

COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) CV PUBLIC SERVICE HANDBOOK

WISCONSIN DEPARTMENT OF ADMINISTRATION DIVISION OF ENERGY,
HOUSING, AND COMMUNITY RESOURCES



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INTRODUCTION

The Wisconsin Department of Administration (DOA) – Division of Energy, Housing and Community Resources (DEHCR) administers the State Community Development Block Grant Program that provides funding to units of general local government (UGLGs) that do not receive an annual allocation directly from HUD.

The State of Wisconsin Department of Administration’s (DOA) Division of Energy, Housing and Community Resources (DEHCR) has developed this handbook as a resource for local government officials and their appointed Community Development Block Grant (CDBG) project managers (i.e., Grant Administrators) to clarify the rules for grant recipients and to help ensure compliance with the state and federal CDBG program requirements.

UGLGs awarded CDBG funding must follow all policies and procedures included in this Handbook and the referenced Handbooks as noted. While this Handbook contains guidance for a combination of state and federal requirements to assist UGLGs in meeting their awarded program obligations, it should be noted that some independent judgment may be required on the part of the UGLG when making certain decisions. DEHCR fully expects recipients of CDBG funding to comply with all applicable local, state and federal requirements, regardless of the information and materials included in this Handbook or any referenced handbook herein.

CDBG-CV PROGRAM OVERVIEW

The Coronavirus Aid, Relief, and Economic Security Act (Pub. L. 116–136) (CARES Act) was signed into legislation on March 27, 2020. The CARES Act made available \$5 billion in CDBG coronavirus response (CDBG-CV) funds to prevent, prepare for, and respond to coronavirus principally for the benefit of persons of low and moderate income.

The United States Department of Housing and Urban Development (HUD) administers the CDBG Program, which is governed by Title I of the Housing and Community Development Act of 1974 as amended (https://www.hud.gov/sites/documents/CDBG_24_CFRPART570.PDF) and federal regulations at 24 CFR 570.480-497 (Subpart I) (<https://www.hudexchange.info/sites/onecpd/assets/File/CDBG-State-National-Objectives-Eligible-Activities-Appendix-B.pdf>).

The Omnibus Budget Reconciliation Act of 1981 (<https://www.congress.gov/bill/97th-congress/house-bill/3982>) authorized states to administer the CDBG programs

ELIGIBLE RECIPIENTS

DEHCR may only award CDBG funding to UGLGs to perform eligible activities. The only UGLGs permitted to apply for the State’s CDBG funding are towns, villages, non-entitlement cities, and non-urban counties.

UGLGs were eligible to apply for CDBG-CV funding by submitting an Intent to Apply form. Applicants were competitively scored and applicants were invited to fill out a final CDBG-CV application based on their scores. Not all applicants were invited to submit a final application.

ELIGIBLE ACTIVITIES

CDBG-CV Assistance may only be used to prevent, prepare for, and respond to the coronavirus. CDBG-CV assistance is limited to events that occurred as of January 21, 2020 and later. CDBG-CV funds may be used for any eligible CDBG activity that has a clear nexus to prevent, prepare for, and respond to the coronavirus. All proposed programs and projects must meet a CDBG National Objective, being, Low to Moderate Income (LMI) Benefit or Urgent Local Need (ULN). Grantees may only provide assistance as outlined in their Grant Agreement. Grantees are responsible for ensuring that proper documentation is maintained to ensure that all costs incurred are eligible. Grantees are responsible for developing policy as to how they will operate and administer the CDBG-CV program.

ADMINISTRATIVE REQUIREMENTS

An important part of any grant is administration. Grant recipients are required to prepare, maintain and submit to the Division of Energy, Housing and Community Resources (DEHCR) all records required to document compliance with the Community Development Block Grant (CDBG) program. Detailed information on Administrative requirements including record keeping and monitoring can be found in Chapter 2 of the BCD CDBG Implementation Handbook at:

<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>

PROCUREMENT, CONTRACTING AND CONFLICT OF INTEREST PROVISION

Units of General Local Government (UGLGs) must comply with all applicable federal, state and local procurement and contracting regulations and policies for the Community Development Block Grant (CDBG) project. Conflict of interest provisions within the Code of Federal Regulations must be addressed as part of procurement and contracting processes.

In accordance with 24 CFR 570.611, no member of the governing body and no official, employee or agent, nor any other person (covered persons), either for themselves or those with whom they have business or immediate family ties, who exercises policy or decision-making responsibilities will financially benefit from this program. For more information on these requirements please visit the link to Chapter 3 of the Bureau of Community Development (BCD) Implementation Handbook found here:

https://doa.wi.gov/DECHR/2020%20Ch%203%20Procurement-Contracting_FINAL.pdf

NOTE: Food pantry and hotel/motel voucher program beneficiaries are not subject to the Conflict of Interest Provision.

DUPLICATION OF BENEFITS

All persons and households, also known as the applicant, receiving assistance under the CDBG-CV Program are required to report any benefits received for the same services for which they are applying under this program. The applicant must complete and sign a Duplication of Benefits Statement. Should a duplication of benefits occur, the Grantee will be required to collect the excess amount and return those funds to DOA.

ENVIRONMENTAL REVIEW

All Community Development Block Grant (CDBG) projects must meet the requirements of federal, state and local environmental regulations. At the federal level, all CDBG projects must meet the requirements of the National Environmental Policy Act of 1969 (NEPA).

For information and the requirements of the Environmental Review Process, please visit the link to Chapter 4 of the Bureau of Community Development (BCD) CDBG Implementation Handbook found here:

https://doa.wi.gov/DECHR/Ch%204%20Environmental%20Review_FINAL%20v2-22-21.pdf

Required fillable forms for the Environmental Review may be found at:

<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>

ACQUISITION & RELOCATION

Whenever federal funds are used in a project involving the acquisition, rehabilitation or demolition of real property, a federal law known as the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (URA) generally applies. The purpose of the URA is to justly compensate people who are displaced and must move from their homes, farms, or businesses or who relinquish ownership of a portion of their land due to a publicly assisted project. For more information on Acquisition and Relocation please see Chapter 5 of the BCD CDBG Implementation Handbook found here:

https://doa.wi.gov/DECHR/2020%20Ch%205%20Acquisition-Relocation_FINAL.pdf

LABOR STANDARDS (DAVIS BACON) REQUIREMENTS

The Davis-Bacon Act (40 USC, Chapter 3, Section 276a-276a-5; and 29 CFR Parts 1, 3, 5, 6 and 7) is triggered when construction work over \$2,000 is financed in whole or in part with CDBG funds. It requires that workers receive no less than the prevailing wages being paid for similar work in the same area. Davis-Bacon does not apply to the rehabilitation of residential structures containing less than eight units or force account labor (construction carried out by employees of the grantee).

For information Labor Standards requirements, please visit the following link to Chapter 7 of the Bureau of Community Development (BCD) CDBG Implementation Handbook found here:

https://doa.wi.gov/DECHR/2020%20Ch%207%20Labor%20Standards_FINAL.pdf

Required fillable forms for Davis Bacon may be found at:

<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>

REPORTING REQUIREMENTS

CDBG programs must report certain accomplishments and information quarterly, semi-annually or annually. The Grant Agreement will designate document submission due dates and activity completion benchmarks for the project. UGLGs are required to follow the Grant Agreement Time Table.

Specific information for these reports, including the required forms can be found in Chapter 6 and Chapter 9 of the BCD CDBG Implementation Handbook at:

<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>

Equal Opportunity

Civil rights laws and related laws and regulations are designed to protect individuals from discrimination on the basis of race, national origin, religion, color, sex, age, disability, sexual orientation and familial status. The laws listed below apply to UGLGs, contractors and sub-contractors. The Department of Labor (DOL) provides employers, workers and others with clear and easy-to-access information and assistance on how to comply with Executive Order 11246. These reports are due semi-annually.

Reporting for Equal Opportunity compliance includes:

- Semi-Annual MBE/WBE Reports; and
- Fair Housing Actions and documentation

Section 3

Section 3 is a provision of HUD Act of 1968 which helps foster local economic development, neighborhood economic improvement, and individual self-sufficiency. "To the greatest extent feasible," UGLGs must guide the employment opportunities of the CDBG project towards low- and moderate income (LMI) persons and Section 3 businesses in the community. This report is due semi-annually.

Labor Standards

This report is due semi-annually.

Beneficiary Data:

DEHCR is required to maintain records documenting the demographic information pertaining to CDBG project beneficiaries, which may include (but is not necessarily limited to): race, ethnicity, household size and number of persons served. Grantees will be required to compile all of the individual data collected and complete the CDBG Project Client Income Certification Report found in the Forms Section at the end of this handbook. Each activity undertaken by the Grantee will have its own report.

Single Audit

In addition to semi-annual reports, the UGLG must establish whether the Single Audit requirements listed in Uniform Guidance 2 CFR 200 apply. The UGLG must submit a Single Audit Statement letter (Attachments 9-I / Attachment 9-J) to DEHCR by January 15th of each calendar year for the duration of the Grant Agreement.

FINANCIAL MANAGEMENT

Accurate financial record-keeping, including timely deposit, payment and accounting of Community Development Block Grant (CDBG) funds is crucial to the successful management of a CDBG funded project.

Federal regulations governing the CDBG program require Grantees to establish adequate recordkeeping. A key provision requires records pertaining to authorizations, obligations, unobligated balances, assets, liabilities, outlays and income be maintained. In the event of conflict between the language specified in the contract and this handbook or other supporting documents, the provisions in the contract regarding financial records shall take precedence.

Detailed information on financial management including how to request CDBG funds can be found in Chapter 8 of the BCD CDBG Implementation Handbook found here:

<https://doa.wi.gov/DECHR/Part10%20Chapter%208%20Financial%20Management%20FINAL.pdf>

NOTE: The CV program does not have a local match requirement.

PROJECT COMPLETION

Final project completion occurs when all funds have been expensed and all reporting, monitoring and completion submission responsibilities related to all projects have been completed by the Unit of General Local Government (UGLG) and approved by DEHCR.

Detailed information on the requirements of project completion including the required forms can be found in Chapter 10 of the BCD CDBG Implementation Handbook found here:

<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>

PUBLIC ASSISTANCE PROGRAMS

Grantees will be required to have applicants of the rent/mortgage/utility assistance programs fill out a CDBG-CV application. Information from all members currently residing in the household is required. Items that must be included in the application are as follows:

- Applicant and household information including name, birthdate, age, social security number, ethnicity and race.
- Applicant and household income and asset information.
- A description of the need for assistance and how the household has been impacted by the Covid-19 pandemic.
- Rental, mortgage, and/or utility information.
- Year the unit was constructed.
- Duplication of Benefits Statement and a signed agreement that should a duplication of benefits occur the applicant will be required to repay the duplicated amount to the Grantee. (Sample provided at the end of this handbook).
- Release of Information statement signed by all adult household members. (Sample provided at the end of this handbook).

Applicants of food pantry and/or hotel/motel voucher assistance are not required to fill out an application. Transitional housing programs that operate as a shelter/group type facility are not required to collect individual applications from households residing in the shelter/group facility. These applicants must fill out a self-certification of income form that includes the household size, annual income, and the race and ethnicity of the household. A sample CDBG CLIENT INCOME CERTIFICATION Form is included in the Forms section of this handbook.

Direct assistance payments that continue past 100 days are subject to the Lead Safe Housing Rule (LSHR) and is subject to a visual lead-based paint inspection. The 100 days begins at the time of the first payment going forward. As direct payment assistance period approaches the end of the 100-day grace period, the grantee must undertake a visual inspection. Per HUD Guidance, due to the Coronavirus, it may not be possible for an onsite visual inspection to occur. If the situation does not allow for an onsite visual inspection, the owner(s) or a surrogate may perform a remote visual inspection. Grantees are encouraged to develop policies and procedures that allow this method and the necessary documentation required for it. **Only units constructed prior to January 1, 1978 are subject to the LSHR.**

RENT/SECURITY DEPOSIT/MORTGAGE/UTILITY ASSISTANCE

CDBG funds may be used to provide assistance for rent, security deposit, mortgage payments, or utility payments to alleviate the housing burden for low-to-moderate income (LMI) households that have experienced financial hardship as the result of the Covid-19 pandemic. Applicants are eligible to receive up to the full monthly payment equal to one month's rent or mortgage payment, utility payment or the full amount of security deposit. Payments for arrears may cover more than one month. Eligibility will be determined at initial application and income determination. The maximum duration of assistance payments will not exceed six (6) consecutive months.* Assistance may be paid for eligible expenses that

occurred after January 21, 2020. **Payments to the local municipal treasurer for the payment of property taxes is not an eligible use of CDBG-CV funds.**

CDBG-CV grantees must ensure that proper documentation is maintained to ensure that all costs incurred are eligible. Grantees must document, in their policies and procedures, how they will determine the amount of assistance to be provided is necessary and reasonable. All expenses must be properly documented. All funds are provided as a grant to the applicant/household.

***Per HUD guidance, “If an individual or family is one or more months in arrears, a grantee may cover some or all the amount in arrears within the first month of assistance and continue through the applicable consecutive period of assistance. For example, for an individual four months in arrears on rent who applied for emergency payment assistance under CDBG-CV, the covered period may include the four months they are in arrears within the payment for the first month of assistance then continue for up to five more months to fulfill the up-to-six-consecutive-month-period allowance. The grantee must base the assistance on a need (for CARES Act, the need must be related to coronavirus preparation, response, and recovery) and cover necessary and reasonable costs. If a grantee chooses to implement subsistence payments covering arrears, the grantee’s policies and procedures for the program should set clear parameters for the types, amounts, and timing for assistance for each individual or family.”**

Eligible Applicants and Requirements:

Assistance is available to renters and homeowners with household incomes at or below 80% of County Median Income (CMI). The applicant must have experienced a reduction of household income, incurred significant costs, or experienced a financial hardship as a result of Covid-19. Documentation of current household income from all sources, including any governmental assistance payments received due to Covid-19 is required. Applicants must provide documentation of household income pre-Covid-19 loss. All applicants must provide a statement of why the assistance is required.

CDBG-CV assistance may not be used to pay for any eligible expense that is being paid by another source (duplication of benefits). However, CDBG-CV funds may be used to cover the unmet cost of the assistance needed. Under no circumstances will CDBG-CV funds be used for costs already fully covered by other programs.

If the household is receiving any type of rental assistance including but not limited to Section 8, Public Housing, SSVF, Permanent Supportive Housing, or TBRA, they are ineligible for this program.

Types of Assistance:

Applicants that meet all of the criteria listed above are eligible to apply for financial assistance for rent or mortgage payments, security deposit, and utility assistance or fuel costs for a period not to exceed six (6) consecutive months. Under this program utilities do not include cable, telephone or internet services. All payments made on behalf of the applicant will be paid directly to the vendor. Under no circumstance will the payment be made directly to the household.

Assistance may be provided for current and/or future rent, mortgage and utility payments, unpaid rent, utilities, or mortgage payments that were due on or after January 21, 2020. Any combination of past, current and/or future payments are eligible, provided the assistance does not exceed a total of six (6) consecutive months.

Documentation of the unpaid amount for each month is required. Assistance may not be paid until it is due.

Program Requirements All Applicants:

- Applicants must fill out an application for assistance;
- Demonstrated gap between current income and pre Covid-19 income; which may include reduction in household income or significant increase in household expenses due to Covid-19, or other financial hardship documentation;
- Statement of need of assistance due to Covid-19;
- Documentation of rent or mortgage owed and/or security deposit needed and or utility assistance needed;
- Documentation that the unit for which assistance is being paid is the primary and occupied residence of the applicant/household;
- Documentation of other relief programs applied for including the history of benefits received or estimated benefits;
- Assistance is limited to a maximum of six (6) consecutive months;
- Sign and comply with a Declaration of Benefits (DOB) statement and agreement to repay the assistance if funding is received from another state, federal or local resource.
- All applicants must receive the EPA pamphlet “Protect Your Family from Lead in Your Home” and sign an acknowledgement that they received the pamphlet. The link to the pamphlet can be found here:
http://www2.epa.gov/sites/production/files/documents/pyf_brochure_landscape_b_w_1-16-13.pdf

Additional Requirements:

- **Renters:**
 - A Lease Agreement or a letter/email from the rental property owner indicating the amount of rent the tenant pays and a statement that the household was in good standing with the property owner and not subject to an eviction for failure to pay rent prior to January 21, 2020.
 - Statement from the property owner/landlord of any unpaid rent and months for which they are due;
 - Renters that have an eviction notice are eligible for assistance if the assistance will stop the eviction and the renter has sufficient income or other resources to remain in the home after the CDBG-CV assistance is exhausted.
- **Owner-Occupied households:**
 - Mortgage statement showing the amount of mortgage payment and arrearage, if any;
 - Documentation of ownership;

- Property must be the primary place of residence for the household and the household must be occupying the property. Second homes, cabins, and rental properties are not eligible for mortgage assistance;
- Properties in foreclosure are eligible for assistance if the CDBG-CV assistance will stop the foreclosure and the household has sufficient income or other resources to remain in the home after the CV assistance is exhausted;
- Properties in foreclosure for payments due prior to January 21, 2020 are not eligible for CDBG-CV assistance.

TRANSITIONAL HOUSING

Transitional housing programs are an eligible CDBG-CV activity. Eligible applicants include those that are homeless or are in danger of becoming homeless. Grantees that utilize transitional housing programs commonly use either privately owned rental units or a congregate living home/facility that is owned/leased by the Grantee or a subrecipient.

Grantees that utilize a direct rental payment transitional housing program will ensure the following requirements are met.

- All applicants have income verified to be 80% or less of the County Median Income (CMI);
- Payments are limited to six consecutive months of payments;
- Payments must be made directly to the landlord;
- Assistance must be based on a correlated need due to Covid-19.

Grantees that operate a transitional housing program that is a shelter type facility or congregate living emergency housing arrangement in a property owned or leased and operated by the Grantee or a subrecipient may utilize CDBG-CV funds for the operational costs of the shelter. 51% of the households served must have incomes at or below 80% of the CMI.

Applicants under this type of transitional housing program must meet the following requirements.

- Self-Certification of Income.
- Assistance must be based on a correlated need due to Covid-19.

Case management services are an eligible expense for the transitional housing activity.

HOTEL/MOTEL VOUCHER EMERGENCY ASSISTANCE

CDBG-CV funds may be used to provide assistance for hotel or motel vouchers to households who have experienced homelessness due to Covid-19 or to assist in the prevention and/or spread of Covid-19 for chronically homeless individuals. Hotel or motel vouchers may also be provided to individuals or families who may need to self-isolate (quarantine) due to Covid-19. Vouchers may not be provided directly to the household. Arrangements must be made with the hotel or motel owner to receive the vouchers on behalf of household(s).

For the purpose of this program, homeless is defined below. Should a homeless situation occur that is not listed below, please contact your Grant Representative for guidance.

- Living on the street or sleeping in a public or private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings (including a car, park, abandoned building, bus station, airport, or campground); or
- Living in a shelter designed to provide temporary living arrangements; or
- Living with others and is not listed as a household member on the lease; or
- Is fleeing or attempting to flee a domestic violent situation; or
- Has an eviction or foreclosure from their primary place of residence and has received a court order judgement to vacate; or
- Is exiting an institution and has not secured permanent housing.

Eligible Applicants and Requirements:

Eligible applicants are homeless households or households who must quarantine or isolate due to Covid-19. 51% of all applicants served under this program must have incomes at or below 80% of the County Median Income (CMI). For purposes of this program all homeless households may self-certify that their household income utilizing the CDBG Project Client Income Certification Form found in the Forms Section of this handbook.

The length of assistance will be determined by the Grantee, but efforts to permanently house the household as quickly as possible is required.

FOOD PANTRY ASSISTANCE

CDBG-CV funds may be used to assist local food pantries to purchase food and other consumables to be distributed by the food pantry. CV funds may also be used to pay for operational costs of the food pantry.

Eligible Applicants and Requirements:

Eligible applicants include all households that utilize the food pantry. 51% of all applicants served under this program must be 80% or less of the County Median Income (CMI). Applicants may self-certify the household income utilizing the CDBG Project Client Income Certification Form found in the Forms Section of this handbook.

PUBLIC FACILITIES AND ACQUISITION ACTIVITIES

Activities that include improvements/additions/repairs/demolition and/or activities for acquisition of real property will follow the requirements of the CDBG BCD Handbook located here:
<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>

DETERMINING INCOME

In order to receive CDBG-CV assistance, households must have documented incomes at or below 80% of the County Median Income (CMI) for the geographic area, adjusted for household size, and determined annually by HUD at the time of application. Under certain CDBG activities, only 51% of the households must have income at or below 80% CMI. These requirements have been noted under the activities in the previous sections. The annual income definition found at 24 CFR Part 5 is used by a variety of Federal programs and must be used to determine eligibility for all Wisconsin CDBG Programs.

The income limits may be found at <https://www.huduser.gov/portal/datasets/il.html> .

The guidelines for determining and calculating household income can be found in the 2019 CDBG Housing Manual, on pages 19-25 located in the link below. These guidelines must be used in determining the household income eligibility.

<https://doa.wi.gov/DECHR/2019%20CDBG%20HOUSING%20IMPLEMENTATION%20MANUAL%20-%209-2-20%20Update%20posted.pdf>

VERIFYING INCOME

Homeless and Food Pantry Assistance Only: Households receiving assistance for motel/hotel vouchers, through the shelter type transitional housing program, or through food pantries, may self-certify their income. A form documenting the household size and income level is required. Homeless Assistance for hotel/motel vouchers, shelter type transitional housing, or food pantries will not be required to have a “gap” in current income and pre-Covid-19 income.

If the household is claiming a loss of income due to Covid 19, the household income prior to the Covid-19 pandemic and the household income after the loss of income due to Covid-19 must be determined.

The Grantee may determine income eligibility by third-party verification or with source documentation.

To conduct third-party verification, a Grantee must obtain a written release from the household member that authorizes the third party to release required information. Conversations with a third-party, such as an employer, may be acceptable if documented through notes in the file, including contact name, address, phone number, information conveyed, and date of a call.

Another way to verify income is to collect source documentation. The source documents, such as wage statements, unemployment compensation statements, child support statements, Social Security and disability award letters, must be maintained in the file. For the purposes of income verification bank statements are not an eligible form of source documentation.

Self-employed households will utilize three consecutive quarterly tax statements or three prior years of income taxes averaged to determine the household income.

SAMPLE FORMS

CDBG PROJECT CLIENT INCOME CERTIFICATION REPORT

GRANTEE/UGLG NAME: _____

GRANT AGREEMENT #: _____

REPORTING PERIOD: _____

QUARTERLY, SEMI-ANNUALLY, ANNUALLY: 00 / 00 / 0000 to 00 / 00 / 0000

TOTAL # NEW CLIENTS SERVED DURING THIS REPORTING PERIOD <i>(Do not include duplicate clients from previous reporting periods.)</i>	
TOTAL # CLIENTS SERVED TO DATE	

RACE/ETHNICITY OF NEW CLIENTS SERVED DURING THIS REPORTING PERIOD					
Single Race	Total Number	Number Hispanic	Multi-Racial or No Answer	Total Number	Number Hispanic
WHITE			AMERICAN INDIAN/ALASKAN NATIVE & WHITE		
BLACK/AFRICAN AMERICAN			ASIAN & WHITE		
ASIAN			BLACK/AFRICAN AMERICAN & WHITE		
AMERICAN INDIAN/ALASKAN NATIVE			AMERICAN INDIAN/ALASKAN NATIVE AND AFRICAN AMERICAN		
NATIVE HAWAIIAN/PACIFIC ISLANDER			OTHER MULTI-RACIAL		
OTHER			DID NOT ANSWER		

LMI STATUS OF NEW CLIENTS SERVED DURING THIS REPORTING PERIOD	
# OF <u>LMI</u> NEW CLIENTS	# OF <u>NON-LMI</u> NEW CLIENTS

REPORT CERTIFICATION	
<p>I certify that to the best of my knowledge and belief the contents in this report are true and correct. Completed individual <i>Client Income Certification Forms</i> are maintained as supporting documentation for this report by the UGLG and are available to provide to DEHCR and/or other regulating entities upon request.</p>	
<p>_____ Signature of UGLG Representative</p>	<p>_____ Date Signed</p>
<p>_____ Printed Name of UGLG Representative</p>	<p>_____ Title of UGLG Representative</p>

CDBG PROJECT CLIENT INCOME CERTIFICATION REPORT (INSTRUCTIONS)

The *CDBG Project Client Income Certification Report* is a summary of the information gathered from *Client Income Certification Forms* completed at the time the client begins receiving services in the Unit of General Local Government's (UGLG's) CDBG-funded program. The *Client Income Certification Form* is *Attachment 9-L* in Chapter 9 of the *CDBG Implementation Handbook*.

1. **Grantee/UGLG Name:** Enter the name of the Unit of General Local Government (UGLG) that received the CDBG award [e.g., Yourville County, City of Yourville, Village of Yourville, Town of Yourville]
2. **Grant Agreement #:** Enter the CDBG Grant Agreement # for the UGLG's CDBG project.
3. **Reporting Period:** Enter the Report period for which the report is being completed and enter the reporting period dates. The month and day of the Annual Report Start Date and End Date are based on the grant Award Date. For example, if the grant was awarded to the UGLG June 15, 2020, then the Start Date for the first Annual reporting period is 06/15/2020 and the End Date is 06/14/2021.
4. **Total # Clients Served During This Reporting Period:** Enter the number of clients served from the start of the reporting period to end of the reporting period.
5. **Total # Clients Service to Date:** Enter the number of clients served from the start of the program (CDBG Award Date) to the end of the reporting period.
6. **Race/Ethnicity of New Clients Served During This Reporting Period:** Enter the total number of clients reporting in each race/ethnicity category on the *Client Income Certification Form* during the reporting period. **Do not leave any entries blank.** Enter zero (0) for any categories for which no clients selected the category or if no clients were served during the reporting period, if applicable.

For example, six (6) new clients completed *Client Income Certification Forms* with all six (6) identifying as White and of those, three (3) also identified as Hispanic. Therefore, for White "6" should be entered under Total Number and "3" should be entered under Hispanic.
7. **LMI Status of New Clients Service During This Reporting Period:** Using the information from the Family Income Category of the *Client Income Certification Form*, enter the total number of new clients served during the reporting period who have a family income at or below the LMI income threshold shown for their family size on the *Client Income Certification Form*, and the total number who have a family income above the LMI income threshold shown for their family size.
8. **Report Certification:** Complete the Report Certification. The *Client Income Certification Report* must be signed by the UGLG Chief Elected Official or an authorized designee.
9. The Final Report must be submitted with the Project Completion Report. It is a summary of all clients served during the project performance period, as listed on the *Grant Agreement*.
10. Submit **one** (1) copy of this report via email to the assigned DEHCR Project Representative and retain the original document with the local CDBG project files.

SAMPLE

DUPLICATION OF BENEFITS STATEMENT

The certification is divided into three (3) components:

1. Assistance received from government, bank and any and all other rental/mortgage and/or utility assistance received by or anticipated to be received by household;
2. Attachments;
3. Signature(s) Read each component in full and provide the accurate information.

Part 1. Government, Bank, and Other Funding Sources Duplication of Benefits Certification.

This certification must be completed by all applicants that will receive any assistance from the Emergency Assistance Grant Program being offered by the _____ (GRANTEE NAME). The information within this certification will provide the _____ (GRANTEE NAME) with vital information for ongoing evaluation of duplication of benefits as required by the Stafford Act Section 312, as amended and the Coronavirus Aid, Relief, and Economic Security Act. This section identifies any sources of mortgage or rental and/or utility assistance funds that an applicant has received or anticipates receiving. Sources of funds include but are not limited to: Federal, state, and local grant programs, subsidized loans, or nonprofit donations or grants.

Please indicate below the amount allocated from any and all funding sources.

Source of Funds #1

Grant Provider Name Purpose / Specific Use Amount

Government Loan, Government Grant Government, Forgivable Loan, Nonprofit Grant, Nonprofit Forgivable Loan, Other: _____

Source of Funds #2

Grant Provider Name Purpose / Specific Use Amount

Government Loan, Government Grant, Government Forgivable Loan, Nonprofit Grant, Nonprofit Forgivable Loan, Other: _____

Source of Funds #3

Grant Provider Name Purpose / Specific Use Amount

Government Loan, Government Grant, Government Forgivable Loan, Nonprofit Grant, Nonprofit Forgivable Loan, Other: _____

Check if no other assistance has been received by the Applicant.

Check if the Applicant has not and is not receiving any other form of mortgage, security deposit, rental and/or utility assistance.

Part 2. Attachments Attached to this certification are copies of the following:

1. Award letter for any assistance received from other rental and/or utility assistance programs or summary of award received as well as documentation of use of funds.

Part 3. Signature(s)

By executing this certification, Applicant(s) acknowledge and understand that Title 18 United States Code Section 1001: (1) makes it a violation of federal law for a person to knowingly and willfully (a) falsify, conceal, or cover up a material fact; (b) make any materially false, fictitious, or fraudulent statement or representation; OR (c) make or use any false writing or document knowing it contains a materially false, fictitious, or fraudulent statement or representation, to any branch of the United States Government; and (2) requires a fine, imprisonment for not more than five (5) years, or both, which may be ruled a felony, for any violation of such Section.

Dated this the _____ day of _____, 20__.

Applicant Signature

Print Applicant name

Joint Applicant Signature

Print Joint Applicant name

SAMPLE

SUBROGATION AGREEMENT

This Subrogation and Assignment Agreement (“Agreement”) is made and entered into on this day of _____, 20____, by and between _____ (“Applicant”) and the _____ (“Grantor”).

In consideration of Applicant’s financial situation or the commitment by Grantor to evaluate Applicant’s application for the receipt of funds (collectively, the “Grant”) under the _____ (GRANTEE NAME) Emergency Assistance Grant Program (the “Program”) administered by Grantor,

Applicant hereby assigns to Grantor all of Applicant’s future rights to reimbursement and all payments received from any grant, subsidized loan, or assistance under any rental and/or utility assistance programs that are determined in the sole discretion of _____ (GRANTEE NAME) to be a duplication of benefits (“DOB”) as provided in this Agreement.

The proceeds or payments referred to in the preceding paragraph, whether they are from a federal grant or any other source, and whether or not such amounts are a DOB, shall be referred to herein as “Proceeds,” and any Proceeds that are a DOB shall be referred to herein as “DOB Proceeds.” Upon receiving any Proceeds not listed on the Duplication of Benefits Certification, the Applicant agrees to immediately notify the Grantor of such additional amounts. The Grantor will determine in its sole discretion if such additional amounts constitute a DOB. If some or all of the Proceeds are determined to be a DOB, the portion that is a DOB shall be paid to the Grantor.

Applicant’s assistance and cooperation shall include but shall not be limited to allowing suit to be brought in Applicant’s name(s) and providing any additional documentation with respect to such consent, giving depositions, providing documents, producing record and other evidence, testifying at trial, and any other form of assistance and cooperation reasonably requested by the Grantor. Applicant further agrees to assist and cooperate in the attainment and collection of any DOB Proceeds that the Applicant would be entitled to under any applicable housing assistance program.

If requested by the Grantor, Applicant agrees to execute such further and additional documents and instruments as may be requested to further and better assign to the Grantor, to the extent of the Grant paid to Applicant under the Program, the Policies, any amounts received under the Program that are DOB Proceeds and/or any rights thereunder, and to take, or cause to be taken, all actions and to do, or cause to be done, all things requested by the Grantor to consummate and make effective the purposes of this Agreement.

Applicant explicitly allows the Grantor to request of any organization with which the Applicant has applied for or is receiving Proceeds, any non-public or confidential information determined to be reasonably necessary by the Grantor to monitor/enforce its interest in the rights assigned to it under this Agreement and give Applicant’s consent to such company to release said information to the Grantor.

Applicant represents that all statements and representations made by the Applicant regarding Proceeds received by the Applicant shall be true and correct as of the date of Closing.

NOTICE: Applicant executing this Agreement are hereby notified that intentionally or knowingly making a materially false or misleading written statement to obtain assistance, property or credit is a violation of Title 18 United States Code Section 1001 and, depending upon the amount of the Grant, is punishable by a fine, imprisonment for not more than five (5) years, or both, which may be ruled a felony, for any violation of such Section.

The Applicant executing this Agreement hereby represents that he/she has received, read, and understands this notice of penalties for making a materially false or misleading written statement to obtain the Grant.

In any proceeding to enforce this Agreement, the Grantor shall be entitled to recover all costs of enforcement, including actual attorney's fees.

Dated this the _____ day of _____, 20____.

Applicant Signature

Joint Applicant Signature

Print Applicant name

Print Joint Applicant name

SAMPLE

GENERAL RELEASE OF INFORMATION

COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM (GRANTEE NAME)

I hereby authorize persons, organizations, or employers, financial institutions, federal, state or local agencies, governmental entities mortgage companies, landlords, property owners, utility companies or establishments to furnish information about me to a representative of **(GRANTEE NAME AND PROGRAM ADMINISTRATOR)** Community Development Block Grant (CDBG) CV Program of **(GRANTEE NAME)**.

I hereby grant permission of the release of information that may be relevant to my application.

This information will be for the confidential use of the **(GRANTEE NAME)** in determining my/our eligibility for a mortgage loan or to confirm information I/we have supplied. Please complete the attached verification request.

A photo or fax copy of this document may be deemed to be the equivalent of the original and may be used as a duplicate original. The original signed release of information form will be kept on record with the Grantee. I understand that this release of information is valid until it is revoked in writing.

APPLICANT STATEMENT: I hereby certify under penalty of perjury that the information on this form is accurate and complete. I understand that this self-certification may be subject to further verification by the agency providing services, the **(GRANTEE NAME)**, the State of Wisconsin and the U.S. Department of Housing & Urban Development. I, therefore, authorize such verification, and I will provide supporting documents, if necessary.

Last, First, M.I.

Last, First, M.I.

Social Security #

Social Security #

Street Address

Street Address

City, State, Zip Code

City, State, Zip Code

Signature

Date

Signature

Date

[PROGRAM/PROJECT NAME]
CLIENT INCOME CERTIFICATION FORM

The [UGLG Name] [CDBG Project/Program Name] is funded by the Community Development Block Grant (CDBG) Program. For the [UGLG Name] to qualify for this funding, the information requested below must be collected for all program clients. This information is strictly confidential and only reported to the required funding and regulating entities for program qualification purposes. Individual/family personal identifying information is not released to the public.

Client information at the time of entry into the program:

Table with 4 columns: FAMILY SIZE, FAMILY INCOME LEVEL, BELOW, ABOVE. Includes instructions for how to fill out the table regarding family size and income levels.

FAMILY RACE/ETHNICITY INFORMATION

Enter the race/ethnicity information for all family members or select the "Prefer Not to Answer" option below.

Table with 3 columns: Race/Ethnicity, Number in Family with Race/Ethnicity Shown on the Left, Number in Family with Race/Ethnicity Shown on the Left Who are Hispanic. Lists various racial and ethnic categories.

Client Printed Full Name: _____ Program Entry Date: _____

Client Signature: _____ Signature Date: _____

Client Income Certification Form Instructions for Program Administrator:

Obtain current income limits on the HUD Income Limits website at: https://www.huduser.gov/portal/datasets/il.html. [The income limits in effect at the time of the client's entry into the program and for the "Low (80%) Income Limits" level for the county in which the program is operating must be entered in the table above on this form. The income limits are updated annually by HUD, typically released in March or April. Check the website regularly for updates.]