

Bringing It All Together: The Mahoning Valley LEAP Grant Program

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PROGRAM MANAGER**

2008



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New Grantee Orientation Conference

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AREAS OF CONCERN



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AREAS OF CONCERN

1. Goals of Program
2. Staff Needs / Job Duties
3. Working Budgets
4. Realistic milestones and benchmarks to ensure a successful grant
5. Matching / Leveraged Funds



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AREAS OF CONCERN

6. Working Partners / Commitments and Agreements
7. Eligible census tracts / zip codes / targeted areas
8. Written Rules / Guidelines / Operating Procedures
9. Available Financial Assistance
10. Timely implementation of the Work Plan



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AREAS OF CONCERN

11. Environmental Review- tier one
12. Environmental Review- tier two
13. Forms for processing all aspects of the Lead Program
14. Lead Pollution & Professional Liability Insurance
15. Education / Outreach / Marketing approach



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AREAS OF CONCERN

16. Lead Training Program
17. Lead screening approach for children less than six years of age
18. Approach for the recruitment / enrollment of units into Lead Program
19. Request for Proposals necessary to implement the Program
20. Fair Housing / Section 3 approach



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AREAS OF CONCERN

21. Lead Hazard Control Approach involving a combination of interim controls & abatement techniques
22. Grievance Procedures
23. Combination Paint Inspections / Risk Assessments
24. Monitoring of sub-grantees



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AREAS OF CONCERN

25. Relocation Plan / Forms / Issues
26. Development of Lead Hazard Control Work Specifications
27. Owner / Contractor lead hazard control agreement
28. Soliciting lead hazard control work, including unit-priced contracts
29. Bid acceptance & award process



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AREAS OF CONCERN

- 30. Bonding requirements
- 31. Duties of Lead Monitor
- 32. Clearance Examinations
- 33. Payments / Close-out procedures /
Evaluation process
- 34. Approach for On-going Monitoring and
Maintenance of units



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ELEMENTS TO REDUCE / ELIMINATE PROBLEMS



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ELEMENTS TO REDUCE / ELIMINATE PROBLEMS

1. Maintain Detailed Case Records
2. Case File Checklist
3. Written Operational Procedures
4. Grievance Procedure-Written as part of the Lead Hazard Control Work Contract



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ELEMENTS TO REDUCE / ELIMINATE PROBLEMS

5. Applicant signs for having received copy of available financial assistance; lead hazard control work policies and procedures, copy of grievance procedures; and copy of booklet, entitled: “Protect Your Family From Lead In Your Home”



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ELEMENTS TO REDUCE / ELIMINATE PROBLEMS

6. Program accreditation as a training provider
7. Lead Inspection / Risk Assessments- thorough, accurate, and complete.
8. Laboratory- approved by National Lead Laboratory Accreditation Program (NLLAP) and by state.



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ELEMENTS TO REDUCE / ELIMINATE PROBLEMS

9. Owner initials and dates every page of the work specifications
10. Liquidated damages written into LHCW contract (Reward & Punishment)
11. 100% Performance Bond and 100% Payment Bond required for each lead hazard control job



ELEMENTS TO REDUCE / ELIMINATE PROBLEMS

12. Lead Monitor reviews the lead hazard control process
13. All housing units are video-taped prior to lead hazard control work starting
14. Occupants are relocated to lead-safe motels / housing.
15. New deadbolts / lock sets on all exterior doors.



ELEMENTS TO REDUCE / ELIMINATE PROBLEMS

- 16. Documentation of landlord stipulations
- 17. On-Going Monitoring and Maintenance Acknowledgement Form



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OUTREACH AND RECRUITMENT STRATEGIES

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OBSTACLES

One of the biggest obstacles necessary to overcome in building and implementing the lead hazard control program was the lack of respect.

Underlying this lack of respect was the absence of knowledge and understanding on the part of the general community regarding the effects of lead-based paint poisoning on children under six years of age.



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EFFECTIVE DIALOGUE

- Triple Positive Effect
- Pay Now or Pay Later
- Why? (50's and 60's) I'm about your age.... Why wasn't I Lead poisoned?



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OBSTACLES

The alienation of the local landlords regarding lead hazard control work

It is important that the Landlord Association becomes a part of the solution and not the problem.



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OBSTACLES

- The County's Bureaucratic maze has been a stumbling block to the timeliness of the lead hazard control work. (Unit-price contracts)
- Lack of state-licensed lead contractors and state-licensed lead workers.



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OBSTACLES ENROLLMENT OF UNITS

- Working Partnerships
- The Youngstown Area Urban League's summer program
- Schools (Halloween bags)
- Restaurants / Fast Food (Place mats)
- Churches, etc.
- Unified agencies' approach



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COMMUNITY PARTNERS



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WORKING PARTNERSHIPS

- Establish working partnerships with:
 1. Lending Institutions
 2. Faith-Based Organizations
 3. Grass-Roots Organizations
 4. Non-Profit Organizations
 5. Housing Court / Code Enforcement



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WORKING PARTNERSHIPS

6. Health Departments
7. Community Development Housing Agencies
8. Housing Authorities
9. Home Builders / Remodelers
10. Rental Property Owners



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WORKING PARTNERSHIPS

11. Agencies involved with strategic planning to eliminate lead poisoning by 2010
12. Housing material providers
13. Weatherization Programs
14. Hispanic Organizations



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WORKING PARTNERSHIPS

15. Youth Build

16. Training Associations

17. Fair Housing



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PROTECT YOUR CHILDREN FROM LEAD POISONING

SECTION 8 VOUCHERS ARE AVAILABLE FOR LEAD- SAFE HOUSING

Authority is committed to a local preference for a total of one-hundred (100) Housing Choice Vouchers (Section 8 Vouchers) which will allow families with lead-poisoned children or children with elevated blood lead levels **(10mcg/dl or greater, and at least one child under the age of 6 years living in the household)** to be housed in lead-safe housing units. The Program would increase the opportunities for families to secure lead-safe housing in order to protect their children from additional exposure to lead hazards.



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ATTENTION LANDLORDS

FUNDING AVAILABILITY FOR LEAD HAZARD CONTROL WORK

The Mahoning Valley LEAP Grant Program, in conjunction with Huntington Bank , and National City Bank have *funds available* to make your rental units lead-safe if you qualify:

Basic Eligibility Requirements:

- Rental unit must be located in a targeted area
- Tenant must be low or very low-income
- Tenant must have a child under six years of age OR a pregnant woman living in the home OR a child under six years of age who spends a significant amount of time in the unit

The Mahoning Valley LEAP Grant Program will provide the following:

1. A Lead Inspection / Risk Assessment for the rental unit
2. Written lead specifications for the lead hazard control work
3. Funding assistance up to \$6,000 from the LEAP Grant Program
4. Relocation of tenants
5. A clearance examination of the lead hazard control work



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GOVERNMENT

- ✓ **County Commissioners**
- ✓ **Mayor (City of Youngstown)**
- ✓ **Youngstown City Council**
- ✓ **HUD Area Office- Cleveland**
- ✓ **Ohio Department of Health- Columbus**



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COMMUNITY OUTREACH / INTEREST GROUPS

- ✓ Schools (Halloween Bags)
- ✓ Restaurants (Placemats)
- ✓ Churches (Black & Hispanic)
- ✓ Blockwatch Groups (Grass Roots)
- ✓ MYCAP- WIC and Head Start Programs
- ✓ Children Services Board (Foster Care)
- ✓ Health Fairs and other Community Events
- ✓ Dept. of Job and Family Services (Home-based Daycare)
- ✓ Youngstown Area Urban League
- ✓ OCCHA
- ✓ Youngstown Metropolitan Housing Authority (Section 8 Program, Tenant Councils, and Flyers / HAP Payment)
- ✓ Mahoning Valley Landlord Association
- ✓ Youngstown Columbiana Board of Realtors



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OUTREACH METHODS

- Small group meetings
- Community events / fairs
- Door-to-door canvassing
- Referrals from existing programs
- Public Service Announcements
- Media stories, cable TV
- Paid media, ads on billboards, buses, etc.



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OUTREACH METHODS

- Store displays (posters, etc.)
- Brochures / printed materials / flyers
- Visual presentations
- Giveaways
- Mascot
- Cleaning kits / materials
- Web site



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PLANNING

- Strategy: Communication with one voice to the Community about childhood lead poisoning.
- A. Inter-Agency Communications- Demonstrate a united effort and ensure that correct information is disseminated. Other Agencies are the “eyes and ears” for the Lead Program.



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PLANNING

- B. Neighborhood Approaches-Engage in “face-to-face” and “one-on-one” communications to conduct neighborhood lead poisoning forums with grass-roots organizations.
- C. Continue to convene stakeholders-continue the consensus-building, action planning, implementation process among stakeholders.



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NEIGHBORHOOD INVESTMENT



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COOKBOOK APPROACH



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LEAD PROCESS: FROM START TO FINISH

Phase 1: Pre-Interview

_____	Pre-Interview Questionnaire	
_____	LEAP-005	Building / Dwelling Unit / Children
_____	Real Estate Summary	
_____	LEAP-018	Verification of Ownership
_____	Letter to Owner with items to bring on date of interview	
_____	Check if property is eligible for MYCAP Services	

Phase 2: Landlord Interview (LANDLORD #1)

_____	LEAP-007	Lease Agreement-Vacant Property (If Applicable)
_____	LEAP-008	Interview Questionnaire- (Landlord)
_____	LEAP-011A	Authorization to Share Information with Working Partners (Landlord)
_____	LEAP-019A	Optional Form (Landlord)
_____	LEAP-021A	Acknowledgement of Temporary Relocation (Landlord)
_____	LEAP-022A	Landlord Receipt
_____	LEAP-063	Acknowledgement of Non-Guarantee of Funding
_____	LEAP-080	Affidavit (Landlord) (If going through the Bank)



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LEAD PROCESS: FROM START TO FINISH

(Phase 2 Continued)

Documents needed from Landlord:

- _____ Deed
- _____ Rental Agreement
- _____ Rent Receipt
- _____ Insurance

Give the following to Landlord:

- _____ LEAP-002 Lead Hazard Control Policies and Guidelines
- _____ LEAP-020 Grievance Procedures
- _____ Lead Pamphlet
- _____ Step-By-Step Procedure of Lead Loan Program
- _____ Bank Contact List (If Applicable)
- _____ MYCAP Services
- _____ List of Items Needed (If applicable)
- _____ Copies of forms signed

LEAP Staff ONLY

- _____ Request Flood Plain / Historic Review
- _____ Set up Tenant Interview & Send letter of items to bring on date of interview



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LEAD PROCESS: FROM START TO FINISH

Phase 3: Tenant Interview (TENANT #1)

_____	LEAP-010	Interview Questionnaire- (Tenant)
_____	LEAP-011B	Authorization to Share Information with Working Partners (Tenant)
_____	LEAP-012	Release of Information
_____	LEAP-013	Request for Verification of Benefits
_____	LEAP-014	Request for Verification of Employment
_____	LEAP-015	Banking Information
_____	LEAP-016	Request for Verification of Deposit
_____	LEAP-019B	Optional Form (Tenant)
_____	LEAP-021B	Acknowledgement of Temporary Relocation (Tenant)
_____	LEAP-022B	Tenant Receipt
_____	LEAP-029	Affidavit (Tenant) (If Applicable)
_____	LEAP-044	General Information Notice
_____		CDA Request for Verification of Benefits
_____		CDA Request for Verification of Employment
_____		MYCAP (HEAP Application)
_____		MYCAP LANDLORD/TENANT Agreement (If Applicable) (For Tenant's Signature)



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LEAD PROCESS: FROM START TO FINISH (Phase 3 Continued)

Documents needed from Tenant:

- _____ Renter's Insurance (If Applicable)
- _____ Utility Bills: (_____ Light Bill _____ Gas Bill _____ Water Bill)
- _____ Birth Certificates
- _____ Social Security Cards
- _____ Photo Identification Cards
- _____ Medical Cards
- _____ Blood Levels of Children Under Six Years of Age (Within Last Six Months & Prior to Lead Hazard Control Work)

Give the following to Tenant

- _____ Lead Pamphlet
- _____ List of Items Needed (If applicable)
- _____ Copies of forms signed

LEAP Staff ONLY

- _____ Mail Verification of Income Forms



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LEAD PROCESS: FROM START TO FINISH

Phase 4: Landlord/Tenant Eligibility

LEAP Staff ONLY

- _____ Request Letter from Bank (If Applicable) (Follow-Up within 2 weeks)
- _____ LEAP-035 Loan / Grant / Matching Funds Worksheet
- _____ Fax or Mail LEAP-078 Permission to Perform a Paint Inspection / Risk Assessment to Landlord (after Tenant / Landlord is Eligible)
- _____ Compile CDA Checklist (If Applicable)
- _____ Compile MYCAP Checklist (If Applicable)

Phase 5: Request Reports (LANDLORD #1B)

- _____ LEAP-078 Permission to Perform a Paint Inspection / Risk Assessment (Fax copy acceptable with original to follow)

LEAP Staff ONLY

- _____ Request Paint Inspection / Risk Assessment (after you have landlord's signature on LEAP-078)
- _____ Request Lead Specs (after you receive paint inspection / risk assessment report)
- _____ Send CDA Packet and Request Rehab Specs (after you receive lead specs & have all documents on CDA Checklist)



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LEAD PROCESS: FROM START TO FINISH

Phase 6: Specs Sign-Off/Request For Bid (LANDLORD #2)

- _____ LEAP-028 Acceptance of Specifications and Work Estimate
- _____ Initial and date Lead Specs
- _____ Initial and date Rehab Specs (If applicable)
- _____ MYCAP LANDLORD / TENANT Agreement (If Applicable)
- _____ Bank Check for \$195.00 Payable to MYCAP (If Applicable)

LEAP Staff ONLY

- _____ Obtain CDA Approval (If Applicable)
- _____ Fax Request For Bids (If Applicable)
- _____ Log Request For Bids (If Applicable)
- _____ Complete LEAP-074 Bid / Quote Tabulation Sheet (If Applicable)
- _____ Mail LEAP-045 Notice of Non-Displacement to Tenant
- _____ Send MYCAP Packet (after you receive all documents on MYCAP Checklist)



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LEAD PROCESS: FROM START TO FINISH

Phase 7A: Landlord Acceptance of Contractor (LANDLORD #3)

_____	LEAP-034	Acceptance of Contractor (Landlord)
_____	LEAP-038	Compliance with Stipulations- Rental Property
_____	LEAP-039	Owner / Contractor Agreement Contract (for Landlord's signature)
_____		Bank Check for Landlord's share of cost of lead hazard control work (Only Applicable if not going through the bank)
_____	LEAP-041	Notice to Proceed (for Landlord's signature)

Give the following to the Landlord:

- _____ Copy of forms signed (if forms have required signatures)
- _____ Check Receipt (If Applicable)



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LEAD PROCESS: FROM START TO FINISH

Phase 7B: Contractor Acceptance of Job (CONTRACTOR #1)

_____	LEAP-033	Contractor Acceptance: _____ Bid (LEAP-033A) _____ Non-Bid (LEAP-033B) (Contractor)
_____	LEAP-039	Owner / Contractor Agreement Contract (for Contractor's Signature)
_____	LEAP-041	Notice to Proceed (for Contractor's signature)

Give the following to the contractor:

- _____ Contractor's Checklist of Items Needed
- _____ Copy of Lead Specs
- _____ Copy of Rehab Specs (If Applicable)
- _____ Copy of Paint Inspection / Risk Assessment
- _____ Copy of forms signed (if forms have required signatures)

LEAP Staff ONLY

- _____ Send LEAP-030 to Successful Bidder (If Applicable)
- _____ Send LEAP-031 to Non-Successful Bidder (If Applicable)
- _____ Fax Request for Video Tape
- _____ Notify Inspector of Job Start Date
- _____ Set up Tenant Relocation Interview
- _____ Ask Tenant to Bring items needed (If Applicable)



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LEAD PROCESS: FROM START TO FINISH

Phase 8: Tenant Relocation Interview (TENANT #2)

____ LEAP-047 Preparing For Relocation
____ Tenant Agrees To

Give the following to tenant:

____ LEAP-046 Notice to Move
____ Copies of forms signed

LEAP Staff ONLY

____ Ensure Income Verification is within 6 months prior to start of Lead Hazard Control Work
____ Ensure Blood Lead levels are within 6 months prior to start of Lead Hazard Control Work
____ Make Hotel Reservations
____ Request Meal Vouchers
____ Send Fax to Restaurants
____ Mail Hotel Reservation Confirmation & Meal Vouchers to Tenant



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LEAD PROCESS: FROM START TO FINISH

Phase 9: Before Job Starts

Documents needed from Contractor:

- _____ 10-Day Notice to State
- _____ Pre-Abatement Plan
- _____ Lead Licensure- State of Ohio
- _____ Contractor Bonding (_____ Performance _____ Payment)
- _____ General Liability Insurance- \$1,000,000
- _____ Vehicle Insurance- \$1,000,000
- _____ Worker's Compensation Certificate

Phase 10: Job Starts

- _____ LEAP-048 Change Order (If Applicable)



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LEAD PROCESS: FROM START TO FINISH

Phase 11: Clearance

LEAP Staff ONLY

- _____ Fax Request for Clearance to Paint Inspector / Risk Assessor
- _____ Complete Clearance Contact List
- _____ LEAP-051 Clearance Examination
- _____ Certificate of Post-Abatement Clearance
- _____ Keys to Tenant
- _____ Set up Contractor / Landlord Interview to sign final forms
- _____ Contractor's List of Items Needed
- _____ Make copies of the following reports for case completion packet: (_____ Paint Inspection / Risk Assessment _____ Lead Specs _____ Rehab Specs (If Applicable) _____ Clearance Report)



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LEAD PROCESS: FROM START TO FINISH

Phase 12A: Inspector Final Forms (INSPECTOR #1)

____ Punch List (If Applicable)
____ LEAP-056 Satisfaction of Completed Work (for Inspector's signature)
____ LEAP-066 Monitoring of Lead Hazard Control Work (Inspector)

Phase 12B: Contractor Final Forms (CONTRACTOR #2)

____ LEAP-053 Contractor's Request for Payment (for Contractor's signature)
____ LEAP-055 Contractor's Report (Contractor)
____ LEAP-057 Contractor's Guarantee (Contractor)
____ Contractor's Invoice
____ Waste Disposal Receipt
____ Copies of Required permits: (_____ Building _____ Electrical _____ Heating _____ Plumbing)



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LEAD PROCESS: FROM START TO FINISH

Phase 12C: Landlord Final Forms (LANDLORD #4)

_____	LEAP-054	On-Going Monitoring & Maintenance Acknowledgement Form (Landlord)
_____	LEAP-056	Satisfaction of Completed Work (for Landlord's signature)
_____	LEAP-061	Case Completion Acknowledgement (Landlord & Leap Staff)

LEAP Staff ONLY

- _____ Make copies of the following forms and add to case completion packet: (___LEAP-055 Contractor's Report ___LEAP-054 On-Going Monitoring & Maintenance Acknowledgement)
- _____ Give copies of forms signed to appropriate parties
- _____ Request CDA Satisfaction of Completed Work (If Applicable)
- _____ LEAP-060 Disposition of Funds



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LEAD PROCESS: FROM START TO FINISH

Phase 13: Payments

LEAP Staff ONLY

Give a copy the following completed forms to Fiscal Officer:

_____	LEAP-039	Owner / Contractor Agreement Contract
_____	LEAP-053	Contractor's Request for Payment
_____	Contractor's Invoice	
_____	LEAP-056	Satisfaction of Completed Work (Owner & Inspector)
_____	CDA Satisfaction of Completed Work (If Applicable)	
_____	Certificate of Post-Abatement Clearance	



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LEAD PROCESS: FROM START TO FINISH

Phase 14: In-House Reporting

LEAP Staff ONLY

Give a copy of the following completed forms to Program Manager :

- _____ LEAP-005 Building / Dwelling Unit / Children
- _____ LEAP-036 Receipt of Leveraged Funds
- _____ Information regarding units completed and cleared

Phase 15: File Close-out

- _____ Complete File Checklist and give file to Lead Coordinator for file review



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CASE FILE CHECKLIST

LEAP FORMS

_____	LEAP-005	Building / Dwelling Unit / Children
_____	LEAP-007	Lease Agreement-Vacant Property
_____	LEAP-008	Interview Questionnaire- (Landlord)
_____	LEAP-010	Interview Questionnaire- (Tenant)
_____	LEAP-011A	Authorization to Share Information with Working Partners (Landlord)
_____	LEAP-011B	Authorization to Share Information with Working Partners (Tenant)
_____	LEAP-012	Release of Information
_____	LEAP-013	Request for Verification of Benefits
_____	LEAP-014	Request for Verification of Employment
_____	LEAP-015	Banking Information
_____	LEAP-016	Request for Verification of Deposit
_____	LEAP-018	Verification of Ownership
_____	LEAP-021A	Acknowledgement of Temporary Relocation (Landlord)
_____	LEAP-021B	Acknowledgement of Temporary Relocation (Tenant)
_____	LEAP-022A	Landlord Receipt
_____	LEAP-022B	Tenant Receipt
_____	LEAP-028	Acceptance of Specifications and Work Estimate
_____	LEAP-029	Affidavit (Tenant)
_____	LEAP-030	Successful Bidder's Form (If Applicable)
_____	LEAP-031	Non-Successful Bidder's Form (If Applicable)
_____	LEAP-033	Contractor Acceptance: _____ Bid (LEAP-033A) _____ Non-Bid (LEAP-033B)
_____	LEAP-034	Acceptance of Contractor (Landlord)
_____	LEAP-035	Loan / Grant / Matching Funds Worksheet
_____	LEAP-036A	Receipt of Leveraged Funds
_____	LEAP-038A	Compliance with Stipulations- Rental Property
_____	LEAP-039	Owner / Contractor Agreement Contract
_____	LEAP-041	Notice to Proceed
_____	LEAP-044	General Information Notice
_____	LEAP-045	Notice of Non-Displacement
_____	LEAP-046	Notice to Move
_____	LEAP-047	Preparing For Relocation
_____	LEAP-051	Clearance Examination
_____	LEAP-053	Contractor's Request for Payment
_____	LEAP-054	On-Going Monitoring & Maintenance Acknowledgement Form
_____	LEAP-055	Contractor's Report
_____	LEAP-056A	Satisfaction of Completed Work
_____	LEAP-057	Contractor's Guarantee
_____	LEAP-060	Disposition of Funds
_____	LEAP-061A	Case Completion Acknowledgement
_____	LEAP-063	Acknowledgement of Non-Guarantee of Funding
_____	LEAP-066	Monitoring of Lead Hazard Control Work
_____	LEAP-074	Bid / Quote Tabulation Sheet
_____	LEAP-078	Permission to Perform a Paint Inspection / Risk Assessment
_____	LEAP-080	Affidavit (Landlord)

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CASE FILE CHECKLIST

DOCUMENTS/REPORTS

- _____ Pre-Interview Questionnaire
- _____ Real Estate Summary
- _____ Deed
- _____ Rental Agreement: (_____ Lease _____ Recorded Land Contract)
- _____ Rent Receipt
- _____ Insurance: (_____ Home Owner's Insurance _____ Renter's Insurance)
- _____ Utility Bills: (_____ Light Bill _____ Gas Bill _____ Water Bill)
- _____ Birth Certificates
- _____ Social Security Cards
- _____ Photo Identification Cards
- _____ Medical Cards
- _____ Blood Levels of Children Under Six Years of Age (Within Last Six Months & Prior to Lead Hazard Control Work)
- _____ CDA Verification Forms: (_____ Employment _____ Benefits)
- _____ Environmental Reviews: (_____ Flood Plain Review _____ Historic Review _____ CDA)
- _____ Paint Inspection / Risk Assessment
- _____ Letter from Bank (If Applicable)
- _____ Work Specifications: (_____ Lead Work Specs _____ CDA Rehabilitation Work Specs)
- _____ Bid Proposals / Sealed Bids
- _____ Copy of State Licenses for Lead Contractors / Supervisor
- _____ Required Contractor Bonding: (_____ Performance _____ Payment)
- _____ Required permits: (_____ Building _____ Electrical _____ Heating _____ Plumbing)
- _____ Required Insurance: (_____ General Liability (\$1,000,000) _____ Vehicle (\$1,000,000)
- _____ Worker's Compensation Certificate
- _____ Pre-Abatement Plan
- _____ Notification to State
- _____ Waste Disposal Receipt
- _____ Punch List
- _____ Certificate of Post-Abatement Clearance
- _____ CDA Satisfaction of Completed Work
- _____ Contractor Invoice



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TOP PROBLEM AREAS



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TOP PROBLEM AREAS FOR GRANTEES

- Staying on target with your grant's benchmarks and deliverables / milestones
- Having and maintaining a written Operational Policies and Procedures Manual
- Complying with Environmental Reviews: Completion, Documentation, Submission
- Tracking and Accounting for Grant Funds



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BENCHMARKS

1. Unit Enrollment
2. Paint Inspections / Risk Assessments
3. Units Completed and Cleared
4. Outreach Programs
5. Training Programs
6. LOCCS Drawdown
7. Matching / Leveraged Funds



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WRITTEN OPERATIONAL PROCEDURES

1. Eligibility
2. Program Marketing
3. Unit Selection
4. Expediting Work on homes occupied by children with elevated blood lead levels
5. Paint Inspections / Risk Assessments
6. Development of Specifications
7. Pre-Hazard Control blood lead testing
8. Available Financing
9. Procurement
10. Temporary Relocation
11. Clearance Examinations



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1. Description of project (Work Plan)
2. Minor Rehabilitation Environmental Review
3. Area of Consideration
4. Exception to 8-Step Floodplain Process
5. Environmental Review Process completed for previous Lead Hazard Control Grant on November 23, 2004 (48 Pages)
6. Identification of Trends that are likely to continue in the absence of the Project
7. Potential Environmental Impacts
8. Eliminate or minimize adverse Environmental Impacts
9. Appendix A Review
10. Finding of No Significant Impact (FONSI)
11. Request for Release of Funds and Certification- Five Communities
12. Determination of Exemption for HUD funded projects- Five Communities
13. Notice of Intent to Request Release of Funds- Youngstown Vindicator (City of Youngstown, Boardman Township, City of Campbell, and City of Struthers) and the Akron Beacon Journal (City of Akron)
14. Anticipated Release of Funds Date



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TOP PROBLEM AREAS FOR GRANTEES

- Amending the Grant Contract
- Developing and presenting documentation of Matching / Leveraged Funds
- Obtaining / Documenting: Children under six years of age and household income with third-party verification
- Documenting and monitoring landlord stipulations after the completion and clearance of the lead hazard control work



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AMENDING / MODIFYING THE GRANT CONTRACT

- Extension of Grant Period
- Change in budget above 10% of total over life of the grant
- Change in number of completed units
- Change in key personnel
- Change in the amount of matching / leveraged funds
- Other significant changes



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DOCUMENTATION OF LANDLORD'S STIPULATIONS

A. Good Faith effort to rent to a family that has a child under six years of age

1. Sign placed in front yard that states “Property is lead-safe and ideal for a family that has a child under six years of age” (picture of sign will be placed in case file).
2. Proof of contact with local Health Department for referrals of appropriate families.
3. Proof of contact with Public Housing Authority’s Section 8 Program for referrals of appropriate families.



DOCUMENTATION OF LANDLORD'S STIPULATIONS

B. Monitoring of Rent-Control

1. Every six months during the three-year period, following the completion and clearance of the lead hazard control work, the tenant will be contacted to verify the amount of rent paid (a rent receipt will be placed in the case file).



TOP PROBLEM AREAS FOR GRANTEES

- Entering, monitoring and documenting agreements with sub-grantees
- Monitoring and documenting contractors' use of lead-safe work practices
- Adhering to Guidelines: Paint Inspections, Risk Assessments, and Clearances



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RELOCATION



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RELOCATION ELEMENTS

- Relocation Notices
- Forms
- Provide Lead-Safe Housing- Hotel / Motel / Other Housing Units
- Meals
- Transportation
- Security
- Clearance
- Other



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**ACKNOWLEDGEMENT OF REQUIREMENT FOR
TEMPORARY RELOCATION WHILE THE LEAD
HAZARD CONTROL WORK IS
BEING PERFORMED**

I have been informed by the **Lead Grant Program**, that as a result of the lead hazard control work being performed, I or my tenant(s) must be temporarily relocated during this process.

Owner-Occupant/Landlord

Date



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**ACKNOWLEDGEMENT OF REQUIREMENT FOR
TEMPORARYRELOCATION WHILE THE LEAD
HAZARD CONTROL WORK IS
BEING PERFORMED**

I have been informed by the **Lead Grant Program**, that as a result of the lead hazard control work being performed, must be temporarily relocated during this process.

Tenant

Date



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GENERAL INFORMATION NOTICE

Date: _____

Case No: _____

Dear _____:

This notice is to inform you that, if assistance is provided and your rental unit receives lead hazard control work, you will not be displaced. Therefore, we urge you not to move anywhere at this time. (If you do elect to move for reason of your choice, you will not be provided relocation assistance.)

If your unit is approved for lead hazard control work, you may have to move temporarily so that the lead hazard control work can be completed. Suitable housing and meals will be made available to you for a temporary period.

Again, we urge you not to move. You can be sure that we will make every effort to accommodate your needs. Because Federal assistance would be involved, you would be protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

This letter is important and should be retained. You will be contacted soon; in the meantime, if you have any questions about our plans, please contact us at (330) 259-9079.

Sincerely,

Name

Title



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NOTICE OF NON-DISPLACEMENT

Date: _____

Case No: _____

Dear _____:

This is a **notice of non-displacement**. You will not be required to move permanently as a result of the lead hazard control work. This notice guarantees you the following:

If you must move temporarily so that lead hazard control work can be completed, suitable housing and meals will be made available to you for a temporary period. The temporary unit will be decent, safe and sanitary, and all other conditions of the temporary move will be reasonable.

If you elect to move for your own reasons, you will not receive any relocation assistance. We will make every effort to accommodate your needs. Because Federal assistance is involved, you are protected by the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended.

This letter is important and should be retained. You will be contacted soon; in the meantime, if you have any questions about our plans, please contact us at (330) 259-9079.

Sincerely,

Name

Title



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NOTICE TO MOVE (Temporary Move Off-Site)

Date: _____

Case No: _____

Dear _____:

On _____, you were provided a Notice of Non-displacement. As you were advised in that Notice and now that lead hazard control work is ready to commence on your residence, you will be required to move for a temporary period of time. As of _____ your new temporary address will be: _____.

Please note that this date is approximate. Once the lead hazard control work is completed, you will be returned to your former residence.

In compliance with HUD regulations, The Lead Grant Program will pay for suitable housing and meals for a temporary period.

This letter is important and should be retained. Please contact _____ at _____ to discuss your pending move and any special needs you may have.

Sincerely,

Name

Title



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PREPARING FOR RELOCATION

Case No: _____

Name of Relocatee _____

Address: _____

Hotel: _____

Contractor's Name: _____

- **Remove** all items from counter tops, tables and stove (dishes must be out of sink).
- **Refrigerators** – Refrigerators should be emptied of all food likely to spoil and cleaned prior to moving out. If this is not done, you may encounter a smelly refrigerator upon your return.
- **Remove** all items from mantels and shelves.
- **Remove** pictures or any wall hanging from walls.
- **Fold** and remove area rugs, runners, and mats.
- **Store** all loose items and stack away from walls and windows.
- **Security** issues discussed: (Circle One) Yes No
- DISCUSSED NOT LEAVING VALUABLES (Circle One) Yes No
- **Secure all valuables** (TV / VCR / Jewelry, Microwave, etc.)
- Since contracting work is between the contractor and the tenant, **NOT the Lead Grant Program**, the client should discuss all security issues with the Contractor.
- Occupant should remove all valuables or leave them with family or friends. Any loss will have to be covered by the renter's insurance. **The Lead Grant Program has no liability.** Do you have Renter's Insurance? (Circle One) Yes No



Tenant's
Initials: _____

Date: _____



Preparing for Relocation (Continued)

Number of family members to relocate:

Number of Adults: _____

Number of Children: _____

Children's Ages: _____

Number of rooms needed? _____

Check in date: _____

Number of estimated days: _____

Discussed any special Needs

No movies or long-distance calls available. Breakfast, lunch and dinner will be provided at no cost for each eligible family member who stays at the _____

I understand that this information will be provided to the (Hotel) for the purpose of establishing reservations for the relocation time period. The Lead Grant Program has my permission to share this information with the _____

The Lead Grant Program's relocation expectations have been shared with me. I understand the contents of this form.

Client's Signature

Date



Preparing for Relocation (Continued)

Hotel Accommodations Accepted? (Circle One) Yes No

Tenant's
Initials: _____

Date: _____

IF YOU HAVE REFUSED TO ACCEPT THE HOTEL ACCOMMODATIONS; WHERE WILL YOU BE STAYING?

Name of family you will be staying with

Address of family you will be staying with

Telephone number where you can be reached

**I HAVE BEEN OFFERED ACCOMMODATIONS AT THE _____
FOR THE DURATION OF THE LEAD HAZARD CONTROL PROCESS, AND I HAVE CHOSEN NOT TO ACCEPT THE OFFERED ACCOMMODATIONS. I WILL BE
STAYING AT THE ABOVE ADDRESS FOR THE DURATION OF THE LEAD HAZARD CONTROL PROCESS.**

Client's Signature

Date



REQUEST FOR PROPOSAL- RELOCATION SERVICES

- Occupant Relocation Begins Monday Morning
- No Motel Costs for the Night Prior to Relocation
- No Motel Costs for the day of Clearance (if achieved)
- Daily / Weekly Rates
- Transportation Services
- Motel / Hotel Risk Assessment Completed
- Refrigerators and Cribs Available
- Limited Phone Calls (local)



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OTHER RELOCATION ISSUES

Security:

- Video-taping of each unit prior to relocation
- Install new exterior locks and deadbolts

Sharing of Costs:

- Community Development Agency and the CHIP Program have shared 50% of the relocation costs.

Laboratory:

- Laboratory turnaround time for clearance is 4-6 hours.



24CFR Part 35, et al.

35.1345 OCCUPANT PROTECTION AND WORKSITE PREPARATION

Occupants shall be temporarily relocated before and during hazard reduction activities to a suitable, decent, safe and similarly accessible dwelling unit that does not have lead-based paint hazards, except if:

- Treatment will not disturb lead-based paint, dust-lead hazards or soil-lead hazards;
- Only the exterior of the dwelling unit is treated, and windows, doors, ventilation intakes and other openings in or near the worksite are sealed during hazard control work and cleaned afterward, and entry free of dust-lead hazards, soil-lead hazards, and debris is provided;



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24CFR Part 35, et al.

35.1345 OCCUPANT PROTECTION AND WORKSITE PREPARATION (Continued)

- Treatment of the interior will be completed within one period of 8-daytime hours, the worksite is contained so as to prevent the release of leaded dust and debris into other areas, and treatment does not create other safety, health or environmental hazards (e.g., exposed live electrical wiring, release of toxic fumes, or on-site disposal of hazardous waste); or
- Treatment of the interior will be completed within 5 calendar days, the worksite is contained so as to prevent the release of leaded dust and debris into other areas, treatment does not create other safety, health or environmental hazards; and, at the end of the work on each day, the worksite and the area within at least 10 feet (3 meters) of the containment areas is cleaned to remove any visible dust or debris, and occupants have safe access to sleeping areas, and bathroom and kitchen facilities.



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“FOREVER IS NOT AS LONG
AS IT USED TO BE”



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SLICE OF TIME

ON-GOING MONITORING AND MAINTENANCE ACKNOWLEDGEMENT FORM



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ON-GOING MONITORING AND MAINTENANCE ACKNOWLEDGEMENT FORM

DATE: _____

PHONE: _____

PROPERTY OWNER(s): _____

PROPERTY ADDRESS: _____

I/We, the undersigned have been informed by the Mahoning Valley LEAP Grant Program of the need for on-going monitoring of the completed lead hazard control work and of the known leaded components which are presently intact.

I/We, understand that a Certificate of Post-Abatement Clearance only represents a period of time, and does not guarantee that the housing unit will continue to be lead-safe (Examples are an enclosure of a leaded component that is breached which now exposes the leaded component, or a water leak which disturbs a component that was previously intact and is now a lead hazard).

I/We further understand that it is my/our responsibility to monitor and maintain leaded components in order to keep the housing unit lead-safe.

OWNER

DATE

OWNER

DATE

LEAP-054



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HELPFUL ADVICE

- ✓ KNOW YOUR COMMUNITY
- ✓ MAINTAIN FLEXIBILITY IN GRANT APPROACH
- ✓ HUD AND YOUR GTR WANT YOU TO SUCCEED
- ✓ LEAD HAZARD CONTROL AND HEALTHY HOMES GRANTS ARE “DOABLE”



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PROTECT OUR CHILDREN



If our Healthy Homes and Lead Grants are carried out in an effective and timely manner, the real winners will be the children of our communities.



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