

# REPORTING

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## CHAPTER 9: REPORTING

### INTRODUCTION

This chapter provides overview of the federal and state reporting requirements related to Community Development Block Grant (CDBG) Program. It is important to use the correct reporting forms. Contact the assigned Division of Energy, Housing and Community Resources (DEHCR) Project Representative for the most current forms.

CDBG programs must report certain accomplishments semi-annually, while other accomplishments are reported annually (e.g. the *Annual Section 3 Report* and the *Annual Single Audit Statement*). 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*. See Attachment 9-G for a sample *Grant Agreement Time Table*.

### IMPORTANT REMINDER!

Reporting requirements are subject to change at any time during the performance period per HUD and DEHCR requirements.

Review the *Reporting Requirement Checklist* (Attachment 9-F) for more information on required reporting forms and deadlines. Refer to the other chapters in this Handbook to confirm compliance with reporting requirements.

The timeliness of reporting is critical to maintain project compliance and avoid disruption in the CDBG payment approval process. **Lack of timely reporting will impact the processing of payment requests.**

### IMPORTANT REMINDER!

Failure to complete and submit all required reports in a timely manner will impact the processing of payment requests.

### SUBMITTAL

Reports are to be submitted electronically via email to the DEHCR. The reports should be emailed to the DEHCR staff member assigned as the CDBG Project Representative. Reports may also be submitted to the general DEHCR CDBG Program email address if the CDBG Project Representative email address is unknown.

Email: The assigned CDBG Project Representative's Email Address  
or [DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)

***Disclaimer: Reporting requirements are subject to change at any time during the performance period per HUD and DEHCR requirements.***

### SEMI-ANNUAL REPORTS

*Semi-Annual Reports* are required to provide updates on the status of the project to DEHCR. In addition, HUD monitors the states to report accomplishments promptly to Congress. The UGLG is required to follow their *Grant Agreement Time Table* and scope of work to provide accurate and timely information about the project.

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The semi-annual reporting requirement begins when the UGLG receives a copy of the fully executed (i.e. “fully signed”) *Grant Agreement* from DEHCR, and continues until the UGLG has submitted the *Project Completion Report* and all supporting documents for the project.

The reporting periods and due dates for the *Semi-Annual Reports* are as follows:

- For the period of **April 1<sup>st</sup> through September 30<sup>th</sup>** – the report is due **no later than October 15<sup>th</sup>**! Reports received after this date will be considered late and may impact the approval of CDBG payment requests.
- For the period of **October 1<sup>st</sup> through March 31<sup>st</sup>** – the report is due **no later than April 15<sup>th</sup>**! Reports received after this date will be considered late and may impact the approval of CDBG payment requests.

DEHCR reserves the right to modify reporting periods and due dates for the *Semi-Annual Reports*, as needed.

## IMPORTANT REMINDER!

The semi-annual reporting requirement begins upon CDBG Award or when the *Grant Agreement* is fully executed (i.e. signed by DOA), whichever is specified in the Award Letter; and continues until the UGLG has submitted the *Project Completion Report* and all supporting documents for the project.

The following required *Report Forms* are attached to this chapter:

- *Semi-Annual Report Certification* (Attachment 9-A);
- *Semi-Annual Summary Narrative* (Attachment 9-B);
- *Semi-Annual Labor Standards Enforcement Report* (Attachment 9-C)
- *Semi-Annual MBE/WBE Report* (Attachment 9-D);
- *Semi-Annual and Annual Section 3 Reports* (Attachment 9-E); and
- *Employee Self-Certification Report (ED/PFED only)* (Attachment 9-H).
- *Annual Single Audit Statement* (Attachment 9-I / Attachment 9-J)
- *Client Income Certification Report (PS and other projects for which DEHCR informs Grantee that client tracking is required only)* (Attachment 9-K)

If the assigned DEHCR Project Representative has provided additional instruction or updated forms, please use that guidance.

It is the responsibility of the UGLG to monitor and report on the performance of sub-recipients and contractors during the contractual performance period. The UGLG **must** submit complete reports to DEHCR in a timely manner.

## LABOR STANDARDS REPORT

The U.S. Department of Labor (USDOL) requires federal agencies administering programs subject to Davis-Bacon and Related Acts (DBRA) and Contract Work Hours and Safety Standards Act (CWHSSA) to furnish a ***Semi-Annual Labor Standards Enforcement Report (LSER) (Attachment 9-C)***, **even if the number of hours worked for the reporting period are equal to zero.** If the assigned DEHCR Project Representative has provided additional instruction or updated forms, use that guidance.



The *Semi-Annual LSER* is due to DEHCR per the *Grant Agreement Time Table*. This report is often due prior to the end of the reporting period. If there is additional activity between the report due date and the end of the reporting period, the UGLG may include the previously unreported information with the next report.

The reporting periods and due dates for the *Semi-Annual LSER* are as follows unless the UGLG is notified by the DEHCR Project Representative of another submission date:

- For the period of **April 1<sup>st</sup> through September 30<sup>th</sup>** – the report is due **no later than September 25<sup>th</sup>**. Reports received after this date will be considered late and may impact the approval of CDBG payment requests.
- For the period of **October 1<sup>st</sup> through March 31<sup>st</sup>** – the report is due **no later than March 25<sup>th</sup>**. Reports received after this date will be considered late and may impact the approval of CDBG payment requests.

DEHCR reserves the right to modify reporting periods and due dates for the *LSER* as needed.

### EQUAL OPPORTUNITY

Chapter 6 of the *BCD CDBG Implementation Handbook* describes the requirements related to Civil Rights Laws, including Equal Opportunity and Fair Housing. Please refer to Chapter 6 for more detailed information.

Reporting for Equal Opportunity compliance includes:

- *Semi-Annual MBE/WBE Reports* (Attachment 9-D); and
- Fair Housing Actions and documentation.

The reporting periods and due dates for the *Semi-Annual MBE/WBE Reports* are as follows unless the UGLG is notified by the DEHCR Project Representative of another submission date:

- For the period of **April 1<sup>st</sup> through September 30<sup>th</sup>** – the report is due **no later than September 25<sup>th</sup>**. Reports received after this date will be considered late and may impact the approval of CDBG payment requests.
- For the period of **October 1<sup>st</sup> through March 31<sup>st</sup>** – the report is due **no later than March 25<sup>th</sup>**. Reports received after this date will be considered late and may impact the approval of CDBG payment requests.

The reporting periods and due dates for Fair Housing are:

- *Fair Housing Actions* – follow the *Grant Agreement Time Table* for due date. Report progress on Fair Housing Actions on the *Semi-Annual Summary Narratives*; and
- *Fair Housing Report* – follow the *Grant Agreement Time Table* for due date. Report completed Fair Housing Actions on the *Semi-Annual Summary Narratives* and submit required supporting documentation.

Completion of Fair Housing Actions and submission of supporting documentation must be completed by the dates stated in the *Grant Agreement* and must be submitted to DEHCR with the associated *Semi-Annual Report*.

### SECTION 3 REPORT

The Section 3 provisions require that recipients of CDBG funding, to the greatest extent feasible, provide job training, employment and contracting opportunities for LMI residents and for low- or very low-income businesses in connection with projects and

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activities in their communities. *Section 3 Reports* (Attachment 9-E) are required semi-annually for the period of October 1<sup>st</sup> – March 31<sup>st</sup> and annually for the period of October 1<sup>st</sup> – September 30<sup>th</sup> each year.

The reporting periods and due dates for the *Section 3 Reports* are as follows unless the UGLG is notified by the DEHCR Project Representative of another submission date:

- For the *Annual* period of **October 1<sup>st</sup> through September 30<sup>th</sup>** – the report is due **no later than September 25<sup>th</sup>**. Reports received after this date will be considered late and may impact the approval of CDBG payment requests.
- For the *Semi-Annual* period of **October 1<sup>st</sup> through March 31<sup>st</sup>** – the report is due **no later than March 25<sup>th</sup>**. Reports received after this date will be considered late and may impact the approval of CDBG payment requests.

More information on Section 3 requirements is included in Chapter 6: <i>Equal Opportunity, Fair Housing and Section 3</i> .
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## EMPLOYEE SELF-CERTIFICATION REPORT

UGLGs with a project funded with CDBG – Economic Development funds (CDBG-ED) and CDBG – Public Facilities Economic Development funds (CDBG-PFED), CDBG CLOSE ED (CDBG-CL-ED), and CDBG CLOSE PFED (CDBG-CL-PFED) are required to submit a *CDBG Project Employee Self-Certification Report* (Attachment 9-H). The *Report* is a summary of all *Employee Self-Certification* forms submitted by employees at the point of hire during the reporting period. *CDBG Project Employee Self-Certification Reports* are required semi-annually for the period of October 1<sup>st</sup> – March 31<sup>st</sup> and April 1<sup>st</sup> – September 30<sup>th</sup> each year, and a final report is due with the Project Completion Report. The due dates for this reporting during the project performance period are specified in the UGLG's *Grant Agreement Time Table*.

## CLIENT INCOME CERTIFICATION REPORT

UGLGs with a project funded with CDBG CLOSE Public Services (CDBG-CL-PS) *[and certain Public Facilities (CDBG-PF or CDBG-CL-PF) projects under very limited circumstances and only if specified in the UGLG's Grant Agreement]* are required to submit a *CDBG Project Client Income Certification Report* (Attachment 9-K). The *Report* is a summary of all *Client Income Certification Forms* (Attachment 9-L) received during the reporting period, completed by clients at the point of first receiving services. *Client Income Certification Reports* are required during the project performance period, and a final report is due with the Project Completion Report. The due dates for this reporting during the project performance period are listed in the UGLG's *Grant Agreement Time Table*.

## SINGLE AUDIT REPORTING

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 15<sup>th</sup>** of each calendar year for the duration of the *Grant Agreement*.

The *Single Audit Report* is due for each calendar year in which the UGLG expends \$750,000 or more in federal funds for the duration of the *Grant Agreement* and through the final year in which the CDBG funds were expended. The UGLG must submit a *Single Audit Report* to the Federal Audit Clearinghouse (FAC), including submission of the FAC's Form SF-SAC, within 30 days of the Single Audit being completed, and no later than September 30<sup>th</sup> of each year in which the UGLG was subject to completing and submitting a *Single Audit Report*. The UGLG must submit to DEHCR the record of submission of the *Single Audit Report* to the FAC (i.e., a copy of the email confirmation of submission received by the UGLG from the FAC). Further information regarding Annual Single Audit requirements and instructions on how to submit a full *Single Audit Report* are listed in the pages that follow in this chapter.

The UGLG must maintain all Single Audit Statements, and maintain all Single Audit Reports, Form SF-SAC records, and FAC email submission confirmation records (if any Single Audit(s) required) in the CDBG project file.

### DOCUMENTS ESTABLISHING REQUIREMENTS

The Office of Management and Budget establishes uniform audit requirements for non-federal entities, including state and local governments that administer federal awards, Uniform Guidance 2 CFR 200 Subpart F. The Act requires non-federal entities that expend a total amount of federal awards, whether received directly from federal awarding agencies or indirectly from pass-through entities, equal to or more than \$750,000 in any fiscal year, to have either a single audit or a program-specific audit, available from the OMB internet web site at <https://www.gpo.gov/fdsys/pkg/CFR-2014-title2-vol1/pdf/CFR-2014-title2-vol1-part200.pdf> or from the Government Printing Office at the following address:

Government Printing Office  
Superintendent of Documents  
Washington, D.C. 20402-9325.

The *State Single Audit Guidelines* (Guidelines) issued by the Wisconsin Department of Administration (DOA) establishes standardized procedures and guidelines for the implementation of single audit requirements for non-federal entities. The *State Single Audit Guidelines* (SSAG) are found at: <https://doa.wi.gov/Pages/StateFinances/State-Single-Audit-Guidelines.aspx>. The *Guidelines* require non-federal entities subject to the requirements of the Act to include selected state financial assistance programs in the scope of the single audit. These programs, and related compliance supplements, are identified in appendices to the *Guidelines*.

### DETERMINING THE ENTITY(IES) TO BE AUDITED

The non-federal entity or government unit to whom a grant is awarded and with whom DOA contracts may be subject to an audit in accordance with the Uniform Guidance 2 CFR 200 (See "III. Determining the Type of Audit Required"). This government unit is responsible for submission of its single audit reporting package to DOA as described more fully below, whether or not the entity has sub-granted the award to another governmental unit.

In addition to the above, if the governmental unit to whom a grant is awarded and with whom DOA contracts passes some or all of the funds through to another general purpose unit of government or a special purpose unit of government such as a sanitary district, that unit of government may also be subject to a single audit in accordance with the Uniform Guidance (see "III. Determining the Type of Audit Required"). To determine whether the second general purpose unit of government, special purpose unit of government, or sub-grantee/sub-recipient must conduct an audit of its own or its auditing

requirement may be fulfilled through the audit of the Department of Administration's Grantee, review the Governmental Accounting Standards Board (GASB) Statement No. 14, "The Financial Reporting Entity", or consult an independent CPA.

### **DETERMINING THE TYPE OF AUDIT REQUIRED**

The federal law requires non-federal entities that "expend" a combined total of \$750,000 or more of federal funds in a year to have a single audit conducted for that year in accordance with the requirements of Uniform Guidance 2 CFR 200 Subpart F. The single audit should cover the operations of the entire local government or, at the option of the local government, the audit may include a series of audits that cover departments, agencies, and other organizational units which expended or otherwise administered federal awards. Non-federal entities that expend \$750,000 or more on one federal program only in any fiscal year may elect to have a program-specific audit conducted in accordance with the Uniform Guidance. [Attachment 9-I: *Single Audit Statement (Audit Required)*]

Non-federal entities that expend less than \$750,000 in total federal awards in a year are exempt for that fiscal year from compliance with the audit requirements of the Uniform Guidance. The exemption does not, however, relieve a non-federal entity from compliance with any provision of a federal statute or regulation that requires the entity to maintain records concerning federal awards, or permits a federal agency, pass-through entity, or the Comptroller General access to such records. [Attachment 9-J: *Single Audit Statement (Audit Not Required)*]

### **AUDITEE RESPONSIBILITIES**

Uniform Guidance 2 CFR 200 clearly identifies the responsibilities of the auditee (the local government) with respect to federal awards.

The auditee is required to:

1. Identify in its accounts the federal awards received and expended. The identification should include the Catalog of Federal Domestic Assistance (CFDA) title and number, name of the federal agency, and name of the pass-through entity. The CFDA for the Small Cities CDBG State Program passed through the Department of Administration is 14.228, and the federal agency is the U.S. Department of Housing and Urban Development. Each similar source or cluster should be subtotaled.
2. Maintain internal control over federal programs. To gain an understanding of the concepts of establishing effective internal control structure policies and procedures, consult the independent auditor or refer to the appendix of the AICPA Audit and Accounting Guide, *Audits of State and Local Governmental Units*.
3. Comply with laws, regulations, and the provisions of contracts or grant agreements related to each of its federal programs. These requirements may be found in the award agreement, this handbook, and Uniform Guidance 2 CFR 200 *Compliance Supplement (Compliance Supplement)*. A copy of the *Compliance Supplement* is available from the OMB internet web site at the Government Printing Office or [https://www.whitehouse.gov/sites/whitehouse.gov/files/omb/circulars/A133/2017/Compliance\\_Supplement\\_2017.pdf](https://www.whitehouse.gov/sites/whitehouse.gov/files/omb/circulars/A133/2017/Compliance_Supplement_2017.pdf) and <https://www.whitehouse.gov/wp-content/uploads/2018/05/2018-Compliance-Supplement.pdf>.
4. Prepare appropriate financial statements, including the schedule of expenditures of federal awards.
5. Arrange for and ensure that audits required by the Uniform Guidance are properly performed. See *Procuring Governmental Audit Services* at:

[https://www.aicpa.org/interestareas/governmentauditquality/resources/auditeer\\_esourcecenter/downloadabledocuments/rfppracticeaid.pdf](https://www.aicpa.org/interestareas/governmentauditquality/resources/auditeer_esourcecenter/downloadabledocuments/rfppracticeaid.pdf).

When procuring professional services, the UGLG must follow Chapter 66 of the Wisconsin Statutes regarding procurement. In addition, the UGLG must comply with Uniform Guidance 2 CFR 200 because federal funds are being used to pay for the services.

In procuring audit services, the auditee must follow the Circular's procurement procedures, which accommodate Chapter 66 of Wisconsin Statutes and comply with OMB Circular A-102. Requests for proposals should clearly state the objective and scope of the audit. Factors to consider in evaluating proposals include:

- a. Responsiveness to the Request for Proposals (RFP);
  - b. Relevant experience in the performance of Single Audits;
  - c. Availability of staff with professional qualifications and technical abilities;
  - d. The result of external peer review; and
  - e. Price.
6. Follow up and take corrective action on audit findings, including preparation of summary schedule of prior audit and corrective action plan.
  7. Execute the Data Collection Form and submit it, together with the audit reporting package, when due. Audits must be completed and submitted within 30 days after the issuance of the auditor's reports to the auditee, but no later than nine (9) months after the end of the audit period.

## **SINGLE AUDIT REPORTING PACKAGE**

The required elements of a single audit reporting package are as follows:

1. Financial statements of the non-federal entity, notes to the financial statements and auditor's opinion;
2. Schedule of expenditures of federal and, if applicable, state awards, notes to the schedule, and auditor's opinion;
3. Report on the internal control structure related to the financial statements and major programs;
4. Report on compliance with laws, regulations, and provisions of contracts or grant agreements, noncompliance with which could have a material effect on the financial statements;
5. Schedule of findings and questioned costs using a reference numbering system to facilitate audit follow-up. One option is to use an identifying prefix of the last two digits of the year under audit, then the sequence number of issues listed;
6. Summary schedule of prior audit findings. The auditee may prepare a summary schedule that indicates that there were no reportable prior year findings; and
7. Corrective action plan for all audit findings and recommendations or an explanation as to why an action plan was not necessary.

## **PROGRAM-SPECIFIC AUDIT REPORTS**

The required elements of a program-specific audit, for eligible non-federal entities, are dependent on whether a program-specific audit guide is available from the Office of the Inspector General of the federal agency. If a program-specific audit guide is available, the auditor must follow the guide and Generally Accepted Government Auditing Standards. In the absence of a program-specific audit guide, the following is required:



1. Financial statements of the federal program, notes to the financial statements and auditor's opinion;
2. Report on internal control related to the federal programs;
3. Report on compliance with laws, regulations and provisions of contracts or grant agreements;
4. Schedule of findings and questioned costs for the federal program that includes a summary of the auditor's results and findings and questioned costs;
5. Summary schedule of prior audit findings; and
6. Corrective action plan for all audit findings or explanation as to why one was not necessary.

## **SUBMISSION TO CLEARINGHOUSE**

All auditees must submit to the federal clearinghouse the data collection form and one (1) copy of the reporting package described above and the Data Collection Form (Form SF-SAC) to the Federal Audit Clearinghouse (FAC). The auditee must electronically submit to the FAC at <https://harvester.census.gov/facweb/>.

## **SUBMISSION TO PASS-THROUGH ENTITIES**

Sub-recipients should review the most current version of the State Single Audit Guidelines for submission requirements: (<https://doa.wi.gov/Pages/StateFinances/State-Single-Audit-Guidelines.aspx>).

## **REPORT RETENTION REQUIREMENTS**

One (1) copy of the Form SF-SAC data collection form and one copy of the complete reporting package must be kept on file for three (3) years from the date of submission to the federal clearinghouse.

## **AUDIT COSTS**

The costs of audits made in accordance with the provisions of 2 CFR 200 Subpart E are allowable charges to the CDBG program unless the non-federal entity expended less than \$750,000 of federal awards and is, therefore, exempted by the Act from having an audit conducted. In accordance with 2 CFR 200 Subpart E, "Special Considerations for States, Local Governments and Indian Tribes," the percentage of costs charged to the CDBG program for a single audit shall not exceed the percentage derived by dividing federal funds expended by total funds expended by the recipient or sub-recipient (including program matching funds) during the fiscal year.

## **QUALITY CONTROL REVIEWS**

The *Guidelines* require state cognizant agencies to conduct quality control reviews (QCRs) of the work of independent auditors performing single audits to ascertain they have adhered to required auditing standards and guidelines, and the scope of the audit was sufficient to provide a reasonable chance of detecting material errors, deficiencies, or irregularities, if any. Annually, a minimum number of single audits are randomly selected by DOA for quality control review. DOA may also judgmentally select audits for quality control review based on the results of a desk review.

The chief elected official of a non-federal entity selected for QCR will be asked to authorize its independent auditor to allow the DOA Auditor to review audit work papers supporting the audit. Written results of the review are provided to the non-federal entity, independent auditor, and DOA within two (2) weeks of completion of the QCR. The non-federal entity is expected to work with its independent auditor to correct deficiencies, if any, noted during the QCR.

## ATTACHMENTS

Attachments for this chapter are listed below:

ATTACHMENT 9-A:	SEMI-ANNUAL REPORT CERTIFICATION (TEMPLATE)
ATTACHMENT 9-A1:	SEMI-ANNUAL REPORT CERTIFICATION (SAMPLE)
ATTACHMENT 9-A2:	SEMI-ANNUAL REPORT CERTIFICATION (INSTRUCTIONS)
ATTACHMENT 9-B:	SEMI-ANNUAL SUMMARY NARRATIVE (TEMPLATE)
ATTACHMENT 9-B1:	SEMI-ANNUAL SUMMARY NARRATIVE (SAMPLE)
ATTACHMENT 9-B2:	SEMI-ANNUAL SUMMARY NARRATIVE (INSTRUCTIONS)
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ATTACHMENT 9-J:	SINGLE AUDIT STATEMENT [AUDIT <b>NOT</b> REQUIRED] (TEMPLATE)
ATTACHMENT 9-J1:	SINGLE AUDIT STATEMENT [AUDIT <b>NOT</b> REQUIRED] (SAMPLE)
ATTACHMENT 9-K:	CLIENT INCOME CERTIFICATION REPORT (TEMPLATE)
ATTACHMENT 9-L:	CLIENT INCOME CERTIFICATION FORM (TEMPLATE)

**ATTACHMENT 9-A: SEMI-ANNUAL REPORT CERTIFICATION  
(TEMPLATE)**

<b>Division of Energy, Housing and Community Resources</b> <u>Semi-Annual Report Certification</u>	
<b>SEMI-ANNUAL REPORT CERTIFICATION</b> Wisconsin's Community Development Block Grant Program	
A. NAME OF UGLG: _____	TEMPLATE
B. DEHCR GRANT AGREEMENT #: _____	
C. BUSINESS NAME: _____	
D. REPORTING PERIOD ENDED: <i>(choose one)</i> <input type="checkbox"/> October 1, 20__ to March 31, 20__ <i>(due April 15<sup>th</sup>)</i> <input type="checkbox"/> April 1, 20__ to September 30, 20__ <i>(due October 15<sup>th</sup>)</i> <input type="checkbox"/> Other: _____	
<b>SEMI-ANNUAL REPORT DOCUMENTS ATTACHED:</b>	
<input type="checkbox"/>	<i>Semi-Annual Report Certification</i>
<input type="checkbox"/>	<i>Semi-Annual Summary Narrative</i> , including update(s) regarding the status of the: <input type="checkbox"/> Environmental Report (refer to Chapter 4: Environmental Review), with supporting documentation; <input type="checkbox"/> Fair Housing Actions completed, with supporting documentation; and <input type="checkbox"/> Second Citizen Participation Public Hearing, with supporting documentation
<input type="checkbox"/>	<i>Semi-Annual Labor Standards Enforcement Report</i> ( <input type="checkbox"/> Previously Submitted to DEHCR: <u>    Date    </u> )
<input type="checkbox"/>	<i>Semi-Annual MBE/WBE Report</i> ( <input type="checkbox"/> Previously Submitted to DEHCR: <u>    Date    </u> )
<input type="checkbox"/>	<i>Section 3 Report(s):</i> <input type="checkbox"/> Semi-Annual Report: October 1, 20__ to March 31, 20__ <i>(due April 15<sup>th</sup>)</i> <input type="checkbox"/> Annual Report: October 1, 20__ to September 30, 20__ <i>(due October 15<sup>th</sup>)</i>
<b>PREPARER CERTIFICATION</b>	
I hereby certify that to the best of my knowledge and belief the contents in this report are true and correct.	
Signature	Date
Title	Telephone
Company	Email
<b>UGLG APPROVAL</b>	
UGLG Signature	Date



## ATTACHMENT 9-A1: SEMI-ANNUAL REPORT CERTIFICATION (SAMPLE)

<b>Division of Energy, Housing and Community Resources</b> <u>Semi-Annual Report Certification</u>									
<b>SEMI-ANNUAL REPORT CERTIFICATION</b> <small>Wisconsin's Community Development Block Grant Program</small>									
<div style="position: relative; height: 100px;"> <span style="position: absolute; top: 0; right: 0; font-size: 100px; opacity: 0.1; transform: rotate(-10deg); pointer-events: none;">SAMPLE</span> </div>									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">A. NAME OF UGLG:</td> <td>Town of Eugene</td> </tr> <tr> <td>B. DEHCR GRANT AGREEMENT #:</td> <td>17-99</td> </tr> <tr> <td>C. BUSINESS NAME:</td> <td></td> </tr> <tr> <td>D. REPORTING PERIOD ENDED: (choose one)</td> <td> <input type="checkbox"/> October 1, 20__ to March 31, 20__ (due April 15<sup>th</sup>)  <input checked="" type="checkbox"/> April 1, 20__18 to September 30, 20__18 (due October 15<sup>th</sup>)  <input type="checkbox"/> Other: _____                 </td> </tr> </table>		A. NAME OF UGLG:	Town of Eugene	B. DEHCR GRANT AGREEMENT #:	17-99	C. BUSINESS NAME:		D. REPORTING PERIOD ENDED: (choose one)	<input type="checkbox"/> October 1, 20__ to March 31, 20__ (due April 15 <sup>th</sup> ) <input checked="" type="checkbox"/> April 1, 20__18 to September 30, 20__18 (due October 15 <sup>th</sup> ) <input type="checkbox"/> Other: _____
A. NAME OF UGLG:	Town of Eugene								
B. DEHCR GRANT AGREEMENT #:	17-99								
C. BUSINESS NAME:									
D. REPORTING PERIOD ENDED: (choose one)	<input type="checkbox"/> October 1, 20__ to March 31, 20__ (due April 15 <sup>th</sup> ) <input checked="" type="checkbox"/> April 1, 20__18 to September 30, 20__18 (due October 15 <sup>th</sup> ) <input type="checkbox"/> Other: _____								
SEMI-ANNUAL REPORT DOCUMENTS ATTACHED:									
<input checked="" type="checkbox"/>	Semi-Annual Report Certification								
<input checked="" type="checkbox"/>	Semi-Annual Summary Narrative, including update(s) regarding the status of the: <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Environmental Report (refer to Chapter 4: Environmental Review), with supporting documentation;</li> <li><input type="checkbox"/> Fair Housing Actions completed, with supporting documentation; and</li> <li><input type="checkbox"/> Second Citizen Participation Public Hearing, with supporting documentation</li> </ul>								
<input checked="" type="checkbox"/>	Semi-Annual Labor Standards Enforcement Report ( <input checked="" type="checkbox"/> Previously Submitted to DEHCR: <u>9/25/18</u> )								
<input checked="" type="checkbox"/>	Semi-Annual MBE/WBE Report ( <input checked="" type="checkbox"/> Previously Submitted to DEHCR: <u>9/25/18</u> )								
<input checked="" type="checkbox"/>	Section 3 Report(s): <ul style="list-style-type: none"> <li><input type="checkbox"/> Semi-Annual Report: October 1, 20__ to March 31, 20__ (due April 15<sup>th</sup>)</li> <li><input checked="" type="checkbox"/> Annual Report: October 1, 20__17 to September 30, 20__18 (due October 15<sup>th</sup>)</li> </ul>								
PREPARER CERTIFICATION									
I hereby certify that to the best of my knowledge and belief the contents in this report are true and correct.									
Signature <i>Tracy Bell</i>	Date 10/15/2018								
Title Grant Administrator/Senior Engineer	Telephone 608-336-6670								
Company Velasquez Consulting	Email TBell@VConsulting.com								
UGLG APPROVAL									
<i>Jrv Franklin</i> UGLG Signature	Date 10/15/2018								

## ATTACHMENT 9-A2: SEMI-ANNUAL REPORT CERTIFICATION (INSTRUCTIONS)

### Instructions:

1. Enter the name of the UGLG, the CDBG contract number, the business name (for ED/PFED projects only), and the reporting period end date.
2. Indicate which semi-annual report documents are attached.
3. The preparer must sign and date the “Preparer Certification.”
4. The UGLG must sign and date the “UGLG Approval.” It is recommended that the signer for the UGLG be the Chief Elected Official.
5. Retain a copy of the completed **Semi-Annual Report Certification** form in the CDBG project files and **submit one (1) copy** of the completed Certification form to the assigned DEHCR Project Representative via email.

Email Submittals: Your assigned DEHCR Project Representative or  
[DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)

**ATTACHMENT 9-B: SEMI-ANNUAL SUMMARY NARRATIVE (TEMPLATE)****Division of Energy, Housing and Community Resources**Semi-Annual Summary Narrative Report**SEMI-ANNUAL SUMMARY NARRATIVE REPORT**

A. NAME OF UGLG:
B. DEHCR GRANT AGREEMENT #:
C. REPORTING PERIOD ENDED: (choose one)
<input type="checkbox"/> October 1, 20__ to March 31, 20__ (due April 15 <sup>th</sup> )
<input type="checkbox"/> April 1, 20__ to September 30, 20__ (due October 15 <sup>th</sup> )
<input type="checkbox"/> Other: _____

**THIS REPORTING PERIOD**

OBJECTIVES	ACCOMPLISHMENTS

**UPDATE ON PREVIOUS REPORTING PERIOD(S)**

DELAYED OBJECTIVE	UPDATE

**ENVIRONMENTAL REPORT STATUS**

*Provide an update on progress made toward completing the Environmental Report requirements of the CDBG project.*

OBJECTIVES	ACCOMPLISHMENTS

**FAIR HOUSING ACTIONS COMPLETED**

*Provide an update on progress made toward completing the Fair Housing Actions requirement of the CDBG project.*

**REMINDER:** The UGLG's contracted Fair Housing Actions (FHAs) must be completed by \_\_\_\_\_ per the Grant Agreement Timetable. Failure to meet this deadline will result in the denial of CDBG payment requests until the FHAs are completed.

OBJECTIVES	ACCOMPLISHMENTS

**2<sup>ND</sup> CITIZEN PARTICIPATION PUBLIC HEARING STATUS**

*Provide an update on progress made toward completing the Second Citizen Participation Public Hearing requirement of the CDBG project.*

**REMINDER:** The UGLG's contracted Second Citizen Participation Public Hearing is scheduled to be completed by \_\_\_\_\_ per the Grant Agreement Timetable. Failure to meet this deadline may result in the denial of CDBG payment requests until the hearing is completed.

OBJECTIVES	ACCOMPLISHMENTS

## ATTACHMENT 9-B1: SEMI-ANNUAL SUMMARY NARRATIVE FORM (SAMPLE)

### Division of Energy, Housing and Community Resources

#### Semi-Annual Summary Narrative Report

### SEMI-ANNUAL SUMMARY NARRATIVE REPORT

A. NAME OF UGLG:

Village of Bishop's Falls

B. DEHCR GRANT AGREEMENT #:

CDBG-PF 17-99

C. REPORTING PERIOD ENDED: (choose one)

- ☒ October 1, 20\_\_17\_\_ to March 31, 20\_\_18\_\_ (due April 15<sup>th</sup>)
- ☐ April 1, 20\_\_ to September 30, 20\_\_ (due October 15<sup>th</sup>)
- ☐ Other: \_\_\_\_\_

#### THIS REPORTING PERIOD

##### OBJECTIVES

##### DUE Prior to Construction:

- Execute Grant Agreement.
- Establish record keeping system.
- Establish financial management system.
- Procure engineering and administrative services.
- Submit draft or executed grant administration contract(s) to DEHCR CDBG Project Representative for review, if applicable.
- Complete acquisition and relocation requirements for property, easement(s), etc., if applicable.
- Obtain federal Davis-Bacon wage rates, if applicable.
- Complete Record of Wage Decision Form. Submit to DEHCR CDBG Project Representative for review.
- Prepare and solicit construction bids.
- Report date of bid advertisement and bid opening to DEHCR.
- Submit Notice of Contractor Award form and construction start date to DEHCR.
- Submit bid tabulation summary to DEHCR CDBG Project Representative.
- Obtain all necessary permits.
- Hold pre-construction meeting. Submit meeting minutes/notes to DEHCR CDBG Project Representative.

##### ACCOMPLISHMENTS

- Grant Agreement executed (fully signed) by DEHCR 09/20/2017.
- Record keeping system established.
- Financial management system established.
- Engineering/administrative services procured; contract(s) signed 01/15/2018.
- Administrative services contract sent to DEHCR for review 12/16/2017.
- N/A – No acquisition/relocation associated with this project.
- Wage rates obtained.
- Record of Wage Decision Form completed; sent to DEHCR for review 03/25/2018.
- IN PROCESS: Construction bids are being prepared.
- IN PROCESS: Bids will be advertised by 04/20/2018, and opened on 05/31/2018.
- Not yet applicable – Will be reported on next/future report.
- Not yet applicable – Will be reported on next/future report.
- Not yet applicable.
- Not yet applicable – Will be reported on next/future report.

Continued on next page...

## Division of Energy, Housing and Community Resources

## Semi-Annual Summary Narrative Report

SAMPLE

**DUE by January 15<sup>th</sup>, 2018:**

- Submit Single Audit Statement for CY2018.

**DUE by March 25<sup>th</sup>, 2018:**

- Submit Semi-Annual Labor Standards Report and MBE/WBE Report for the period of 10/01/2017 through 03/31/2018.

**DUE by April 15<sup>th</sup>, 2018:**

- Submit Semi-Annual Report Certification, Semi-Annual Report Narrative, and supporting documentation for the period of 10/01/2017 through 03/31/2018.
- Submit Annual Section 3 Report for the period of 10/01/2016 through 09/30/2017 (reporting 07/28/2017-09/30/2017 activities).
- Submit Semi-Annual Section 3 Report for the period of 10/01/2017 through 03/31/2018.

- **LATE SUBMISSION: Single Audit Statement (letter) submitted to DEHCR/DOA 01/31/2018.**

- Semi-Annual Labor Standards Enforcement Report (LSER) and MBE/WBE Report submitted to DEHCR 03/23/2018.

- Submitted herewith (04/15/2018); see attached Semi-Ann. Report Cert., Semi-Ann. Report Narrative, & support docs.

- Submitted herewith (04/15/2018); see attached Annual Section 3 Report.

- Submitted herewith (04/15/2018); see attached Semi-Annual Section 3 Report.

**UPDATE ON PREVIOUS REPORTING PERIOD(S)****DELAYED OBJECTIVE**

Not Applicable – No delayed objectives from prior report period(s).

**UPDATE**

No delayed objectives from prior report period(s).

**ENVIRONMENTAL REPORT STATUS**

*Provide an update on progress made toward completing the Environmental Report requirements of the CDBG project.*

**OBJECTIVES****DUE Prior to Construction:**

- Complete Environmental Report and obtain official approval from DEHCR Environmental Desk. Submit copy of approval from DEHCR Environmental Desk to assigned DEHCR CDBG Project Representative.

**ACCOMPLISHMENTS**

- Approval of Environmental Report received from DEHCR Environmental Desk 02/01/2018. Copy of signed approval letter submitted to DEHCR CDBG Project Representative 02/05/2018.

**FAIR HOUSING ACTIONS COMPLETED**

*Provide an update on progress made toward completing the Fair Housing Actions requirement of the CDBG project.*

**REMINDER:** The UGLG's contracted Fair Housing Actions (FHAs) must be completed by 09/30/2018 per the Grant Agreement Timetable. Failure to meet this deadline will result in the denial of CDBG payment requests until the FHAs are completed.

**OBJECTIVES****DUE by September 30<sup>th</sup>, 2018:**

- Fair Housing Action #1 – The Village will post a Fair Housing poster at Village Hall, at the Post Office, and at the Library.

**ACCOMPLISHMENTS**

- Fair Housing posters were posted 03/12/2018 – Photos of posted posters and list of posting locations attached.



**Division of Energy, Housing and Community Resources****Semi-Annual Summary Narrative Report**

- Fair Housing Action #2 – The Village will... (insert description here).
- Fair Housing Action #3 – The Village will... (insert description here).

- IN PROCESS: The Village is/has...
- IN PROCESS: The Village is/has...

**2<sup>ND</sup> CITIZEN PARTICIPATION PUBLIC HEARING STATUS**

Provide an update on progress made toward completing the Second Citizen Participation Public Hearing requirement of the CDBG project.

**REMINDER:** The UGLG's contracted Second Citizen Participation Public Hearing is scheduled to be completed by 03/31/2019 per the Grant Agreement Timetable. Failure to meet this deadline may result in the denial of CDBG payment requests until the hearing is completed.

**OBJECTIVES****DUE by March 31<sup>st</sup>, 2019:**

- Conduct second Public Hearing to report project progress to, and receive input from, local community regarding the CDBG project.

**DUE by April 15<sup>th</sup>, 2019:**

- Report status of second Public Hearing completion (in the 2<sup>nd</sup> Citizen Participation Public Hearing section of the Semi-Annual Summary Narrative) and submit second Public Hearing meeting notice, attendance list, and meeting minutes to DEHCR CDBG Project Representative.

**ACCOMPLISHMENTS**

- Not yet applicable – Will be reported on a future Semi-Annual Report.
- Not yet applicable – Will be reported on a future Semi-Annual Report.

SAMPLE

## ATTACHMENT 9-B2: SEMI-ANNUAL SUMMARY NARRATIVE (INSTRUCTIONS)

### Instructions:

1. Enter the UGLG name, DEHCR Grant Agreement #, and the reporting period end date.
2. **THIS REPORTING PERIOD:** In the “Objectives” section, list **all** the activities identified for the reporting period in the *Grant Agreement Time Table*. Do not insert additional objectives. In the “Accomplishments” section, describe the progress made on each objective, in detail, as well as any problems encountered and their resolution. Provide meaningful information such as names and dates of administration or contractors hired.
3. **UPDATE ON PREVIOUS REPORTING PERIOD(S):** In the “Delayed Objectives” section, list **only** those activities that were to be accomplished in a previous report, but had **not** been reported as completed. In the “Update” Section, describe the progress made, in detail, on each delayed objective, any problems encountered, and their resolution. **If all activities scheduled for previous reports have been completed, leave this section blank.**
4. **ENVIRONMENTAL REPORT STATUS:** Provide an update on progress made toward completing the Environmental Report requirements of the project. In the “Objectives” section, list the steps needed to complete the ER (see ER Table of Contents). Do not insert additional objectives. In the “Accomplishments” section, describe the progress made on each step, in detail, as well as any problems encountered and their resolution. Provide meaningful information such as names and dates of documents completed, submitted, and/or received. **Do not delete progress previously reported to DEHCR.** Submit supporting documentation to the assigned DEHCR project representative.
5. **FAIR HOUSING ACTIONS COMPLETED:** Provide an update on progress made toward completing the Fair Housing Actions requirement of the project. In the “Objectives” section, list the UGLG’s contracted Fair Housing Actions as listed in the *Grant Agreement*. In the “Accomplishments” section, describe the progress made on each objective, in detail, as well as any problems encountered and their resolution. Provide meaningful information such as names and dates of events held, along with documents completed and dates published/posted. **Do not delete progress previously reported to DEHCR.** Submit supporting documentation to the assigned DEHCR project representative.
6. **SECOND CITIZEN PARTICIPATION PUBLIC HEARING STATUS:** Provide an update on progress made toward completing the Second Citizen Participation Public Hearing requirement of the project. In the “Objectives” section, list the UGLG’s contracted obligation(s) as listed in the *Grant Agreement*. In the “Accomplishments” section, describe the progress made toward completing the Public Hearing requirement, in detail, as well as any problems encountered and their resolution. Provide meaningful information such as names and dates of events held, along with documents completed and dates published/posted. **Do not delete progress previously reported to DEHCR.** Submit supporting documentation to the assigned DEHCR project representative.
7. Retain a copy of the completed Semi-Annual Report Summary Narrative form in the CDBG project file and **submit one (1) copy** of the completed Summary Narrative form to the assigned DEHCR Project Representative via email.

Email Submittals:                      Your assigned DEHCR Project Representative or  
[DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)

## ATTACHMENT 9-C: SEMI-ANNUAL LABOR STANDARDS ENFORCEMENT REPORT (TEMPLATE)

### Division of Energy, Housing and Community Resources

#### Semi-Annual Labor Standards Enforcement Report

Unit of General Local Government (UGLG)/Grantee Name: \_\_\_\_\_  
DEHCR Grant Agreement #: \_\_\_\_\_

## SEMI-ANNUAL LABOR STANDARDS ENFORCEMENT REPORT

*for Community Development Block Grant (CDBG) Program Projects*

Reporting Period Covered: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ through \_\_\_\_ / \_\_\_\_ / \_\_\_\_ .

This Report is **due to the Division on or before:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ .

### CDBG Semi-Annual Labor Standards Enforcement Report:

- 1) Number of prime contracts, awarded during this six (6) month period, that are subject to Davis-Bacon and Related Acts (DBRA) and/or the Contract Work Hours and Safety Standards Act (CWHSSA). Track contracts by award dates – **DO NOT track by bid opening date:** \_\_\_\_\_
- 2) Enter the total dollar amount of prime contracts reported above: \$ \_\_\_\_\_
- 3) Supply the indicated information for each prime contract awarded during the reporting period: \*

A	B	C	D	E	F
Prime Contractor(s):	Bid Opening Date: (mm/dd/yyyy)	Project-Related Contract Amount:	Contract Award Date: (mm/dd/yyyy)	Wage Decision Modification Number & Publication Date: (WI##00## Mod. ##) (mm/dd/yyyy)	Wage Decision Lock-In Date: (mm/dd/yyyy)
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
Total Project-Related Contracts:		\$			

- 4) Construction start date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ ☐ N/A
- 5) Is construction completed? ☐ Yes ☐ No
- 6) Construction completion date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ ☐ N/A

# TEMPLATE



**Division of Energy, Housing and Community Resources****Semi-Annual Labor Standards Enforcement Report**

- 7) Enter the employers (contractors, subcontractors, lower-tier subcontractors) against whom complaints, investigations or §5.11 hearings were received during the reporting period. \*

Employer	Project	HUD or DOL	Investigations or Hearings

- 8) Enter the information relative to wage restitution that was collected and/or disbursed during this six (6) month period. This includes: restitution disbursed by the grantee, restitution reported on certified payroll correction report, and amounts collected but not disbursed because workers could not be found.

- a) Enter the total number of workers for whom wage restitution was collected and/or disbursed during this six (6) month period:

- b) Enter the total amount of wage restitution collected and/or disbursed during this six (6) month period:

Straight time: \$ \_\_\_\_\_  
Overtime: \$ \_\_\_\_\_

- c) Enter the total amount of liquidated damages collected during this six (6) month period for Contract Work Hours and Safety Standards Act overtime violations:

\$ \_\_\_\_\_

\* Use additional pages if necessary.

\_\_\_\_\_  
Typed Name of the Designated Labor Standards Officer

\_\_\_\_\_  
Labor Standards Officer  
Title

\_\_\_\_\_  
Date

TEMPLATE

**PLEASE NOTE:** Download this form from

<https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>, or contact the assigned DEHCR Project Representative, to ensure the current version of this form for proper report submission has been obtained.

# ATTACHMENT 9-C1: SEMI-ANNUAL LABOR STANDARDS ENFORCEMENT REPORT (SAMPLE)

## Division of Energy, Housing and Community Resources

### Semi-Annual Labor Standards Enforcement Report

Unit of General Local Government (UGLG)/Grantee Name: Milton, City of  
 DEHCR Grant Agreement #: PF 17-99

## SEMI-ANNUAL LABOR STANDARDS ENFORCEMENT REPORT

for Community Development Block Grant (CDBG) Program Projects

Reporting Period Covered: 04 / 01 / 2018 through 09 / 30 / 2018

This Report is **due to the Division on or before:** 09 / 25 / 2018

### CDBG Semi-Annual Labor Standards Enforcement Report:

- 1) Number of prime contracts, awarded during this six (6) month period, that are subject to Davis-Bacon and Related Acts (DBRA) and/or the Contract Work Hours and Safety Standards Act (CWHSSA). Track contracts by award dates – **DO NOT track by bid opening date:** 2
- 2) Enter the total dollar amount of prime contracts reported above: \$ 395,800.00
- 3) Supply the indicated information for each prime contract awarded during the reporting period: \*

A	B	C	D	E	F
Prime Contractor(s):	Bid Opening Date: (mm/dd/yyyy)	Project-Related Contract Amount:	Contract Award Date: (mm/dd/yyyy)	Wage Decision Modification Number & Publication Date: (W#00## Mod. ##) (mm/dd/yyyy)	Wage Decision Lock-In Date: (mm/dd/yyyy)
Jo-Cee Sands Excavating	03 / 25 / 18	\$ 195,800.00	05 / 08 / 18	WI18 0008 Mod. 4 03 / 17 / 18	03 / 25 / 18
Mark-O-Cain Well Drilling Services	04 / 15 / 18	\$ 200,000.00	07 / 31 / 18*	WI18 0008 Mod. 13 07 / 28 / 18*	07 / 31 / 18*
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
	/ /	\$	/ /	WI 00 Mod. / /	/ /
Total Project-Related Contracts:		\$ 395,000.00			

- 4) Construction start date: 08 / 15 / 2018 ☐ N/A
- 5) Is construction completed? ☐ Yes ☒ No
- 6) Construction completion date: / / ☒ N/A

**\*PLEASE NOTE: Time between Bid Opening and Contract Award exceeded 90 days.**

**Division of Energy, Housing and Community Resources****Semi-Annual Labor Standards Enforcement Report**

- 7) Enter the employers (contractors, subcontractors, lower-tier subcontractors) against whom complaints, investigations or §5.11 hearings were received during the reporting period. \*

Employer	Project	HUD or DOL	Investigations or Hearings
A. Baddon Concrete	St. Bonaventure Street Reconstruction	DOL	Sworn depositions regarding sub-contractor kickback allegations

- 8) Enter the information relative to wage restitution that was collected and/or disbursed during this six (6) month period. This includes: restitution disbursed by the grantee, restitution reported on certified payroll correction report, and amounts collected but not disbursed because workers could not be found.

- a) Enter the total number of workers for whom wage restitution was collected and/or disbursed during this six (6) month period:

1

- b) Enter the total amount of wage restitution collected and/or disbursed during this six (6) month period:

Straight time: \$ 9.17

Overtime: \$ 0

- c) Enter the total amount of liquidated damages collected during this six (6) month period for Contract Work Hours and Safety Standards Act overtime violations:

\$ 0

\* Use additional pages if necessary.

Julia Wilkinson

Typed Name of the Designated Labor Standards Officer

Labor Standards Officer

Title

10/15/2018

Date

SAMPLE

## ATTACHMENT 9-C2: SEMI-ANNUAL LABOR STANDARDS ENFORCEMENT REPORT (INSTRUCTIONS)

### Instructions:

The Unit of General Local Government (UGLG) must submit this Semi-Annual Labor Standards Enforcement Report form in accordance with the reporting schedule established in the UGLG's CDBG Grant Agreement.

1. Fill-in the **Labor Standards Enforcement Report** "UGLG Name" and the "DEHCR Grant Agreement Number" fields found in the upper right corner on the first page of the form.
2. The report information must include any construction contract awards made and/or all active payroll monitoring of on-going construction projects conducted during the 6-month reporting period listed on the first page of the report form.
  - If there were no new construction contracts awarded during the 6-month reporting period, submit zeros as answers to Sections #1-3. Responses are required from all UGLGs with open/active CDBG Projects (i.e. projects not yet certified by DEHCR as being "completed").
  - Column 3C: Report the eligible project cost (which includes any costs that will be funded using CDBG dollars and that are eligible to be counted as Match towards this CDBG project) for each Prime Contract awarded during this 6-month reporting period (refer to Column 3A).
    - If a portion of a Prime Contractor's total award amount does not apply to the CDBG project, deduct the non-CDBG project-eligible amount from the contract award to calculate the Project-Related Contract Amount(s) that should be listed in Column 3C.
    - If the total award amount for each Prime Contract applies to the CDBG project, then the total of the values listed in Column C should equal the dollar value reported for Section 2.
  - Column 3F: The applicable Wage Decision Lock-In Date for each Prime Contractor is either the Bid Opening Date or the Contract Award Date.
    - If a contract is awarded within ninety (90) days of the bid opening, the Bid Opening Date is the date when the wage decision is considered to be locked-in for the project.
    - If a contract is awarded more than ninety (90) days after the bid opening, the Wage Decision must be double-checked for updates (i.e. additional modifications), and the current published Wage Decision would be applicable to the CDBG project. In this scenario, the Contract Award Date is the date when the wage decision is considered to be locked-in for the project.
  - If no active payroll monitoring was conducted during the 6-month reporting period, submit zeros as answers to Section #7 and Section #8. Responses are required from all UGLGs with open/active CDBG Projects (i.e. projects not yet certified by DEHCR as being "completed").
3. The **Labor Standards Enforcement Report** form must be completed by the UGLG's designated CDBG Labor Standards Officer. Make sure to provide the typed name and title of the designated CDBG Labor Standards Officer. Enter the date the form is completed by the designated CDBG Labor Standards Officer.
4. Retain a copy of the completed **Labor Standards Enforcement Report** form in the CDBG Project file and **submit one (1) copy** of the completed report to the assigned DEHCR Project Representative via email.

Email Submittals:                      Your assigned DEHCR Project Representative  
or [DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)

**PLEASE NOTE:** *If any new contracts are awarded or any wage restitution payments are collected after the submittal of this report to the DEHCR for the reporting period covered on this report, the contract award and restitution payment information must be included on the next Semi-Annual Labor Standards Enforcement Report submission to DEHCR.*

**A Section 5.7 Enforcement Report** (Attachment 7-O) must be submitted with the LSER for each contractor with underpayments restitution of \$1,000 or more during the reporting period in which it was paid.

## ATTACHMENT 9-D: SEMI-ANNUAL MBE/WBE REPORT (TEMPLATE)

<b>Division of Energy, Housing and Community Resources (DEHCR)</b> <b>MBE/WBE Report Form</b>	
<b>FEDERAL GRANT #:</b> <input type="checkbox"/> B - DC - 55 - 0001 <input type="checkbox"/> B - DF - 55 - 0001 <input type="checkbox"/> B - DI - 55 - 0001 <input type="checkbox"/> B - DN - 55 - 0001 <input type="checkbox"/> E - DC - 55 - 0001 <input type="checkbox"/> M - SG - 55 - 0001	<b>GRANTEE/JGLG NAME:</b> <b>DEHCR GRANT AGREEMENT #:</b>
<h2 style="margin: 0;">MBE/WBE REPORT</h2>	
<b>For DEHCR Use ONLY</b>	
<b>Program (Choose One):</b> <input type="checkbox"/> Community Development Program <input type="checkbox"/> HOME RHD / HHR <input type="checkbox"/> Housing Program <input type="checkbox"/> ESG	<b>Report Type (Choose One):</b> <input type="checkbox"/> Semi-Annual (6-Month) Report
<b>Reporting Period Covered (Choose One):</b> <b>Semi-Annual Report:</b> <input type="checkbox"/> April 1 - September 30, 20 <input type="text"/> <input type="text"/> <input type="checkbox"/> October 1, 20 <input type="text"/> - March 31, 20 <input type="text"/>	
<b>PREPARER CERTIFICATION</b>	
I hereby certify that, to the best of my knowledge and belief, the contents in this report are true and correct.	
<b>Full Name of the Report Preparer:</b> <i>(This serves as an electronic signature.)</i>	
<b>Preparer's Job Title &amp; Company/Employer:</b>	<b>Date Signed:</b>
<b>Preparer's Telephone Number:</b>	<b>Preparer's Email Address:</b>
<b>For Grantees / UGLGs: Full Name of the Chief Elected Official</b> <i>(This serves as an electronic signature.)</i>	
<b>Title</b>	<b>Date Signed</b>

Revised: 08/31/2019

Page 1

## Division of Energy, Housing and Community Resources (DEHCR)

MBE/WBE Report Form

GRANTEE/UGLG NAME: \_\_\_\_\_

DEHCR GRANT AGREEMENT #: \_\_\_\_\_

Prime Contractor/Sub-Contractor Name & Address 1a.				Prime Contractor FEIN # 1b.	Sub-Contractor FEIN # 1c.	Amount of Contract or Sub-Contract 1d.	Type of Trade Code (See below.) 1e.	Prime Contractor or Sub- Contractor Business Race/Ethnicity (See below.) 1f.	Women Owned Business (Yes or No) 1g.	Section 3 Business (Yes or No) 1h.
Name	Street Address	City	State / ZIP							
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				
<input type="checkbox"/> Prime Contractor						\$0.00				
<input type="checkbox"/> Sub-Contractor						\$0.00				

PLEASE NOTE: If you need to list more than 9 (nine) Contractors or Sub-Contractors (in the space provided above), scroll-down for additional Prime Contractor/Sub-Contractor information page(s).

## 1e. Type of Trade Codes:

- 1 = New Construction  
2 = Substantial Rehab  
3 = Repair

- 4 = Service  
5 = Project Management  
6 = Professional

- 7 = Tenant Services  
8 = Education / Training  
9 = Architectural / Engineering Appraisal  
0 = Other

## 1f. Racial / Ethnic Codes:

- 1 = White Americans  
2 = Black Americans  
3 = Native Americans

- 4 = Hispanic Americans  
5 = Asian / Pacific Americans  
6 = Hasidic Jews

**PLEASE NOTE:** Download this form from <https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx> or contact the assigned DEHCR Project Representative, to ensure the current version of this form for proper report submission has been obtained.



## ATTACHMENT 9-D1: SEMI-ANNUAL MBE/WBE REPORT (SAMPLE)

<b>Division of Energy, Housing and Community Resources (DEHCR)</b> <small>MBE/WBE Report Form</small>	
<b>FEDERAL GRANT #:</b> <input type="checkbox"/> B - DC - 55 - 0001 <input type="checkbox"/> B - DF - 55 - 0001 <input type="checkbox"/> B - DI - 55 - 0001 <input type="checkbox"/> B - DN - 55 - 0001 <input type="checkbox"/> E - DC - 55 - 0001 <input type="checkbox"/> M - SG - 55 - 0001 <small>For DEHCR Use ONLY</small>	<b>GRANTEE/UGLG NAME:</b> City of Lafayette <b>DEHCR GRANT AGREEMENT #:</b> CDBG-PF 17-99
<h2 style="margin: 0;">MBE/WBE REPORT</h2>	
<b>Report Type (Choose One):</b> <input checked="" type="checkbox"/> Semi-Annual (6-Month) Report	<b>Reporting Period Covered (Choose One):</b> Semi-Annual Report: <input checked="" type="checkbox"/> April 1 - September 30, 20 18 <input type="checkbox"/> October 1, 20 - March 31, 20
<b>Program (Choose One):</b> <input checked="" type="checkbox"/> Community Development Program <input type="checkbox"/> HOME RHD / HHR <input type="checkbox"/> Housing Program <input type="checkbox"/> ESG	<b>Preparer Certification</b> I hereby certify that, to the best of my knowledge and belief, the contents in this report are true and correct. <b>Full Name of the Report Preparer:</b> <i>April Kelly</i> <small>(This serves as an electronic signature.)</small>
<b>Preparer's Job Title &amp; Company/Employer:</b> Sr. Engineer/Grant Administrator	<b>Date Signed:</b> 10 / 22 / 2018
<b>Preparer's Telephone Number:</b> ( 764 ) 837 - 3273 Ext. 7	<b>Preparer's Email Address:</b> <a href="mailto:AKelly@KellyEngineering.com">AKelly@KellyEngineering.com</a>
<b>For Grantees / UGLGs: Full Name of the Chief Elected Official</b> <small>(This serves as an electronic signature.)</small> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <i>Buddy Boyle</i> </div> <div style="text-align: center;"> <b>Mayor</b>  <b>Title</b> </div> </div>	
<h1 style="margin: 0;">SAMPLE</h1>	

Revised: 08/31/2019

Page 1

## Division of Energy, Housing and Community Resources (DEHCR)

MBE/WBE Report Form

GRANTEE/UGLG NAME: City of Lafayette

DEHCR GRANT AGREEMENT #:

CDBG-PF 17-99

Prime Contractor/Sub-Contractor Name & Address 1a.		Street Address	City	State / ZIP	Prime Contractor FEIN # 1b.	Sub-Contractor FEIN # 1c.	Amount of Contract or Sub-Contract 1d.	Type of Trade Code (See below.) 1e.	Prime Contractor or Sub- Contractor Business' Race/Ethnicity (See below.) 1f.	Women Owned Business (Yes or No) 1g.	Section 3 Business (Yes or No) 1h.	
											Prime Contractor	Sub- Contractor
<input checked="" type="checkbox"/>	Prime Contractor	Bartholomew Construction	239 Keefer Street	Emory Park	WI 55055	06 - 2642225	Not Applicable	1	1	No	No	Not Applicable
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor	G.L. Jacobson Excavations	172 - 77381 Krespin Rd.	Longmont	WI 54235	06 - 2642225	\$111,113.00	1	1	Yes	No	No
<input checked="" type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											
<input type="checkbox"/>	Prime Contractor						\$0.00					
<input type="checkbox"/>	Sub-Contractor											

PLEASE NOTE: If you need to list more than 9 (nine) Contractors or Sub-Contractors (in the space provided above), scroll-down for additional Prime Contractor/Sub-Contractor information page(s).

1e. Type of Trade Codes:  
 1 = New Construction  
 2 = Substantial Rehab  
 3 = Repair

4 = Service  
 5 = Project Management  
 6 = Professional  
 7 = Tenant Services  
 8 = Education / Training  
 9 = Architectural / Engineering Appraisal  
 0 = Other

1f. Racial / Ethnic Codes:

1 = White Americans  
 2 = Black Americans  
 3 = Native Americans  
 4 = Hispanic Americans  
 5 = Asian / Pacific Americans  
 6 = Hasidic Jews



## ATTACHMENT 9-D2: SEMI-ANNUAL MBE/WBE REPORT (DEFINITIONS AND INSTRUCTIONS)

### SEMI-ANNUAL MBE/WBE REPORT FORM DEFINITIONS:

1. A **Minority-owned Business Enterprise (MBE)** is a business that is both owned **and** controlled by minorities. This means that there must be not less than 51 percent minority ownership of the business (a business in which more than 50 percent of the ownership or control is held by one or more minority individuals, and more than 50 percent of the net profit or loss which accrues is to one or more minority individuals), and that the minority ownership must control the management and daily operations of the business. When 51% or more of the business is not owned and controlled by any single racial/ethnic category, enter the race/ethnicity code which best classifies the majority of employees working for the Contractor or Sub-Contractor.
2. A **Woman-owned Business Enterprise (WBE)** is a business that is both owned **and** controlled by women. This means that there must be not less than 51 percent women ownership of the business (a business in which more than 50 percent of the ownership or control is held by one or more female individuals, and more than 50 percent of the net profit or loss which accrues is to one or more female individuals), and that the women ownership must control the management and daily operations of the business.
3. A **Section 3 Business** is a business that provides economic opportunities to low-income and very low-income persons. A Section 3 Business must be able to provide documentation to support at least one of the following situations:
  - The business has at least 51 percent ownership by Section 3 residents (a business in which 51 percent or more of the ownership is held by one or more Section 3 residents, and 51 percent or more of the net profit or loss which accrues is to one or more Section 3 residents); **OR**
  - At least 30 percent of the full-time employees of the business include persons that are currently Section 3 residents, or were Section 3 residents within three (3) years of their date of first hire by the Section 3 business; **OR**
  - The business provides evidence, as required, of a commitment to sub-contract in excess of 25 percent of the dollar amount awarded of all sub-contracts to business concerns that meet one of the first two qualifications for being a Section 3 Business (as listed above).
4. A **Section 3 resident (or Section 3 person)** is an individual that:
  - Is a public housing resident; **OR**
  - Is a low-income or very low-income person (as defined below):
    - A **Low-Income** level is defined as being 80 percent (or less than 80 percent) of the median income of that area.
    - A **Very Low-Income** level is defined as being 50 percent (or less than 50 percent) of the median income of that area.

### SEMI-ANNUAL MBE/WBE REPORT FORM INSTRUCTIONS:

The Division of Energy, Housing and Community Resources' (DEHCR's) grant recipients are required to submit MBE/WBE Reports to the Division either Semi-Annually or Quarterly. Questions regarding project-specific reporting requirements should be directed to the assigned DEHCR Project Representative. For each MBE/WBE Report submitted, the following items must be completed:

- Provide your project's "Grantee/UGLG Name" and the "DEHCR Grant Agreement Number" information in the upper-right corner on the first page of the report.

## BCD CDBG Implementation Handbook

- Check mark the appropriate box (e.g. Community Development Program, HOME RHD/HHR, or Housing Program, or ESG) to specify the DEHCR Program that is funding the project for which the MBE/WBE Report is being submitted.
- Check mark the appropriate box (e.g. Semi-Annual Report or Quarterly Report) to specify the type of report being submitted.
- Check mark the appropriate box (e.g. 4/1–9/30/20YY, 10/1/20YY–3/31/20YY, 1/1–3/31/20YY, 4/1–6/30/20YY, 7/1–9/30/20YY, or 10/1-12/31-20YY) to indicate which semi-annual or quarterly reporting period is applicable.
- **PREPARER CERTIFICATION:** Provide the name, job title, company/employer, telephone number, and email address of the person preparing the MBE/WBE report. The preparer must certify they have prepared this report by typing their name dating the report prior to submitting it to DEHCR.
- **All MBE/WBE Reports** approved by the Chief Elected Official (CEO) [i.e., Mayor, City Council President, Village President, Town Board Chairman, County Board Chairman, or County Executive], and contain the typed name and title of the CEO. Maintain the record of the CEO's approval of the report (e.g., email from the CEO) in the CDBG project file.
- **MBE/WBE CONTRACTOR/SUB-CONTRACTOR INFORMATION (Table on Page 2):** Begin by individually listing the **Business Name (1a.)** of each Contractor and Sub-Contractor awarded contracts (funded with program dollars) for the project during the reporting timeframe listed.

– **For each** business (i.e. contract recipient) listed in the table:

Column **1a:** Indicate whether the business is a **Contractor** or **Sub-Contractor** by check marking the appropriate box. Also provide the **Street Address, City, State** and **ZIP Code** for the business.

Column **1b:** For each business that is listed as a Contractor (1a.), provide that **Contractor's FEIN #**. *If a business is listed as a Sub-Contractor (1a.), provide the FEIN # of the Prime Contractor overseeing the Sub-Contractor's work on the project.*

Column **1c:** For each business that is listed as a Sub-Contractor (1a.), provide that **Sub-Contractor's FEIN #**. *If a business is listed as a Contractor (1a.), then leave the Sub-Contractor's FEIN # (1c.) **blank**.*

Column **1d:** Provide the contracted **dollar amount** for the business' services and materials. **DO NOT DOUBLE-COUNT** overlapping contract amounts. Funds awarded by a Contractor for sub-contracted work to Sub-Contractor(s) should be listed with the Sub-Contractor(s) information, **NOT** with the Contractor's awarded dollar amount. *(Refer to the examples provided below for further clarification.)*

**EXAMPLE #1:** *A project has awarded \$100,000 in funds to **each** of two (2) Contractors, for a total of \$200,000 during the current reporting period. Neither Contractor sub-contracts any work to Sub-Contractor(s). A portion of the MBE/WBE Report form would be completed as follows:*

Contractor/Sub-Contractor Name & Address <b>1a.</b>					Contractor FEIN # <b>1b.</b>	Sub-Contractor FEIN # <b>1c.</b>	Amount of Contract or Sub-Contract <b>1d.</b>
Name	Street Address	City	State / ZIP				
<input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Sub-Contractor	ABC Construction	123 Main Street	Youreville	WI 54000	XX - XXXXXXXX		\$100,000.00
<input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Sub-Contractor	XYZ Construction	456 First Street	Youreville	WI 54000	XX - XXXXXXXX		\$100,000.00

**EXAMPLE #2:** A project has awarded \$100,000 in funds to **each** of two (2) Contractors, for a total of \$200,000 during the current reporting period. The first Contractor (ABC Construction) does not sub-contract any work to Sub-Contractor(s). The second Contractor (XYZ Construction) sub-contracts a **total** of \$25,000 (of their \$100,000 contract) to two (2) Sub-Contractors (DEF Plumbing & GHI Paving). A portion of the MBE/WBE Report form would be completed as follows:

Contractor/Sub-Contractor Name & Address <b>1a.</b>					Contractor FEIN # <b>1b.</b>	Sub-Contractor FEIN # <b>1c.</b>	Amount of Contract or Sub-Contract <b>1d.</b>
Name	Street Address	City	State / ZIP				
<input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Sub-Contractor	ABC Construction	123 Main Street	Youreville	WI 54000	XX - XXXXXXXX		\$100,000.00
<input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Sub-Contractor	XYZ Construction	456 First Street	Youreville	WI 54000	XX - XXXXXXXX		\$75,000.00
<input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Sub-Contractor	DEF Plumbing	873 Main Street	Youreville	WI 54000	XX - XXXXXXXX (fgr. XYZ Constr.)	XX - XXXXXXXX	\$5,000.00
<input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Sub-Contractor	GHI Paving	925 Main Street	Youreville	WI 54000	XX - XXXXXXXX (fgr. XYZ Constr.)	XX - XXXXXXXX	\$20,000.00

Column **1e**: Provide the **Trade Code** for the type of work that each business (1a.) was hired to perform. (Refer to the list of Trade Codes provided at the bottom of page 2 of the form.)

Column **1f**: Indicate whether each business is a **Minority-owned Business Enterprise (MBE)** by listing the **Race/Ethnicity Code** designation for each business. (Refer to the definition of an MBE listed above. A list of race/ethnicity codes is provided at the bottom of page 2 of the form.)

**PLEASE NOTE:** If 51 percent or more of the business is **not** owned and controlled by any **single** racial/ethnic category, input the race/ethnicity code which best classifies the majority of minority employees working for the individual business.

Column **1g**: Indicate whether each business is classified as a **Woman-owned Business Enterprise (WBE)**. (Refer to the definition of a WBE listed above.)

Column **1h**: Indicate whether each business is classified as a **Section 3 Business**. (Refer to the definition of a Section 3 Business listed above.)

**PLEASE NOTE:** If the listed business is a Sub-Contractor, you must identify whether the business is classified as a **Section 3 Business and** you must also identify whether the business' associated (higher-level) Prime Contractor is classified as a **Section 3 Business**.

- Retain the completed **MBE/WBE Report** form and the CEO approval record in the CDBG project file and **submit one (1) copy** of the completed report via email to the assigned DEHR Project Representative.

Email Submittals: Your assigned DEHCR Project Representative or  
[DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)

## ATTACHMENT 9-E: SECTION 3 REPORT (TEMPLATE)

DOA/DEHCR  
PO Box 7970  
Madison, WI 53707-7970  
DOADEHCR@wisconsin.gov  
Fax (608) 266-3381

## SECTION 3 REPORT

DOA AGREEMENT # \_\_\_\_\_  
(Contract #)

NAME OF GRANTEE \_\_\_\_\_

## CONTACT INFORMATION

Preparer's Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone \_\_\_\_\_  
E-mail \_\_\_\_\_

HUD REPORTING PERIOD ☐ Semi-Annual Report: October 1, 20\_\_ to March 31, 20\_\_  
☐ Annual Report: October 1, 20\_\_ to September 30, 20\_\_

Complete one form for each program/contract with DEHCR.

Please check program ☐ CDBG ☐ NSP ☐ HOME ☐ HOPWA  
☐ CDBG-DR (Disaster Recovery) ☐ ESG

## Part I: Employment and Training

Job Category	Number of New Hires	Number of New Hires that are Section 3 Residents	Number of Section 3 Trainees
Professionals			
Clerical			
Case Management			
Facilities / Maintenance			
Technical (Bookkeeping, IT, etc.)			
Carpentry			
Masonry			
Plumbing			
Electrical			
Administration			
Define Other:			
Define Other:			
Define Other:			

## Part II: Contracts Awarded

## Construction Contracts

1. Total dollar amount of all contracts award on the project	\$
2. Total dollar amount of contracts awarded to Section 3 businesses	\$
3. Percentage of the total dollar amount that was awarded to Section 3 businesses	%
4. Total number of Section 3 businesses receiving contracts	

## Non-Construction Contracts

1. Total dollar amount of non-construction contracts award on the project	\$
2. Total dollar amount of non-construction contracts awarded to Section 3 businesses	\$
3. Percentage of the total dollar amount that was awarded to Section 3 businesses	%
4. Total number of Section 3 businesses receiving non-construction contracts	

DOA/DEHCR  
PO Box 7970  
Madison, WI 53707-7970  
DOADEHCR@wisconsin.gov  
Fax (608) 266-3381

## Part III: Best Efforts

Describe the Grantee's best efforts to give training and employment opportunities to LMI residents and/or businesses, check all that apply:

- |   |   |
|---|---|
| <input type="checkbox"/> Job Posting at Job Centers             | <input type="checkbox"/> Job Posting in Community List Serves           |
| <input type="checkbox"/> Job Posting in Local Newspaper/Shopper | <input type="checkbox"/> Job Posting at Public Municipal Building       |
| <input type="checkbox"/> Job Posting at Housing Authority       | <input type="checkbox"/> Job Posting at Technical College or University |
| <input type="checkbox"/> Website or Social Media Outreach       | <input type="checkbox"/> Disadvantage Business Outreach                 |
| <input type="checkbox"/> No new hires during reporting period   | <input type="checkbox"/> Project Complete – No Activity                 |
| <input type="checkbox"/> Other: _____                           |   |

comments:

TEMPLATE

\_\_\_\_\_  
Signature of Preparer

\_\_\_\_\_  
Title

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date Signed

\_\_\_\_\_  
Printed Name of Preparer

\_\_\_\_\_  
UGLG/Grantee Signature

\_\_\_\_\_  
Title

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date Signed

**PLEASE NOTE:** Download this form from <https://doa.wi.gov/Pages/LocalGovtsGrants/CDBGImplementationHandbook.aspx>, or contact the assigned DEHCR Project Representative, to ensure the current version of this form for proper report submission has been obtained.

## ATTACHMENT 9-E1: SECTION 3 REPORT (SAMPLE)

DOA/DEHCR  
PO Box 7970  
Madison, WI 53707-7970  
DOADEHCR@wisconsin.gov  
Fax (608) 266-3381

# SAMPLE

## SECTION 3 REPORT

DOA AGREEMENT # CDBG-PF 17-99  
(Contract #)

NAME OF GRANTEE Village of Enid

## CONTACT INFORMATION

Preparer's Name Kevin Tran  
Title Planner/Grant Administrator  
Telephone 332-647-2364  
E-mail KTran@camrose-planning.com

HUD REPORTING PERIOD ☐ Semi-Annual Report: October 1, 20\_\_ to March 31, 20\_\_  
☒ Annual Report: October 1, 20\_\_18\_\_ to September 30, 20\_\_19\_\_

Complete one form for each program/contract with DEHCR.

Please check program ☒ CDBG ☐ NSP ☐ HOME ☐ HOPWA  
☐ CDBG-DR (Disaster Recovery) ☐ ESG

## Part I: Employment and Training

Job Category	Number of New Hires	Number of New Hires that are Section 3 Residents	Number of Section 3 Trainees
Professionals	0	0	0
Clerical	0	0	0
Case Management	0	0	0
Facilities / Maintenance	0	0	0
Technical (Bookkeeping, IT, etc.)	0	0	0
Carpentry	0	0	0
Masonry	0	0	0
Plumbing	0	0	0
Electrical	0	0	0
Administration	0	0	0
Define Other: Laborer	1	1	0
Define Other:	0	0	0
Define Other:	0	0	0

## Part II: Contracts Awarded

## Construction Contracts

1. Total dollar amount of all contracts award on the project	\$ 201,395.00
2. Total dollar amount of contracts awarded to Section 3 businesses	\$ 0.00
3. Percentage of the total dollar amount that was awarded to Section 3 businesses	0 %
4. Total number of Section 3 businesses receiving contracts	0

## Non-Construction Contracts

1. Total dollar amount of non-construction contracts award on the project	\$ 11,000.00
2. Total dollar amount of non-construction contracts awarded to Section 3 businesses	\$ 0.00
3. Percentage of the total dollar amount that was awarded to Section 3 businesses	0 %
4. Total number of Section 3 businesses receiving non-construction contracts	0



DOA/DEHCR  
PO Box 7970  
Madison, WI 53707-7970  
DOADEHCR@wisconsin.gov  
Fax (608) 266-5381

## Part III: Best Efforts

Describe the Grantee's best efforts to give training and employment opportunities to LMI residents and/or businesses, check all that apply:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Job Posting at Job Centers<br><input checked="" type="checkbox"/> Job Posting in Local Newspaper/Shopper<br><input checked="" type="checkbox"/> Job Posting at Housing Authority<br><br><input checked="" type="checkbox"/> Website or Social Media Outreach<br><br><input type="checkbox"/> No new hires during reporting period<br><input type="checkbox"/> Other: _____ | <input type="checkbox"/> Job Posting in Community List Serves<br><input type="checkbox"/> Job Posting at Public Municipal Building<br><input type="checkbox"/> Job Posting at Technical College or University<br><br><input type="checkbox"/> Disadvantage Business Outreach<br><br><input type="checkbox"/> Project Complete – No Activity |
|--|---|

Comments:

SAMPLE

Kevin Tran

Signature of Preparer

Planner Grant Administrator

Title

10 / 15 / 2019

Date Signed

Kevin Tran

Printed Name of Preparer

Miranda Bates

UGLG/Grantee Signature

Village President

Title

10 / 15 / 2019

Date Signed

## ATTACHMENT 9-E2: SECTION 3 REPORT (INSTRUCTIONS)

Federal regulation 24 CFR 135 requires the Grantee (i.e. Unit of General Local Government, Non-Profit, Housing Authority, etc.) **and each** of its contractors/sub-contractors/service providers that receives or are contracted for a project that is paid for with federal funds must complete a Section 3 report. The Grantee will compile all contractors/sub-contractors/service providers forms and submit a cumulative Section 3 Report to the Division of Energy, Housing and Community Resources (DEHCR) for each contract with DEHCR.

- Fill in the *DOA Agreement #* and *Name of Grantee* in the upper left-hand corner on the first page of the form. This information can be found on the Contract Agreement.
- **Contact Information**  
Fill in the *Preparer's Name*, *Title*, *Telephone* and *E-mail* fields pertaining to the individual compiling the report information.
- **US Department of Housing and Urban Development (HUD) Reporting Period**  
Check the appropriate reporting period for the report. Please note, CDBG Disaster Recovery (TKE) must continue to report quarterly.
- **Program**  
Check the program under which the Section 3 Report is being submitted.
- **Part I: Employment and Training**  
Report any new full-time permanent hires and trainees who are hired/trained with regards to the DOA Agreement/Contract listed above during the specified reporting period. For each Job Category listed in the table, indicate how many full-time permanent New Hires were completed during the specified reporting period, along with the number of New Hires that are/were Section 3 Residents (determination based on the county where the work is being performed) and the total number of Section 3 Trainees (that completed training during the specified reporting period) as it relates to the DOA Agreement. If there were no full-time permanent hires or trainees, enter "0" (zero) in the space. If New Hire(s) or Trainee(s) does not fall into the pre-populated list of Job Categories, then enter the job title(s) in the Define Other field(s) and appropriately count the hire(s) or trainee(s).
- **Part II – Contracts Awarded**  
Construction Contracts:
  1. Enter the total dollar amount of construction contracts awarded during the reporting period. The total dollar amount should include both HUD and match funds. *Note: If DEHCR has awarded a contract to a grantee, but the grantee has not awarded the contract to a construction contractor, then the amount reported would be \$0.*
  2. Enter the total dollar amount of construction contracts awarded to Section 3 businesses during the reporting period. The amount entered should reflect both HUD and match amounts. The amount entered cannot exceed the amount entered for Line #1.
  3. Enter the percentage of the dollar amount of the construction contracts awarded to Section 3 businesses during the reporting period (Line 2 divided by [Line 1 + Line 2]). The result cannot exceed 100 percent.
  4. Enter the total number of Section 3 businesses receiving construction contracts during the reporting period.Non-Construction Contracts:  
*Non-construction contracts are professional services contracts that are associated with construction (i.e. Architecture, Engineering, Site Preparation, Legal, etc.).*



1. Enter the total dollar amount of **non**-construction contracts awarded during the reporting period. The total dollar amount should include both HUD and match funds. *Note: If DEHCR has awarded a contract to a grantee, but the grantee has not awarded the contract to a construction contractor, then the amount reported would be \$0.*
2. Enter the total dollar amount of **non**-construction contracts awarded to Section 3 businesses during the reporting period. The amount entered should reflect both HUD and match amounts. The amount entered cannot exceed the amount entered for Line #1.
3. Enter the percentage of the dollar amount of the **non**-construction contracts awarded to Section 3 businesses during the reporting period (Line 2 divided by [Line 1 + Line 2]). The result cannot exceed 100 percent.
4. Enter the total number of Section 3 businesses receiving **non**-construction contracts during the reporting period.

**NOTE: Each space must be completed for Parts I and II. If no new hires or trainees occurred or no funds were spent then enter "0". N/A is not an acceptable response.**

- **Part III – Best Efforts**

Grantees should make every effort within their disposal to meet the regulatory requirements of Section 3. For example, this may mean going a step beyond the normal notification process for employment and contracting procedures by developing strategies that will specifically target Section 3 residents and businesses for these types of economic opportunities.

Describe the Grantee's best efforts to give training and employment opportunities to Low- and Moderate Income (LMI) residents and/or businesses during the reporting period. Check all efforts that apply. Include any comments to emphasize any targeted outreach efforts that were made, along with procedures established to ensure the LMI residents and businesses were given opportunities in the evaluation and hiring/contracting processes. If no new hires were made, select the appropriate box.

For examples of best efforts see *Appendix to 24 CFR Part 135* ([https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=3a08288138e0183f1b595e73c537673a&rgn=div5&view=text&node=24:1.2.1.2.10&idno=24#ap24.1.135\\_192.1](https://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&sid=3a08288138e0183f1b595e73c537673a&rgn=div5&view=text&node=24:1.2.1.2.10&idno=24#ap24.1.135_192.1)).

- **Signature of Preparer**

The form must be completed, signed and dated by the preparer. The preparer's printed name must also be included. *[Electronic signature is acceptable. Submit the record of the preparer's electronic approval with the report to DEHCR.]*

- **Grantee Signature**

The form must be signed by the Grantee's Chief Elected Official, Executive Director or his/her designee. If the form is being completed by a contractor or sub-contractor, then the signature must be of the owner, business manager or project manager. *[Electronic signature is acceptable. Submit the record of the approver's electronic approval with the report to DEHCR.]*

- **Document Submittal**

Retain a copy of the completed **Section 3 Report** form in the CDBG project files and **submit one (1) copy** of the completed report to the assigned DEHCR Project Representative via email.

Email Submittals: Your assigned DEHCR Project Representative or  
[DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)

## ATTACHMENT 9-F: REPORTING REQUIREMENTS CHECKLIST

SEMI-ANNUAL REPORTS				
Form:		PLEASE NOTE: These forms are: <ul style="list-style-type: none"> <li>Due semi-annually as indicated in your executed CDBG Grant Agreement.</li> <li>To be completed and submitted by the local Grant Administrator.</li> </ul>		
9-A	<i>Semi-Annual Report Certification</i>			
9-B	<i>Semi-Annual Summary Narrative</i>			
9-C	<i>Semi-Annual Labor Standards Enforcement Report</i>			
9-D	<i>Semi-Annual MBE/WBE Report</i>			
9-E	<i>Section 3 Report</i>			
9-H	<i>Employee Self-Certification Report</i>			

Annual Reporting				
Form:		Completed by:	Submit via Email to:	Due:
9-E	<i>Section 3 Report</i>	Grant Administrator	DEHCR Project Rep	September 25 (unless notified of by DEHCR earlier due date)
9-K	<i>Client Income Certification Report</i>	Grant Administrator	DEHCR Project Rep	Per Grant Agreement Time Table
SINGLE AUDIT				
Form:		Completed by:	Submit via Email to:	Due:
9-I/ 9-J	<i>Single Audit Statement</i>	Grant Administrator	DEHCR Project Rep	January 15
	<i>Single Audit Report</i>	External auditor	1) Submit report to Federal Audit Clearinghouse 2) Submit copy of confirmation email from FAC to DEHCR Project Rep	Within 30 days of Single Audit completion and no later than September 30

LABOR STANDARDS			
Form:		Completed by:	Due (via Email):
7-C	<i>Labor Standards Officer Designee</i>	Grant Administrator	Upon execution of CDBG Grant Agreement
7-D	<i>Record of Wage Decision Selection</i>	Labor Standards Officer	Prior to advertising for bids
7-F	<i>Advertisement for Bids</i>	Chief Elected Official	Upon advertisement for a bid (Retain in CDBG project file only – does not need to be submitted to DEHCR)
7-H	<i>Notice of Contractor Award</i>	Labor Standards Officer	Upon awarding contract(s)
7-O	<i>Section 5.7 Enforcement Report</i>	Labor Standards Officer	Upon finding any labor violations where underpayment is greater than \$1,000
FINANCIAL MANAGEMENT			
Form:			Due (via Email):
8-A	<i>Depository Certification</i>		Prior to executing the CDBG Agreement
8-B/C	<i>DOA 6456/DOA6457</i>		
8-D	<i>Financial Management Contact Person</i>		
8-E	<i>Signature Certification</i>		
8-F	<i>CDBG Payment Request Form (must request Form from DEHCR Project Rep. when Grantee is ready to make the first CDBG Payment Request)</i>		With <u>each</u> request for CDBG funds
8-G	<i>Cash Control Register (Up-to-date as of the Payment Request submission date)</i>		
8-H	<i>CDBG Disbursement Journal (Up-to-date as of the Payment Request submission date)</i>		
8-I	<i>Matching Funds Journal (Up-to-date as of the Pavment Request submission date)</i>		

All reports are due to the assigned DEHCR Project Representative unless otherwise indicated and must be submitted via email. Any additional required documents listed in the *CDBG Implementation Handbook* (but which are not listed above) may be requested by the DEHCR Project Representative at any time.

**ATTACHMENT 9-G: GRANT AGREEMENT TIME TABLE**

*Sample for a grant period of two construction seasons for a CDBG-PF construction project:*

Due Date	Activity
<b>Prior to Construction and Acquisition</b>	<ul style="list-style-type: none"> <li>• Execute Grant Agreement.</li> <li>• Establish record keeping system.</li> <li>• Establish financial management system.</li> <li>• Procure engineering and administrative services, if contracting with third-party firm(s) for these services.</li> <li>• Submit draft or executed grant administration contract to DEHCR CDBG Project Representative for review, if contracting with a third-party for grant administration.</li> <li>• Enter into the grant administration contract, if contracting with a third-party for grant administration.</li> <li>• Complete Environmental Report and obtain official approval from DEHCR Environmental Desk. Submit copy of approval from DEHCR Environmental Desk to DEHCR CDBG Project Representative.</li> <li>• Submit "Notice of Acquisition/Relocation to DEHCR" form (if applicable)</li> <li>• Complete acquisition and relocation requirements for property purchase, easement(s), etc., if applicable to project.</li> <li>• Obtain federal Davis-Bacon wage rates, if federal labor standards are applicable to project.</li> <li>• Complete Record of Wage Decision Selection Form prior to bidding, if federal labor standards are applicable to project; and submit to DEHCR CDBG Project Representative for review.</li> <li>• Prepare and solicit construction and/or demolition related bids.</li> <li>• Check for wage decision updates prior to bid opening and inform potential bidders of updates, if federal labor standards are applicable to project.</li> <li>• Submit Notice of Contractor Award form(s) for prime contract(s) awarded.</li> <li>• Submit detailed bid tabulation summary to DEHCR CDBG Project Representative.</li> <li>• Obtain all necessary permits.</li> <li>• Hold pre-construction meeting (pre-construction meeting is optional but strongly recommended). Submit meeting minutes/notes to DEHCR CDBG Project Representative, if a pre-construction meeting was held.</li> </ul>
<b>January 15, 2021</b>	<ul style="list-style-type: none"> <li>• Submit Single Audit Statement for CY2020 to DEHCR CDBG Project Representative. Arrange for Single Audit, if required (Single Audit Report will be due to Federal Audit Clearinghouse within 30 days of Single Audit being completed or September 30, 2021, whichever date is earlier).</li> </ul>

Due Date	Activity
<b>March 25, 2021</b>	<ul style="list-style-type: none"> <li>• Submit Semi-Annual Labor Standards Enforcement Report (LSER), Minority Business Enterprise/Women Business Enterprise (MBE/WBE) Report, and Section 3 Report for the period of October 1, 2020 through March 31, 2021 [reporting activities May 5, 2020 (the Award Date) through March 31, 2021], unless notified by DEHCR CDBG Project Representative of another submission date.</li> </ul>
<b>April 15, 2021</b>	<ul style="list-style-type: none"> <li>• Submit Semi-Annual Report and supporting documentation for the period of October 1, 2020 through March 31, 2021 [reporting activities May 5, 2020 (the Award Date) through March 31, 2021]. Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> </ul>
<b>July 1, 2021</b>	<ul style="list-style-type: none"> <li>• Begin Construction. Document and report progress and/or delays to DOA.</li> </ul>
<b>September 25, 2021</b>	<ul style="list-style-type: none"> <li>• Submit Semi-Annual LSER and MBE/WBE Report for the period of April 1, 2021 through September 30, 2021, and Annual Section 3 Report for the period of October 1, 2020 through September 30, 2021 [reporting Section 3 activities May 5, 2020 (the Award Date) through September 30, 2021], unless notified by DEHCR CDBG Project Representative of another submission date.</li> </ul>
<b>September 30, 2021</b>	<ul style="list-style-type: none"> <li>• Complete Fair Housing Actions described in the attachments of the Grant Agreement.</li> <li>• Complete Single Audit and submit Single Audit Report for CY2020 to Federal Audit Clearinghouse (submit within 30 days of Single Audit completion or September 30, 2021, whichever date is <i>earlier</i>). Submit record of this submission to DEHCR CDBG Project Representative, if the Grantee was required to complete a Single Audit for CY2020. Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> </ul>
<b>October 15, 2021</b>	<ul style="list-style-type: none"> <li>• Submit Semi-Annual Report and supporting documentation for the period of April 1, 2021 through September 30, 2021. Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> <li>• Report Fair Housing Actions completed (in the Fair Housing section of the Semi-Annual Report Summary Narrative) and submit supporting documentation to DEHCR.</li> </ul>

## BCD CDBG Implementation Handbook

Due Date	Activity
January 15, 2022	<ul style="list-style-type: none"> <li>Submit Single Audit Statement for CY2021 to DEHCR CDBG Project Representative. Arrange for Single Audit, if required (Single Audit Report will be due to Federal Audit Clearinghouse within 30 days of Single Audit being completed or September 30, 2022, whichever date is <i>earlier</i>).</li> </ul>
March 25, 2022	<ul style="list-style-type: none"> <li>Submit Semi-Annual LSER, MBE/WBE Report, and Section 3 Report for the period of October 1, 2021 through March 31, 2022, unless notified by DEHCR CDBG Project Representative of another submission date.</li> </ul>
March 31, 2022	<ul style="list-style-type: none"> <li>Conduct second Public Hearing to report project progress to, and receive input from, local community regarding the CDBG project.</li> </ul>
April 15, 2022	<ul style="list-style-type: none"> <li>Submit Semi-Annual Report and supporting documentation for the period of October 1, 2021 through March 31, 2022. Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> <li>Report status of second Public Hearing completion (in the 2<sup>nd</sup> Citizen Participation Public Hearing section of the Semi-Annual Report Summary Narrative) and submit second Public Hearing meeting notice, attendance list, and minutes to DEHCR CDBG Project Representative.</li> </ul>
September 25, 2022	<ul style="list-style-type: none"> <li>Submit Semi-Annual LSER and MBE/WBE Report for the period of April 1, 2021 through September 30, 2022, and Annual Section 3 Report for the period of October 1, 2021 through September 30, 2022, unless notified by DEHCR CDBG Project Representative of another submission date.</li> </ul>
September 30, 2022	<ul style="list-style-type: none"> <li>Complete Single Audit and submit Single Audit Report for CY2021 to Federal Audit Clearinghouse (submit within 30 days of Single Audit completion or September 30, 2022, whichever date is <i>earlier</i>). Submit record of this submission to DEHCR CDBG Project Representative, if the Grantee was required to complete a Single Audit for CY2021. Reporting must follow the guidance provided in the CDBG Implementation Handbook</li> </ul>



Due Date	Activity
October 15, 2022	<ul style="list-style-type: none"> <li>Submit Semi-Annual Report and supporting documentation to DEHCR CDBG Project Representative for the period of April 1, 2021 through September 30, 2021. Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> </ul>
October 31, 2022	<ul style="list-style-type: none"> <li>Complete all Construction Activities.</li> <li>End of Construction Period. <i>No construction expenses incurred after this date.</i></li> </ul>
December 31, 2022	<ul style="list-style-type: none"> <li>Submit Final Payment Request and supporting documents.</li> <li>Submit Project Completion Report and supporting documents.</li> <li>Submit Final Summary Narrative and supporting documents for the period of October 1, 2022 through December 31, 2022 (with the Completion Report). Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> <li>Submit Semi-Annual LSER and MBE/WBE Report for the period of October 1, 2022 through March 31, 2023 (with Completion Report).</li> <li>Submit Final Labor Standards Compliance Report (LSCR) for each prime contractor (with Completion Report).</li> <li>Submit Annual Section 3 Report for the period of October 1, 2022 through September 30, 2023 (with Completion Report).</li> </ul>
January 15, 2023	<ul style="list-style-type: none"> <li>Submit Single Audit Statement for CY2022 to DEHCR CDBG Project Representative. Arrange for Single Audit, if required (Single Audit Report will be due to Federal Audit Clearinghouse within 30 days of Single Audit being completed or September 30, 2023, whichever date is earlier).</li> </ul>
September 30, 2023	<ul style="list-style-type: none"> <li>Complete Single Audit and submit Single Audit Report for CY2022 to Federal Audit Clearinghouse (submit within 30 days of Single Audit completion or September 30, 2023, whichever date is earlier). Submit record of this submission to DEHCR CDBG Project Representative, if the Grantee was required to complete a Single Audit for CY2022. Reporting must follow the guidance provided in the CDBG Implementation Handbook.</li> </ul>

## ATTACHMENT 9-H: CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT (TEMPLATE)

### Division of Energy, Housing and Community Resources

#### CDBG Project Employee Self-Certification Report

### CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT

NAME OF UGLG:

BUSINESS NAME:

GRANT AGREEMENT #:

REPORTING PERIOD ENDED: (choose one)

- ☐ Semi-Annual Report: October 1, 20\_\_ to March 31, 20\_\_
- ☐ Semi-Annual Report: April 1, 20\_\_ to September 30, 20\_\_
- ☐ Final Summary Report: Project Start Date \_\_ to Project End Date \_\_

BASELINE JOB NUMBER	
TOTAL JOBS CREATED TO DATE	
TOTAL WORKFORCE (BASELINE + CREATED)	

EMPLOYEE RACE FOR JOBS CREATED TO DATE					
Single Race	Total Number	Number Hispanic	Multi-Racial	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					

INFORMATION ON POSITIONS CREATED TO DATE	
CLASSIFICATION	TOTAL CREATED TO DATE
OFFICIALS/MANAGERS	
SALES	
OPERATIVES (SEMI-SKILLED)	
PROFESSIONALS	
TECHNICIANS	
LABORERS (UNSKILLED)	
OFFICE/CLERICAL	
CRAFT WORKERS (SKILLED)	
SERVICE WORKERS	
TOTAL CREATED	

**Division of Energy, Housing and Community Resources****CDBG Project Employee Self-Certification Report****CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT (continued)**

NAME OF UGLG:

BUSINESS NAME:

GRANT AGREEMENT #:

REPORTING PERIOD ENDED: (choose one)

- ☐ Semi-Annual Report: October 1, 20\_\_\_\_ to March 31, 20\_\_\_\_
- ☐ Semi-Annual Report: April 1, 20\_\_\_\_ to September 30, 20\_\_\_\_
- ☐ Final Summary Report: Project Start Date \_\_\_\_ to Project End Date \_\_\_\_

1. Have new positions been provided employer sponsored health care?	YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
2. Have position openings been posted with the WI Department of Workforce Development or local employment agency per your Application with DEHCR?	YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
3. Have any new positions been filled by individuals that were previously unemployed? If yes, please provide the number:	YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>

Please provide the family income breakdown of employees that corresponds with Question 1 of Employee Self-Certification Form.

A (VERY LOW)	B (LOW)	C (MODERATE)	D (ABOVE LMI LIMITS)

**REPORT ATTACHMENTS:** Submit supporting documentation (i.e., completed *Employee Self-Certification Forms*) with each semi-annual *Certification Report* submission. If submitting the final *Certification Report* (Final Summary Report), include all *Certification Forms* of new employees hired during the CDBG Project who remain at the Business; the payroll record data from the Business; and a letter from the Business certifying the accuracy of payroll record data, as verification of the current employment numbers and status of each employee at the business.

**REPORT CERTIFICATION**

I certify that to the best of my knowledge and belief the contents in this report are true and correct. Completed individual *Employee Self-Certification Forms* are attached as supporting documentation.

Signature of Chief Elected Official (CEO) (or Official Designee)

Date Signed

Printed Name of CEO (or Official Designee)

Title of CEO (or Official Designee)

Email Address of CEO (or Official Designee)

Telephone Number of CEO (or Official Designee)

## ATTACHMENT 9-H1: CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT (SAMPLE)

### Division of Energy, Housing and Community Resources

#### CDBG Project Employee Self-Certification Report

### CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT

NAME OF UGLG: City of Yourville

BUSINESS NAME: ABCZ Company

GRANT AGREEMENT #: PFED 21-01

REPORTING PERIOD ENDED: (choose one)

- ☒ Semi-Annual Report: October 1, 20 20 to March 31, 20 21
- ☐ Semi-Annual Report: April 1, 20    to September 30, 20
- ☐ Final Summary Report: Project Start Date    to Project End Date

BASELINE JOB NUMBER	25
TOTAL JOBS CREATED TO DATE	10
TOTAL WORKFORCE (BASELINE + CREATED)	30

EMPLOYEE RACE FOR JOBS CREATED TO DATE					
Single Race	Total Number	Number Hispanic	Multi-Racial	Total Number	Number Hispanic
WHITE	8	2	AMERICAN INDIAN/ALASKAN NATIVE & WHITE	1	0
BLACK/AFRICAN AMERICAN	1	0	ASIAN & WHITE	0	0
ASIAN	0	0	BLACK/AFRICAN AMERICAN & WHITE	0	0
AMERICAN INDIAN/ALASKAN NATIVE	0	0	AMERICAN INDIAN/ALASKAN NATIVE AND AFRICAN AMERICAN	0	0
NATIVE HAWAIIAN/PACIFIC ISLANDER	0	0	OTHER MULTI-RACIAL	0	0
OTHER	0	0		0	0

INFORMATION ON POSITIONS CREATED TO DATE	
CLASSIFICATION	TOTAL CREATED TO DATE
OFFICIALS/MANAGERS	1
SALES	
OPERATIVES (SEMI-SKILLED)	6
PROFESSIONALS	
TECHNICIANS	
LABORERS (UNSKILLED)	3
OFFICE/CLERICAL	
CRAFT WORKERS (SKILLED)	
SERVICE WORKERS	
TOTAL CREATED	

**Division of Energy, Housing and Community Resources****CDBG Project Employee Self-Certification Report****CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT (continued)**NAME OF UGLG: City of YourvilleBUSINESS NAME: ABCZ CompanyGRANT AGREEMENT #: PFED 21-01

REPORTING PERIOD ENDED: (choose one)

- ☒ Semi-Annual Report: October 1, 20 20 to March 31, 20 21
- ☐ Semi-Annual Report: April 1, 20    to September 30, 20
- ☐ Final Summary Report: Project Start Date    to Project End Date

1. Have new positions been provided employer sponsored health care?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
2. Have position openings been posted with the WI Department of Workforce Development or local employment agency per your Application with DEHCR?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
3. Have any new positions been filled by individuals that were previously unemployed? If yes, please provide the number:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> <u>4</u>

Please provide the family income breakdown of employees that corresponds with Question 1 of Employee Self-Certification Form.

A (VERY LOW)	B (LOW)	C (MODERATE)	D (ABOVE LMI LIMITS)
<u>2</u>	<u>4</u>	<u>2</u>	<u>2</u>

**REPORT ATTACHMENTS:** Submit supporting documentation (i.e., completed *Employee Self-Certification Forms*) with each semi-annual *Certification Report* submission. If submitting the final *Certification Report* (Final Summary Report), include all *Certification Forms* of new employees hired during the CDBG Project who remain at the Business; the payroll record data from the Business; and a letter from the Business certifying the accuracy of payroll record data, as verification of the current employment numbers and status of each employee at the business.

**REPORT CERTIFICATION**

I certify that to the best of my knowledge and belief the contents in this report are true and correct. Completed individual *Employee Self-Certification Forms* are attached as supporting documentation.

Jane Smith

Signature of Chief Elected Official (CEO) (or Official Designee)

03/31/2021

Date Signed

Jane Smith

Printed Name of CEO (or Official Designee)

President

Title of CEO (or Official Designee)

abczpres@abczcompany.com

Email Address of CEO (or Official Designee)

(608) 555-1111

Telephone Number of CEO (or Official Designee)



## ATTACHMENT 9-H2: CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT (INSTRUCTIONS)

### Division of Energy, Housing and Community Resources

#### CDBG Project Employee Self-Certification Report

### CDBG PROJECT EMPLOYEE SELF-CERTIFICATION REPORT (INSTRUCTIONS)

The *CDBG Project Employee Self-Certification Report* is a summary of the information gathered from *Employee Self-Certification Forms* completed at the time of hiring. The *Employee Self-Certification Form* may be downloaded from <http://doa.wi.gov/Divisions/Housing/Bureau-of-Community-Development> under Resources.

1. Enter the name of the UGLG, business name and Grant Agreement # on front and back of the report.
2. Check off and enter the year of the current reporting period. For the *Final Summary Report*, enter the project start date and end date as listed in the *Grant Agreement*.
3. Baseline Job Number: Enter the number of jobs at the date of the UGLG's application to the CDBG Program.
4. Total Jobs Created: Enter the number of full-time, permanent jobs created to date.
5. Total Workforce: Add the Baseline Job Number and the Total Jobs Created and enter the result.
6. Employee Race for Jobs Created: Enter the total number of employees reporting in each racial category under #2 on the *Employee Self-Certification Form* to date. Then enter the sub-group reporting as Hispanic. Enter zero (0) if there is no response.  
  
For example, six (6) new employees completed *Employee Self-Certification Forms* with all six (6) identifying as White and of those three (3) also identified as Hispanic. Therefore, for White six (6) should be entered under Total Number and three (3) under Hispanic.
7. Information on Position(s) Created to Date: Based on Employer responses on the *Employee Self-Certification Form(s)* to date, enter the total number of positions created within each of the classifications listed. Enter zero (0) if there is no response. Enter the total number of positions created in the final line.
8. Based on Employer responses on the *Employee Self-Certification Form*, enter the responses to Questions 1, 2 and 3 on the second page of the *Report*.
9. Using the information from the Family Income Category of the *Employee Self-Certification Form* enter the total number of employees reporting the income level for each of the categories.
10. Complete the Report Certification. The *Report* must be signed (with written signature or electronic approval/signature by the UGLG Chief Elected Official or his/her official designee (CEO must email DEHCR, officially designating another to approve/sign the *Report* in lieu of the CEO). If the certification/approval is electronic via email, then also submit a copy of the approval email with the *Report*).
11. The *final Employee Self-Certification Report* (Final Summary Report) must be submitted with the CDBG Project Completion Report. It is a summary of all jobs created during the job creation period of the *Grant Agreement*.
12. Submit *Certification Report and Forms* to the assigned DEHCR Project Representative via email and retain the original document with the local CDBG project files.

Email Submittals:

Assigned DEHCR Project Representative Email Address  
OR [DOACDBG@wisconsin.gov](mailto:DOACDBG@wisconsin.gov)



**ATTACHMENT 9-I: SINGLE AUDIT STATEMENT [AUDIT REQUIRED] (TEMPLATE)**

**PLACE THE FOLLOWING ON THE UGLG'S LETTERHEAD**

SINGLE AUDIT STATEMENT (AUDIT REQUIRED)

Assigned DEHCR Project Representative  
Wisconsin Department of Administration  
Division of Energy, Housing and Community Resources  
Bureau of Community Development, 9<sup>th</sup> Floor  
P.O. Box 7970  
Madison, WI 53707-7970

I hereby attest, under penalties of perjury, that during the calendar year ending, December 31,  
20\_\_, \_\_\_\_\_ (UGLG name) has expended **\$750,000 or more** in  
total federal funds and will comply with the federal Single Audit Act and the requirements of  
Uniform Guidance 2 CFR 200.

\_\_\_\_\_

(Signature of Chief Elected Official)

\_\_\_\_\_

(Typed Name)

\_\_\_\_\_

(Typed Title)

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\*(The CFDA # for all CDBG projects is 14.228.)

TEMPLATE

## ATTACHMENT 9-J: SINGLE AUDIT STATEMENT [AUDIT NOT REQUIRED] (TEMPLATE)

### PLACE THE FOLLOWING ON THE UGLG'S LETTERHEAD

#### SINGLE AUDIT STATEMENT (AUDIT NOT REQUIRED)

Assigned DEHCR Project Representative  
Wisconsin Department of Administration  
Division of Energy, Housing and Community Resources  
Bureau of Community Development, 9<sup>th</sup> Floor  
P.O. Box 7970  
Madison, WI 53707-7970

I hereby attest, under penalties of perjury, that during the calendar year ending, December 31,

20\_\_\_\_, \_\_\_\_\_ (UGLG name):

1. Has expended **less than \$750,000** in total federal funds and, therefore, is not required to submit an audit which meets the Federal Single Audit Act and the requirements of Uniform Guidance 2 CFR 200.
2. Has expended the following amount(s) of federal funds, including funds received from the Wisconsin Department of Administration, Division of Energy, Housing and Community Resources or any other source.

<u>CFDA #*</u>	<u>GRANT CONTRACT #</u>	<u>SOURCE AGENCY</u>	<u>AMOUNT EXPENDED</u>
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_  
(Signature of Chief Elected Official)

\_\_\_\_\_  
(Typed Name)

\_\_\_\_\_  
(Typed Title)

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*\*The CFDA # for all CDBG projects is 14.228.*

# TEMPLATE

ATTACHMENT 9-J1: SINGLE AUDIT STATEMENT [AUDIT NOT REQUIRED] (SAMPLE)

**PLACE THE FOLLOWING ON THE UGLG'S LETTERHEAD**

SINGLE AUDIT STATEMENT (AUDIT NOT REQUIRED)

Assigned DEHCR Project Representative  
Wisconsin Department of Administration  
Division of Energy, Housing and Community Resources  
Bureau of Community Development, 9<sup>th</sup> Floor  
P.O. Box 7970  
Madison, WI 53707-7970

SAMPLE

I hereby attest, under penalties of perjury, that during the calendar year ending, December 31,  
2022, the Village of Yourville:

1. Has expended **less than \$750,000** in total federal funds and, therefore, is not required to submit an audit which meets the Federal Single Audit Act and the requirements of Uniform Guidance 2 CFR 200.
2. Has expended the following amount(s) of federal funds, including funds received from the Wisconsin Department of Administration, Division of Energy, Housing and Community Resources or any other source.

<u>CFDA #*</u>	<u>GRANT CONTRACT #</u>	<u>SOURCE AGENCY</u>	<u>AMOUNT EXPENDED</u>
14.228	CDBG PF 21-01	DOA/HUD	\$150,000
14.228	CDBG Housing 21-10	DOA/HUD	\$75,000
21.019	RR 1234**	DOA/US Dept. of Commerce	\$150,000
66.468	DNR 5111-01**	DNR/EPA	\$50,000

Sam Smith

(Signature of Chief Elected Official)

Sam Smith

(Typed Name)

President, Village of Yourville

(Typed Title)

\* The CFDA # for all CDBG projects is 14.228.

\*\* For any non-CDBG funds, please contact the granting agency directly to determine if the funds are considered federal. The various types of funding from local and state agencies may or may not include some or all federal funding.

## ATTACHMENT 9-K: CLIENT INCOME CERTIFICATION REPORT (TEMPLATE)

<b>Division of Energy, Housing and Community Resources</b>					
<u>CDBG Project Client Income Certification Report</u>					
<b>CDBG PROJECT CLIENT INCOME CERTIFICATION REPORT</b>					
GRANTEE/UGLG NAME:					
GRANT AGREEMENT #:					
REPORTING PERIOD:					
Annual Report:		00 / 00 / 0000   to   00 / 00 / 0000			
TOTAL # NEW CLIENTS SERVED DURING THIS REPORTING PERIOD <small>(Do not include duplicate clients from previous reporting periods.)</small>					
TOTAL # CLIENTS SERVED TO DATE					
<b>RACE/ETHNICITY OF NEW CLIENTS SERVED DURING THIS REPORTING PERIOD</b>					
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		
<b>LMI STATUS OF NEW CLIENTS SERVED DURING THIS REPORTING PERIOD</b>					
# OF LMI NEW CLIENTS			# OF NON-LMI NEW CLIENTS		
<b>REPORT CERTIFICATION</b>					
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.					
Signature of UGLG Representative			Date Signed		
Printed Name of UGLG Representative			Title of UGLG Representative		

## ATTACHMENT 9-L: CLIENT INCOME CERTIFICATION FORM (TEMPLATE)

<b>[GRANTEE/UGLG NAME]</b>	<b>CDBG GRANT AGREEMENT # [CDBG Agreement #]</b>		
<b>[PROGRAM/PROJECT NAME]</b>			
<b>CLIENT INCOME CERTIFICATION FORM</b>			
<p>The [UGLG Name] [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.</p>			
Client information at the time of entry into the program:			
<b>FAMILY INCOME INFORMATION</b>			
<ul style="list-style-type: none"> <li>• Circle your family size in the far left column.</li> <li>• If your family income is <u>at or below</u> the Family Income Level shown for your family size, then enter "X" in the <b>BELOW</b> column.</li> <li>• If your family income is <u>above</u> the Family Income Level shown for your family size, then enter "X" in the <b>ABOVE</b> column.</li> <li>• Family income includes the annual income of <i>all</i> family members living in your household.</li> </ul>			
<b>FAMILY SIZE</b>	<b>FAMILY INCOME LEVEL</b>	<b>BELOW</b>	<b>ABOVE</b>
1	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 1]		
2	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 2]		
3	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 3]		
4	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 4]		
5	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 5]		
6	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 6]		
7	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF 7]		
8 or More	\$[ADD COUNTY INCOME LIMIT FOR FAMILY SIZE OF +/-8]		
<b>FAMILY RACE/ETHNICITY INFORMATION</b>			
Enter the race/ethnicity information for all family members or select the "Prefer Not to Answer" option below.			
	Number in Family with Race/Ethnicity Shown on the Left:	Number in Family with Race/Ethnicity Shown on the Left Who are Hispanic:	
White			
Black/African American			
Asian			
American Indian/ Alaskan Native			
Native Hawaiian/ Pacific Islander			
Amer. Indian/ Alaskan Native & White			
Asian & White			
Black/African Amer. & White			
Amer. Indian/ Alaskan Nat. & Black/ African Amer.			
Other Multi-Racial			
Prefer Not To Answer			
<div style="position: relative; width: 100%; height: 100%;"> <span style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%) rotate(-45deg); font-size: 100px; opacity: 0.1;">TEMPLATE</span> </div>			
Client Printed Full Name: _____		Program Entry Date: _____	
Client Signature: _____		Signature Date: _____	
<p><b>Client Income Certification Form Instructions for Program Administrator:</b>          Obtain current income limits on the HUD Income Limits website at: <a href="https://www.huduser.gov/portal/datasets/il.html">https://www.huduser.gov/portal/datasets/il.html</a>.          [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.]</p>			

ADDITIONAL NOTES: (optional)