

CDBG Grantee: _____

Grantee Representative: _____

Date of Review: _____

GOED Reviewer: _____

Project Name: _____

CDBG Grant Number: _____

National Objective: _____

Grant Category: _____

The objective of grant monitoring is twofold: to check grantee files for completeness under the following headings and to progress towards close out of the grant.

A. APPLICATION

- | | | |
|---|-----|----|
| 1. Is original application and any supplementary information on file? | Yes | No |
| 2. Does file contain evidence of public participation process, including minutes of the meetings? | Yes | No |
| 3. Are any citizen inquiries, complaints and correspondence regarding citizen concern on file? | Yes | No |
| 4. Is a copy of the Housing & Community Development Needs Assessment on file? | Yes | No |
| 5. Any other relevant correspondence? | Yes | No |

B. FINANCIAL MANAGEMENT

- | | | |
|---|-----|----|
| 1. What is the amount of the award? \$ _____ | | |
| 2. Is the grant award on file? ____/____/____ | Yes | No |
| 3. Does the file contain letter from: | | |
| a. The Governor? ____/____/____ | Yes | No |
| b. The GOED Office? ____/____/____ | Yes | No |
| 4. Is there a clear working budget in the file? | Yes | No |
| 5. Is there a Notice to Proceed in the file (may be in the Environmental Section)? | Yes | No |
| 6. Does the file contain a Certification for authorized signature(s)? | Yes | No |
| 7. Were any budget changes requested/approved? | Yes | No |
| 8. Is there supporting evidence of budget change requests/approvals? | Yes | No |
| 9. Is there a request for a grant expiration extension? | Yes | No |
| 10. If the grant was extended, are the extensions recorded and on file? | Yes | No |
| a. Provide Details of the extensions: _____ | | |
| | | |
| 11. Was the first draw down within 9 months of award? ____/____/____ | Yes | No |
| 12. Are all Draw Requests on file with corresponding invoices or proof of expenditure(s) on file? | Yes | No |
| a. Are copies of checks/direct deposits from GOED on file? | Yes | No |
| b. Are copies of checks/warrants to sub-recipients/vendors on file? | Yes | No |
| 13. Are quarterly reports on file and up to date? | Yes | No |
| a. Are any missing? | Yes | No |
| b. If missing, which quarters/dates? _____ | | |

- | | | |
|---|-----|----|
| 14. Were any funds de-obligated on this grant? | Yes | No |
| a. If yes, what amount? _____ | | |
| b. Does the grant award reflect this revision? | Yes | No |
| 15. Is there a Final Financial Report on file? ____/____/____ | Yes | No |
| 16. Is there a Final Financial Summary on file? ____/____/____ | Yes | No |
| 17. Is there an Audit/Disallowed Cost Certification on file? ____/____/____ | Yes | No |
| 18. Is there other relevant correspondence? | Yes | No |
| 19. Is the current audit in the file? (Single Audit Act) | Yes | No |

General comments on **Financial Management**: _____

C. ENVIRONMENTAL REVIEW RECORD

_____ 1. For **Exempt** Projects:

- | | | |
|---|-----|----|
| a. Is the LERD on file? ____/____/____ | Yes | No |
| b. Is Finding of Exemption Letter on file? ____/____/____ | Yes | No |
| c. Is Notice to Proceed on file? ____/____/____ | Yes | No |

_____ 2. For **Categorically Excluded, Not Subject to 58.5** Projects:

- | | | |
|---|-----|----|
| a. Is the LERD on file? ____/____/____ | Yes | No |
| b. Is the Statutory Worksheet on file? ____/____/____ | Yes | No |
| c. Is Notice to Proceed on file? ____/____/____ | Yes | No |

_____ 3. For **Categorically Excluded, Subject to 58.5** Projects:

- | | | |
|---|-----|----|
| a. Are copies of letters sent out to reviewing agencies (with project description and map) on file? | Yes | No |
| b. Are responses received from reviewers on file? | Yes | No |
| c. Is the Statutory Worksheet on file? | Yes | No |
| d. Were there any issues requiring mitigation? | Yes | No |
| 1. If NO : Did the project convert to Exempt status? | Yes | No |
| i. Is the authority to use grant funds in the file? | Yes | No |

2. If **YES**: What steps were taking to mitigate? _____

- | | | |
|---|-----|----|
| i. Are the records on file? | Yes | No |
| ii. Was the NOI/ROF published/sent to CDBG/filed? | Yes | No |
| iii. Was the ROF/Certification sent to CDBG/filed? | Yes | No |
| | | |
| e. Is the authority to use grant funds in file? | Yes | No |
| f. Is the LERD on file? ____/____/____ | Yes | No |
| g. Is the Notice to Proceed on file? ____/____/____ | Yes | No |
| h. Is the ERR complete? | Yes | No |

1. If not, what is required? _____

_____ 4. For projects requiring an **Environmental Assessment**:

- | | | |
|---|-----|----|
| a. Are copies of letters sent out to reviewing agencies (with project description and map) on file? | Yes | No |
| b. Are responses received from reviewers on file? | Yes | No |
| c. Is the HUD Environmental Assessment Form complete/filed? | Yes | No |
| d. Were there any issues requiring mitigation? | Yes | No |

1. If **NO**:

- | | | |
|--|-----|----|
| i. Was the FONSI & NOI/ROF published/sent to CDBG/filed? | Yes | No |
| ii. Was the ROF/Certification sent to CDBG/filed? | Yes | No |

2. If **YES**: What steps were taking to mitigate? _____

- | | | |
|---|-----|----|
| i. Are the records in the file? | Yes | No |
| ii. Was the NOI/ROF published/sent to CDBG/filed? | Yes | No |
| iii. Was the ROF/Certification sent to CDBG/filed? | Yes | No |
| | | |
| e. Is the authority to use grant funds in the file? | Yes | No |
| f. Is the Notice to Proceed on file? ____/____/____ | Yes | No |
| g. Is the ERR complete? | Yes | No |

1. If "No", what is required? _____

4. General comments on **Environmental Review**: _____

D. PROCUREMENT PROCESS

1. Did the project involve a bidding process for service provider(s)/contractors?

Yes

No

If **NO**: Why not? _____

2. For **Service Provider(s)** (i.e. Architect/Engineer/Consultant):

a. Was a RFQ/RFP used?

Yes

No

1. If not, what method was used? _____

2. What documents are in the file in support this method? _____

b. If **YES**: Do the files contain:

1. The RFQ?

Yes

No

2. The RFP?

Yes

No

3. Evidence that the grantee made special efforts to target local, LMI, minority and/or women owned firms?

Yes

No

4. Evidence of selection process?

Yes

No

5. Evidence of City/County approval (minutes)? ____/____/____

Yes

No

6. Evidence of debar check performed by CDBG prior to contracting service provider? ____/____/____

Yes

No

7. The MBE Form?

Yes

No

8. A copy of the final contract with the service provider?

Yes

No

3. For **Contractors**:

a. Is the bid package a part of the grantee's grant file?

Yes

No

b. Is there evidence in file that bid process was advertised, open, and competitive according to NRS?

Yes

No

c. Is there evidence that grantee made special efforts to target local, LMI, minority, and women-owned firms?

Yes

No

d. Evidence in file that bid package reviewed by CDBG staff?

Yes

No

e. Does the bid package contain all requisite CDBG documents?

Yes

No

f. Was a 10-day wage check requested? ____/____/____

Yes

No

g. What wage rates were included in bid package? ____/____/____; _____

h. Are these in the file with the bid package?

Yes

No

i. What was the opening date of the bid(s)? ____/____/____

j. Does the file contain a bid summary/tabulation of bids received?

Yes

No

k. Is there a record of an appropriate contractor selection process

Yes

No

l. Is there evidence of City/County approval for contractor (minutes)?

Yes

No

m. Is there evidence of debar check performed by CDBG prior to contracting service provider?	Yes	No
n. Is the MBE on file?	Yes	No
o. Does file contain a copy of the final contract with contractor?	Yes	No
_____ p. If project is 100k+, is the Section 3 form on file?	Yes	No

4. General comments on **Procurement**: _____

_____.

E. CONTRACTOR MANAGEMENT & LABOR COMPLIANCE

1. Is the Grantee Notification of Contractors/Subcontractors form on file and was it sent to GOED?	Yes	No
2. Is Wage Comparison Worksheet on file for all contractors and subcontractors and was it sent to GOED?	Yes	No
3. Does the WCWS reflect wage rates in the bid package (D 3a)	Yes	No
4. Was a pre-construction conference held? ____/____/____	Yes	No
a. Were minutes kept and are they in the file?	Yes	No
5. Does the contract contain signed copies of all the requisite CDBG certifications?	Yes	No
6. Is there evidence that contractor made special efforts to target advertisements of employment opportunities to local, LMI, minority, and female potential applicants?	Yes	No
7. Is there evidence that the grantee received, checked, and signed weekly payrolls and statements of compliance?	Yes	No
8. Were workers paid weekly and with no improper deductions?	Yes	No
9. If workers were not paid correctly, what steps were taken by the grantee? _____		

10. Did grantee receive any labor complaints?	Yes	No
If YES , What were the details of the complaint(s)? _____		

1. Were investigations done in a timely matter?	Yes	No
2. Were complaints referred to GOED?	Yes	No
3. Was a resolution reached?	Yes	No
4. Do the files reflect the resolution?	Yes	No

11. Were wages and Davis Bacon posters posted at the work site(s)?	Yes	No
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12. Were worker interviews conducted?	Yes	No
---------------------------------------	-----	----

a. If YES:

1. Number of times?	_____
2. Number of persons?	_____
3. Which classifications?	_____

4. Were the appropriate HUD forms completed and filed?	Yes	No
--	-----	----

If NO: Why not? _____

13. Is the Final Wage Compliance Report on file? ____/____/____	Yes	No
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14. General comments on **Contractor Management and Labor Compliance:** _____

F. PROJECT BENEFITS

1. Were all activities carried out as described in the application?	Yes	No
2. Do the activities demonstrate that the project meets the national objective?	Yes	No
3. Has grantee completed the Project Benefits Report? ____/____/____	Yes	No

If **YES**: quantify the following, applicable:

1. Total/LMI beneficiaries: ____/____	2. Minority Beneficiaries: <u>(on PBR form)</u>
3. Hispanic or Latino: _____	4. Handicapped: _____
5. Female Headed House: _____	6. Elderly: _____

4. Does grantee data collection form include race, ethnicity, disability, and female head of household	Yes	No
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5. Analysis of Participation:

- | | | |
|---|-----|----|
| a. Does the grantee analyze rates of participation based on race, ethnicity, gender, & disability on an annual basis? | Yes | No |
| b. Does the grantee identify potential causes of under-participation and devise remedies to overcome under-participation? | Yes | No |

6. General comments on **Project Benefits**: _____

_____.

G. FAIR HOUSING AND NON-DISCRIMINATION RECORDS**1. Citizen Participation**

- | | | |
|--|-----|----|
| a. Does grantee have a Citizen Participation Plan? | Yes | No |
| 1. Date of Adoption: ____/____/____ | | |
| b. Is a procedure established for handling general complaints? | Yes | No |
| c. Have any complaints been received on this project? | Yes | No |

2. Section 504 (Non-discrimination)

- | | | |
|--|-----|----|
| a. Does the grantee have a Section 504 Plan? | Yes | No |
| 1. Date of Adoption: ____/____/____ | | |
| b. Name of the Section 504 Coordinator: _____ | | |
| c. Is a procedure established for handling Sec. 504 complaints? | Yes | No |
| d. Does grantee included a non-discrimination notice in marketing, advertising, and informational materials for CDBG activities? | Yes | No |
| e. Have any complaints been filed during this project? | Yes | No |
| f. Disposition of complaints? _____ | | |

3. Anti-Displacement: Does grantee have an anti-displacement plan?

Yes No

- a. Date of Adoption: ____/____/____

4. Section 3

- | | | |
|--|-----|----|
| a. Has the grantee adopted a Section 3 Plan? | Yes | No |
| 1. Date of Adoption: ____/____/____ | | |
| b. Is there evidence that the grantee makes special efforts to target advertisements of employment target advertisements of employment opportunities to local, LMI, minority, and female applicants? | Yes | No |
| c. Is there evidence that the grantee uses small businesses located in or owned by disadvantaged persons in Section 3 areas? | Yes | No |
| d. Does grantee maintain lists of lower income Section 3 area residents applying for employment, and hired for employment? | Yes | No |

5. Grantee Workforce

- | | | |
|---|-----|----|
| a. Does grantee have written personnel policies which include equal opportunity provisions? | Yes | No |
| 1. Date of Adoption: ____/____/____ | | |
| b. Does Grantee have an Affirmative Action Plan? | Yes | No |
| 1. Date of Adoption: ____/____/____ | | |
| c. How many people are employed by the grantee? _____ | | |
| d. What is the racial and ethnic breakdown of the workforce? (Form EEO-1) _____ | | |
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- | | | |
|---|-----|----|
| e. Are there any handicapped workers? How many? _____ | Yes | No |
|---|-----|----|

6. Fair Housing

- | | | |
|---|-----|----|
| a. Is there evidence that grantee takes action to affirmatively further fair housing? | Yes | No |
| b. Is a procedure established for handling fair housing complaints? | Yes | No |
| c. Have any complaints been filed during this project? | Yes | No |
| d. Disposition of complaints? _____ | | |

7. Language Access Plan (LAP)

- | | | |
|---|-----|----|
| a. Has the grantee adopted an LAP? Date: ____/____/____ | Yes | No |
| b. Is there evidence that the grantee makes special efforts (including outreach) to include Limited English Proficiency individuals in vital public planning processes? | Yes | No |
| c. Is there evidence that the grantee provides translation services, both written and oral, when reasonably requested and needed? | Yes | No |
| d. Does the grantee have bilingual staff? | Yes | No |
| 1. What language(s)? _____ | | |
| e. Does the grantee conduct a survey of the special needs of LEP persons? | Yes | No |
| f. Does the grantee analyze rate of participation based on race, ethnicity, gender and disability on an annual basis? | Yes | No |
| g. Does the grantee identify potential causes of under-participation and develop remedies to overcome any of these causes? | Yes | No |

H. GENERAL COMMENTS: _____

I. SUMMARY OF REQUIREMENTS/FOLLOW UP REQUIRED: _____

K. Date of post-monitoring email/letter was sent to the grantee that included findings and recommended actions.

___/___/___

L. Response from Grantee regarding any follow-up required.

M. Grant closing date: _____