

<b>Guide for Review of CDBG-Funded Public Facilities/Improvements</b>			
<b>Name of Program Participant:</b>			
<b>Staff Consulted:</b>			
<b>Activity Name/Identifying Number:</b>		<b>CDBG Funding Amount:</b>	
<b>Location:</b>		<b>Date(s) Funded:</b>	
<b>Name(s) of Reviewer(s):</b>		<b>Date:</b>	

**NOTE:** All questions that address requirements contain the citation for the source of the requirement (statute, regulation, NOFA, or grant agreement). If the requirement is not met, HUD must make a finding of noncompliance. All other questions (questions that do not contain the citation for the requirement) do not address requirements, but are included to assist the reviewer in understanding the participant's program more fully and/or to identify issues that, if not properly addressed, could result in deficient performance. Negative conclusions to these questions may result in a "concern" being raised, but not a "**finding**."

**Instructions:** This Exhibit is designed to monitor activities where the program participant has used Community Development Block Grant (CDBG) funds to construct, reconstruct, or rehabilitate publicly owned facilities and/or infrastructure. Under the CDBG regulations, such activities include water or sewer improvements; street improvements; sidewalks; streetlights; tree planting; and similar activities that are within the public right-of-way. [See 24 CFR 570.201(c).]

The Exhibit is divided into five sections: Consolidated Plan; Eligibility; National Objective – Area Benefit; Primary Objective of Benefit to Low- and Moderate-Income Persons; and Other Applicable Requirements. One Exhibit is to be completed for each public facility/improvement monitored. A reasonable sample size should be obtained, either randomly or selectively, as appropriate.

**Questions:**

A. CONSOLIDATED PLAN

1.

Is the activity consistent with an identified Need or Strategy in the program participant's Consolidated Plan that is applicable to this activity? (Include page number and date of Consolidated Plan in your response below.) [24 CFR 91.225(b)(3)]	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>    	

B. ELIGIBILITY

2.

a. Does the program participant’s file documentation contain information sufficient to verify eligibility? [24 CFR 570.506(a)]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>          	

<b>[OS]</b> b. If this activity was reviewed on-site, is the program participant’s description consistent with on-site observation (bearing in mind what phase the activity is at, if it is incomplete)? [24 CFR 570.506(a)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<b>Describe Basis for Conclusion:</b>          	

3.

Does the activity properly qualify as an eligible public facility, improvement, rehabilitation, or new construction activity (as opposed to “maintenance,” which is ineligible)? (See definition of “maintenance” at OMB Circular A-87, Attachment B, # 28.) [24 CFR 570.502(a)]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>          	

C. NATIONAL OBJECTIVE – LOW- AND MODERATE-INCOME AREA BENEFIT

(Note: If this activity qualifies under another CDBG national objective, please use the applicable Exhibit in Chapter 3 of this Handbook to monitor national objective compliance.)

4.

Do the program participant's records describe the boundaries of the service area? [24 CFR 570.208(a)(1)(i) and 24 CFR 570.506(b)(2)]	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>     	

5.

Upon review, do you agree with the approach/basis used by the program participant in determining the service area of this activity? [24 CFR 570.208(a)(1)(i) and 24 CFR 570.506(b)(2)]	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>     	

6.

<b>[OS]</b> Does the size of the service area appear consistent with the nature and scope of the activity? [24 CFR 570.208(a)(1)(i) and 24 CFR 570.506(b)(2)]	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>     	

7.

Provide, in the table below, either the census or survey data that the program participant used for this service area (add more rows if necessary):			
Census Tract/Block Group	Total Population	Total LMI Population	LMI Percentage
<b>TOTAL:</b>			
<b>Describe Basis for Conclusion:</b>			

8.

If census data were used, is it consistent with HUD’s published data for the point in time when the activity’s ability to qualify under this national objective was determined by the program participant? [24 CFR 570.3 “income” and “population” and 24 CFR 208(a)(1)(vi)]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<b>Describe Basis for Conclusion:</b>			

9.

If the program participant used a survey to qualify the activity under the LMI area benefit national objective, did the methodology meet the regulatory requirements for statistical reliability comparable to Census? [24 CFR 208(a)(1)(vi)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<b>Describe Basis for Conclusion:</b>	

10.

Does the program participant qualify for the LMI “Exception Rule” regarding the LMI percentage required to qualify activities as meeting the area benefit standard? (If yes, indicate the applicable exception percentage in your response below.) [24 CFR 570.208(a)(1)(ii)]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

11.

Does this activity meet the required percentage of LMI population in the service area (whether it qualified under census or survey data or is an “exception” community)? [24 CFR 570.208(a)(1)(i) or 24 CFR 570.208(a)(1)(vi)]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

D. PRIMARY OBJECTIVE OF BENEFIT TO LOW- AND MODERATE-INCOME PERSONS

12.

a. Does this activity qualify towards meeting the program participant’s primary objective of benefit to LMI persons?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>   		

b. If the answer to “a” above is “yes,” complete the information below:

<u>Program Year:</u>	<u>Funds Expended for this Activity</u> (to be counted towards overall LMI primary objective):

**Describe Basis for Conclusion:**

c. If this activity qualifies under another national objective, indicate in response below as well as whether you conducted a review for national objective compliance using another Exhibit in this Handbook and results.

**Describe Basis for Conclusion:**

E. OTHER APPLICABLE REQUIREMENTS

**Instructions:** To complete the questions in this Section, select a sample of files covering the areas in the subsections below.

Procurement/Small Purchase Procedures

13.

Does your review of this activity indicate that small purchase procedures were used? [24 CFR 85.36(d)(1); 24 CFR 570.502(a)(12)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>		

14.

Did the activity qualify for use of small purchase procedures?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>Describe Basis for Conclusion:</b>			

15.

If small purchase procedures were used, is the program participant able to document that it received an adequate number of price or rate quotations from qualified sources? [24 CFR 85.36(d)(1)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>Describe Basis for Conclusion:</b>			

Procurement/Competitive Sealed Bids

16.

Were competitive sealed bids used for this activity? [24 CFR 85.36(d)(2)(i)(B)]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

17.

If competitive sealed bids were used, did the program participant receive two or more responsible bids for the applicable procurement transactions reviewed? [24 CFR 85.36(d)(2)(i)(B)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<b>Describe Basis for Conclusion:</b>	

18.

If the program participant issued Invitations for Bids (IFBs), did the IFBs: <ul style="list-style-type: none"> <li>• include specifications and pertinent attachments; and</li> <li>• clearly define the items or services needed in order for the bidders to properly respond to the invitation?</li> </ul> [24 CFR 85.36(d)(2)(i)(A)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<b>Describe Basis for Conclusion:</b>	

19.

If the answer to question 18 above is “yes,” was the contract awarded to the lowest responsive and responsible bidder? [24 CFR 85.36(d)(2)(i)(D)]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Yes No N/A
<b>Describe Basis for Conclusion:</b>	

20.

Did the program participant ensure that any awards for this activity were not made to any party excluded, disqualified, or otherwise ineligible (e.g., suspension, debarment, or limited denial of participation) for Federal procurement and nonprocurement programs? [24 CFR 570.502(a)(11) and 24 CFR 24.85.35]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

Cost Allowability

21.

Were costs for this activity charged to the CDBG program after subtraction of applicable credits? [24 CFR 570.502(a); OMB Circular A-87, Attachment A, C.4]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

22.

Does your review of a sample of cost transactions show that adequate documentation is maintained to support expenditures? [24 CFR 570.506; 24 CFR 570.502(a); OMB Circular A-87, Attachment A, C.1.j.]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

Financial Management

23.

Does a review of the accounting records for this activity accurately show the source and application of funds for selected transactions? [24 CFR 570.502(a)(4); 24 CFR 85.20]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

24.

Were the expenditures reviewed consistent with the contract for the work? [24 CFR 570.502(a)(4); 24 CFR 85.20]	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Describe Basis for Conclusion:</b>	

25.

Were the funds authorized by the selected transactions supported by records showing the unexpended balance available? [24 CFR 570.502(a)(4); 24 CFR 85.20]	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>		

26.

Were the funds authorized by the selected transactions consistent with amounts entered on the draw down requests in the Integrated Disbursements and Information System (IDIS)? [24 CFR 570.502(a)(4); 24 CFR 85.20]	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>		

27.

For the selected transactions reviewed, were the funds timely disbursed and consistent with amounts authorized for the selected transactions? [24 CFR 570.502(a)(4); 24 CFR 85.20]	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Describe Basis for Conclusion:</b>		

Reporting

28.

<p><b>[OS]</b> Based on the time frame of the monitoring review, are the data in IDIS on this activity, including expenditures, and accomplishments, consistent with program participant records?                  [24 CFR 91.520 and 24 CFR 570.900(b)(3)]</p>	<p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                  Yes No N/A</p>
<p><b>Describe Basis for Conclusion:</b></p>	

Environmental Review

29.

<p>Did the responsible entity complete an environmental review prior to the final commitment of funds (e.g. contract award) for this activity? (If “yes,” include, in your response below, either the effective date of HUD’s Release of Funds or the date of the local determination that the activity was “Categorically Excluded and/or Exempt.”)                  [24 CFR 570.604; 24 CFR 58.22; 58.34; and 58.35(b)]</p>	<p><input type="checkbox"/> <input type="checkbox"/>                  Yes No</p>
<p><b>Describe Basis for Conclusion:</b></p>	