

**E-4: DESKTOP REVIEW CHECKLISTS**

Desktop Review	
<b>General Information</b>	Grantee: _____
	Contract Number: _____
	Grant Program Year: _____
	Grant Type [PF, HO, ED, DN, LS]: _____
	Entity [Village, City, Town, Parish]: _____
<b>Contacts</b>	Chief Elected Official: _____
	Consultant: _____
	Engineer: _____
	LGR: _____
<b>Dates</b>	Date of Application: _____
	Authorization to Incur Costs: _____
	Transmittal of Contract: _____
	Consultant Cleared: _____
	Engineer Cleared: _____
	Consultant Contract: _____
	Engineer Contract: _____
	CDBG Contract Ends: _____
Desktop Review Letter Sent: _____	
<b>Amounts/Activities/Nat'l Objective</b>	Grant Award Amount: _____
	Percent Drawn to Date: _____
	Local Funds: _____
	Other Funds: _____
	<b>Activity:</b> _____
	National Objective: _____
	ORIGINAL Budgeted Amount for Activity: _____
	Most recent REVISED Budgeted Amount for Activity: _____
	Expenditures to Date: _____
	<b>Activity:</b> _____
	National Objective: _____
	ORIGINAL Budgeted Amount for Activity: _____
	Most recent REVISED Budgeted Amount for Activity: _____
	Expenditures to Date: _____
	<b>Activity:</b> _____
	National Objective: _____
	ORIGINAL Budgeted Amount for Activity: _____
	Most recent REVISED Budgeted Amount for Activity: _____
Expenditures to Date: _____	
<b>Activity:</b> _____	
National Objective: _____	
ORIGINAL Budgeted Amount for Activity: _____	
Most recent REVISED Budgeted Amount for Activity: _____	
Expenditures to Date: _____	
Grant Award (ORIGINAL BUDGET): _____	
Grant Award (REVISED BUDGET): _____	
Total Expenditures to Date: _____	

**Acquisition of Property**

	<u>Yes</u>	<u>No</u>	<u>N/A</u>
1. Did application include acquisition by purchase or donation or lease? ~ If <b>No</b> , should the application have included acquisition?	_____	_____	_____
2. Was documentation of ownership or maintenance on file for grantee-owned property or servitude acquired?	_____	_____	_____
Attorney's Name: _____			
Documentation: _____			
Date of Documentation: _____			
Comments: _____			

**Anti-displacement**

	<u>Yes</u>	<u>No</u>	<u>N/A</u>
1. Are the following included in the Residential Anti-displacement and Relocation Plan documents: <ul style="list-style-type: none"> <li>a. Residential Anti-displacement and Relocation Plan</li> <li>b. resolution adopting the Plan</li> <li>c. Residential Anti-displacement/Relocation Certification</li> <li>d. if applicable, regulations, information booklets, relocation claim forms</li> </ul>	_____	_____	_____
2. Does the Plan identify a person who is responsible for displacement and relocation compliance?  ~ If <b>Yes</b> , identify: _____	_____	_____	_____
3. Has a person or business been displaced as a result of this program? ~ If <b>Yes</b> , complete the <b>Residential Relocation/Displacement Checklist (Part 2)</b> . ~ If <b>Yes</b> , was the acquisition subject to the Uniform Act? ~ If <b>Yes</b> , complete the <b>Anti-displacement Checklist (Part 2)</b> .	_____	_____	_____

**Citizen Participation**

	<u>Yes</u>	<u>No</u>
1. Does grantee have an adopted Citizen Participation Plan? ~ If <b>Yes</b> , was the plan adopted prior to the first public hearing? ~ If <b>No</b> , was it prepared before hearing but adopted at hearing without changes?	_____	_____
2. Does the plan... <ul style="list-style-type: none"> <li>● provide citizens with reasonable access to local meetings, information concerning the State's method of distributing funds and the use of funds under Title I?</li> <li>● provide for LCDBG-related public hearings to obtain views on the development of needs, the review of proposed activities and the review of program performance?</li> <li>● provide for and encourages participation, particularly persons of low/mod income residing in blighted areas and/or in areas where CDBG funds will be used?</li> <li>● provide TA to facilitate participation where requested?</li> <li>● address accommodations at hearings for non-English speaking persons?</li> <li>● address accommodations at public hearings for persons with disabilities?</li> <li>● provide for public hearings to obtain views concerning program amendments? ~ Was a program amendment requested and approved? ~ If <b>YES</b>, was a public hearing conducted prior to the request?</li> <li>● provide for a public hearing on performance at closeout?</li> </ul>	_____	_____
3. Does the Citizen Participation Plan include a complaint procedure? ~ If <b>Yes</b> , does the complaint procedure identify; <ul style="list-style-type: none"> <li>● how a citizen should file a complaint?</li> <li>● the manner in which a complaint is processed?</li> <li>● a response time to the complainant - maximum of 15 working days?</li> </ul>	_____	_____

	<u>Yes</u>	<u>No</u>
4. Did first public notice for the public hearing state the following would be discussed? <ul style="list-style-type: none"> <li>● amount of funds available for community development and housing needs</li> <li>● the range of eligible activities and the estimated amounts for activities that will benefit low/mod income persons</li> <li>● the applicant's plans for minimizing displacement and the provision of benefits should displacement occur</li> <li>● information of the applicant's past LCDBG performance</li> </ul>	_____	_____
5. Did the notice encourage citizens, particularly those of low/mod income & residents of slum/blight areas to submit their views on community development and housing needs?	_____	_____
6. Did the notice state accommodations would be provided for non-English speaking and disabled individuals?	_____	_____
7. Were five calendar days allowed for notification of the public hearing?	_____	_____
8. Is there a roster of those in attendance of the public hearing?	_____	_____
9. Are there minutes of the public hearing? <ul style="list-style-type: none"> <li>- If <b>Yes</b>, do they state the items in #4 above were discussed?</li> <li>(Reference to items is not necessary if no one was in attendance.)</li> </ul>	_____	_____
10. Was the second public notice published: <ul style="list-style-type: none"> <li>● After the first public hearing was held?</li> <li>● After all forms in the application were dated?</li> <li>● Prior to application submittal?</li> </ul>	_____	_____
11. Was the second public notice published a minimum of 7 calendar days prior to application submittal?	_____	_____
12. Was the following information included in the grantee's second public notice? <ul style="list-style-type: none"> <li>● proposed objectives</li> <li>● proposed activities</li> <li>● location of proposed activities</li> <li>● activity amounts</li> <li>● application submittal date</li> <li>● the opportunity to comment on the application and the place and time to review the application</li> </ul>	_____	_____

**Civil Rights**

**Section 504**

**Summary of Previous Actions Taken**

	<u>Yes</u>	<u>No</u>	<u>N/A</u>
1. Has the grantee prepared a "Summary of Previous Actions Taken"?	_____	_____	_____
a. Does it identify when the grantee conducted its Self-Evaluation?	_____	_____	_____
b. According to the "Summary", did the Self-Evaluation address:	_____	_____	_____
⇒ Physical Accessibility	_____	_____	_____
⇒ Communications	_____	_____	_____
⇒ Employment	_____	_____	_____

**Physical Accessibility**

2. According to the "Summary of Previous Actions Taken", ...			
a. did Self-Evaluation identify all non-housing facilities owned by grantee?	_____	_____	_____
b. were facilities identified as "new" and "existing"? ("existing" means constructed, altered or designed before July 11, 1988; "new" means after this date.)	_____	_____	_____
c. did the Self-Evaluation identify any physical barriers that impede accessibility to any programs or activities? <ul style="list-style-type: none"> <li>- If <b>Yes</b>, continue.</li> </ul>	_____	_____	_____

	<u>Yes</u>	<u>No</u>	<u>N/A</u>
d. did the grantee make physical alterations to provide for accessibility?	_____	_____	_____
e. were all physical barriers identified in the Self-Evaluation removed? ~ If <b>No</b> , continue.	_____	_____	_____
3. For "existing" facilities with continuing physical barriers, according to the "Summary of Previous Actions",			
a. have new policies or practices been adopted or existing ones modified or revised in order to achieve accessibility such as relocation, home visits, selective alterations? (24 CFR 8.21(2))	_____	_____	_____
b. has community's adopted policies and/or practices been modified to achieve accessibility for all physical barriers identified? ~ If <b>No</b> , continue.	_____	_____	_____
c. has grantee determined that making facility accessible and usable by individuals with handicaps would impose either an undue financial and administrative burden, or demonstrated that it would result in a fundamental alteration in the nature of the program or activity? (24 CFR 8.21 (b)(1)(ii))	_____	_____	_____
d. did the grantee identify any facilities as "new"? ~ If <b>Yes</b> , continue.	_____	_____	_____
e. did the grantee identify all "new" facilities as accessible? ~ If <b>No</b> , inaccessibility must be addressed in <b>Transition Plan</b> below.	_____	_____	_____

**Communications**

4. According to the "Summary of Previous Actions Taken", ...			
a. did the Self-Evaluation identify any impediments to communications accessibility? ~ If <b>Yes</b> , continue.	_____	_____	_____
b. did the grantee adopt policies to remedy impediments?	_____	_____	_____

**Employment**

5. According to the "Summary of Previous Actions Taken", ...			
a. did the Self-Evaluation identify any practices discriminatory towards disabled persons? (i.e., advertising, tests, selection criteria, job assignment, etc.) ~ If <b>Yes</b> , continue.	_____	_____	_____
b. did the grantee adopt policies to remedy impediments?	_____	_____	_____

**Current Policies**

6. a. does grantee operate a 24 hour emergency service? ~ If <b>Yes</b> , does grantee have a functioning TDD?	_____	_____	_____
b. does grantee utilize the LA Relay System?	_____	_____	_____
c. if the LA Relay System is used, was it advertised in newspaper within 60 days of AIC letter?	_____	_____	_____
d. does grantee have any disabled employees?	_____	_____	_____
e. If yes to 6d., are reasonable accommodations made for a qualified applicant or employee with a disability? (restructuring/relocating job, modifying schedule, acquiring or modifying equipment, providing reader/interpreter. This can be a policy statement).	_____	_____	_____

**Other Section 504 Requirements**, as applicable

If grantee has less than 15 employees, go to 'Transition Plan'. Otherwise continue.

7. a. Has grantee designated a Section 504 coordinator?	_____	_____	_____
b. Adopted a grievance procedure for complaints alleging prohibited actions? (File should include the grievance procedure and resolution adopting it.)	_____	_____	_____
c. Complied with notice in Section 504 handbook which states that grantee "does not discriminate against participants, beneficiaries, applicants, employees or unions or organizations with whom they have collective bargaining agreements, in admission or access to or treatment or employment treatment or employment in its federally assisted programs or activities" ?	_____	_____	_____
i. If <b>Yes</b> , was the initial notice made within 90 days of receipt of the executed contract and once a year thereafter?	_____	_____	_____
ii. If <b>Yes</b> , does notice list the Section 504 coordinator?	_____	_____	_____
iii. Note method grantee used to make notification.	_____	_____	_____

	<u>Yes</u>	<u>No</u>	<u>N/A</u>
<b>Grantee's Transition Plan</b> (Subsequent to Evaluation & original Transition Plan)			
8. Has grantee acquired an "existing" facility constructed prior to 1988 that is not accessible and will renovate prior to occupying it? <b>OR,</b> Has the U.S. Justice Dept. required the grantee to make a facility physically accessible? <b>OR,</b> If either of the above was answered YES, did the grantee complete a self-evaluation for this ~ If <b>Yes</b> , continue.	_____	_____	_____
9. Has a plan been developed listing all steps needed to complete the changes? ~ If <b>Yes</b> ,	_____	_____	_____
a. Does the plan identify a compliance officer?	_____	_____	_____
b. Does it list handicap resources used in writing the plan?	_____	_____	_____
c. Does the plan identify all impediments?	_____	_____	_____
d. Does it describe how all facilities will be made accessible?	_____	_____	_____
e. Is there a time schedule for rectifying all impediments? Note time period - _____	_____	_____	_____
i. Are the renovations on schedule?	_____	_____	_____
ii. If <b>No</b> , should the time schedule be revised?	_____	_____	_____

**Limited English Proficiency**

10. Did the grantee conduct the four part analysis?	_____	_____	_____
11. Did the analysis determine that the grantee did not meet the "safe harbor" requirements?	_____	_____	_____
12. Did the grantee prepare and adopt a Language Access Plan in the first year of the grant?	_____	_____	_____
13. Has the Language Access Plan been reviewed/updated annually?	_____	_____	_____

**Fair Housing**

14. <b>FAIR HOUSING ASSESSMENT:</b>			
a. Did the grantee complete the assessment within its jurisdiction?	_____	_____	_____
b. Is the assessment complete and are the responses reasonable?	_____	_____	_____
c. Do all "N/A's" have an explanation or are confirmed by the numbers in Part I of the assessment?	_____	_____	_____
d. Does Part II of the assessment indicate the contact or source of information and describe the policies and/or practices?	_____	_____	_____
e. Did the assessment identify any impediments?	_____	_____	_____
f. Is Part III marked "N/A" only in the case of Part II being marked "N/A" or "None"?	_____	_____	_____
g. Has grantee taken steps to remedy impediments?	_____	_____	_____
h. Has the assessment been signed by the Preparer and the CEO?	_____	_____	_____
i. Do grantees' records maintain the assessment and actions taken?	_____	_____	_____
15. Have any fair housing complaints been recorded? ~ If <b>Yes</b> , explain. _____	_____	_____	_____
a. Was complaint sent to HUD if discrimination was alleged?	_____	_____	_____
b. Did grantee notify complainant of HUD's involvement?	_____	_____	_____
c. What is the status of the complaint? _____	_____	_____	_____



Environmental			
	Yes	No	N/A
1. Were all activities exempt from the environmental review process? ~ If <b>No</b> , complete remainder of checklist.	_____	_____	_____
2. Did the Historic Preservation Officer request additional information before or during construction? ~ If <b>Yes</b> , is there documentation to show compliance?	_____	_____	_____

Financial Management	
<b>Financial Reporting</b>	Reference: 2 CFR 200.302(a)

1. Are there any delinquent annual financial reports? \_\_\_\_\_

Accounting Records	
	Reference: 2 CFR 200.302

2. Is the chart of accounts being used by the grantee adequate for the transactions of the program? \_\_\_\_\_
3. Does the grantee's chart of accounts include a complete listing of the accounts used to support the control needed to ensure that resources used do not exceed resources authorized? \_\_\_\_\_
4. Was there evidence of costs (other than approved pre-agreement costs) were being incurred prior to the Authorization to Incur Costs letter? \_\_\_\_\_
5. Were there internal control findings relevant to the CDBG program in the most recent audit? \_\_\_\_\_
6. Are all employees handling financial transactions bonded? \_\_\_\_\_

Labor Standards			
<b>Prime Contractors Only</b>	(answer: Yes, No or N/A)	<b>1</b>	<b>2</b>

1. Did the local government receive a fully executed Verification of Wage Decision and Contractor Eligibility form from OCD prior to the award of the construction contract?  
Yes No \_\_\_\_\_
2. Does a resolution from the local government state that the award will be contingent on verification of wage decision and contractor eligibility?  
\_\_\_\_\_
3. Was the "Notice of Contract Award" sent to OCD?  
No Yes \_\_\_\_\_
4. Was the Notice of Contract Award rec'd by OCD within 30 days of the award date?  
\_\_\_\_\_
5. Was the construction contract awarded more than 90 days after bid opening? \_\_\_\_\_

Procurement	
<b>Minority Business Enterprise (MBE)</b>	

1. Did grantee encourage and/or achieve MBE participation?  
(Methods: SBA, newspaper ads, direct solicitation, divided project into smaller contracts, etc.)  
~ If **No**, explain.  
\_\_\_\_\_  
\_\_\_\_\_

**Public Improvements**

1. Did LDH review/approve plans/specs for the sewer/water project? \_\_\_\_\_  
 ~ If **Yes**, is LDH's letter dated prior to start of construction? \_\_\_\_\_
- 2.\* Is a project sign prominently displayed in each target area of the project? \_\_\_\_\_  
**\*Program Performance**
3. a. Identify resident inspector(s): \_\_\_\_\_  
 \_\_\_\_\_
- b. Was inspector's Qualification Certificate sent to OCD prior to construction? \_\_\_\_\_
4. Was ad for bids published once a week for 3 weeks according to State Bid Law?  
 (First ad must appear at least 25 days prior to bid opening and cannot be on a Sunday or holiday.) \_\_\_\_\_
5. Did advertisement for bids include time/place of bid opening? \_\_\_\_\_
6. Did advertisement for bids call bidders attention to the following?  
 • conditions of employment and minimum wages \_\_\_\_\_  
 • Section 3 \_\_\_\_\_  
 • E. O. 11246 \_\_\_\_\_  
 • Segregated Facility \_\_\_\_\_  
**\*Civil Rights**
- (answer: **Yes**, **No** or **N/A**) **Contractors:** 1 2 3
7. Were there minutes of the bid opening and a tabulation of bids? \_\_\_\_\_  
 ~ Did grantee send OCD the itemized bid tabulation? \_\_\_\_\_
8. Was the contract awarded to the lowest responsible bidder? \_\_\_\_\_
9. Was the contract awarded within the time frame established in State Bid Law?  
**[45 days; time frame may be extended in 30-day increments by mutual consent.]** \_\_\_\_\_
10. Will grantee transfer ownership of system to another entity? \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**  
 ~ If **Yes**, was this approved during application review? \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**  
 ~Has a Cooperative Endeavor Agreement been signed executed regarding transfer  
 of ownership, if applicable? \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

**NOTE: Unless otherwise noted with an asterisk (\*), questions on the Public Improvements Checklist are in the procurement compliance area.**

**Technical Assistance Needed**

Program Areas Reviewed	Identify Problems to be Corrected
Acquisition (05)	
Anti-displacement (14)	
Citizen Participation(13)	
Civil Rights: 504 / EO / MBE/Sec. 3/FH (04)	
Environmental (02)	
Financial Management (01)	
Labor Standards (03)	
National Objective (10)	
Program Performance- Administration (09)	
Procurement (08)	
Public Improvements	
Record Keeping (12)	

Technical Assistance Needed Page 1 of 1