complete.

If No, continue.

- b. *Is the project located in a FEMA identified Special Flood Hazard Area?*

Yes No

If No, compliance with this section is complete.

If Yes, continue.

- c. *Is the community participating in the National Flood Insurance Program (or has less than one year passed since FEMA notification of Special Flood Hazards)?*

Yes No

If Yes, Flood Insurance under the National Flood Insurance Program must be obtained. If HUD assistance is provided as a grant, insurance must be maintained for the economic life of the project and in the amount of the total project cost (or up to the

Statutory Checklist and Worksheet

Worksheet must be completed because the worksheet directs the Grantee to know what should be put on the checklist.

The Compliance Finding section should state what was included in the response from the agencies. The Source Documentation column should include both copies of the letters and dates that match the letter. If a map is referenced the date on the map and map number should be included.

Under each set of questions on the statutory worksheet it will let you know depending on responses if box A or B should be checked on the checklist.

Historical Properties

The letter sent to SHPO and the response letter received from SHPO should both be included and referenced on checklist.

If tribes should be contacted, the list from the TDAT should be included as well as all correspondences to and from the listed tribes for that area. If the tribes/SHPO request something the wording should be included in the compliance finding section. <https://egis.hud.gov/tdat/>

All letters and dates should be included on the Statutory Checklist.

If a Cultural Resource Survey is requested by a tribe consult with OCD on a timeline and extension request.

Floodplain and Wetland Management

Floodplain Management - FEMA website will be used to verify the map panel and the zones that should be in the project area. (Reference the FEMA number and date of the map on the checklist) If the project is located in a 100-year, 500-year or floodway then an 8-step must be completed.

<https://msc.fema.gov/portal/home>

Wetland Management- Check the USFSW map and make sure it's the correct area. If Wetlands are in the project area or adjacent then the 8-Step will need to be completed. (Reference Wetlands Inventory Map on checklist) <https://www.fws.gov/wetlands/Data/Mapper.html>

8-Step Process

General Overview:

Step 1: Reviewed the site and ensured the project is needed

Step 2: Early Publication notice w/ 15-day comment period

Step 3: Can the project be avoided? List reasons why it can not be avoided.

Step 4: Permanent adverse impacts?

Step 5: Require minimization of project impacts

Step 6: Re-evaluation of alternatives

Step 7: Final notice Publication w/ 7-day comment period

Step 8: Proceed to implement project after comment period

If the 8-step is needed for both Wetlands and Floodplains the Grantee can include both findings in one 8-step review, but all findings must be mentioned. Also, make sure that the findings of the 8-step are included and the 8-step process is mentioned in the compliance determination column.

Maps

Coastal Zone Map

Coastal Zone map for Louisiana should be included and referenced on checklist as Coastal Zone Map <https://www.fws.gov/ecological-services/habitat-conservation/cbra/maps/a/LA.pdf>

Coastal Zone Barrier Map

Coastal Zone barrier map should be attached to the compliance checklist.
<https://www.fws.gov/ecological-services/habitat-conservation/cbra/maps/a/LA.pdf>

Sole Source Aquifer Map

<https://epa.maps.arcgis.com/apps/webappviewer/index.html?id=9ebb047ba3ec41ada1877155fe31356b>

Environmental Justice Map

LMI Map that shows concentrated areas should be included and referenced on the checklist

**PLEASE WATCH THE YOUTUBE VIDEO ON HOW TO GET ALL MAPS
NEEDED FOR THE ERR**

Endangered Species

A USFSW Report is required from

<https://www.fws.gov/southeast/lafayette/project-review/>

If the report yields any findings consultation is required with the agency and a memo is required from the CEO.

All letters and memos should be referenced on the checklist and include the dates as well as the findings.

Wild and Scenic Rivers

The Grantee should include a map that shows the distance from the Sabine River.

The list of Rivers from the National Parks Service that are currently being studied should also be included.

<https://www.nps.gov/subjects/rivers/nationwide-rivers-inventory.htm>

<https://www.nps.gov/subjects/rivers/louisiana.htm>

Both the list and the map should be mentioned on the checklist

Farmland Protection

Should include one of the following for documentation:

A determination that the project does not include any activities, including new construction, acquisition of undeveloped land, or conversion, that could potentially convert one land use to another

Evidence that the exemption applies, including all applicable maps

Evidence supporting the determination that “Important Farmland,” including prime farmland, unique farmland, or farmland of statewide or local importance regulated under the FPPA does not occur on the project site

Documentation of all correspondence with NRCS, including the completed AD-1006 and a description of the consideration of alternatives and means to avoid impacts to Important Farmland

Airport Hazards

Must include 2 separate maps (one for civil airports and one for military airfields)

Both maps must show the distance from the site to the airport.

<https://www.airnav.com/> or google maps

Other Compliance Areas

Air Quality – non attainment list for Louisiana should be included.

Noise Abatement and Control – refers to the project description in the compliance determination section.

Explosives and Flammables – refers to project description in the compliance determination section.

Contamination and toxic substances – NETROnline search and NepAssist map both included and referenced in compliance determination section.

Map - <https://nepassisttool.epa.gov/nepassist/entry.html> –

Please complete search in NETROnline <https://environmental.netronline.com/>

Revisions

After the initial review – If revisions are needed the reviewer will send out a letter requesting revisions. The Grantee should respond in a timely manner to avoid delays and penalties. A second revision letter may be needed if all corrections are not correct.

Once the ERR is complete and no other revisions are needed the reviewer will send a letter giving permission to publish or clearance depending on the level of review.

Activities Requiring an Environmental Assessment – 58.36

Comment Periods - Combined Notice

	Publication	Posted
“Combined Notice” Date	06/04/xx (15 days)	06/04/xx (18 days)
Date of “Request for Release of Funds and Certification”	06/20/xx	06/23/xx
Date ERR and request for funds mailed to State	06/20/xx	06/23/xx
ERR received by State	06/22/xx	06/25/xx
State’s 15-day Public Comment Period	06/23/xx to 07/07/xx	06/26/xx to 07/10/xx

Categorical Exclusions Subject To 58.5 – 58.35 (a)

Comment Periods - Notice of Intent to Request Release of Funds

	Publication	Posted
Notice of Intent Date	06/04/XX (7 days)	06/04/xx (10 days)
Date of “Request for Release of Funds and Certification”	06/12/xx	06/15/xx
Date ERR and request for funds mailed to State	06/12/xx	06/15/xx
ERR received by State	06/14/xx	06/17/xx
State’s 15-day Public Comment Period	06/15/xx to 06/29/xx	06/18/xx to 07/02/xx

ERR Clearance

All required permits, mitigation measures, and the Eight-Step Process must be included in the notices.

The Request for Release of Funds must be signed by the CEO after the end of the local public comment period.

The ERR reviewer will count **15** days from the date the RROF is received for the state comment period. The day after the 15th day the reviewer will prepare the ERR clearance letter.

If the entity is determined EXEMPT after a review of documents then the reviewer will issue a clearance and the Permission to Publish is not needed.

All activities must be environmentally cleared including those funded by private funds.

Until the State has approved the recipient's Request for Release of Funds, neither a grantee nor any participant, including public or private non-profit or for-profit entities or any of their contractors, may commit LCDBG/HUD funds or private funds or undertake an activity or project. (24 CFR Part 58.22)

This regulation is triggered when the grantee's application is submitted to the State.

Revised Environmental Review Records

If the project site/location or scope of work changes after clearance, then the ERR must be amended.

All compliance areas must be reconsidered and all relevant agencies contacted.

OCD will review all changes once submitted and issue a new clearance.

For Environmental Assessment projects:

- No change in determinations - only have to submit revised ERR.

- Change in determinations or new activity or location added – post/publish new FONSI notice.

Common Errors

- Not including all of the required maps or not including enough information on the maps.
- Not completing all forms
- Not following requests from tribes.
- Not signing and dating forms that require signatures.
- Not discussing alternatives in the Eight-Step Process.
- Missing documentation to support determinations.

Make sure you review the entire ERR before turning it in! This will minimize errors.

Questions?

Please contact Fenishia Favorite

Fenishia.favorite@la.gov , 225-342-5884

Staff that reviews Environmental Review Records:

- Suzanne Bentley-Smith, Specialist

Suzanne.Bentley-Smith@LA.GOV , 225-342-7214

- Denease McGee, Program Manager

Denease.mcgee2@la.gov, 225-342-7530

- Kristi Kron, Specialist, 225-342-7412

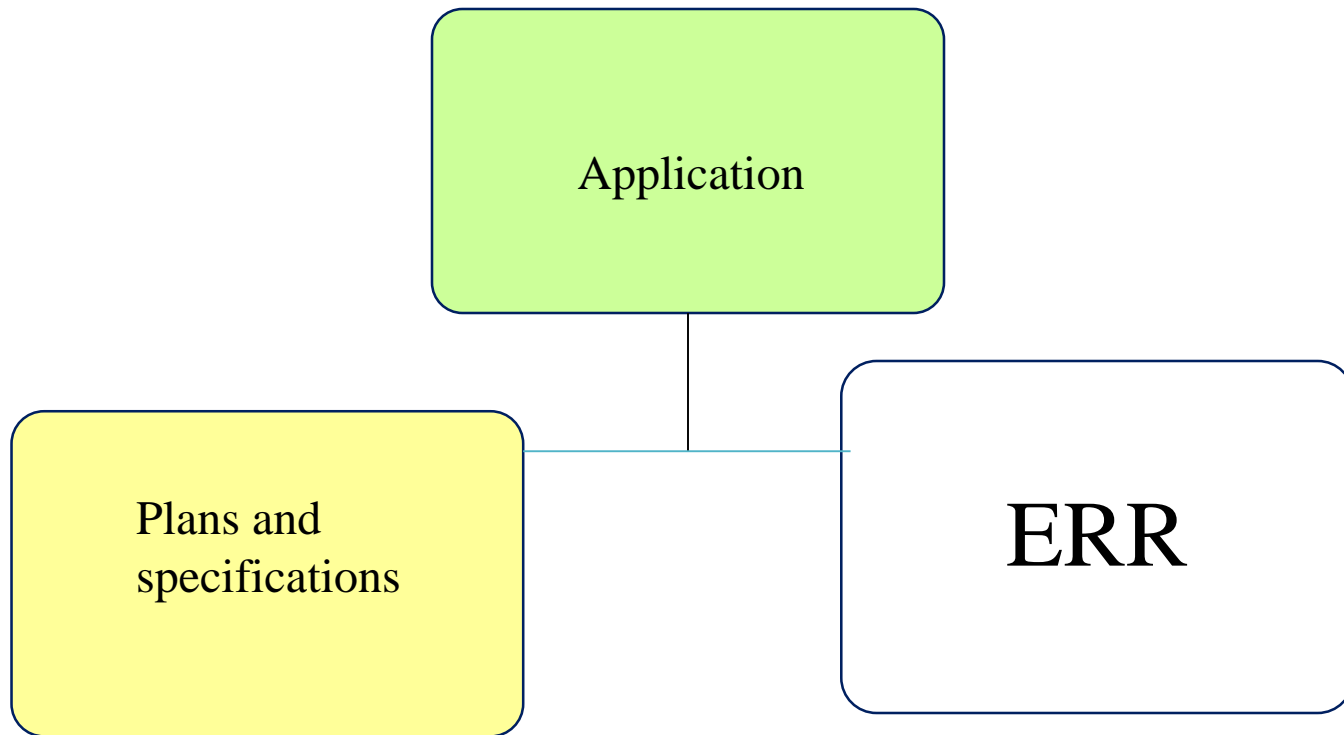
Kristi.kron2@la.gov

Engineering

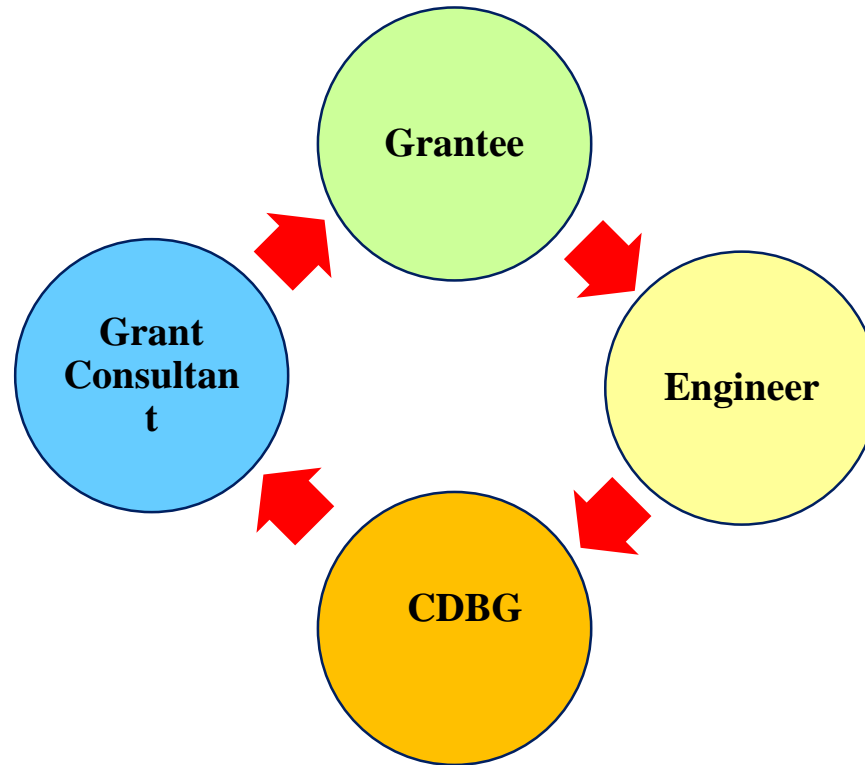
Presented By:

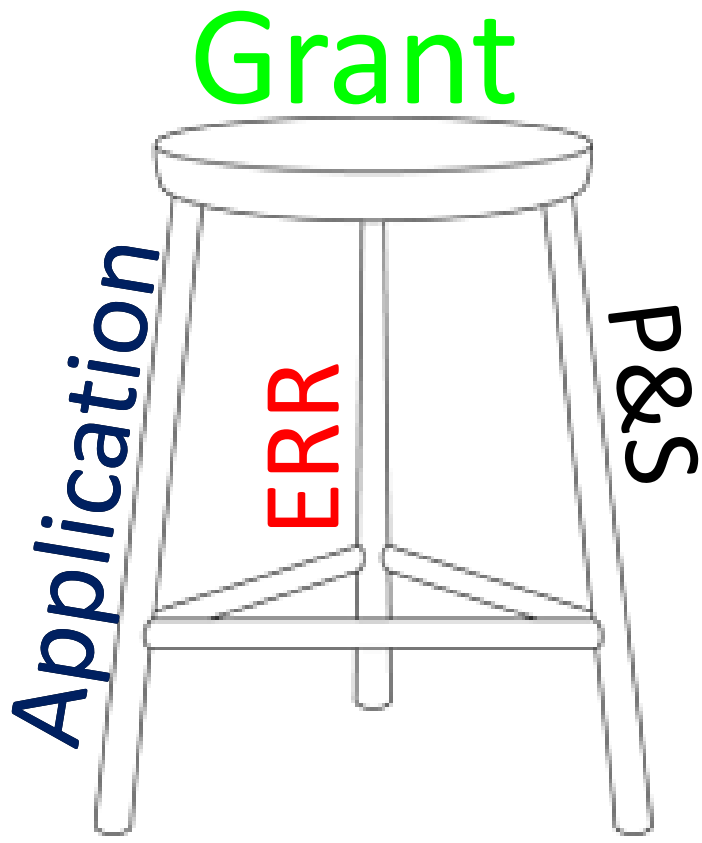
Jeff Tessier

Grant – 3 Parts



Communication!





Plans



Specifications



Cost Estimate
(=Bid Form)



Transmittal Letters
LDH &
Permitting

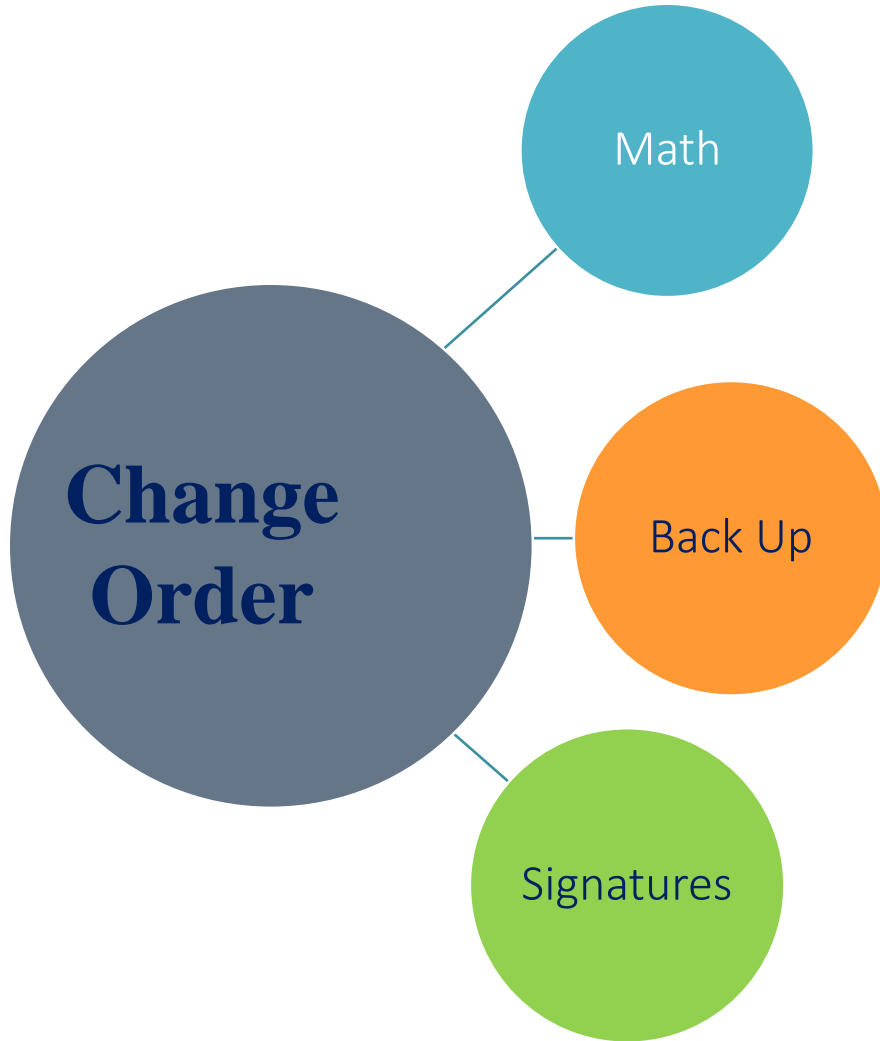


Addendums

Authorization to Advertise for Bids

The Authorization to Advertise for Bids will come when the P&S and the ERR have been approved and all other contract conditions are met.

The advertisement to solicit bids for the construction contract will be published within 30 days of the State's "authorization to advertise for bids."



The engineer & the contractor sign and date the C.O.

Submit the C.O. to me by email or mail.

I approve it and email it back to you, this is for your records.

Get the Mayor or Parish President to approve and date the Change Order. You keep and distribute as many copies as you need.

Submit to LCDBG one copy with the engineers, contractors and Mayor or Parish President signatures.



Change Orders

Addendums

RPR Certifications

*Anything Time Sensitive

Plans and Specs and
Revisions

* Large Attachments

For the Community Development Block Grant (CDBG) program:

We require a Resident Project Representative (RPR) for the project.

We also need to qualify the Resident Project Representative.

To qualify a Resident Project Representative, submit the certification form and resume of the RPR.

If you have worked with CDBG before and have qualified your RPR then you do not need to do anything.

When the grant is monitored, the monitoring team will check to see that the whoever is signing the inspection reports is a qualified RPR.

A-44: QUALIFICATION CERTIFICATION FOR RESIDENT PROJECT REPRESENTATIVE

**QUALIFICATION CERTIFICATION
FOR**

RESIDENT PROJECT REPRESENTATIVE

LOUISIANA COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM

(To be filled out by the Architect/Engineer – if more than one Resident Project Representative is seeking to be qualified per Engineering Firm, fill out one Qualification Certification for each)

NOTE: This Qualification Certification and a copy of the Resident Project Representative's current resume showing qualifications and work history must be submitted to the Office of Community Development and approval granted before construction begins.

Architect/Engineering Firm: _____

Name of Resident Project Representative: _____

******* CERTIFICATION *******

This is to certify that the person listed above has the qualifications and abilities to perform the appropriate duties and responsibilities of the Resident Project Representative on the proposed LCDBG funded construction project. This individual understands the duties, responsibilities, and authority of the Resident Project Representative; has a good working knowledge of the types of construction materials and practices for this particular project; and will be under my direct supervision for the duration of the construction of the project.

**(For State Use Only)
A P P R O V E D**

CDBG

Signature of Architect/Engineer

Typed or printed name

Date

Jeff Tessier

Engineer

Jefferson.Tessier@la.gov

Phone: (225) 342-3268

Civil Rights

Grantee's Required Actions for
Compliance

Presented by:
Denease McGee

Civil Rights: Compliance Areas

Equal Employment Opportunities (EEO)

Requirements

**Minority business Enterprise
(MBE)**

Fair Housing

Requirements

Fair Housing Assessment

Section 504

Requirements

**Summary of Previous Actions
Taken/Transition Plan**

TDD

**Language Access Plan- Limited
English Proficiency**

Employee data

Section 3

Definition

Goals

Requirements

Civil Rights

- **Title VI of the Civil Rights Act of 1964**
- **Title VIII of the Civil Rights Act of 1968**
- **Section 109 of the Housing and Community Development Act of 1974**
- **Age Discrimination Act of 1975**
- **Section 3 of the Housing and Urban Development Act of 1968**
- **Section 504 of the Rehabilitation Act of 1973**

Equal Employment

Each local government participating in the LCDBG program must maintain employment records that include the composition of their staff. Exhibit A-45, City/Parish Employment form, is provided to assist in keeping track of this information.

Personnel policies should clearly outline hiring, training, and promotional procedures. The local government should develop an employment policy that contains a non-discrimination clause assuring that all persons will be treated equally in employment opportunities.

An Equal Employment Opportunity poster must be displayed in a prominent place in the Grantee's office

MBE: Regulations

24 CFR 200-321 requires that Grantees take affirmative action to contract with small and minority- owned firms or women's business enterprises in the administration of the LCDBG project.

Examples of Affirmative Action Steps

- Adding qualified small and minority-owned enterprises and women's business enterprises to solicitation lists and assuring they are solicited whenever they are potential sources.
- Dividing total requirements into smaller tasks or quantities to permit maximum participation by small and minority-owned enterprises and women's business enterprises when economically feasible.
- Establishing delivery schedules that will encourage participation by small and minority-owned businesses and women's business enterprises where the requirements permit.
- Using the services and assistance of the Small Business Administration as necessary.
- Requiring the prime contractor to take the above affirmative steps if any subcontracts are to be let.

Grantee Requirements for Compliance:

Annual submission of the Contract and Subcontract Activity Form for construction and non-construction contracts and subcontracts.

This report is due by September 30th each year.

Grantee will only report new contracts which have been awarded from October 1st through September 30th each year.

Contracts that have not previously been reported.

Grantee is required to submit a yearly report during active grant years

What if all contracts were reported, do we still need to complete the report?

YES!

* October 1, 2023 – September 30, 2024 *

If the grant closes prior to the deadline, a report must be submitted with closeout documents if and only if there is a contract to report that was not previously reported.

Contract and Subcontract Activity

U.S. Department of Housing and Urban Development

OMB Approval No.: 2535-0117 (exp. 10/31/2013)

Privacy Reporting Burden for this collection of information is estimated to average .50 hours 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 information is voluntary. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB Control Number.

Executive Order 12421 dated July 14, 1983, directs the Minority Business Development Plans shall be developed by each Federal Agency and that these annual plans shall establish minority business development objectives. The information is used by HUD to monitor and evaluate MBE activities against the total program activity and the congressionally mandated minority business enterprise (MBE) goals. The Department requires the information to provide guidance and oversight for the development of minority business enterprise concerning Minority Business Development. If the information is not collected HUD would not be able to establish meaningful MBE goals nor evaluate MBE performance against these goals. While no assurance of confidentiality is pledged to respondents, HUD generally discloses this data only in response to a Freedom of Information request.

Privacy Act Notice - The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, United States Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. It will not be disclosed or released outside the United States Department of Housing and Urban Development without your consent, except as required or permitted by law.

1. Grant/Project Owner/Developer/Sponsor/Builder/Agency

Check if:
 PHA
 IHA

2. Location (City, State, ZIP Code)

3a. Name of Contact Person

3b. Phone Number (including Area Code)

4. Reporting Period
 Oct. 1 - Sept. 30 (Annual-FY)

5. Program Code (Not applicable for CDF programs.)
 See explanation of codes at bottom of page.
 Use a separate sheet for each program code.

6. Date Submitted to Field Office

7a. Grant/Project Number or HUD Case Number or other identification of property, subdivision, dwelling unit, etc.	7b. Amount of Contract or Subcontract	7c. Type of Trade Code (See below)	7d. Contractor or Subcontractor Business Racial/Ethnic Code (See below)	7e. Woman Owned Business (Yes or No)	7f. Prime Contractor Identification (ID) Number	7g. Sec. 3	7h. Subcontractor Identification (ID) Number	7i. Sec. 3	7j. Contractor/Subcontractor Name and Address					
									Name	Street	City	State	Zip Code	

7c: Type of Trade Codes:
1 = New Construction
2 = Education/Training
3 = Other

Housing/Public Housing:
1 = New Construction
2 = Substantial Rehab.
3 = Repair
4 = Service
5 = Project Manag.

7 = Professional
7 = Tenant Services
8 = Education/Training
9 = Arch./Engrg. Appraisal
0 = Other

7d: Racial/Ethnic Codes:
1 = White Americans
2 = Black Americans
3 = Native Americans
4 = Hispanic Americans
5 = Asian/Pacific Americans
6 = Ethnic Java

5: Program Codes (Use only for Housing and Public and Indian Housing programs only):
1 = All insured, including Section 8
2 = Flexible Subsidy
3 = Section 8 Noninsured, Non-HFDA
4 = Insured (Management)
5 = Section 202
6 = HUD-held (Management)
7 = Public/Indian Housing

Previous editions are obsolete.

Questions?



Fair Housing

The Federal Fair Housing Law provides that “...no person shall be subjected to discrimination because of race, color, religion, sex, handicap, familial status, or national origin in the sale, rental, or advertising of dwellings, in the provision of brokerage services, or in the availability of residential real estate-related transactions including lenders, builders, and homeowners’ insurance companies” (24 CFR 100.5).

Grantee Requirements for Compliance

Each Grantee shall certify that there have been no findings made by or open complaints with the HUD FHEO or Louisiana Attorney General.

The Grantee shall notify OCD at any time during the grant if a complaint is filed.

Fair Housing Assurance

The (local community) _____ does hereby assure the Office of Community Development (OCD), Division of Administration, that, as a recipient of Louisiana Community Development Block Grant Funds, there have been no findings made by, or open complaints with the HUD Fair Housing and Equal Opportunity (FHEO) Office or the Louisiana Attorney General.

The local government shall notify OCD at any time during the grant, if a complaint is filed.

Chief Elected Official

Date

Fair Housing Activity



Each Grantee must conduct at least one Fair Housing activity during the grant period and maintain documentation of the activity that was or will be conducted.

This documentation must be available when this office conducts its on-site monitoring.

The documentation must identify the type of Fair Housing activity that was or will be conducted (community seminar, brochure distribution, etc.), the target audience (the general public, real estate brokers, etc.), and the category of Fair Housing information provided

Fair Housing Assessment

LCDBG Grantees are required to further fair housing efforts by conducting an assessment to identify impediments to fair housing choice.

Actions:

- Must be within jurisdiction,

- Take appropriate actions to overcome the effects of any impediments identified through the assessment,

- Maintaining records reflecting the assessment and actions in this regard (24 CFR 570.487(b)(1)).

A-54: FAIR HOUSING ASSESSMENT

Assessing Fair Housing Conditions in Your Community

Name of Community: _____ Contract #: _____ FY: _____

PART I – HOUSING PROFILE

American Community Survey Table B25032 -Tenure by Units in Structure
(See instructions at end of form.)

1. Owner Occupied Units:
 - a. Single attached and detached (row 3+4) _____
 - b. Mobile Home and others (row 11+12) _____
 - c. Other Units (rows 5+6+7+8+9+10) _____
 - d. Total Number of Owner Occupied Units: (row 2) _____
2. Renter Occupied
 - a. Single attached and detached (row 14+15) _____
 - b. Mobile Home and others (row 22+23) _____
 - c. Two Unit Structure (row 16) _____
 - d. Multiple Unit Structure (rows 17+18+19+20+21) _____
 - e. Total Number of Renter Occupied Units (row 13) _____
3. Total Units (row 1) _____
4. What percent of total occupied housing units are owner occupied single units?
(add 1 a and 1 b then divide by 3) _____
5. What percent of total occupied housing units are multiple unit structure rental units (3 or more units)? (Divide 2 d by 3) _____
6. Does your community have public housing? _____
7. How many mortgage lenders are located or have offices in your community? _____
8. How many real estate brokers are located and/or have offices in your community? _____
9. Does your community have a comprehensive zoning ordinance? _____
10. Does your community have or enforce building codes? _____
11. Are there any new subdivisions building or planned for your community?

Yes _____ No _____

PART II – REVIEW OF FAIR HOUSING PRACTICES

For the Housing Activities applicable to your community provide the following information:

1. Rental Units: Description of data sources or contacts made:

Description of policies or practices examined:

2. Public Housing: Description of data sources or contacts made:

Description of policies or practices examined:

3. Mortgage Lending Institutions: Description of data sources or contacts made:

Description of policies or practices examined:

4. Real Estate Brokerage Services:

Description of data sources or contacts made:

Description of policies or practices examined:

5. Zoning Ordinances: Description of data sources or contacts made:

Description of policies or practices examined:

6. Building Codes: Description of data sources or contacts made:

Description of policies or practices examined:

PART III – IDENTIFICATION OF IMPEDIMENTS

1. Rental Units: (Mark NA and skip to next question if answer to ONE in PART II is zero)

Are there any identifiable barriers for persons of similar income levels that restrict or have the effect of restricting access to rental housing; because of their race, color, religion, sex, national origin, handicap or familial status? (for example: unnecessary or burdensome application procedures; unreasonable requirements) Yes _____ No _____ NA _____

2. Public Housing: (Mark NA and skip to next question if answer to TWO in PART II is zero)

Are there any identifiable barriers for persons of similar income levels that restrict or have the effect of restricting access to public housing units; because of their race, color, religion, sex, national origin, handicap or familial status? (for example: unnecessary or burdensome qualification requirements) Yes _____ No _____ NA _____

3. Mortgage Lending Institutions: (Mark NA and skip to next question if answer to THREE in PART II is zero)

Are there any identifiable barriers for persons of similar income levels that restrict or have the effect of restricting access to mortgage loans; because of their race, color, religion, sex, national origin, handicap or familial status? (for example: inconsistent appraisal practices, redlining; restrictive lending practices,) Yes _____ No _____ NA _____

4. **Real Estate Brokerage Services:** (Mark NA and skip to next question if answer to FOUR in PART II is zero)

Are there any identifiable barriers for persons of similar income levels that restrict or have the effect of restricting access to real estate brokerage services; because of their race, color, religion, sex, national origin, handicap or familial status? (for example: uneven appraisal practices, redlining, unnecessary or burdensome application procedures; exclusion from listing services; steering) Yes _____ No _____ NA _____

5. **Zoning Ordinances:** (Mark NA and skip to next question if answer to FIVE in PART II is no)

Does the communities' zoning ordinances restrict or have the effect of restricting housing choices or availability of housing choices for persons of similar income levels because of their race, color, religion, sex, national origin, handicap or familial status? (for example: restrictive regulations that make low income housing development difficult) Yes _____ No _____ NA _____

6. **Building Codes:** (Mark NA if answer to SIX in PART II is no)

Does the communities' building code ordinances restrict or have the effect of restricting housing choices or availability of housing choices for persons of similar income levels because of their race, color, religion, sex, national origin, handicap or familial status? (for example: restrictive regulations that make low income housing development difficult) Yes _____ No _____ NA _____

PART IV – ANALYSIS OF IMPEDIMENTS

For any items identified as YES in PART III please provide the following details.

Housing Activity: _____

Description of the Impediment: _____

Cause of the Impediment: _____

Result of the Impediment: _____

XX

Housing Activity: _____

Description of the Impediment: _____

Cause of the Impediment: _____

Result of the Impediment: _____

**PART V – ACTIONS TAKEN TO OVERCOME
IDENTIFIED IMPEDIMENTS**

Housing Activity: _____

Actions or proposed actions: _____

XX

Housing Activity: _____

Actions or proposed actions: _____

Date Assessment completed: _____

Signature of Preparer of Assessment: _____

Signature of Chief Elected Official: _____

Any Questions?



Section 504

Section 504 provides that "no otherwise qualified individual with handicaps in the United States shall, solely by reason of his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

Grantee Requirements for Compliance

Each Grantee shall submit an assurance to the Office of Community Development that the LCDBG program will be operated in compliance with Section 504 requirements (24 CFR 8.50(a)).

This assurance obligates the Grantee for the period during which federal financial assistance is extended. This assurance must be submitted prior to receipt of the executed contract with the State.

Section 504 Assurance

The (local community) does hereby assure the Office of Community Development, Division of Administration, that, as a recipient of Louisiana Community Development Block Grant funds, all activities of this grant will be operated in compliance with requirements of Section 504 of the Rehabilitation Act of 1973, as amended.

As a local government with 15 or more employees, the (local community) further assures the Office of Community Development, Division of Administration, that it has appointed (name), (position) as the designated Section 504 Coordinator (24 CFR 8.53), and adopted a Section 504 Grievance Procedure on (Date) (24 CFR 8.53), and (describe method)

as a means of providing for continuing notification of participants, beneficiaries, applicants, and employees that it does not discriminate on the basis of handicap in its federally assisted programs (24 CFR 8.54).

Chief Elected Official

Date

Requirements for Grantees Employing 15 or More Persons



Grantee Requirements for Compliance:

A responsible employee must be designated to coordinate the community's efforts to comply with Section 504.

The community must adopt by resolution grievance procedures that incorporates appropriate due process standards and that provide for the prompt and equitable resolution of complaints alleging any action prohibited by this part.

Grantee Requirements for Compliance

The Grantee shall take appropriate initial and continuing steps to notify “participants, beneficiaries, applicants, and employees, including those with impaired vision or hearing, and unions or professional organizations holding collective bargaining or professional agreements with the Grantee” that it does not discriminate on the basis of disability in violation of this part.

The notification shall also include an identification of the responsible employee designated above.

Grantee Requirements for Compliance

A Grantee shall make the initial notification required by this paragraph within 90 days of receipt of the executed contract with the State for each new grant.

Methods of initial and continuing notification may include the posting of notices, publication in newspapers and magazines, placement of notices in recipients' publications, and distribution of memoranda or other written communications.

Grantee Requirements for Compliance

The Grantee must maintain a file, make available for public inspection, and provide the following to the responsible civil rights official upon request:

- (1) a list of the interested persons consulted;
- (2) a description of areas examined in the self-evaluation and any problems identified;
- (3) a description of any modifications made and/or any remedial steps taken

Grantee must maintain data for the State showing the extent to which individuals with disabilities are beneficiaries of federally assisted programs

Self-Evaluation & Transition Plan

Grantee Requirements for Compliance

Each Grantee shall have completed a self-evaluation of current policies and practices with respect to communications, employment, and program/physical accessibility to determine whether, in whole or in part, they do not or may not meet the requirements of being accessible to individuals with disabilities. The self-evaluation will have been completed within six months of receipt of any grant award after July 1988.

The self-evaluation shall designate all buildings and structures as “new” or “existing,” depending on whether the building was constructed or altered after July 1988 (24 CFR 8.51(a)).

The self-evaluation shall determine whether buildings and structures that house programs and services for the public can be approached, entered, and used by persons with disabilities

Grantee Requirements for Compliance

At a minimum, these items should be addressed in the self-evaluation:

Parking – Spaces, Curbs, Ramps;

Routes and Pathways – Slopes, Levels, Ramps,

Notices; Entrance Ways – Widths and Heights;

Interiors – Door Grasp, Pressure, Pathways,

Elevators; Service – Counter Heights,

Notices; and Auxiliary Services – Telephones, Restrooms, Drinking Fountains.

Grantee Requirements for Compliance

Each Grantee shall modify any policies and practices that do not meet the requirements for program accessibility (24 CFR 8.51). Compliance with 504 does not necessarily require a Grantee to make each of its existing facilities accessible to and usable by individuals with disabilities.

Questions?



Visual and Hearing Impairments

Grantee Requirements for Compliance

Each Grantee must ensure that members of the population eligible to be served or likely to be affected directly by a federally assisted program who have visual or hearing impairments are provided with the information necessary to understand and participate in the program.

Methods for ensuring participation include, but are not limited to:

- qualified sign language and oral interpreters
- readers
- or the use of taped and Braille materials.

Grantee Requirements for Compliance

The regulation requires that each Grantee must have available a TDD or equally effective method for communicating with hearing impaired persons.

Louisiana has an approved relay service that may be utilized.

The Grantee must have a policy indicating the use of the relay system by the Grantee and publish the telephone numbers in the newspaper within six months of the date of the “Authorization to Incur Costs” letter.

Grantee Requirements for Compliance

The numbers are: TDD Users 1-800-846-5277, and Voice Users 1-800-947-5277. This service is free of charge.

The number “711” has been approved by the Federal Communications Commission (FCC) for use in contacting the relay service. This number works from both TDD and voice telephones and while it is applicable in most states, Grantees are still required to list the “800” numbers presented above.

Limited English Proficiency: Language Access Plan

All Grantees will be required to complete and adopt a Language Access Plan (LAP) for Limited English Proficiency (LEP) Persons, as required by Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000(d) and Executive Order 13166 which states that recipients of federal funds take responsible steps to ensure meaningful access by persons with Limited English Proficiency.

Grantee Requirements for Compliance

In preparing this LAP, Grantees must conduct a four-factor analysis

This plan must be adopted within one year of the “Authorization to Incur Costs” letter and reviewed/updated on an annual basis to ensure continued responsiveness to community needs.

Depending upon the site of a particular language group, translation of “vital” documents may become necessary.

Grantee Requirements for Compliance

The Office of Community Development's LAP is found in exhibit A-58, which can be used as a sample.

The LEP website www.lep.gov also has resources available to help formulate the LEP, including links to I-Speak Cards. More information can be found at www.hud.gov

The Grantee should utilize Census.gov to find the data at the Parish or the City/Town/Village level at <https://data.census.gov/cedsci/table?q=S1601&tid=ACST1Y2019.S1601>

III. Four-factor Analysis

The following four-factor analysis will serve as the guide for determining which, if any, language assistance measures the OCD will undertake to provide access to the covered programs for LEP persons. Additionally, all future CDBG fund recipients will be required to use the same four-factor analysis prior to the release of funds.

- A. Number or proportion of LEP persons eligible to be served or likely to be encountered by the OCD or its federally funded programs. Per the 2013-2017 American Community Survey 5-Year estimates, Louisiana's population is 4,353,030.

Approximately 91.7% of Louisiana's population speaks English, and 8.3% speak a language other than English. 3.6% of Louisiana's population speaks Spanish or Spanish Creole, and 3.0% speak other Indo-European languages and 1.3% speak Asian and Pacific Island Languages. No other ethnicity has a sizeable limited English proficiency.

The table below shows the LEP percentages for each of the above mentioned languages.

Language 1 (name)	Population That Speaks a Language Other Than English	LEP Number	LEP % of Total Louisiana Population
Spanish/Spanish Creole	161,384	73,584	1.69%
Other Indo-European	129,835	22,791	.52%
Asian and Pacific Island	55,163	27,547	.63%

Questions?



Section 3

Section 3 of the Housing and Urban Development Act of 1968 [12 U.S.C. 1701u and 24 CFR Part 75] is HUD's legislative directive for providing preference to low- and very low-income residents of the local community (regardless of race or gender), and the businesses that substantially employ these persons, for new employment, training, and contracting opportunities resulting from HUD-funded projects.

Grantee Requirements for Compliance

The purpose of Section 3 is to ensure, to the greatest extent feasible, that training, employment, contracting, and other economic opportunities generated by Section 3 covered financial assistance shall be directed to low-and very low-income residents of the neighborhood where the financial assistance is spent.

HUD funded project that meet/exceeds \$200,000

- Housing demolition

- Rehabilitation or construction

- Rehabilitation or construction of public buildings, facilities, or infrastructure.

Definitions

Labor hours means the number of paid hours worked by persons on a Section 3 project or by persons employed with funds that include public housing financial assistance.

Section 3 business concern means:

(1) A business concern meeting at least one of the following criteria, documented within the last six-month period:

(i) It is at least 51 percent owned and controlled by low- or very low-income persons;

(ii) Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers; or

(iii) It is a business at least 51 percent owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing.

(2) The status of a Section 3 business concern shall not be negatively affected by a prior arrest or conviction of its owner(s) or employees.

(3) Nothing in this part shall be construed to require the contracting or subcontracting of a Section 3 business concern. Section 3 business concerns are not exempt from meeting the specifications of the contract.

Definitions

Section 3 worker means:

(1) Any worker who currently fits or when hired within the past five years fit at least one of the following categories, as documented:

(i) The worker's income for the previous or annualized calendar year is below the income limit established by HUD.

(ii) The worker is employed by a Section 3 business concern.

(iii) The worker is a YouthBuild participant.

(2) The status of a Section 3 worker shall not be negatively affected by a prior arrest or conviction.

(3) Nothing in this part shall be construed to require the employment of someone who meets this definition of a Section 3 worker.

Section 3 workers are not exempt from meeting the qualifications of the position to be filled.

Definitions

Targeted Section 3 worker:

is a Section 3 worker who:

Is employed by a Section 3 business concern; or

Currently fits or when hired fit at least one of the following categories, as documented within the past five years:

Living within the service area or the neighborhood of the project, as defined in [24 CFR § 75.5](#); or

A YouthBuild participant.

Meeting Goals

“Service Area” or the “ neighborhood of the project” means an area within one mile of the Section 3 project or, if fewer than 5,000 people live within one mile of the Section 3 project, within a circle centered on the Section 3 project that is sufficient to encompass a population of 5,000 people according to the most recent U.S. Census

Residing in the Section 3 service areas is one of the criteria for a Section 3 targeted worker.

Section 3 service area is NOT the same as low-mod area, which pertains to meeting a national objective.

Meeting Goals

Minimum Numerical Goals

Twenty -five (25) percent or more of the total number of labor hours worked by all workers on a Section 3 project are Section 3 workers.

$\frac{\text{Section 3 Worker Labor Hours}}{\text{Total Labor Hours}} =$

Five (5) percent or more of the total number of labor hours worked by all workers on a Section 3 project are Targeted Section 3 workers, as defined at § 75.21.

$\frac{\text{Targeted Section 3 Labor Hours}}{\text{Total Labor Hours}} =$



Professional Service Labor Hours

Non-construction services that require an advanced degree or professional licensing are excluded from Section 3 Final Rule.

BUT.....

Grantee may count any work performed by a professional services Section 3 or Targeted Section 3 worker as Section 3 labor hours.

This is done by adding the hours to the numerator in the equation.

DO NOT COUNT PROFESSIONAL SERVICES AS PART OF THE TOTAL LABOR HOURS!

→ Section 3 Worker Labor Hours = 25%
Total Labor Hours

→ Targeted Section 3 Labor Hours = 5%
Total Labor Hours

Questions?



Grantee Requirements for Compliance

Grantees must document their efforts to comply with Section 3 through maintenance of a “good faith efforts” file. It should contain memoranda, correspondence, advertisements, etc., illustrating the Grantee’s and the contractor’s attempts to reach eligible persons and businesses. Documentation should support attempts to comply with Section 3.

Normal Advertising is not enough!

Additional guidance (24 CFR Part 75.13.)

Grantee Requirements for Compliance

Failure to Meet Goals

Documentation must be maintained as to the actions taken by each in order to attain the goals and any impediments encountered.

This documentation will be reviewed when the Grantee is monitored.

Sanctions for noncompliance with Section 3 include debarment, suspension, and limited denial of participation in HUD programs.

Grantee Requirements for Compliance

Other economic opportunities to train and employ Section 3 residents include, but need not be limited to, use of “upward mobility,” “bridge,” and trainee positions to fill vacancies and hiring Section 3 residents in part-time positions.

These “other” opportunities, if provided, may be viewed by HUD as an effort to comply with Section 3 should a challenge be issued by a Section 3 resident or business concern that either the Grantee or contractor is not following Section 3 requirements.

Contractor Requirements

Grantee Requirements for Compliance

Once a contract has been awarded to a contractor, each contractor must complete the required documents in the Contractors Documents Guide Exhibit A-38:

Section 3 Clause

Section 3 Statement of Assurances

Subcontract Utilization Report (A-51)

Contractor/Subcontractor Project Workforce Report (A-52)

Section 3 Worker/Targeted Worker Certification (A-49)

Section 3 Business Certification (A-50)

Section 3 Final Labor Hours Compliance Report (A-44)

Grantee Requirements for Compliance

The Grantee should discuss these requirements as a separate item at the PRE-CONSTRUCTION CONFERENCE or whatever other means the Grantee utilizes to notify the prime contractor(s) of his/her responsibilities.

When CDBG (and other HUD funding) to the project exceeds \$200,000, the Section 3 Assurances (included in Exhibit A-38), the Project Workforce Report (Exhibit A-52), the Subcontractor Utilization Report (Exhibit A-51) must be completed by the prime and all subcontractors prior to receiving CDBG funds.

SECTION 3 CLAUSE

(To be included in all contracts and subcontracts)

All Section 3 covered contracts shall include the following clause (referred to as the Section 3 Clause).

- A. The work to be performed under this contract is subject to the requirements of Section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u (Section 3). The purpose of Section 3 is to ensure that economic opportunities, most importantly employment, generated by certain HUD financial assistance shall be directed to low- and very low-income persons, particularly those who are recipients of government assistance for housing or residents of the community in which the Federal assistance is spent.
- B. The parties to this contract agree to comply with HUD's regulations in 24 CFR part 75, which implement Section 3. As evidenced by their execution of this contract, the parties to this contract certify that they are under no contractual or other impediment that would prevent them from complying with the part 75 regulations.
- C. The contractor agrees to send to each labor organization or representative of workers with which the contractor has a collective bargaining agreement or other understanding, if any, a notice advising the labor organization or workers' representative of the contractor's commitments under this Section 3 clause and will post copies of the notice in conspicuous places at the work site where both employees and applicants for training and employment positions can see the notice. The notice shall describe the Section 3 preference, shall set forth minimum number and job titles subject to hire, availability of apprenticeship and training positions, the qualifications for each; and the name and location of the person(s) taking applications for each of the positions; and the anticipated date the work shall begin.
- D. The contractor agrees to engage in qualitative efforts including but not limited to:
 - a. Engaging in outreach efforts to generate job applicants who are Targeted Section 3 Workers.
 - b. Providing training or apprenticeship opportunities.
 - c. Providing or referring Section 3 Workers to services supporting work readiness and retention (e.g., work readiness activities, interview clothing, test fees, transportation, childcare).
 - d. Engaging in outreach efforts to identify and secure bids from Section 3 business concerns.
 - e. Promoting the use of business registries designed to create opportunities for disadvantaged and small businesses.
 - f. Engaging in outreach and referrals with the Louisiana Workforce Commission, American Job Centers.

STATEMENT OF ASSURANCES
INTENT TO COMPLY WITH SECTION 3 REQUIREMENTS

(To be returned with all submitted bids)

_____ (Contractor) agrees to implement affirmative steps to comply with the Section 3 requirements set forth at 24 CFR 75 directed at increasing the utilization of lower income residents and businesses within the City or Parish of _____.

1. To implement Section 3 requirements by seeking the assistance of local officials in determining the exact boundaries of the applicable project area.
2. To attempt to recruit from within the **Town/City/Parish** the necessary number of lower income residents through local advertising media, signs placed at the proposed site for the project, and community organizations and public or private institutions operating within or serving the project area.
3. To maintain a list of all lower income residents who have applied either on their own or on referral from any source, and to employ such persons, if otherwise eligible and if a vacancy exists.
4. To insert this Section 3 plan in all bid documents, and to require all bidders to submit a Section 3 affirmative action plan including utilization goals and the specific steps planned to accomplish these goals. To formally contact unions, subcontractors and trade associations to secure their cooperation for this program.
5. To maintain records, including copies of correspondence, memoranda, etc., which document that all the above affirmative action steps have been taken.
6. To appoint or recruit an executive official of the company or agency as Equal Opportunity Officer to coordinate the implementation of this Section 3 plan.
7. To list all workforce for this project.

Please complete the following:

1. If awarded a contract, do you agree to insert the HUD Section 3 Clause into all Section 3 covered sub-contracts?
Yes No
2. If awarded a contract for this CDBG funded project, do you anticipate hiring new employees to complete the project? (Hiring would be specific to this project)
Yes No
If yes, please estimate the number of employees to be hired: _____
3. Is your business a Section 3 Business? Yes No
4. Is the bidder willing to consider hiring Section 3 residents for future employment opportunities that are a direct result of this CDBG funded project?

Yes No
5. Is the bidder willing to consider subcontracting with Section 3 Businesses for this project?

Yes No

A-51: SUBCONTRACTOR UTILIZATION BREAKDOWN

*Prime contractors must complete this form with information on all proposed subcontractors at the time of contract and again at the time of project completion, including any additional subcontractors.

Estimated (submitted prior to contract)
 Final (submitted at completion)

Type of Contract (Business or Profession)	Name of Subcontractor	Total Approximate Dollar Amount	Section 3 Business (Y / N)

Section 3 Business
 A Section 3 business concern is a business that meets at least one of the following criteria, documented within the last six-month period:

- 1) At least 51 percent owned and controlled by low- or very low-income persons;
- 2) Over 75 percent of the labor hours performed for the business over the prior three-month period are performed by Section 3 workers; or
- 3) A business at least 51 percent owned and controlled by current public housing residents or residents who currently live in Section 8-assisted housing.

_____ Company Name

_____ Project Name

_____ Signature of Person Completing Form

_____ Printed Name

_____ Date

*Attach additional sheets when necessary

Section 3 Worker and Targeted Worker Certification Form

(To be submitted as applicable)

A Section 3 Worker seeking the preference in training and employment provided by this part shall certify, or submit evidence to the recipient contractor or subcontractor, if requested, that the person is a Section 3 Worker, as defined in Section 75.5.

Date: _____

Worker Name: _____

Worker Apartment Complex Name (if applicable): _____

Worker Address (will be verified): _____

Worker Email Address: _____

To meet the income qualifications, you must earn 80% or below of the median income for Parish or MSA.

Section 3 Income Limit for Parish or MSA Residents (as of June 1, 2021)	
Annual Income	\$47,850

Place a check mark beside any of the following that apply:

- My income for the previous year was below the amount listed above*
- I am employed by a Section 3 Business
- I am a YouthBuild participant
- I reside in public housing or Section 8-assisted housing
- I reside within one mile of the work site
- I am *not* a resident of [redacted]. My Parish is _____ and my annual income is \$ _____.

***Section 3 income qualification limits are based on where the worker lives and not the location of the project.**

I hereby certify that the information provided by me to be true and correct and understand any falsification of any of the information could subject me to disqualification from participation and punishment under the law.

Signature of Worker

Date

Printed Name

FY 2023 Income Limits Summary

FY 2023 Income Limit Area	Median Family Income Click for More Detail	FY 2023 Income Limit Category	Persons in Family							
			1	2	3	4	5	6	7	8
Baton Rouge, LA HUD Metro FMR Area	\$83,300	Very Low (50%) Income Limits (\$) Click for More Detail	29,550	33,750	37,950	42,150	45,550	48,900	52,300	55,650
		Extremely Low Income Limits (\$)* Click for More Detail	17,750	20,250	24,860	30,000	35,140	40,280	45,420	50,560
		Low (80%) Income Limits (\$) Click for More Detail	47,250	54,000	60,750	67,450	72,850	78,250	83,650	89,050

https://www.huduser.gov/portal/datasets/il/il2023/select_Geography.odn

Reporting & Complaints Requirements



Reporting Requirements

The Grantee must report information on the Section 3 Final Labor Hours Compliance Report. (Exhibit A-44)

This report will be due before final payment can be made to the contractor and will be included in the Program Completion Report.

Documentation of “good faith efforts” shall be submitted with the Labor Hours Compliance Report.

A-44: Section 3 Final Labor Hours Compliance Report

Updated April 2023

To be provided with final closeout documents.

Date Report Submitted to County:				
Project Name:				
Contractor Name:				
Contact Person:				
Project Address:				
Phone:				

PART 1: EMPLOYMENT AND TRAINING (All fields are mandatory)

	A	B	C	D	E
Job Category	Total Labor Hours Worked on Project*	Total Labor Hours Worked on Project by Section 3 Workers	Total Labor Hours Worked on Project by Targeted Section 3 Workers	% of Total Labor Hours Worked by Section 3 Workers *	% of Total Labor Hours Worked by Targeted Section 3 Workers
Professionals	0	0	0	0%	0%
Technicians	0	0	0	0%	0%
Office/Clerical	0	0	0	0%	0%
Officials/Managers	0	0	0	0%	0%
Sales	0	0	0	0%	0%
Craft Workers (skilled)	0	0	0	0%	0%
Operatives (semiskilled)	0	0	0	0%	0%
Laborers (unskilled)	0	0	0	0%	0%
Service Workers	0	0	0	0%	0%
Other	0	0	0	0%	0%
Total	0	0	0	0%	0%

* Includes hours worked by Section 3 Workers and Targeted Section 3 Workers

PART 2: SUMMARY OF EFFORTS

Indicate the efforts made to direct the employment and other economic opportunities generated by HUD financial assistance for housing and community development programs, to the greatest extent feasible, Section 3 Workers and Targeted Section 3 Workers. Check all that apply.

	Attempted to recruit low-income workers through local advertising, signs prominently displayed at the project site, contacts with community organizations and public or private agencies operating within the metropolitan area in which the Section 3 covered program or project is located (Butler County), or similar methods.
	Provided training or apprenticeship programs.
	Coordinated with YouthBuild Programs administered in the area in which the Section 3 covered project is located.
	Provided or connected Section 3 Workers with employment search assistance such as resume writing, interview

Requirements for Complaints

A Section 3 complaint may be filed by an individual representing the interests of a small business, or by a Section 3 resident, alleging non-compliance with Section 3 by the Grantee, contractor, or subcontractor.

The complaint must be filed within 180 days of the alleged violations with the local HUD field office. The appropriate office can be found at www.hud.gov.

Questions?



Contact Information

Denease McGee

Program Manager

Phone: 225-342-7530

Email: Denease.McGee2@la.gov

Procurement

Presented By:

William Hall

Procurement Regulations

CDBG Regulation 24 CFR § 570.489(g) Procurement Policy

“The State shall establish requirements for **procurement policies** and procedures for units of general local government...”

UAR 2 CFR § 200.320 Procurement Procedures.

“The non-Federal entity **must have** and use documented procurement procedures, consistent with the standards of this section...”

On the OCD-LGA website

FORMS AND INFORMATION

Community Development - Local Government Assistance / LCDBG Programs / **Forms and Information**

Forms and Information

[Components of Requests for Proposals \(RFP\) and Requests for Qualifications \(RFQ\)](#)

[Census-Survey Methodology Application Workshop Slideshow](#)

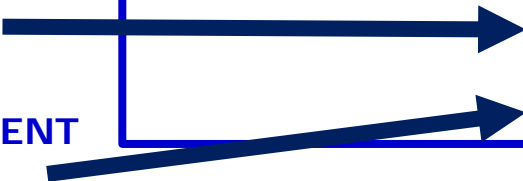
[LMA Procurement Workshop - 10/21/2021](#)

[Procurement and Citizen Participation Slideshow 1/28/2021](#)

[LCDBG Procurement Procedures](#)

[Local Government Procurement Policy](#)

The PROCUREMENT PROCEDURES and Revised PROCUREMENT POLICY are located



Procurement Policy

Procurement Policy

OCD has **revised** the procurement policy that all recipients must adopt

The previous existing policy contains obsolete terms and thresholds and is missing some essential components

Requirement: LCDBG recipients must adopt the new Procurement Policy

Procurement Policy

Revised Procurement Policy

[On the OCD/LGA
website]

PROCUREMENT POLICY

These policy provisions are intended to serve as the legal authority for the procurement of supplies, equipment, construction services and professional services for the [UGLG/NFE subrecipient NAME] in the conduct of all of its Federal programs [and the UGLG/subrecipient's purchases]. These policy provisions meet the Federal grant standards established in 2 CFR 200.317-326.

PURPOSE

The purpose of this Statement of Procurement Policy is to: (1) provide for the fair and equitable treatment of all persons or firms involved in purchasing by [UGLG/NFE subrecipient NAME]; (2) assure that supplies, services, and construction are procured efficiently, effectively, and at the most favorable prices available to the [UGLG/NFE subrecipient]; (3) promote competition in contracting; provide safeguards for maintaining a procurement system of quality and integrity; and (4) assure that [UGLG/NFE subrecipient] purchasing actions are in full compliance with applicable State laws, Federal standards, [UGLG/NFE subrecipient] ordinances, regulations or other relevant policies.

PROCUREMENT AUTHORITY AND ADMINISTRATION

The primary purchasing/procurement authority for the [UGLG/NFE subrecipient] shall be the [job title/position]. All procurement transactions shall be conducted and administered by the [job title/position].

The [purchasing/procurement authority] shall insure that there are sufficient unencumbered funds available to cover the anticipated cost of each procurement before contract award or modification (including change orders), work is inspected before payment, and payment is made promptly for contract work performed and accepted.

The [purchasing/procurement authority] shall insure the appropriate method of procurement is used for the particular purchase considering Federal, State and [UGLG/NFE subrecipient] dollar thresholds.

The [purchasing/procurement authority] shall insure the appropriate contract and prices are applied to the particular purchase.

Procurement Policy Changes

PROCUREMENT POLICY: Solicitations

“The nearest metropolitan statistical area [MSA] to the [UGLG/NFE subrecipient] is [name of City] and whose largest general circulation newspaper is [name of MSA newspaper].”

Requirement: Identify by name the MSA City and the general circulation newspaper in your Procurement Policy.

Procurement Policy Changes

PROCUREMENT POLICY: Uniform and secure electronic interactive system

Requirement: If you use or are required to use [R.S. 38:2212(E)] the internet for procurement activities describe them in your Procurement policy.

“The City provides, as an additional bidding option, a uniform and secure electronic interactive system for the submittal of bids or proposals by utilizing “centralauctionhouse.com”.

-OR-

Requirement: Otherwise make the statement in your Procurement policy

“The City does not and is not required to provide a uniform and secure electronic interactive system for the submittal of bids.”

Procurement Policy Changes

Types of Contracts

Federal procurement regulations identify three types of contracts that may be used in contracting with private parties.

2 CFR 200.324

Firm fixed price

Cost reimbursement

Time and materials

Procurement Policy Changes

Types of Contracts

Federal procurement regulations identify three types of contracts that may be used in contracting with private parties.

2 CFR 200.324

Firm fixed price

For Specified Accomplishments

Cost reimbursement

Accomplishments and Efforts

Time and materials

For Efforts

Procurement Policy Changes

Types of Contracts

Firm fixed-price. This contract type requires the delivery of products or services at a specified price, fixed at the time of contract award and not subject to any adjustment on the basis of the contractor's cost experience in performing the contract.

Cost-reimbursement. Cost-reimbursement types of contracts provide for payment of allowable incurred costs, to the extent prescribed in the contract.

Procurement Policy Changes

Types of Contracts

Time and materials: provides for acquiring supplies or services on the basis of the following:

Direct labor hours at specified fixed hourly rates that include wages, overhead, general and administrative expenses, and profit; and,

Materials at cost, including, if appropriate, material handling costs as part of material costs.

Procurement Policy Changes

Types of Contracts

Cost Reimbursement and **Time and Materials** contracts establish an estimate of total cost for the purpose of obligating funds and with a predetermined cost ceiling that the contractor may not exceed (except at its own risk) without the approval of the Grantee.

Contractors are not guaranteed payment of the contract ceiling

Ceiling can be adjusted based on cost experience

Procurement Policy Changes

Contract Prices

Lump Sum Price

For definable work product(s) or deliverable(s) whose value can be expressed as a single price inclusive of all production costs [labor, materials and purchased service costs, allowable overhead and profit].

Unit Price

For definable work products or deliverables whose value can be expressed as a single price inclusive of all production costs [labor, materials and purchased service costs, allowable overhead and profit] for contract tasks or items and will be needed in two more iterations at the same agreed upon price.

Procurement Policy Changes

Contract Prices

Billable Hours

For work efforts that are composed of preponderantly personnel compensation costs with a minimum of outside purchases of materials and services needed to produce a work product or provide a service; the contractor will be reimbursed for applied work efforts at the agreed upon billable hourly rate(s) inclusive of direct labor compensation, overhead, general and administrative expenses, and profit [fully burdened] by job title.

Reimbursable Costs

For work efforts that require significant outside purchases of materials, services or from subcontractors in addition to the contractor's personnel compensation costs needed to produce a work product or service.

Questions?



Procurement Procedures

Procurement Procedures

The Federal grant procurement regulations [2 CFR 200 Subpart D] never provided “procedures” to follow, they had “standards” that State and local government “procedures” had to meet for each method of procurement.

Requirement: Review and revise or develop procurement **procedures** that meet the federal regulation standards for all procurement methods.

Procurement Standards for Procedures

Federal Procurement Standards applicable to procedures for each procurement method:

Applicable dollar thresholds for each method

Type of purchase and use

Solicitation requirements for each method

Basis for contractor selection

Federal contract type and payments

Cost reasonableness

Procurement records

Applicable State Procurement Procedures

Method: Sealed Bids [2 CFR 200.320(b)(1)]

R.S. 38:2212 Public Works Construction exceeding	\$250,000
R.S. 38:2212.1 Materials and Supplies exceeding	\$60,000
R.S. 38:2212.1 Law enforcement vehicles exceeding	\$40,000

Procurement Standards for State Sealed Bid Law Procedures RS 38:2212

Procurement Standards applicable to **Sealed Bid Method**

Applicable dollar thresholds:	\$250,000
Type of purchase and use:	Design Specifications for PW construction
Solicitation requirements for:	Public advertising 3 X over 3 weeks
Basis for contractor selection:	Lowest responsive bid
Federal contract type and payments:	Fixed price contract, progress payments
Cost reasonableness	Obtain opinion of probable cost
Procurement records	Minutes of bid opening, tabulation

Local Government Procurement Procedures

Must have written procedures that meet the standards for the other procurement methods

Micro-purchase

Small purchase

Sealed bids below the State threshold(s)

Competitive proposals

Non-competitive proposals

Requirement: develop procedures that meet the federal grant procurement standards for the other methods of procurement.

Local Government Procurement Procedures

To help meet this requirement OCD-LGA has developed sample wording for procedures that meet the standards for each federal method of procurement.

Local Government Procurement Procedures

Sample Procurement Procedures

[On the OCD/LGA website]

Method: Small Purchase

Cost/price thresholds: The Small Purchase threshold for the [UGLG/NFE Subrecipient] shall be \$ ____ or less. [at least \$10,000 – and cannot exceed \$250,000 for Federal awards].

State thresholds for using the Small Purchase thresholds and do not require sealed bids [La RS 38:2212.1] Supplies and Materials \$59,999,000 and below; Used or New vehicles for law enforcement \$39,999 and below, Road maintenance or improvement equipment \$24,999 and below. The State Small Purchase threshold for other designated items is more than \$10 and less than \$29,999.

Price/Cost information and Categories of Purchase: Existing vendor information according to the item or product purchase description for Specified Product, Brand Name or Equal purchases and limited use for Design Specifications to include public works/construction under the State sealed bid threshold.

Small Purchase Procedure: General requirements for use of the Small Purchase Method. The Small Purchase method can be utilized for simple fixed price purchases that are below the various State and Federal cost/price thresholds that require advertised sealed bidding (IFB) and are only for purchases that have definitive products or completed services.

The [purchasing/procurement authority] shall develop or describe a purchase requirement that meets the all the dollar thresholds and allowable uses of the Small Purchase method. The [purchasing/procurement authority] shall conduct Small Purchases by making the selection principally based on price but may also justify other selection factors such as delivery schedules that are important to the selection.

Small Purchase Procedure: Procurements not allowable for the Small Purchase method.

Notwithstanding any cost/price thresholds, the Small Purchase method shall not be used:

If the purchase categories are for Scope of Work or Performance Specifications and or;

If the purchase is for products or services in which there are complex questions to be considered or specific contract provisions to be included (inspection and testing, insurance, patents, price adjustments, etc.); and/or

Local Government Procurement Procedures

Small Purchase Procedure: General requirements for use of the Small Purchase Method. The Small Purchase method can be utilized for simple fixed price purchases that are below the various State and Federal cost/price thresholds that require advertised sealed bidding (IFB) and are only for purchases that have definitive products or completed services.

The [purchasing/procurement authority] shall develop or describe a purchase requirement that meets the all the dollar thresholds and allowable uses of the Small Purchase method. The [purchasing/procurement authority] shall conduct Small Purchases by making the selection principally based on price but may also justify other selection factors such as delivery schedules that are important to the selection.

To be replaced



Adapting the procurement policy and procedures

[purchasing/procurement authority]

Job title of person within the organization who will perform the designated procurement function

Requirement: Designate by **job title of person** appointed to perform each procurement function and replace “purchasing/procurement authority”

Examples: Procurement Job Titles & their Function

Examples: Procurement Job titles and their function:

❖ Micro-purchase Procedure: Determining Cost reasonableness

“The **Finance Director** will make a determination that the price is fair and reasonable provide a description of how the City made its determination.”

❖ **Sec. 2-217. Evaluation form.**

“The **chief administrative officer** shall develop a form to be used in the evaluation of proposals by each selection review panel convened.”

❖ **Sec. 9-30. Preparation and distributing of specification sheet.**

“(a)The **purchasing agent**, upon receipt of the written request or resolution, shall have the necessary specifications for the items to be bid upon prepared by the appropriate department head, engineer or consultant. “

Additional Notes on Procurement Procedures

Federal and State price/cost thresholds change

Use of the Small Purchase method has several limitations

The Federal Sealed Bid/[IFB] method has wider applications than does the State Sealed Bid law

The Federal standards for the Competitive Proposal method include “must have a written method for conducting technical evaluations of the proposals”

Questions?



**Federal Methods of
Procurement
2 CFR 200.320**

Selecting the Right Procurement Method

Fixed price purchases typically focus on the product to be purchased with less consideration given to the characteristics of the producer.

(1) Micro-Purchase

(2) Small Purchase

(3) Sealed Bids

When the purchases are less definitive and more consideration is given to the producer [quality]

(4) Competitive Proposal

Selecting the Right Procurement Method

Purchase is a definable work product[s] and/or deliverable[s]; require a specified level of accomplishment; all iterations or quantities certain and selection can be made principally based upon price.

Use a fixed price Method which meet Federal/State price thresholds

MICRO-PURCHASE

Up to \$10,000
Federal

SMALL PURCHASE

Up to \$250,000
Federal

SEALED BID

Minimum \$250,000
State

Selecting the Right Procurement Method, Type of Solicitation

Purchase is a definable work product[s] and/or deliverable[s]; require a specified level of accomplishment; all iterations or quantities certain and selection can be made principally based upon price.

Use a fixed price Method

MICRO-PURCHASE

Quotes

SMALL PURCHASE

Quotes

SEALED BID

Advertised Bids

Request for Bids

Methods of Procurement

(1) Micro Purchase 200.320(a)(1)

Micro-purchases may be awarded without soliciting competitive quotations if the non-federal entity considers the price to be reasonable.

The recipient shall maintain records identifying item(s) purchased, the purchase price, the vendor, date of the transaction and any special delivery or inspection requirements.

No applicable State laws to local governments

Methods of Procurement

(2) Small Purchase 200.320(a)(2)

The Small Purchase method may use oral/telephone solicitations when a simple description or a product with an established price is available.

The Small Purchase method shall use written solicitations when it is necessary to provide vendors with detailed information or specifications that cannot be conveyed orally (e.g., by phone), and/or the purchase requires detailed quotation evaluation information.

When using the Small Purchase method for public works construction projects below the State bid below threshold the solicitation process shall provide for specifications to be publically available and provide a **reasonable response time** for bidders.

Methods of Procurement

(2) Small Purchase 200.320(a)(2)

Typically for a **small purchase** a single payment be made upon completion delivery/performance.

Finally, to qualify as a **small purchase** the total acquisition cost cannot exceed \$250,000.

Methods of Procurement

(2) Small Purchase Restrictions

NOT USED for the purchase categories of Scope of Work or Performance Specifications.

NOT USED for complex questions to be considered or specific contract provisions to be included (inspection and testing, insurance, patents, price adjustments, etc).

NOT USED for studies and services or has other features that may require technical evaluation, qualitative assessment, or involve negotiations, and where an award cannot be made confidently on the basis of the lowest price.

Methods of Procurement

(2) Small Purchase Restrictions

NOT USED consultant services that require a more defined work statement and multiple delivery schedules, different work products, deliverables and/or contingent or uncertain performance requirements including the quantities or iterations of the purchase are needed.

NOT USED for complex questions to be considered or specific contract provisions to be included (inspection and testing, insurance, patents, price adjustments, etc).

Methods of Procurement

(3) Sealed Bids

200.320(b)(1)

Public Works Construction over \$250,000- State Law

Any fixed price purchase over \$250,000 -Fed Regulation
Including items [demolition, debris removal] exempt from the
State Bid law

Supplies/Materials over \$60,000 -State Law

Should have two or more responsible bidders willing and able to
compete effectively for the business.

Initiated by publishing an advertisement for bids. Also bids must
be solicited from an adequate number of known suppliers,
providing them sufficient response time prior to the date set for
opening the bids.

Methods of Procurement

(3) Sealed Bids

200.320(b)(1)

Must hold a **public bid opening** at the time and place set in the advertisement for bids.

Must have a written **review and tabulation of bids** according to selection criteria.

Contract must be awarded to the lowest responsive and responsible bidder.

Must be a **firm fixed-price contract** (lump sum price or unit price).

Any or all bids may be rejected if there is a sound documented reason.

Methods of Procurement

(4) Competitive Proposals 200.320(b)(2)

The purchase requirement(s) cannot be described specifically enough to permit the use of sealed bidding.

And/or

Purchase is not a definable work product[s] and/or deliverable[s]; does not require a specified level of accomplishment; all iterations or quantities are not certain and selection needs to evaluate more than just price.

And/or

The purchase lends itself to different approaches, e.g., proposals.

There are no State or Federal price/cost thresholds

There are no State laws applicable to local governments

Methods of Procurement

(4) Competitive Proposals 200.320(b)(2)

“selection needs to evaluate more than just price. “

Federal Acquisition Regulation requires a least one non-cost evaluation factor must be considered in addition to price/cost for Proposals

Qualifications

Capabilities

Past Performance

Experience

Approach

Easy

Harder

Difficult

Methods of Procurement

(4) Competitive Proposals

“a written method for conducting technical evaluations”

<u>COMPONENT:</u>	<u>Requirements:</u>
Rating Subject:	Identify the <u>subject area</u> to be evaluated.
Evaluation criteria:	Identify what <u>items</u> will be evaluated.
Rating Factor Rationale:	Explain the <u>reason</u> the factor is relevant to this contractor selection.
Submission requirements:	Identify the items proposers must <u>submit</u> for factor evaluation.
Evaluation basis:	Explain <u>how</u> the items will be evaluated and scored.

Format of Competitive Proposals

Format for Requests for Proposals (RFPs) and Requests for Qualifications (RFQs) found on the *LCDBG Procurement Procedures* page

COMPONENTS OF REQUESTS FOR PROPOSALS (RFPs) AND QUALIFICATIONS (RFQs)

PURPOSE

purpose to explain why the Unit of General Local Government is issuing this proposal

OBJECTIVE

purpose to explain what this purchase/acquisition/procurement is seeking to obtain

BACKGROUND OF THE ISSUER

purpose to provide information on the UGLG and pertinent information on the project

DEFINITIONS

purpose to identify any items that are peculiar to the procurement optional

PROJECT DESCRIPTION

purpose to provide sufficient information for proposers to estimate work efforts and time needed to accomplish tasks

SCHEDULE OF EVENTS

purpose to outline the significant events of the procurement

RFP/RFQ Announced/Issued
Pre-Proposal Conference optional
Proposer Inquiry Deadline optional
Response to Inquiries optional
Proposal Due Date
Extended Deadline optional
Oral interviews/negotiation optional

SCOPE OF SERVICES

purpose to identify what tasks and/or accomplishments contractor will perform

Tasks to be performed
Objectives optional
Requirements optional

Questions?



Procurement Staff

William Hall

Grant Specialist

William.hall@la.gov

225-219-3613

Denease McGee

Program Manager

Denease.Mcgee2@la.gov

225-342-7530

Labor Standards

Presented By:

Andrea' Scott

Local Government Responsibilities

Each local government is responsible for ensuring compliance with Labor Standards.

The local government delegates a Labor Compliance Officer (LCO), often an administrative consultant, but ultimately it's up to the local government to make sure compliance is met.

See Exhibit B-1 (Appointment of Labor Compliance Officer)

The local government is also responsible for maintaining a labor file.

Regulations/Requirements

1. Davis-Bacon Related Acts
DBA and DBRA – deals with prevailing wages
2. Copeland “Anti-Kickback” Act
Deals with the anti-trust act, payrolls, Statements of Compliance, and deductions
3. Contract Work Hours and Safety Standards Act (CWHSSA)
Deals with OT/time-and-a-half
4. Louisiana Law (as opposed to federal law)
If the state law is more stringent, then the state law governs
5. LCDBG Requirements
Any requirements we have under LCDBG

What is Davis-Bacon?

Davis-Bacon Act vs. Davis-Bacon Related Acts

The DBA was enacted by Congress to cover contracts that are directly federally funded. After the DBA was enacted, they extended the reach of DBA provisions by passing the DBRA, which covers contracts that are indirectly federally financed (or assisted) in whole or in part)

Meaning: Since LCDBG projects are funded through HUD, most of the projects LCDBG works with are subject to DBRA.

DBA and DBRA are very similar in substance and purpose and will be referred to interchangeably in our Handbook and communications

Davis-Bacon requires payment of locally prevailing wages to laborers and mechanics for on-site construction, alteration, or repair on federally financed projects with contracts over \$2,000

These wages are decided by the Department of Labor (DOL) and made available as wage decisions

A contractor on an LCDBG project must meet, at a minimum, the wage requirements set forth in the prevailing wage decisions

Copeland “Anti-Kickback” Act

B-14: PAYROLL DEDUCTION AUTHORIZATION

Payroll Deduction Authorization

Name of grant recipient _____

LCDBG Contract # _____

Employee _____

Employer _____

One box should be marked with an “x”. Occasionally more than one box will be marked. In addition to deductions authorized by law, such as social security and income taxes, the following deduction(s) will be subtracted from the employee’s paycheck(s)

- I authorize weekly deduction(s) as described below.
- I authorize a one-time deduction(s), as described below.
- I authorize deduction(s), below, to be subtracted from my paycheck for _____ weeks.

<u>Description of Additional Deductions*</u>	<u>Amount</u>

Employee Signature _____

Date _____

*Types of deductions may include retirement, health insurance, uniforms, loans and advance on wages. Deductions for garnishments, such as court orders and child support, may be authorized by this form or an appropriate legal document.

The Copeland “Anti-Kickback” Act is a federal law that applies to contracts receiving federal financial (assistance) that are subject to Davis-Bacon Requirements.

It outlaws paying the employer kickbacks, requires weekly payrolls, Statements of Compliance, and permission for pay deduction(s) not prescribed by law

There is a Payroll Deduction Authorization Form (Exhibit B-14) in our Handbook that an employee fills out to show other deductions

Anytime there’s something other than state taxes or FICA being deducted, this form has to be filled out providing explanation and monetary amounts for the other deductions

Deductions: union dues, 401K, loan payback, uniforms, etc., may only be made with the permission of the employee

Contract Work Hours and Safety Standards Act (CWHSSA)

CWHSSA is a federal law that requires time-and-a-half pay for any hours worked in excess of 40 during a work week.

Has liquidated damages of \$27 per person per day for any hours in excess of 40 in a given workweek in addition to restitution paid to worker

There are two methods to addressing the liquidated damages penalties:

1. Contractor requests a waiver from HUD

Ex: contractor finds out that he underpays an employee, he outlines it and pays the extra money to the employee and sends this office a request for the liquidated damages to be waived. We pass it along to HUD, and hopefully they grant the waiver and don't have to worry about paying any extra restitution

2. Contractor has to pay HUD by wire transfer

Ex: all the previous steps were made, but the waiver isn't granted. The contractor will then have to follow the guidance given by HUD to pay a wire transfer and makes for a significantly longer process

Wage Decision Example

WAGE DETERMINATIONS

Davis-Bacon Act WD # LA20220004

Wage Determination	
Modification #	4
Construction	Heavy
Last Revised Date	Mar 18, 2022

States and Counties

State
Louisiana

Counties
Allen, Assumption, Avoyelles, Beauregard, Bienville, Caldwell, Cameron, Catahoula, Claiborne, Concordia, De Soto, East Carroll, East Feliciana, Evangeline, Franklin, Grant, Iberia, Iberville, Jackson, Jefferson Davis, La Salle, Lincoln, Madison, Morehouse, Natchitoches, Pointe Coupee, Red River, Richland, Sabine, St Helena, St Mary, Tangipahoa, Tensas, Union, Vermilion, Vernon, Washington, West Carroll, West Feliciana, Winn

Document

Download Print

"General Decision Number: LA20220004 03/18/2022

Superseded General Decision Number: LA20210004

State: Louisiana

Construction Type: Heavy

Counties: Allen, Assumption, Avoyelles, Beauregard, Bienville, Caldwell, Cameron, Catahoula, Claiborne, Concordia, De Soto, East Carroll, East Feliciana, Evangeline, Franklin, Grant, Iberia, Iberville, Jackson, Jefferson Davis, La Salle, Lincoln, Madison, Morehouse, Natchitoches, Pointe Coupee, Red River, Richland, Sabine, St Helena, St Mary, Tangipahoa, Tensas, Union, Vermilion, Vernon, Washington, West Carroll, West Feliciana and Winn Counties in Louisiana.

HEAVY CONSTRUCTION PROJECTS (includes water walls, water &

ELECTRICIAN.....\$ 26.39 3%+9.42

* SULA2004-008 05/19/2004

	Rates	Fringes
CARPENTER (including formsetting/formbuilding).....	\$ 14.75 **	0.00
Laborers:		
Common.....	\$ 7.60 **	0.00
Pipelayer.....	\$ 8.47 **	0.00
PIPEFITTER (excluding pipelaying).....	\$ 18.75	4.05
Power equipment operators:		
Backhoe/Excavator.....	\$ 11.67 **	0.00
Boring Machine.....	\$ 10.25 **	0.00
Bulldozer.....	\$ 11.82 **	0.00
Crane.....	\$ 13.60 **	0.00
Dragline.....	\$ 13.12 **	0.00
Front End Loader.....	\$ 9.93 **	0.00
Mechanic.....	\$ 12.50 **	0.00
Trackhoe.....	\$ 11.99 **	0.00
Tractor.....	\$ 10.43 **	0.00
Water Well Driller.....	\$ 10.73 **	2.01
Truck drivers:		
Dump.....	\$ 10.00 **	0.00
Water.....	\$ 8.00 **	0.00

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

** Workers in this classification may be entitled to a higher minimum wage under Executive Order 14026 (\$15.00) or 13658 (\$11.25). Please see the Note at the top of the wage determination for more information.

Note: Executive Order (EO) 13706, Establishing Paid Sick Leave for Federal Contractors applies to all contracts subject to the Davis-Bacon Act for which the contract is awarded (and any solicitation was issued) on or after January 1, 2017. If this contract is covered by the EO, the contractor must provide employees with 1 hour of paid sick leave for every 30 hours

Types of Wage Decision

Building: the construction of sheltered enclosures with walk-in access for the purpose of housing persons, machinery, equipment, or supplies.

Structures, the installation of utilities, and the installation of equipment above and below the grade level, as well as incidental grading and paving

Highway: The construction, alteration, or repair of roads, streets, highways, runways, taxiways, alleys, trails, paths, parking areas, and other similar projects that are not incidental to building or heavy construction (streets and LLO projects)

Heavy: The construction on projects that cannot be classified as building, residential, or highway (sewer and water projects)

Residential: The construction, alteration, or repair of single-family houses or apartment building of no more than four stories in height.

<https://www.dol.gov/sites/dolgov/files/WHD/legacy/files/memo-131.pdf> - this link will bring you to an even more specific breakdown of wage decisions

Obtaining a Wage Decision

Things to consider:

Decision type (building highway, heavy or residential)

Project location

Special characteristics of the project

The possibility that more than one may apply

If you want further guidance on how to pick the right wage decision, you can submit an Initial Wage Decision Request (Exhibit B-3 in the Handbook)

DOL's website (<https://sam.gov/content/wage-determinations>) also has guidance on choosing the proper wage decision and lets you download it as well

Helpers, Apprentices, and Trainees

Helpers: this classification cannot be listed on an LCDBG payroll because it is not found on any of the Louisiana wage decisions.

If a person were listed to be working as a worker, Davis-Bacon would require such a person to be classified and paid at the minimum wage of a mechanic or laborer, depending on the type of work they are doing.

Apprentices: permitted to work at less than the wage for their craft when they are employed and individually registered in a bona fide apprentice program registered within the DOL, Bureau of Apprenticeship and Training

Their apprenticeship papers with the first payroll on which that worker appears would need to be submitted to OCD.

Trainees: permitted to work at less than the predetermined rate for their craft if they are employed and individually registered in a program that has received prior approval through formal certification by DOL.

These papers must be submitted by the contractor with the first payroll on which the worker appears

Excessive Use of the “Laborer” Classification

Contractors must not be allowed the excessive use of the “laborer” classification on Davis-Bacon covered projects.

Since “laborer” is often the lowest paid classification on a wage decision, a contractor might classify workers as laborers with the knowledge that such workers will actually perform some mechanic work.

Payrolls must reflect a reasonable distribution of laborers to mechanics based on the types of work inherent to completing the project.

Ten Day Rule

The DOL updates their prevailing wage decisions pretty regularly. To avoid having bidders take into consideration the constantly changing rates, DOL allows the wage decision in effect 10 days before bid opening to be effective for the duration of the construction if contract is awarded within 90 days of the bid opening date.

If more than 90 days pass, the wage decision in effect on the date of the contract award becomes the “effective” wage decision and the “lock-in” date becomes the date of contract award

The “ten-day call” (Exhibit B-4) is an optional form that the local government may use to determine whether a wage decision has been updated since the bid package was prepared.

Fringe Benefits

Fringe benefits are amounts paid to a receiving institution on behalf of the worker.

These can sometimes be confused with deductions.

If a wage decision contains fringes for a classification utilized by a construction contractor, box 4a or 4b of the payroll form must be marked to indicate the method of fringe benefit payment.

If no classifications with fringes were used, then those boxes can be left blank.

Date _____

I, _____ (Name of Signatory Party) _____ (Title) do hereby state:

(1) That I pay or supervise the payment of the persons employed by _____ (Contractor or Subcontractor) on the _____ (Building or Work); that during the payroll period commencing on the _____ day of _____ and ending the _____ day of _____ all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said _____ (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 106, 72 Stat. 967, 76 Stat. 357; 40 U.S.C. § 3145), and described below:

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That: (b) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH Fringe? Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

Signatory Authority?

NAME AND TITLE _____ SIGNATURE _____

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

Use of Force Account Labor

Exhibit B-11 explains required record keeping for force account work.

Prior approval needs to be obtained before using force accounts.

This refers to the use of laborers or mechanics who are employed by the local government, which serves as a contractor for the LCDBG project. In such cases, the contractor (local government) does not have to pay the DBA wage rates.

Verification Of Wage Decision & Contractor Eligibility Form (Exhibit B-5)

Prior to the award of a construction contract to any prime contractor, the local government must obtain verification of the wage decision choice and contractor eligibility.

This form must be sent to this office for review. After review, it will be sent back with revisions or approval.

If a determination is made that the wage decision choice was incorrect, the lowest responsive and responsible bidder must agree in writing to incorporate the proper decision.

The UEI number must be active on Sam.gov before work begins on the project

We also should be notified if any subcontractors get put onto the project (we do not clear subcontractors)

Clearance of Consulting and Engineering Firms: any firms that have not worked with our office in the last five years or who are new to the LCDBG program must be cleared

The form is very similar to this (Exhibit A-33), it just doesn't include the information about the wage decisions

Verification of Wage Decision(s) & Contractor Eligibility		
Please Note: Verifications must be obtained prior to award of contract		
1.	Grantee Name	
2.	LCDBG Contract Number	
3.	Parish	
4.	Bid Opening Date	
5.	Description of work covered by the bid package	
<ul style="list-style-type: none"> • Identification of wage decision(s) made part of the bid package whether by initial inclusion in bid document or by addendum. Example: LA 08 0014, Mod 0, 2/8/08 		
6.	Decision Number(s)	
7.	Modification Number(s)	
8.	Issue Date(s)	
<ul style="list-style-type: none"> • Identification of the prime contractor and principals of the firm. 		
9.	Prime Contractor Name	
10.	Address	
11.	City	
12.	State	
13.	Zip Code	
14.	Contractor Phone Number	
15.	Unique Entity ID (UEI) Number	
16.	Enter the name of each principal below	Enter the title of each principal
17.		
18.		
19.		
20.	Anticipated Number of Subcontractors:	UEI Number of Subcontractor(s)
21.		
22.		
23.	Grantee's Labor Compliance Officer (Signature or name)	
24.	Upon verification send to: (email address or fax #)	
25.	Date of this request	
<ul style="list-style-type: none"> • State Use Only: Initials & dates below indicate verification by OCD 		
26.	Wage decision(s) above verified by (Signature, date) (Valid only if awarded within 90 days of bid opening)	
27.	Prime contractor's eligibility verified (Signature, date)	
28.	Verification is hereby sent to (Name of Person)	

Notice of Contract Award

This form must be received by our office within 30 days after awarding the contract (Exhibit B-6 in Grantee Handbook).

The local government must also submit a Certified and Itemized Bid Tabulation, which is a listing of bidders and bid amounts for the project.

This office requires that the local government holds a preconstruction conference with the prime and all available subcontractors prior to the start of construction, at which time they will be advised of their responsibilities and obligations concerning labor standards and UEI number requirements

B-6: NOTICE OF CONTRACT AWARD

LGR: _____ File: _____ FY: _____ Labor

Notice of Contract Award

Date Received by State _____

- Louisiana law, LA RS 38:2215, requires mutual written agreement between the parties if the time between the bid opening and contract award exceeds 45 days.
- If more than 90 days transpire between bid opening and contract award date, ensure that the wage decision(s) in effect on the contract award date becomes a written part of the construction contract.
- Send this Notice to OCD within 30 days of the contract award date.

1. The LCDBG Contract:

Grantee Name _____

LCDBG Contract # _____

2. A prime construction contract has been awarded as follows:

Name of prime contractor _____

Type of work to be done _____

Bid Opening Date _____

Date of contract award _____

Estimated date of start of construction _____

3. Components of the above listed contract identified by source, purpose and amount:

Source	Purpose	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Total Amount of Contract Award (All funds—Local, LCDBG, etc.) _____

5. A copy of the certified and itemized bid tabulation is attached: Yes _____ No _____
Please do not attach unrequested documents such as: minutes of bid opening, list of attendees, LA Uniform Public work bid form, or resolution to award the contract.

6. Comments: _____

7. Signed _____
Signature of Grantee's CEO

8. Date _____

Additional Classifications

A wage decision will state the minimum hourly pay and fringe benefits that must be paid to specific classes of workers such as carpenters, electricians, and backhoe operators. If it is found that a class of laborers or mechanics not listed in the decision will be employed on the project, the contractor must request an additional classification

A construction contractor will often know immediately whether additional classifications will be needed, so this process can begin mobilization or hiring of workers

****RECENTLY
 UPDATED - FORM
 THAT SHOULD BE
 USED IS SF-1444 per
 HUD***

REQUEST FOR AUTHORIZATION OF ADDITIONAL CLASSIFICATION AND RATE		CHECK APPROPRIATE BOX <input type="checkbox"/> SERVICE CONTRACT <input type="checkbox"/> CONSTRUCTION CONTRACT	OMB Control Number: 9000-0066 Expiration Date: 5/31/2025
<p>Paperwork Reduction Act Statement - This information collection meets the requirements of 44 U.S.C. § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 9000-0066. We estimate that it will take .5 hours to read the instructions, gather the facts, and answer the questions. Send only comments relating to our time estimate, including suggestions for reducing this burden, or any other aspects of this collection of information to: U.S. General Services Administration, Regulatory Secretariat Division (MTV1CB), 1800 F Street, NW, Washington, DC 20405.</p> <p>INSTRUCTIONS: THE CONTRACTOR SHALL COMPLETE ITEMS 3 THROUGH 16, KEEP A PENDING COPY, AND SUBMIT THE REQUEST, IN QUADRUPPLICATE, TO THE CONTRACTING OFFICER.</p>			
1. TO: ADMINISTRATOR, WAGE AND HOUR DIVISION U.S. DEPARTMENT OF LABOR WASHINGTON, DC 20210		2. FROM: (REPORTING OFFICE)	
3. CONTRACTOR			4. DATE OF REQUEST
5. CONTRACT NUMBER	6. DATE BID OPENED (SEALED BIDDING)	7. DATE OF AWARD	8. DATE CONTRACT WORK STARTED
			9. DATE OPTION EXERCISED (IF APPLICABLE) (SERVICE CONTRACT ONLY)
10. SUBCONTRACTOR (IF ANY)			
11. PROJECT AND DESCRIPTION OF WORK (ATTACH ADDITIONAL SHEET IF NEEDED)			
12. LOCATION (CITY, COUNTY, AND STATE)			
13. IN ORDER TO COMPLETE THE WORK PROVIDED FOR UNDER THE ABOVE CONTRACT, IT IS NECESSARY TO ESTABLISH THE FOLLOWING RATE(S) FOR THE INDICATED CLASSIFICATION(S) NOT INCLUDED IN THE DEPARTMENT OF LABOR DETERMINATION			
NUMBER:		DATED:	
a. LIST IN ORDER: PROPOSED CLASSIFICATION TITLE(S); JOB DESCRIPTION(S); DUTIES, AND RATIONALE FOR PROPOSED CLASSIFICATIONS. (Service contracts only) <small>(Use reverse or attach additional sheets, if necessary)</small>		b. WAGE RATE(S)	c. FRINGE BENEFITS PAYMENTS
14. SIGNATURE AND TITLE OF SUBCONTRACTOR REPRESENTATIVE (IF ANY)		15. SIGNATURE AND TITLE OF PRIME CONTRACTOR REPRESENTATIVE	
16. SIGNATURE OF EMPLOYEE OR REPRESENTATIVE		TITLE	CHECK APPROPRIATE BOX-REFERENCING BLOCK 13 <input type="checkbox"/> AGREE <input type="checkbox"/> DISAGREE
<p>TO BE COMPLETED BY CONTRACTING OFFICER (CHECK AS APPROPRIATE - SEE FAR 22.1019 (SERVICE CONTRACT LABOR STANDARDS) OR FAR 22.406-3 (CONSTRUCTION WAGE RATE REQUIREMENTS))</p> <p><input type="checkbox"/> THE INTERESTED PARTIES AGREE AND THE CONTRACTING OFFICER RECOMMENDS APPROVAL BY THE WAGE AND HOUR DIVISION. AVAILABLE INFORMATION AND RECOMMENDATIONS ARE ATTACHED.</p> <p><input type="checkbox"/> THE INTERESTED PARTIES CANNOT AGREE ON THE PROPOSED CLASSIFICATION AND WAGE RATE. A DETERMINATION OF THE QUESTION BY THE WAGE AND HOUR DIVISION IS THEREFORE REQUESTED. AVAILABLE INFORMATION AND RECOMMENDATIONS ARE ATTACHED. <small>(Send 3 copies to the Department of Labor)</small></p>			
SIGNATURE OF CONTRACTING OFFICER OR REPRESENTATIVE		TITLE AND COMMERCIAL TELEPHONE NUMBER	DATE SUBMITTED
AUTHORIZED FOR LOCAL REPRODUCTION PREVIOUS EDITION IS USABLE		STANDARD FORM 1444 (REV. 4/2013) Prescribed by GSA-FAR (48 CFR) 53.222(f)	

Employee Interviews

B-10: RECORD OF EMPLOYEE INTERVIEW FORM

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 16 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 collected to ensure compliance with the Federal labor standards by recording interviews with construction workers. The information collected will assist HUD in the conduct of compliance monitoring; the information will be used to test the veracity of certified payroll reports submitted by the employer. **Sensitive Information.** The information collected on this form is considered sensitive and is protected by the Privacy Act. The Privacy Act requires that these records be maintained with appropriate administrative, technical, and physical safeguards to ensure their security and confidentiality. In addition, these records should be protected against any anticipated threats or hazards to their security or integrity that could result in substantial harm, embarrassment, inconvenience, or unfairness to any individual on whom the information is maintained. **The information collected herein is voluntary, and any information provided shall be kept confidential.**

1a. Project Name			2a. Employee Name		
1b. Project Number			2b. Employee Phone Number (including area code)		
1c. Contractor or Subcontractor (Employer)			2c. Employee Home Address & Zip Code		
			2d. Verification of identification? Yes <input type="checkbox"/> No <input type="checkbox"/>		
3a. How long on this job?	3b. Last date on this job before today?	3c. No. of hours last day on this job?	4a. Hourly rate of pay?	4b. Fringe Benefits?	
				Vacation Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
				Medical Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Pension Yes <input type="checkbox"/> No <input type="checkbox"/>	
5. Your job classification(s) (list all) — continue on a separate sheet if necessary					
6. Your duties					
7. Tools or equipment used					
CONFIDENTIAL					
8. Are you an apprentice or trainee?		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"/>	
9. Are you paid for all hours worked?		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

Previous editions are obsolete

Form HUD-11 (03/2019)

During the course of construction, the local government must conduct interviews of workers to help determine payroll accuracy and compliance with DBA (Exhibit B-10)

Minimum requirements:

All prime contractors

Subcontractors whose award is \$100,000 or more

Any subcontractor where there are a large number of payroll problems

When an interview session is conducted, at least 50% of the laborers and at least one worker of each of the remaining classifications present on the jobsite that day must be interviewed

This includes truck drivers and other classifications who may not spend all day on the jobsite

If you have to go back and get interviews for certain individuals who were not present when you were there, you do not have to start over.

Corrective Actions Regarding Labor Standards Violations

Inadequate Payroll Information

The local government should be requiring prime contractors to submit weekly payrolls in order for them to be reviewed and possibly revised in a timely manner

The payroll format in Exhibit B-12 shows the necessary information for payroll reporting and comes from the DOL.

Note: alternate forms may be used as long as all the required information on the form is included.

If the payroll is filled out incorrectly, corrections should be made prior to monitoring (included a corrected payroll and Statement of Compliance)

Handwritten corrections are not allowed

U.S. Department of Labor
Wage and Hour Division

PAYROLL
(For Contractor's Optional Use. See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Please see all required to request to the collection of information under a currently valid OMB control number.

U.S. Wage and Hour Division
Rev. Dec. 2010
CHIEF NO. 1235-0048
EFFECTIVE: 04/30/2011

NAME OF CONTRACTOR OR SUBCONTRACTOR ADDRESS

PROJECT AND LOCATION PROJECT OR CONTRACT NO.

(1)	(2)	(3)	(4) ON DAY AND DATE				(5)	(6)	(7)	(8) DEDUCTIONS				(9)	
			MON	TUE	WED	THUR				TOTAL HOURS	RATE OF PAY	GROSS AMOUNT EARNED	REG.		SEMI-HOLDING TAX
NAME AND PERSONAL IDENTIFYING NUMBER (i.e., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER OR NUMBER)	WORK CLASSIFICATION	JOB TITLE	1												
			2												
			3												
			4												
			5												
			6												
			7												

Write completion of Form WH-347 in ink. It is necessary for several contractors and subcontractors performing work on Federally financed or assisted construction projects to request to the information collection contained in 16 CFR, 261.23, 261.24, 261.25, 261.26, 261.27, 261.28, 261.29, 261.30, 261.31, 261.32, 261.33, 261.34, 261.35, 261.36, 261.37, 261.38, 261.39, 261.40, 261.41, 261.42, 261.43, 261.44, 261.45, 261.46, 261.47, 261.48, 261.49, 261.50, 261.51, 261.52, 261.53, 261.54, 261.55, 261.56, 261.57, 261.58, 261.59, 261.60, 261.61, 261.62, 261.63, 261.64, 261.65, 261.66, 261.67, 261.68, 261.69, 261.70, 261.71, 261.72, 261.73, 261.74, 261.75, 261.76, 261.77, 261.78, 261.79, 261.80, 261.81, 261.82, 261.83, 261.84, 261.85, 261.86, 261.87, 261.88, 261.89, 261.90, 261.91, 261.92, 261.93, 261.94, 261.95, 261.96, 261.97, 261.98, 261.99, 261.100, 261.101, 261.102, 261.103, 261.104, 261.105, 261.106, 261.107, 261.108, 261.109, 261.110, 261.111, 261.112, 261.113, 261.114, 261.115, 261.116, 261.117, 261.118, 261.119, 261.120, 261.121, 261.122, 261.123, 261.124, 261.125, 261.126, 261.127, 261.128, 261.129, 261.130, 261.131, 261.132, 261.133, 261.134, 261.135, 261.136, 261.137, 261.138, 261.139, 261.140, 261.141, 261.142, 261.143, 261.144, 261.145, 261.146, 261.147, 261.148, 261.149, 261.150, 261.151, 261.152, 261.153, 261.154, 261.155, 261.156, 261.157, 261.158, 261.159, 261.160, 261.161, 261.162, 261.163, 261.164, 261.165, 261.166, 261.167, 261.168, 261.169, 261.170, 261.171, 261.172, 261.173, 261.174, 261.175, 261.176, 261.177, 261.178, 261.179, 261.180, 261.181, 261.182, 261.183, 261.184, 261.185, 261.186, 261.187, 261.188, 261.189, 261.190, 261.191, 261.192, 261.193, 261.194, 261.195, 261.196, 261.197, 261.198, 261.199, 261.200, 261.201, 261.202, 261.203, 261.204, 261.205, 261.206, 261.207, 261.208, 261.209, 261.210, 261.211, 261.212, 261.213, 261.214, 261.215, 261.216, 261.217, 261.218, 261.219, 261.220, 261.221, 261.222, 261.223, 261.224, 261.225, 261.226, 261.227, 261.228, 261.229, 261.230, 261.231, 261.232, 261.233, 261.234, 261.235, 261.236, 261.237, 261.238, 261.239, 261.240, 261.241, 261.242, 261.243, 261.244, 261.245, 261.246, 261.247, 261.248, 261.249, 261.250, 261.251, 261.252, 261.253, 261.254, 261.255, 261.256, 261.257, 261.258, 261.259, 261.260, 261.261, 261.262, 261.263, 261.264, 261.265, 261.266, 261.267, 261.268, 261.269, 261.270, 261.271, 261.272, 261.273, 261.274, 261.275, 261.276, 261.277, 261.278, 261.279, 261.280, 261.281, 261.282, 261.283, 261.284, 261.285, 261.286, 261.287, 261.288, 261.289, 261.290, 261.291, 261.292, 261.293, 261.294, 261.295, 261.296, 261.297, 261.298, 261.299, 261.300, 261.301, 261.302, 261.303, 261.304, 261.305, 261.306, 261.307, 261.308, 261.309, 261.310, 261.311, 261.312, 261.313, 261.314, 261.315, 261.316, 261.317, 261.318, 261.319, 261.320, 261.321, 261.322, 261.323, 261.324, 261.325, 261.326, 261.327, 261.328, 261.329, 261.330, 261.331, 261.332, 261.333, 261.334, 261.335, 261.336, 261.337, 261.338, 261.339, 261.340, 261.341, 261.342, 261.343, 261.344, 261.345, 261.346, 261.347, 261.348, 261.349, 261.350, 261.351, 261.352, 261.353, 261.354, 261.355, 261.356, 261.357, 261.358, 261.359, 261.360, 261.361, 261.362, 261.363, 261.364, 261.365, 261.366, 261.367, 261.368, 261.369, 261.370, 261.371, 261.372, 261.373, 261.374, 261.375, 261.376, 261.377, 261.378, 261.379, 261.380, 261.381, 261.382, 261.383, 261.384, 261.385, 261.386, 261.387, 261.388, 261.389, 261.390, 261.391, 261.392, 261.393, 261.394, 261.395, 261.396, 261.397, 261.398, 261.399, 261.400, 261.401, 261.402, 261.403, 261.404, 261.405, 261.406, 261.407, 261.408, 261.409, 261.410, 261.411, 261.412, 261.413, 261.414, 261.415, 261.416, 261.417, 261.418, 261.419, 261.420, 261.421, 261.422, 261.423, 261.424, 261.425, 261.426, 261.427, 261.428, 261.429, 261.430, 261.431, 261.432, 261.433, 261.434, 261.435, 261.436, 261.437, 261.438, 261.439, 261.440, 261.441, 261.442, 261.443, 261.444, 261.445, 261.446, 261.447, 261.448, 261.449, 261.450, 261.451, 261.452, 261.453, 261.454, 261.455, 261.456, 261.457, 261.458, 261.459, 261.460, 261.461, 261.462, 261.463, 261.464, 261.465, 261.466, 261.467, 261.468, 261.469, 261.470, 261.471, 261.472, 261.473, 261.474, 261.475, 261.476, 261.477, 261.478, 261.479, 261.480, 261.481, 261.482, 261.483, 261.484, 261.485, 261.486, 261.487, 261.488, 261.489, 261.490, 261.491, 261.492, 261.493, 261.494, 261.495, 261.496, 261.497, 261.498, 261.499, 261.500, 261.501, 261.502, 261.503, 261.504, 261.505, 261.506, 261.507, 261.508, 261.509, 261.510, 261.511, 261.512, 261.513, 261.514, 261.515, 261.516, 261.517, 261.518, 261.519, 261.520, 261.521, 261.522, 261.523, 261.524, 261.525, 261.526, 261.527, 261.528, 261.529, 261.530, 261.531, 261.532, 261.533, 261.534, 261.535, 261.536, 261.537, 261.538, 261.539, 261.540, 261.541, 261.542, 261.543, 261.544, 261.545, 261.546, 261.547, 261.548, 261.549, 261.550, 261.551, 261.552, 261.553, 261.554, 261.555, 261.556, 261.557, 261.558, 261.559, 261.560, 261.561, 261.562, 261.563, 261.564, 261.565, 261.566, 261.567, 261.568, 261.569, 261.570, 261.571, 261.572, 261.573, 261.574, 261.575, 261.576, 261.577, 261.578, 261.579, 261.580, 261.581, 261.582, 261.583, 261.584, 261.585, 261.586, 261.587, 261.588, 261.589, 261.590, 261.591, 261.592, 261.593, 261.594, 261.595, 261.596, 261.597, 261.598, 261.599, 261.600, 261.601, 261.602, 261.603, 261.604, 261.605, 261.606, 261.607, 261.608, 261.609, 261.610, 261.611, 261.612, 261.613, 261.614, 261.615, 261.616, 261.617, 261.618, 261.619, 261.620, 261.621, 261.622, 261.623, 261.624, 261.625, 261.626, 261.627, 261.628, 261.629, 261.630, 261.631, 261.632, 261.633, 261.634, 261.635, 261.636, 261.637, 261.638, 261.639, 261.640, 261.641, 261.642, 261.643, 261.644, 261.645, 261.646, 261.647, 261.648, 261.649, 261.650, 261.651, 261.652, 261.653, 261.654, 261.655, 261.656, 261.657, 261.658, 261.659, 261.660, 261.661, 261.662, 261.663, 261.664, 261.665, 261.666, 261.667, 261.668, 261.669, 261.670, 261.671, 261.672, 261.673, 261.674, 261.675, 261.676, 261.677, 261.678, 261.679, 261.680, 261.681, 261.682, 261.683, 261.684, 261.685, 261.686, 261.687, 261.688, 261.689, 261.690, 261.691, 261.692, 261.693, 261.694, 261.695, 261.696, 261.697, 261.698, 261.699, 261.700, 261.701, 261.702, 261.703, 261.704, 261.705, 261.706, 261.707, 261.708, 261.709, 261.710, 261.711, 261.712, 261.713, 261.714, 261.715, 261.716, 261.717, 261.718, 261.719, 261.720, 261.721, 261.722, 261.723, 261.724, 261.725, 261.726, 261.727, 261.728, 261.729, 261.730, 261.731, 261.732, 261.733, 261.734, 261.735, 261.736, 261.737, 261.738, 261.739, 261.740, 261.741, 261.742, 261.743, 261.744, 261.745, 261.746, 261.747, 261.748, 261.749, 261.750, 261.751, 261.752, 261.753, 261.754, 261.755, 261.756, 261.757, 261.758, 261.759, 261.760, 261.761, 261.762, 261.763, 261.764, 261.765, 261.766, 261.767, 261.768, 261.769, 261.770, 261.771, 261.772, 261.773, 261.774, 261.775, 261.776, 261.777, 261.778, 261.779, 261.780, 261.781, 261.782, 261.783, 261.784, 261.785, 261.786, 261.787, 261.788, 261.789, 261.790, 261.791, 261.792, 261.793, 261.794, 261.795, 261.796, 261.797, 261.798, 261.799, 261.800, 261.801, 261.802, 261.803, 261.804, 261.805, 261.806, 261.807, 261.808, 261.809, 261.810, 261.811, 261.812, 261.813, 261.814, 261.815, 261.816, 261.817, 261.818, 261.819, 261.820, 261.821, 261.822, 261.823, 261.824, 261.825, 261.826, 261.827, 261.828, 261.829, 261.830, 261.831, 261.832, 261.833, 261.834, 261.835, 261.836, 261.837, 261.838, 261.839, 261.840, 261.841, 261.842, 261.843, 261.844, 261.845, 261.846, 261.847, 261.848, 261.849, 261.850, 261.851, 261.852, 261.853, 261.854, 261.855, 261.856, 261.857, 261.858, 261.859, 261.860, 261.861, 261.862, 261.863, 261.864, 261.865, 261.866, 261.867, 261.868, 261.869, 261.870, 261.871, 261.872, 261.873, 261.874, 261.875, 261.876, 261.877, 261.878, 261.879, 261.880, 261.881, 261.882, 261.883, 261.884, 261.885, 261.886, 261.887, 261.888, 261.889, 261.890, 261.891, 261.892, 261.893, 261.894, 261.895, 261.896, 261.897, 261.898, 261.899, 261.900, 261.901, 261.902, 261.903, 261.904, 261.905, 261.906, 261.907, 261.908, 261.909, 261.910, 261.911, 261.912, 261.913, 261.914, 261.915, 261.916, 261.917, 261.918, 261.919, 261.920, 261.921, 261.922, 261.923, 261.924, 261.925, 261.926, 261.927, 261.928, 261.929, 261.930, 261.931, 261.932, 261.933, 261.934, 261.935, 261.936, 261.937, 261.938, 261.939, 261.940, 261.941, 261.942, 261.943, 261.944, 261.945, 261.946, 261.947, 261.948, 261.949, 261.950, 261.951, 261.952, 261.953, 261.954, 261.955, 261.956, 261.957, 261.958, 261.959, 261.960, 261.961, 261.962, 261.963, 261.964, 261.965, 261.966, 261.967, 261.968, 261.969, 261.970, 261.971, 261.972, 261.973, 261.974, 261.975, 261.976, 261.977, 261.978, 261.979, 261.980, 261.981, 261.982, 261.983, 261.984, 261.985, 261.986, 261.987, 261.988, 261.989, 261.990, 261.991, 261.992, 261.993, 261.994, 261.995, 261.996, 261.997, 261.998, 261.999, 262.000, 262.001, 262.002, 262.003, 262.004, 262.005, 262.006, 262.007, 262.008, 262.009, 262.010, 262.011, 262.012, 262.013, 262.014, 262.015, 262.016, 262.017, 262.018, 262.019, 262.020, 262.021, 262.022, 262.023, 262.024, 262.025, 262.026, 262.027, 262.028, 262.029, 262.030, 262.031, 262.032, 262.033, 262.034, 262.035, 262.036, 262.037, 262.038, 262.039, 262.040, 262.041, 262.042, 262.043, 262.044, 262.045, 262.046, 262.047, 262.048, 262.049, 262.050, 262.051, 262.052, 262.053, 262.054, 262.055, 262.056, 262.057, 262.058, 262.059, 262.060, 262.061, 262.062, 262.063, 262.064, 262.065, 262.066, 262.067, 262.068, 262.069, 262.070, 262.071, 262.072, 262.073, 262.074, 262.075, 262.076, 262.077, 262.078, 262.079, 262.080, 262.081, 262.082, 262.083, 262.084, 262.085, 262.086, 262.087, 262.088, 262.089, 262.090, 262.091, 262.092, 262.093, 262.094, 262.095, 262.096, 262.097, 262.098, 262.099, 262.100, 262.101, 262.102, 262.103, 262.104, 262.105, 262.106, 262.107, 262.108, 262.109, 262.110, 262.111, 262.112, 262.113, 262.114, 262.115, 262.116, 262.117, 262.118, 262.119, 262.120, 262.121, 262.122, 262.123, 262.124, 262.125, 262.126, 262.127, 262.128, 262.129, 262.130, 262.131, 262.132, 262.133, 262.134, 262.135, 262.136, 262.137, 262.138, 262.139, 262.140, 262.141, 262.142, 262.143, 262.144, 262.145, 262.146, 262.147, 262.148, 262.149, 262.150, 262.151, 262.152, 262.153, 262.154, 262.155, 262.156, 262.157, 262.158, 262.159, 262.160, 262.161, 262.162, 262.163, 262.164, 262.165, 262.166, 262.167, 262.168, 262.169, 262.170, 262.171, 262.172, 262.173, 262.174, 262.175, 262.176, 262.177, 262.178, 262.179, 262.180, 262.181, 262.182, 262.183, 262.184, 262.185, 262.186, 262.187, 262.188, 262.189, 262.190, 262.191, 262.192, 262.193, 262.194, 262.195, 262.196, 262.197, 262.198, 262.199, 262.200, 262.201, 262.202, 262.203, 262.204, 262.205, 262.206, 262.207, 262.208, 262.209, 262.210, 262.211, 262.212, 262.213, 262.214, 262.215, 262.216, 262.217, 262.218, 262.219, 262.220, 262.221, 262.222, 262.223, 262.224, 262.225, 262.226, 262.227, 262.228, 262.229, 262.230, 262.231, 262.232, 262.233, 262.234, 262.235, 262.236, 262.237, 262.238, 262.239, 262.240, 262.241, 262.242,

Three Scenarios of Payroll Review

1. Scenario One: Error that Requires Restitution

Requires restitution due to underpayment of wages. May result from Davis-Bacon violations, CWHSSA overtime violations, or both

The local government must promptly notify the prime contractor in writing that payment of back wages is required (Exhibit B-15)

Should identify the name of the prime and the applicable subcontractor, the underpaid worker(s), the correct job classification and wage rate, dates of underpayment, and the amount of underpayment owed

If there OT violations under CWHSSA, the notice to the contractor should also identify a calculation of liquidated damages and inform the contractor to either pay them or request a waiver

Certified Correction Payroll: a payroll that reflects restitution paid under DBA and/or CWHSSA. Will reflect the corrected payroll amounts and will be designated as a “certified” correction payroll.

Payroll problems that require the employer to prepare a Certified Correction Payroll

Wage rates on the payroll do not meet DBA

Wage rates on the payroll do not meet CWHSSA requirements

Worker classifications are incorrect, incomplete, or not in accordance with the applicable wage decision resulting in restitution due

Calculations are in error and result in underpayment

Three Scenarios of Payroll Review

2. When restitution will not be due but some type of correction not involving restitution is required.

may be used to reclassify workers, correct math errors, clarify monetary amounts, revise improper dating

Each corrected payroll is for one week only (should be the same weekly number as the original. Ex: Payroll 4 Revision 1)

Supplementary statements may be obtained from the contractor to clarify not only major issues involving restitution or classification clarifications, but also minor issues that do not involve restitution

The payroll does not have the last four digits of the employee's SSN

An incorrect employee name

3. No error detected

Final Wage Compliance Report

Final Wage Compliance Report

(Not required for Housing grants)

1. Grantee Name _____

2. LCDBG Contract# _____

3. Fiscal Year of Grant _____

4. Date of this Report _____

5. Report Prepared By _____

6. Was there any wage underpayment(s)? Yes No

7. Listing of any contractors associated with underpayment(s):

Prime contractor (above) Sub(s) to this prime (below)	Prime contractor (above) Subs to this prime (below)	Prime contractor (above) Subs to this prime (below)
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. Are any labor issues unresolved? Yes No If yes, explain on the line below:

9. Provide enforcement activity information for each contractor who had underpayment(s) using the format provided in 10-15.

10. Contractor (prime or sub)	11. Type of work	12. # of workers underpaid	13. Restitution under Davis Bacon	14. Restitution under CWHSSA	15. Liquidated Damages collected
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

The last item regarding labor standards, found in Exhibit E-6, must be sent to this office along with other closeout documents.

If there are unresolved labor compliance problems at that time, the OCD Labor Compliance Officer will assist the local government in determining how to fix it

Reporting Restitution under Davis-Bacon and CWHSSA

Restitution reported on the Labor Standards Enforcement Report or the Final Wage Compliance Report must be correctly classified

DBA: involves the restitution that comes from an underpayment rate for each hour worked at the deficient rate

CWHSSA: involves the payment of one-half of the hourly deficiency for each overtime hour worked

EX: A laborer worked 48 hours in one workweek. He was paid \$10.00 per hour for 40 hours and \$15.00 per hour for eight hours. The wage decision calls for \$11.00 per hour with no fringe benefits. Most payroll preparers would immediately know that \$52.00 of restitution is due; however, some may not realize the proper classification of each of the components of restitution. The \$52.00 in restitution is properly calculated and classified as follows:

48 x \$1.00 = \$48.00 Davis-Bacon component of restitution

8 x \$0.50 = \$ 4.00 CWHSSA component of restitution

Withholding Funds from Contractor Based on Non-Compliance with Labor Standards

If violations regarding restitution have not been corrected within 30 calendar days from the day of the first notice of underpayment, the local government may withhold funds due to the prime.

Only an amount considered necessary to ensure payment of underpaid wages (and Liquidated Damages, if applicable) may be withheld

The prime must be notified of the withholding and be given the second notice of underpayment

The local government must, again, specify the identity of underpaid workers, correct job classifications and wage rates, dates when underpayments occurred, and the amounts of underpayments owed

If OCD determines it appropriate, the local government will be notified to disburse wages owed from the withheld funds to the respective workers

Unfound Workers

If all affected workers cannot be located and restitution made either by the contractor directly or through use of withheld funds, enough funds must be reserved to pay those workers the wages owed

Efforts should be made to locate workers; however, if they have not been located by the time of closeout, the local government must return the withheld funds to the OCD

A check, made payable to the Louisiana Division of Administration, and a Labor Standards Enforcement Report (Exhibit B-16) covering the remaining withheld funds must be submitted before the grant will be closed

Falsification

If intentional falsification by the contractor is suspected, the local government's Labor Compliance Officer must not return the payroll to the contractor for correction and submittal.

Notify this office of any suspected falsification

Withholding Funds from Grantee Based on Non-Compliance with LCDBG Requirements

If a Labor Standards violation does occur that results in the local government not being in compliance within the LCDBG program, the OCD may suspend payment on the next “Request for Payment”

Ex: if the local government fails to ensure the timely submission of contractor payrolls by the prime, then the local government may be considered as being in non-compliance

Payroll Retention

Payroll records must be retained by the local government for a period of four years from the date of the letter indicating “Final Close” of the LCDBG program relative to the construction project.

These records must be available at all times during the retention period for inspect by representatives of the OCD, HUD, and DOL.

Chronological Steps

1. Obtain a wage decision
2. Prepare bid documents
3. Advertise for bids
4. Ten day responsibility (10dc no longer required)
5. Bid opening
6. Verification of contractor eligibility (**Revised to Include Subs**)
7. Award contract
8. Notice of contract award
9. Preconstruction conference (**Required**)
10. Additional classifications

Chronological Steps (continued)

- 11. Employee interviews**
- 12. Examinations of payrolls (must stay current to ensure compliance of contractors before they leave the site)**
- 13. Corrective actions (if applicable) such as restitution and liquidated damages**
- 14. Labor Standards Enforcement Report**
- 15. Monitoring by OCD-LGA staff**
- 16. Corrective action to address findings of deficiency**
- 17. Final Wage Compliance Report**

Questions?



Labor Staff

Fenishia Favorite

Policy & Program Coordinator

Fenishia.Favorite@la.gov

225-342-5884

Andrea Scott

CD Program Specialist

Andrea.Scott2@la.gov

225-342-8440

Monitoring, Closeout, and Program Amendments

Presented By:
Heather Paul

Desktop Review

OCD-LGA staff will send a letter requesting documents when the grant funds have been 25% expended.

Grantees will have 2 weeks to submit requested documents.

Local Government Questionnaire

E-5: LOCAL GOVERNMENT QUESTIONNAIRE

Local Government Questionnaire

This questionnaire must be completed in its entirety and returned with the information requested. It must be signed by the chief elected official.

	Question	Yes	No	N/A
1.	At this time, has a person or business been displaced as a result of this program? (If yes, contact OCD-LGA immediately)			
2.	Is it anticipated that any person or business will be displaced as a result of this program? (If yes, contact OCD-LGA immediately)			
3.	Does your local government operate a 24-hour emergency service?			
	<ul style="list-style-type: none"> If yes, does your local government use a functioning TDD? 			
4.	If your local government does not have a functioning TDD, does it utilize the LA Relay Service?			
	<ul style="list-style-type: none"> A copy of the newspaper advertisement of the published telephone numbers within six months of the Authorization to Incur Costs letter date must be returned with this questionnaire. 			
5.	Does the local government have any disabled employees?			
	<ul style="list-style-type: none"> If yes, provide the policy stating that reasonable accommodations, such as restructuring/relocating job, modifying schedule, acquiring or modifying equipment, providing reader/interpreter, are made. 			
6.	Does your local government's operating unit have 15 or more employees?			
	<ul style="list-style-type: none"> If yes, has the local government taken appropriate initial and continuing steps to notify "participants, beneficiaries, applicants, and employees, including those with impaired vision or hearing, and unions or professional organizations holding collective bargaining or professional agreements with the grantee" that it does not discriminate on the basis of disability in violation of this part? 			
	<ul style="list-style-type: none"> If yes, did the grantee make the initial notification required within 90 days of receipt of the executed contract with the State for each new grant? 			
	<ul style="list-style-type: none"> If yes, documentation of initial and continuing notifications must be returned with this questionnaire. 			
7.	Has your local government acquired an "existing" facility (construction prior to July 11, 1988) that is not accessible and will renovate it prior to occupying it?			
8.	Has the U.S. Justice Department required your local government to make a facility physically accessible?			

Desktop Review Exhibit E-4

Desktop Review	
General Information	Grantee: _____
	Contract Number: _____
	Grant Program Year: _____
	Grant Type [PF, HO, ED, DN, LS]: _____
	Entity [Village, City, Town, Parish]: _____
Contacts	Chief Elected Official: _____
	Consultant: _____
	Engineer: _____
	LGR: _____
Dates	Date of Application: _____
	Authorization to Incur Costs: _____
	Transmittal of Contract: _____
	Consultant Cleared: _____
	Engineer Cleared: _____
	Consultant Contract: _____
	Engineer Contract: _____
	CDBG Contract Ends: _____
Desktop Review Letter Sent: _____	
Amounts/Activities/Nat'l Objective	Grant Award Amount: _____
	Percent Drawn to Date: _____
	Local Funds: _____
	Other Funds: _____
	Activity: _____
	National Objective: _____
	ORIGINAL Budgeted Amount for Activity: _____
	Most recent REVISED Budgeted Amount for Activity: _____
	Expenditures to Date: _____
	Activity: _____
	National Objective: _____
	ORIGINAL Budgeted Amount for Activity: _____
Most recent REVISED Budgeted Amount for Activity: _____	
Expenditures to Date: _____	
Activity: _____	
National Objective: _____	

Onsite Monitoring – Exhibit E-3

E-3: ON-SITE MONITORING CHECKLISTS

Monitoring Preparation Checklist (pages 1-4)		Updated: July 2022			
General Information		Grantee:			
		Contract Number:			
		Grant Program Year:			
		Grant Type [PF, HO, ED, DN, LS]:			
		Entity [Village, City, Town, Parish]:			
Contacts		Chief Elected Official:			
		Consultant:			
		Engineer:			
		LGR:			
Dates		Date of Application:			
		Authorization to Incur Costs:			
		Transmittal of Contract:			
		Consultant Cleared:			
		Engineer Cleared:			
		Consultant Contract:			
		Engineer Contract:			
		CDBG Contract Ends:			
		Monitoring Visit:			
Amounts/Activities/Nat'l Objective		Grant Award Amount:			
		Percent Drawn to Date:			
		Local Funds:			
		Other Funds:			
		Activity:			
		National Objective:			
		ORIGINAL Budgeted Amount for Activity:			
		Most recent REVISED Budgeted Amount for Activity:			
		Expenditures to Date:			
		Activity:			
		National Objective:			
		ORIGINAL Budgeted Amount for Activity:			
		Most recent REVISED Budgeted Amount for Activity:			
		Expenditures to Date:			
		Activity:			
		National Objective:			
		ORIGINAL Budgeted Amount for Activity:			
		Most recent REVISED Budgeted Amount for Activity:			
		Expenditures to Date:			
		Activity:			
		National Objective:			
		ORIGINAL Budgeted Amount for Activity:			
		Most recent REVISED Budgeted Amount for Activity:			
		Expenditures to Date:			
		Grant Award (ORIGINAL BUDGET):			
		Grant Award (REVISED BUDGET):		\$0.00	
		Total Expenditures to Date:			
Acquisition			Yes	No	N/A
1. Did application include acquisition by purchase or donation?					
Anti-Displacement			Yes	No	N/A
2. Does plan identify a person who is responsible for displacement and relocation compliance?					
- If Yes , note name of contact person:					
3. Was a person or business displaced as a result of this program?					
- If Yes , print Part 2 of the Checklist					
Financial			Yes	No	N/A
6. Does grantee have more than one open CDBG grant?					
10. Date 1st administration invoice: _____ Period covered: _____					
Date 1st construction invoice: _____ Period covered: _____					

Closeout – p.165

In order to receive a Conditional Closeout...

Improvements/construction undertaken with grant funds must be in full operation

Submit 1 copy of the Program Completion Report

Submit 3 copies of the Certificate of Completion (must be original signatures)

Submit Clear Lien Certificate

All findings of deficiency must be cleared

Program Completion Report

Exhibit E-6

PROGRAM COMPLETION REPORT
COVER SHEET

1. Name of Grantee

2. Address of Grantee

3. Contract Number

4. Citizen participation information submitted with this report includes the following:

- a) A summary of each citizen comment received during program implementation, the grantee assessment of the comment, and a description of actions taken or to be taken in response to the comment.
- b) Specific information on each required public hearing held which includes the purpose of the public hearing and the date(s) of each; and a copy of the public notice, attendance roster, and minutes of the public hearing on performance.

5. The grantee's chief elected official certifies that:

- a) To the best of his/her knowledge and belief the data in this report is true and correct as of the

Program Completion Report

CITIZEN PARTICIPATION INFORMATION

Attach the citizen participation information as identified and required. As a reminder, public hearings are required: a) for the development of the LCDBG application, b) for comments regarding any amendments to the Program, and c) for review of the grantee's program performance as a part of closeout. Identify the date and purpose of each public hearing. Also include a summary of each comment received during the program and the local government's response to each comment received. These comments must also include any complaints received regarding the program.

Grant Progress Form

LOUISIANA COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAMM
GRANT PROGRESS FORM

1. Grantee

2. Contract Number:

3. Name of Activity	4. National Objective Addressed	5. Actions Accomplished	6. Actions Remaining to be completed and Anticipated Completion Date	7.* Current LCDBG Budget	8.* LCDBG Funds Obligated	9.* LCDBG Funds Expended
			10. TOTAL	\$	\$	\$

*If other funds were injected into the project, attach a separate sheet identifying the amount of, source of, and use of funds for each activity. This is required for all economic development projects; however, it may also pertain, to housing, public facilities, demonstrated needs, or other types of projects. The amounts shown in columns 7, 8, and 9 should involve only LCDBG funds.

Housing Opportunities Form

LOUISIANA COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM HOUSING OPPORTUNITIES FORM	1. GRANTEE: 2. CONTRACT NUMBER:				
3. Actions taken to affirmatively further fair housing in the grantee's community: <table data-bbox="490 571 1429 915"><thead><tr><th data-bbox="490 571 1049 614"><u>Actions Taken</u></th><th data-bbox="1049 571 1429 614"><u>Results</u></th></tr></thead><tbody><tr><td> </td><td> </td></tr></tbody></table>		<u>Actions Taken</u>	<u>Results</u>		
<u>Actions Taken</u>	<u>Results</u>				
4. Actions taken to increase housing opportunities for lower income: <table data-bbox="490 971 1429 1288"><thead><tr><th data-bbox="490 971 1049 1013"><u>Actions Taken</u></th><th data-bbox="1049 971 1429 1013"><u>Results</u></th></tr></thead><tbody><tr><td> </td><td> </td></tr></tbody></table>		<u>Actions Taken</u>	<u>Results</u>		
<u>Actions Taken</u>	<u>Results</u>				

Miscellaneous Information Form

LOUISIANA COMMUNITY DEVELOPMENT 1. GRANTEE:
BLOCK GRANT PROGRAM
MISCELLANEOUS INFORMATION FORM 2. Contract

3. Did the grantee receive any program income during the course of this grant? Yes _____ No _____
(See the instructions on the back of this form.)
4. If yes,
- a. Enter the sum of program income received during this program \$ _____
 - b. For all program income received, list separately the source and original LCDBG Program year which generated the program income and the amount received.

<u>SOURCE</u>	<u>ORIGINAL LCDBG PROGRAM YEAR</u>	<u>AMOUNT</u>
---------------	--	---------------

-
5. Was any property or equipment (property having a useful life of more than one year and an acquisition cost of \$300 or more per unit) purchased with LCDBG funds? Yes _____ No _____

If yes, provide a description and dollar amount paid for such purchases.

<u>DESCRIPTION</u>	<u>AMOUNT</u>
--------------------	---------------

Disposition of property acquired with federal funds must be in compliance with OMB Circular A-87. Notification will be provided for the proper procedures for disposition of the property described above.

-
6. Was any land acquired/donated in order to complete the project?
Yes _____ No _____
If yes, identify the number of parcels donated _____ and acquired _____.
(number) (number)

-
7. Has or will the local government transfer ownership of the system/asset to another entity?
Yes _____ No _____
- If yes, a copy of the executed intergovernmental cooperative agreement must be attached to the closeout documents.

-
8. If the project included infrastructure construction, a copy of the recorded clear lien certificate must be submitted with the closeout documents.

-
9. If the project involved infrastructure construction which was subject to Davis Bacon and Related Acts, a Final Wage Compliance Report must be submitted.

Certificate of Completion

Louisiana Community Development Block Grant Program

1. Grantee: _____

2. Contract Number: _____

CERTIFICATE OF COMPLETION

FINAL STATEMENT OF COSTS

Program Activity Categories	3. Paid Costs	4. Unpaid Costs	5. Total Grant Costs	6. State Use Only
A. Acquisition of Real Property	\$	\$	\$	\$
B. Public Works, Facilities, Site Imp.				
1. Sewer				
2. Streets				
3. Water (Fire Protection)				
4. Water (Potable)				
5. Multi-purpose Community Centers				
6. Other				
C. Rehabilitation Housing				
D. Rehabilitation Administration				
E. Clearance, Demolition				
F. Relocation Payments				
G. Economic Development				
1. Commercial/Industrial Infrastructure Development				
2. Loan				
3. Other				
H. Planning and Management Development				
I. Administration				
1. Pre-Agreement Costs				
2. Public Facilities, Housing & Economic Development				
J. Other				
K. Other				
L. TOTAL GRANT COST				
M. Prog. Income Applied to Prog. Cost				

COMPUTATION OF GRANT BALANCE

Description	To be completed by Grantee		State Use Only	
	7. Amount		8. Approved Amount	
A. Total Grant. Cost	\$		\$	
B. Unsettled third party claims				
C. Subtotal				
D. Grant amount as per contract				
E. Unutilized Grant				
F. Grant Funds Received				
G. Balance of Grant Payable				

Certificate of Completion

-
9. List any unpaid costs and unsettled third-party claims against the LCDBG Program. Describe circumstances and dollar amounts involved.

____ Check if continued on additional sheet and attach

CERTIFICATION OF RECIPIENT

It is hereby certified that all activities undertaken by the recipient with funds provided under the contract identified hereof, have, to the best of my knowledge, been carried out in accordance with the contract; that proper provision has been made by the recipient for the payment of all unpaid costs and unsettled third-party claims identified hereof; that the State of Louisiana is under no obligation to make any further payment to the recipient under the contract in excess of the amount identified in line 7.C. hereof, and that every statement and amount set forth in this instrument is, to the best of my knowledge, true and correct as of this date.

10. Date	11. Typed Name and Title of Recipient's Chief Elected Official	12. Signature of Recipient's Chief Elected Official
----------	---	--

LCDBG APPROVAL

13. This Certificate of Completion is hereby approved. Therefore, I authorize cancellation of the unutilized contract commitment and related funds reservation and obligation of \$ _____ less \$ _____ previously authorized for cancellation.
(from Line 7.E.)

Date	Typed Name and Title of State Authorized Official	Signature of State's Authorized Official
------	--	---

Traci M. Watts
Director, Louisiana Community
Development Block Grant Program

CLOSEOUTS

Closeout

In order to receive a Final Closeout:

All conditions must be met in order to be approved for a Conditional Closeout.

All financial reports/audits covering the expenditure of all LCDBG funds have been received and accepted.

Program Amendments – p.91

Required when single or cumulative changes to the program budget greater than 10% of the grant award amount or changes that result in the deletion or addition of an activity or item

Must be submitted by the Grantee

Funds remaining due to cost under-runs may be used with prior approval by OCD-LGA through a Request for Program Amendment

Project must continue to be fundable based on the proposed changes to be approved and NOT require an amendment to the ERR

Program Amendment: Exhibit A-60

A-67: LCDBG REQUEST FOR PROGRAM AMENDMENT

PRINT

3. Grantee Name 3. Contract Number		4. Date		2. Contact Person's Name Phone Number		5. Program Amendment Number									
Name of Activity	Approved Work To Be Completed	Proposed Work To Be Completed	Reasons For Change	Extremely Low/Low/Moderate Income Beneficiaries				Minority Beneficiaries				Total Beneficiaries			
				Original/Current		Revised		Original/Current		Revised		Original/Current		Revised	
6	7	8	9	#	%	#	%	#	%	#	%	#	%	#	%

- 13. Date of public hearing on proposed amendment. Attach a copy of the public notice and minutes of the public hearing. Also, attach a map that identifies the location of any proposed activities.
- 14. For street projects only, number of beneficiaries on streets proposed to be improved.
- 15. Clearly explain the method for determining the revised beneficiaries.

A-60: REQUEST FOR PROGRAM AMENDMENT

16. Activity/Line Item	Original/Current Budget (A)	Revised Budget (B)	Comments (C)
A. Acquisition of Real Property			
B. Public Works, Facilities, Site Improvements			
1. Sewer			
2. Water (Potable)			
3. Water (Fire Protection)			
4. Streets			
5. Multi-Purpose Community Centers			
6. Other			
C. Clearance, Demolition			
D. Rehabilitation Loans and Grants (PF hookups)			
E. Rehabilitation Administration			
F. Provision of Public Services			
G. Relocation Payments and Assistance			
H. Economic Development			
1. Acquisition Land Building			
2. Infrastructure Improvements			
3. Building Construction/Improvements			
4. Industrial and Commercial Facilities			
5. Inventory			
6. Working Capital			
7. Capital Equipment			
8. Other			
I. Administration			
1. Pre-Agreement Costs (architectural/engineering/consulting)			
2. Grant Administration			
3. Public Facilities			
4. Economic Development			
J. Other			
K. Other			
L. TOTAL	\$ 0.00	\$ 0.00	

Changes to approved projects

Some changes that become necessary for project implementation do not involve a change in scope of work or number of project beneficiaries and may not require a full program amendment.

These program changes generally must be requested in writing by the grantee.

The request should describe the intended change to the project and statements regarding whether the change will affect the intent/scope of the project, number of project beneficiaries, and the Environmental Review Record.

Changes to approved projects

OCD-LGA must be contacted anytime a Grantee seeks to make changes to an approved LCDBG project.

Amendments and/or project changes to the approved LCDBG project can neither be requested nor approved through the submittal of engineering change orders only.

Major reductions in the scope of proposed work could result in adverse state action — grant reduction, termination, or a finding of ineligibility for future funding.

PLEASE NOTE:

Any changes that are not necessary to complete the originally approved project and/or require an amendment to the originally approved ERR will **NOT** be considered.

Questions?



Did we answer all of your questions?

Monitoring & Closeout Staff

Heather Paul

Assistant Director

heather.paul@la.gov

225-342-7418

Stay Informed...Resources

Follow us on Facebook – Facebook.com/LaOCD



Watch us on YouTube– Search OCD-LGA



HUD Exchange - <https://www.hudexchange.info/>

OCD_LGA- <https://www.doa.la.gov/doa/ocd-lga/>

Coffee Talk- Monthly online technical assistance opportunity (link available on OCD-LGA website)

Thank You for attending the 2023
Grantee Workshop!!