

Division of Energy, Housing, and
Community Resources
Grants
Monitoring
Plan

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INTRODUCTION

The purpose of this grants monitoring plan is to define the expectations of the Department of Administration Division of Energy, Housing, and Community Resources (DEHCR) relative to the oversight and monitoring of state and federal grant funds. The chapters in this plan have been designed to conform to the oversight and monitoring requirements of federal rules and regulations on reporting for state grant funds and 2 CFR Part 200. Additionally, the plan is designed to assure that each of the core steps in effective monitoring are addressed.

For purposes of the plan and any related forms, “state grant funds” are defined as any Federal pass through funds or State funds for which DEHCR is responsible.

Priorities

The Division of Energy, Housing and Community Resources (DEHCR) has made a strong commitment to providing effective grants oversight and monitoring throughout the life of the grant. To this end, we are establishing with the publication and distribution of this document a plan for grants monitoring that adheres to the mandates contained in the rules and regulations used by the U.S Department of Housing and Urban Development (HUD), Wisconsin Statutes, DEHCR policies, and 2 CFR Part 200. Effective monitoring is not a one-time event, but an ongoing process of planning, implementation, communication, and follow-up.

To create an effective monitoring program, it is the intention of DEHCR management to devote the necessary resources to accomplish our monitoring goals. Resources are understood to include personnel, equipment, and an adequate budget to perform the necessary travel to conduct monitoring visits. While it is not possible to set concrete numbers for resources, it is our intention to provide adequate resources based on the number and type of grants for which the department is responsible.

Goals and Objectives

DEHCR established a grants monitoring plan for all state and federal grants for which the department is responsible. Our goal is to provide the level of oversight and monitoring for grants that will allow us to provide accurate data on grants performance throughout the life of the grant. Specific objectives are to:

- Provide on-going oversight and monitoring of federal and state grants.
- Develop a grants monitoring program that will meet the specific policies and regulations of the U.S. Department of Housing and Urban Development, Wisconsin State Statutes, 2 CFR Part 200 and document compliance with program requirements.
- Assure the achievement of the intended purposes of the various grants for which the DEHCR is responsible.
- Identify and track grant results.
- Identify the technical assistance needs of grantees.
- Ensure timely expenditure of grant funds.
- Prevent fraud and abuse.
- Identify innovative tools and techniques for the achievement of grant objectives.

Monitoring Frequency and Type

The overall purpose of monitoring and evaluation is to: ensure the appropriate use of federal and state funds; document that funds are spent effectively to accomplish the intended purpose, funds are used in accordance with the terms of the grant award, document the measurement of performance goals, and review information to provide technical assistance. Thus, monitoring should not be a one-time event. Grants should be reviewed periodically, taking into account the following:

- Amount of the grant
- Associated risks
- Sensitivity of the grant
- Type of grant

DEHCR expects to review grant information at several key phases of the contract/agreement cycle and monitor at least once before or at the close out of the grant.

Pre-Award Assessment: The initial monitoring will begin with a pre-award assessment of the prospective grantee or staff experience with grant management.

Periodic Review: On-going review of grant information will be conducted during the life of the grant agreement. The types and frequency of the review may include the following reports: Section 3, MBE/WBE, Davis Bacon, requests for disbursement, annual reporting, or any other reports as specified in the grant agreement.

Monitoring: Monitoring schedules will in most instances be risk-based and may consider factors other than grant or award amounts. The risk assessment can include:

- Prior grant experience
- Single audit information
- Capacity to administer a grant, including record keeping, financial transactions and reporting
- Past monitoring
- Amount of the grant
- Incorrect documentation submissions
- Failure to submit timely reports
- Citizen complaints
- Repeated requests for time extensions

Completion of Grant: A final review of grant activity, accomplishments, expenditures, matching, reports, and any other contractual information will be conducted at the completion of the grant.

The above monitoring can be accomplished through various means based on the needs of the grant recipient. Techniques to be used consist of: periodic written reports, requests for disbursement documentation, submission and review of required reports, telephone contacts, and, if applicable, on-line review of grant data.

Monitoring Targets by Program:

Each program has set a target for the number of grantees to be monitored for program year 2016. The target may be adjusted if the need arises.

The targets are:

<u>PROGRAM</u>	<u>TARGET # OF GRANTEES</u>
HOME RHD	76
HOME HHR	21
HOME TBRA	23
HCRI 1	8
CDBG EAP/DRGR:	5
CDBG Housing	7
CDBG PF	8
CDBG PFED	8
CDBG Planning	2
CDBG ED	6*
CSOAR	2
ESG	8
S+C	1
PATH	1

* The number may fluctuate as projects from the former administration's Department of Commerce are updated in the data system.

Monitoring Types:

Based upon a risk assessment for each program, a monitoring strategy is formed and a monitoring type is chosen. For each type of monitoring, the program manager will be looking for both financial information and beneficiary information to ensure that regulatory requirements are met. The risk analysis is an objective assessment of risk based upon information from a variety of sources, including:

- Constituent Complaints
- Reporting information
- Results of previous on-site reviews and follow-up activities

Monitoring staff have a list of specific "signs" of risk, also called risk factors, to help assess risk. Examples are: 1) grantee staff experience/competence; 2) number of transactions; 3) amount of the award, etc.

Desk Review:

A Desk Review is performed each time a report and/or request for disbursement is made to ensure that information is accurate and conforms to contract expectations. This also allows the program manager an opportunity to judge the need to provide technical assistance to the grantee prior to a desk or on-site monitoring.

Remote (Desk) Monitoring:

Remote monitoring is the appropriate tool for monitoring low risk recipients. This process is also known as a desk monitoring. Each program has a checklist sent to the selected recipients to complete and return to DEHCR for review.

Site Monitoring:

An onsite monitoring is conducted for recipients that score higher on the risk assessment or have not had a site visit for some time. The program manager sends a checklist in advance of the on-site meeting to ensure that materials can be gathered for the on-site visit.

Scheduling: The actual scheduling of monitoring efforts is based on an assessment of risks in two broad areas:

- **Compliance** - the likelihood that the grantee may violate state or federal regulations, fail to comply with grant agreement or statutory requirements, or be open to fraud and abuse.
- **Performance** - the likelihood that, even without actual compliance violations, the results of the activity may not result in the desired outcome for the grant.

Documentation and Analysis

Reporting Format: The grantee is expected to provide reports identified in the agreement signed between DEHCR and the grantee. These reports do not have any flexibility, and if the grantee fails to file the required reports within the allowable timeframes, then the grantee may be deemed in non-compliance with the program. As a result, DEHCR may take steps to recover funding and/or stop all funding to the grantee.

Program staff will review the documents to make sure they are complete and that the information agrees with any requests for disbursement, periodic reporting, and monitoring checklist, terms of the grant agreement.

Monitoring Records: Each program manager/monitor is expected to fully and accurately document all monitoring efforts. A monitoring section of the grant file should be maintained for each grantee. Items that should be in that file include:

- Desk review monitoring report or
- On-site visit report
- Telephone contact report
- Assistance report
- Corrective action plan
- Annual report and/or monitoring checklist
- Copies of e-mail, memos, or other written correspondence with grantee, including notification informing grantee of the results of monitoring, letters following up on monitoring results, or monitoring compliance.

Staffing, Scheduling & Reporting Structure

Staffing: The program manager is responsible for ensuring that the grants are monitored on a timely basis. That action may be completed through a desk review, remote monitoring, on-site monitoring, assistance from a co-worker or partner State or quasi state agency. DEHCR may use other resources to ensure monitoring is completed timely. The U.S Department of Housing and Urban Development and DEHCR reserves the right to review any and all grant information on site upon request.

Program/monitoring staff report through the Section Chief or Bureau Director. If any problems arise with a grant, the program manager/monitor should immediately communicate that information to his/her direct supervisor. Once problem issues have been identified, the program manager/monitor should draft the monitoring letter to the grantee for review by the supervisor. All monitoring letters shall be issued within 30 days of the monitoring visit or desk monitoring. Results of the monitoring letter may include findings and/or concerns or the lack of concerns.

Reporting Structure: Program/monitoring staff report through the Section Chief or Bureau Director. If any problems arise with a grant, the program manager/monitor should immediately communicate that information to his/her direct supervisor. Once problem issues have been identified the program manager/monitor should draft the monitoring letter to the grantee for review by the supervisor. All monitoring letters shall be issued within 30 days of the monitoring visit or desk monitoring.

Follow Up:

The program manager will issue a report to the grantee via a letter on a desk or on-site monitoring, in most cases within 30 days of the event. The monitoring letter/report may include corrective actions/findings or concerns. A finding is a violation of regulation or policy requiring correction. A concern is a problem that if not addressed may result in a violation of regulation or policy. A report or a letter with findings will state the violation and a suggested corrective action plan. The corrective action will include:

1. A description of each finding and recommendation.
2. Specific steps to be taken to implement the recommendation.
3. A timetable for performance of each corrective action.
4. A description of future monitoring to be performed to ensure implementation.

SAMPLE FORMS are attached for reference only.



SCOTT WALKER
GOVERNOR

SCOTT A. NEITZEL
SECRETARY

Division of Energy, Housing and
Community Resources
P.O. Box 7970
Madison, WI 53707-7970

Date

Recipient Name
Municipality
Address

RE: Community Development Block Grant Agreement ### Monitoring

Dear Recipient,

As part of administering the Community Development Block Grant (CDBG) program, the Division of Energy, Housing and Community Resources (DEHCR) is required to monitor all CDBG projects at least once during the Grant Agreement performance period. Sometimes the Division elects to do a "desk" monitoring in lieu of an on-site visit. We will be performing a desk monitoring for the **Municipality** CDBG ### project. Your Grant Administrator will complete the enclosed self-monitoring checklist and submit it to the Division of Energy, Housing and Community Resources. The completed checklist should be returned to me, emailed or postmarked no later than **DATE**.

After the Division of Energy, Housing and Community Resources receives and reviews your completed checklist, you will be notified of any additional documentation that is needed.

Please contact me at xxx-xxx-xxxx or via email at xxx@Wisconsin.gov if you have questions regarding the upcoming monitoring.

Sincerely,

Grant Manager
Bureau of Community Development



**WISCONSIN DEPARTMENT OF
ADMINISTRATION**

SCOTT WALKER
GOVERNOR
SCOTT A. NEITZEL
SECRETARY

Division of Energy, Housing and
Community Resources
P.O. Box 7970
Madison, WI 53707-7970

Date

Recipient Name
Agency Name
Address

Dear Mx. Recipient,

On date, the Division of Energy, Housing and Community Resources (DEHCR) will be conducting an on-site monitoring of your agency's 2016-17 Emergency Solutions Grant, Transitional Housing Program, and Homeless Prevention Program (ETH) grant. We will arrive at your facility at approximately time. The monitoring process should take 4-6 hours.

During this visit, we will want to:

- Speak with program and fiscal staff involved with the administration/performance of the program(s) to address issues that arise during the document review and provide technical assistance as requested
- Interview two current participants in your ETH program in person or by phone (5-10 minute interviews)
- Inspect your shelter facility to ensure it meets ESG minimum shelter standards

We would also like to:

- Review your program contract file
- Have access to all ETH program participant files
- Review financial records for the program
- Review invoices used to calculate monthly expenditures submitted for reimbursement
- Review payroll records for any staff paid through the ETH program
- Review tracking of match, including documentation method
- Review the process for approval and signing of checks
- Review appeal or grievance procedures for participants

Additionally, we will review the following items and would like copies of these items for the files at DEHCR:

- Current program materials such as program brochures
- Intake forms
- Participant agreements
- MOUs
- Program guidelines

I am attaching the monitoring forms that will be used in our visit. **Please complete these forms and email them to me one week before the scheduled visit.** Unless explicitly noted, policy and procedure manuals or fiscal documents referenced in the forms should not be attached to the email. These will be reviewed during the monitoring visit.

I look forward to meeting you and your staff. If you have any questions, please contact me at xxx-xxx-xxxx or via email at xxx@wisconsin.gov.

Sincerely,

Grant Manager



**WISCONSIN DEPARTMENT OF
ADMINISTRATION**

SCOTT WALKER
GOVERNOR

SCOTT A. NEITZEL
SECRETARY

Division of Energy, Housing and
Community Resources
P.O. Box 7970
Madison, WI 53707-7970

DATE

NAME, Executive Director
GRANTEE NAME
ADDRESS

RE: File Monitoring - GRANTEE, HOME HHR # & HCRI #Contracts

Dear NAME:

As part of its responsibilities for the HOME Homebuyers and Rehabilitation and the Housing Cost Reduction Initiative Programs, the State of Wisconsin - Division of Energy, Housing and Community Resources oversees program compliance of state grant recipients. The Division routinely conducts monitoring to ensure compliance. At this time, the Division is requesting copies of project files to be reviewed.

Please submit **COPIES** of the following Individual Housing Activity files for the HOME HHR and HCRI contracts by **DATE**.

- Activity #
- Activity #
- Activity #
- Activity #
- HCRI File(s)

The files can be forwarded to XXX, Grants Specialist, at the address above or emailed to xxx@Wisconsin.gov.

Please refer to the latest versions of the [HOME HHR and HCRI Manuals/Program Guidelines](#) for more information relating to the items that will be reviewed. The handbooks can be found on the Bureau of Affordable Housing's website at: <http://www.doa.state.wi.us/Divisions/Housing/Bureau-of-Affordable-Housing>.

Additional files may be requested or an on-site visit may be scheduled after the initial desk review if further information is needed. A summary letter will be sent at the completion of the file monitoring.

If you have any questions regarding this request, please feel free to contact me at (xxx) xxx-xxxx or via email at xxx@Wisconsin.gov.

Sincerely,
HOME HHR/HCRI Program Manager



**WISCONSIN DEPARTMENT OF
ADMINISTRATION**

SCOTT WALKER
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SECRETARY

Division of Energy, Housing and
Community Resources
P.O. Box 7970
Madison, WI 53707-7970

DATE

Recipient Name
Agency Name
Address

RE: HOME RHD Monitoring Visit: Recipient ###

Dear Recipient,

This confirms our scheduled HOME RHD monitoring of Agency.

This will consist of a review of administrative and financial records, project development information (if this is the first monitoring visit after completion), DOA contract documents and tenant files.

As part of the monitoring process for the project, we will need to review the following areas:

- Leases
- Copy of Tenant selection process with approval/denial/appeal process described
- Income calculations for tenant qualification
- Tenant income documentation
- Unit inspections
- Subsidy type for units (LIHTC, Section 8, RD, etc.) with income/rent limit documentation for each
- Marketing efforts including MBE/WBE, Section 3, Fair Housing labeling, etc.
- Certified rent roll with designated HOME units specified, CMI designation, actual percentage of CMI, and current rent
- HUD-issued Rent Schedule of Low Rent Housing communicating Utility Allowance information on project

I have attached the monitoring form that we will be using during the review so that you may see in greater detail what we will be looking for.

Thank you for participating in the HOME RHD program – I will look forward to receiving the documentation and conducting the desk monitoring.

Please feel free to call me at (xxx) xxx-xxxx or email xxx@Wisconsin.gov if you have any questions.

Sincerely,

Program Manager

**HOME HHR & HCRI
INDIVIDUAL PROJECT FILE CHECKLIST**

Grantee/Contract Number: _____

Property Owner: _____ Phone: _____

Rehab Address: _____ Activity # _____

HOME \$ in Project: _____ Total Project Cost: \$ _____

Project is: _____owner-occupied _____renter-occupied _____ homestead

FILE CONTENTS (does the file contain:) Y (YES) N (NO) N/A (not applicable)

Completed rehabilitation application form? _____
(Must include marital property statement, age of structure, conflict of interest)

Release of information form? _____

Verification of:
Title? _____

Homeowner Insurance? _____

LMI status/income?: _____

Income Limits by County? _____

Property inspection reports? _____

- HQS Inspections _____
- (before _____, during _____, and after _____ rehab) _____
(Must specifically mention lead-based paint and smoke detectors)

Specifications for the work to be done? _____
(Must have adequate number of working smoke detectors when work done.)

Cost Estimate _____

Final loan approval by Grantee? (Date: _____) _____

Acceptance of bids by property owner? _____

Was any relocation (temporary or permanent) involved? _____
(Attach Relocation Monitoring form)

Recorded mortgage? (Date signed: --_____) (Date recorded _____)
(Recorded 1-2 weeks after signing max. Should be same amount as total bids + C.O.)

Acknowledgement of Subordination _____

Mortgage Amount \$ _____

Promissory Note? _____

Right of Recission? (Date: _____) _____

Truth-In-Lending statement? (Date: _____) _____

Lead-based paint brochure to occupant?
(Be sure to complete Lead-based Paint Review) _____

Activity Set-Up _____

Completion Report _____

Local unit of government added to homeowner's insurance? _____

Grievance Procedures _____

Soft Cost _____

Payment Log/Individual Obligations Journal completed to date _____

Documentation of match or other funds brought into project. _____

Timely Completion Report or Close-out Letter _____

ENVIRONMENTAL REVIEW: (does the file contain) Y (YES) N (NO) N/A (not applicable)

Completed Statutory Checklist? _____

Evidence of consultation where indicated by Statutory Checklist? _____

Copy of all correspondence regarding historic preservation? _____

Age of structure: _____ _____

CONSTRUCTION OR REHABILITATION PROJECTS

Bids for the work to be done?
(List bids.) _____

Signed contract(s) between owner and contractor? (Date: _____)
(Must include Lead-based paint restrictions and One year guarantee of work)
(List) _____

Debarment List Check _____

CDBG UGLGs SELF-MONITORING CHECKLIST Complete the following document and submit to your designated Division of Energy, Housing and Community Resources Project Representative, as requested.	
UGLG:	
CDBG Grant Agreement Number:	
Reviewer's Name and Title: <i>(person completing this form)</i>	
Date Completed:	Reviewer's Phone Number:
I attest that the information herein is true and correct.	
<div style="border-bottom: 1px solid black; width: 200px; margin: 0 auto;"></div> Date Signed	
<div style="border-bottom: 1px solid black; width: 300px; margin: 0 auto;"></div> Signature of Chief Elected Official	<div style="border-bottom: 1px solid black; width: 350px; margin: 0 auto;"></div> Printed Name of Elected Official and Title

At the end of the contracted Performance Period (as stated in your signed CDBG Grant Agreement), **all CDBG UGLGs must complete this Self-Monitoring Checklist and then sign & return this document to your designated Program Representative in the Wisconsin Department of Administration's Division of Energy, Housing and Community Resources.** Completion of this Self-Monitoring Checklist plays an important role in initiating the wrap-up of the grant through a formal Project Monitoring & Completion process, which allows for final disbursement (i.e. "payment") requests to be processed & approved (provided that the other requirements of the grant have been fully met, as stated in your signed CDBG Grant Agreement).

INSTRUCTIONS:

1. Complete this Self-Monitoring Checklist.
2. Review your CDBG Grant project folder and marking the "Yes", "No", "Not Applicable (N/A)", and/or "Date" fields (where appropriate) to indicate that you either do or do not have each of the listed documents & described information currently stored within your on-site CDBG Grant project folder.
3. Sign & date the document.
4. Make & retain a copy of the signed & dated document for your records.
5. Return this completed document (preferably in an electronic PDF format, via email) to your designated Program Representative in the Wisconsin Department of Administration's Division of Energy, Housing and Community Resources by the date indicated in the letter that accompanied this document.

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1. General Administration Documentation: (Indicate whether the following items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Application Documents				
Signed Application and Supporting Attachments, as submitted to the Department				
Statement of Assurances Documents				
Signed Statement of Assurances				
Policy/Policies in compliance with requirements for Non-Violent Civil Rights Demonstrations (prohibiting use of excessive force and the barring of entrances and exits)				
Citizen Participation Documents				
Citizen Participation Plan				
Citizen Participation Plan Adopting Resolution				
Date of Adoption:				
Citizen Participation Public Hearing Notices:				
Citizen Participation Hearing 1 (list date of the posting)				
Citizen Participation Hearing 2 (list date of the posting)				
Citizen Participation Public Hearing Minutes or Certification:				
Citizen Participation Hearing 1 (list date of the hearing)				
Citizen Participation Hearing 2 (list date of the hearing)				
Copies of the Citizen Participation Public Hearing Sign-In Sheet (not required if the Meeting Minutes list the Hearing Attendees & Participants)				
Sign-In Sheet(s) for Citizen Participation Hearing 1				
Sign-In Sheet(s) for Citizen Participation Hearing 2				
Income Survey Documents				
Was an Income Survey conducted for this project? If YES , check for the following items in the file:				
Income Surveys which were completed and returned				
Income Survey Methodology used (including the distribution process, calculations, etc.)				
Income Survey Area Map				

2. Grant Agreement Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Award letter(s)				
Agreement / "Contract" (specify final date signed by all parties)				
Amendment(s): If applicable, list total number: _____				
Amendment 1 (specify final date signed by all parties)				
Amendment 2 (specify final date signed by all parties)				
Amendment 3 (specify final date signed by all parties)				

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3. Procurement Documentation: <small>(Indicate whether these items are present within your CDBG Grant project folder.)</small>	YES	NO	N/A	Date:
Copy of UGLG's Procurement Policy				
Conflict of Interest Evidenced Waiver Process (if applicable).				
Sealed Bid Process and Bid Opening Requirements Documentation*				
The Request for Proposal (RFP) states requirements for services and project specifications*				
The RFP identified all significant evaluation factors including price and their relative importance*				
The RFP was published*				
Copy of bid tabulation AND successful bid document*				
Proposals were solicited from an adequate number of providers (Total number solicited* = _____)				
All proposals were evaluated and the evaluation is documented*				
The award(s) was made to the consultant/vendor/provider whose proposal was most advantageous to the UGLG after all factors were considered*				
Board/Council Acceptance of the Successful Bid Documentation*				
Signed Lobbying forms from all contractors (<u>Complete the checklist on page 17.</u>)				
Executed contracts, including Civil Rights Compliance and Section 3 compliance language.*				
<i>*Items may also be maintained in the Labor Standards file if relevant labor standards requirements apply, as detailed in the Labor Standards chapter of the Program-specific CDBG Implementation Handbook.</i>				
Procurement Transactions Documentation:				
Names of Consultants/Vendors/Providers	Method(s) of Procurement			
	___ Competitive, or ___ Non-Competitive			
	___ Competitive, or ___ Non-Competitive			
	___ Competitive, or ___ Non-Competitive			
	___ Competitive, or ___ Non-Competitive			
	___ Competitive, or ___ Non-Competitive			
	___ Competitive, or ___ Non-Competitive			
	___ Competitive, or ___ Non-Competitive			

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4. Environmental Review Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Has the UGLG prepared, maintained, and made available for public inspection a project Environmental Review Record (ERR)?				
Did the ERR contain a copy of the UGLG's Request for Release of Funds and Certification form (HUD form 7015.15) or a Determination of Exemption?				
Did the ERR contain the Department of Administration Certification letter? (If YES , indicate the date of the letter.)				
Were CDBG costs expended or obligated, except for exempt activities (24 CFR 58.34), prior to the date on the Department of Administration Certification letter? (If YES , indicate the earliest date of CDBG costs expended/obligated.)				
Were any <i>non</i> -CDBG project costs expended or obligated except for exempt activities (24 CFR 58.34), prior to the date on the Department of Administration Certification letter? (If YES , indicate the earliest date of non-CDBG costs expended or obligated.)				

5. Acquisition & Relocation Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Acquisition Summary Checklist				
Documentation of real property acquisition, including correspondence, notices, etc.				
Notice of Intent to Acquire/Preliminary Acquisition Notice				
Did the UGLG provide the owner an adequate Notice of Land Acquisition Procedures, and given to owner in advance of initiating negotiations? (Refer to brochures: <i>WI Relocation Rights/Rights of Landowner Under WI Eminent Domain Law, and Your Relocation Rights</i>)				
Was the owner invited to accompany all of the appraisers on their inspection of the property?				
Appraisal Conducted (Copy of the Appraisal)				
Are the data contained in the appraisals adequate to determine Fair Market Value (FMV)?				
Are the analyses of the data in the appraisals reasonable?				
Do the appraisals disregard the influence of the project on the FMV of the property?				
Is the amount determined to be "Just Compensation" an acceptable conclusion of the FMV of the property?				
Review of Appraisal Conducted				
Initiation of Negotiations:				
Did the UGLG provide owner(s) with a Statement of the Basis for the Determination of "Just Compensation" at the time the owner was given the written offer to purchase?				

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Did the owner receive the amount determined to be “Just Compensation”?				
Condemnation procedures (if applicable)				
Estimated just compensation deposited with court (condemnation only)				
Final Contract				
UGLG takes title				
90-day Notice to vacate property (if applicable)				
Disposition/Acquisition Register				
Relocation Plan				

6. Equal Opportunity Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Demographic profile of UGLG’s community or target areas approximate census profile				
Affirmative Action Plan notice posted in a conspicuous place (if applicable)				
Record of evidence demonstrating promotion of employment and training opportunities to LMI businesses and individuals				
Section 3 job creation tracking system and reports*				
Section 3 contract language is inserted into contract document(s)*				
Has the UGLG made their best efforts to employ Section 3 businesses?				
Has the UGLG made their best efforts to employ MBE/WBE businesses?				
Minority and Women Business Enterprises (MBE/WBE) tracking system and reports*				
Executive Order 11246 language inserted into contract document?*				
Fair Housing Efforts Documentation*				
Briefly list efforts made:				
Handicap Accessibility Self-Evaluation Checklist (if applicable)				
<i>*Items may also be maintained in the Procurement or Reporting files.</i>				

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Contractor Information (continued)								
Complete the following by circling Yes, No, or N/A.	Prime #1	Prime #2	Sub #1	Sub #2	Sub #3	Sub #4	Sub #5	Sub #6
Did the UGLG follow state law and OMB A 102 in awarding this prime contract?	Yes No	Yes No	N/A	N/A	N/A	N/A	N/A	N/A
Is wage decision(s) included in bid document(s) \$ construction contract(s)?	Yes No							
Is the HUD 4010 Labor Standards Provision in the construction bid specification(s) and contract(s)?	Yes No							
Are wage decision(s) posted in an area accessible to all employees?	Yes No							
Have all contractors/subcontractors submitted their IRS Employer Identification Number?	Yes No							
Are payrolls submitted weekly or "no work" letter(s) filed?	Yes No							
Are payrolls numbered? (first to last)	Yes No							
Does an authorized person of the company sign the certified payroll(s)?	Yes No							
Are all workers' individual identification numbers (e.g. employee ID numbers, last four social security numbers, etc.) shown on at least the first payroll?	Yes No							
Do hourly wage rates shown on the payroll equal or exceed the wage rates in wage decision(s)?	Yes No							
Is a there Form 4230A (additional classification) for those classifications not shown in the wage decision?	Yes No N/A							
Is time and a half paid to workers for work performed over 40 hours per week?	Yes No N/A							
If worker is listed in two classifications, did s/he sign the payroll, or was a daily time record submitted?	Yes No N/A							
Are "other" deductions properly documented?	Yes No N/A							

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Contractor Information (continued)								
Complete the following by circling Yes, No, or N/A.	Prime #1	Prime #2	Sub #1	Sub #2	Sub #3	Sub #4	Sub #5	Sub #6
Are HUD 11s completely filled out, compared with payrolls, & signed by payroll examiner? Number of HUD 11s complete:	Yes No N/A							
Are the proper apprentice/trainee indentures attached to payrolls where such employees appear?	Yes No N/A							
Are apprentices/trainees working alone?	Yes No N/A							
Does payroll examiner sign off on payouts of wage underpayments?	Yes No N/A							
Wage Underpayments Collected Monies? Amount Collected:	Yes No N/A							
Are all violations resolved?	Yes No N/A							
If all violations are NOT resolved, explain why & provide their current status(es):								
Wage Underpayments due to Unpaid Overtime Collected Monies per HUD CWHSSA? Amount Collected:	Yes No N/A							
Are all violations resolved?	Yes No N/A							
If all violations are NOT resolved, explain why & provide current status of each:								
Other comments or recommendations:								

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List Names, the corresponding Employer I.R.S. Identification Number, the Debarment Check Status, and the Lobbying Certification Status of all Prime Contractor(s):

Contractor:	Name:	Employer I.R.S. Identification Number:	Sam.gov Debarment Check on File? (Yes or No)	Signed Lobbying Certification on File? (Yes or No)
Prime Contractor #1				
Prime Contractor #2				
Prime Contractor #3				
Prime Contractor #4				
Prime Contractor #5				
Prime Contractor #6				
Prime Contractor #7				

List Names, the corresponding Employer I.R.S. Identification Number, the Debarment Check Status, and the Lobbying Certification Status of all Sub-Contractor(s):

Sub-Contractor:	Name:	Employer I.R.S. Identification Number:	Sam.gov Debarment Check on File? (Yes or No)	Signed Lobbying Certification on File? (Yes or No)
Sub-Contractor #1				
Sub-Contractor #2				
Sub-Contractor #3				
Sub-Contractor #4				
Sub-Contractor #5				
Sub-Contractor #6				
Sub-Contractor #7				
Sub-Contractor #8				

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8. Financial Management Documentation:				
these items are present within your CDBG Grant project folder.)				(Indicate whether
Bank Documents:	YES	NO	N/A	Date:
Depository Certification form				
Signature Certification form				
Financial Contact Person form				
Bank Statements				
Disbursements (“Drawdowns”) Documents:	YES	NO	N/A	Date:
Request for Disbursement (Draw) forms				
Notification of Deposit (e.g., deposit slip)				
Cash Control Register (CCR) Documents:	YES	NO	N/A	Date:
CCR copies all in file				
Deposit dates agree with the date deposit notifications were received from bank				
Disbursement dates agree with the Disbursements Journal and check register				
Reports balance of cash on hand each day a disbursement or deposit was made				
Account does not have more than \$5,000 of federal cash on hand for more than three days. Exceptions noted:				
Is mathematically correct				
Cumulative Disbursements to date per CCR:	\$			
Total payments to date per Disbursements Journal:	\$			
The adjusted balance and balance per bank statement dated:				
Balance per CCR:	\$			
(-) Deposits in Transit	\$			
(+) Checks Outstanding	\$			
(=) Adjusted Balance	\$			
Comments:				
Disbursement Journal:	YES	NO	N/A	Date:
Disbursement Journal copies all in file				
Reports the award amount, budget codes, activities and amounts in the header row				
Accounts for the sequence of grant checks issued and indicates which, if any, are voided				
Corresponds to checks issued and bank statements with regard to amount, date, payee				
Reports disbursements per month, in total and by budget activity, monthly				

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Reports cumulative disbursements to date in total and by budget activity, monthly				
Reports the available balance, in total and by budget category, monthly				
Source documentation is mathematically correct				
Source documentation for disbursements: (e.g., invoices from contractors and others, canceled checks, engineer approval of expenditures)				
Comments:				
Matching Funds Journal:	YES	NO	N/A	Date:
Matching Funds Journal copies all in file				
Cumulative match equals/exceeds the contracted "commitment of other parties" amount				
Lists each check number, date, and payee claimed as match				
Are CDBG funds deposited into same account from which UGLG is claiming match?				
Source documentation: (e.g., invoices from contractors and others, canceled checks, engineers approval of expenditures)				
Comments:				

9. Reporting Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Semiannual Narrative Reports on Accomplishments with UGLG Certification Signature:				
Reporting Period #1 from _____ through _____				
Reporting Period #2 from _____ through _____				
Reporting Period #3 from _____ through _____				
Reporting Period #4 from _____ through _____				
Semi-Annual Fair Labor Standards Reports*				
Semi-Annual MBE/WBE Reports*				
Section 3 Reports*				
Semi-Annual Equal Opportunity Reports*				
LMI Job Creation/Retention Records Reporting				
Is/Was there a construction sign posted for the project(s)?*				
<i>*Items may also be maintained in the Labor Standards file.</i>				

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10. Project Completion Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Signed Program Completion Report and Supporting Documents, as submitted to the Department				
Evidence of Payment of Claims after Submittal of Closeout Report				

11. Single Audit Documentation: (Indicate whether these items are present within your CDBG Grant project folder.)	YES	NO	N/A	Date:
Single Audit Report Statement				
Annual Correspondence for Single Audit to DEHCR (if applicable) For year(s): _____ to _____				
Copies of required Single Audit Reports (if applicable)				
Resolution of Findings documentation (if applicable)				

Other Monitoring Notes and Considerations:

EXIT INTERVIEW PARTICIPANTS:		
<i>APPLICABLE IF THE MONITORING WAS PERFORMED BY A THIRD PARTY DESIGNATED BY THE UGLG OR BY A DEHCR REPRESENTATIVE</i>		
Participant's Name:	Participant's Phone #:	Participant's Email: