



# CDBG-DR COMPLIANCE AND MONITORING GUIDE

St. Tammany Parish Government

**Version 2.0**

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## **I. Introduction**

The St. Tammany Parish Department of Grants (“Grants”) is the entity charged with administering all Department of Housing and Urban Development’s Community Development Block Grant- Disaster Recovery (CDBG-DR) funds on behalf of the St. Tammany Parish Government. CDBG-DR grants are authorized by the United States Congress and the President of the United States under supplemental appropriation laws. Specific requirements are typically included in the appropriation law adopted to cover a specific disaster.

Grants staff is responsible for ensuring that all projects and programs are administered efficiently, effectively, and in accordance with all applicable rules and regulations. Staff will work in conjunction with other Parish Departments, and will competitively procure additional services, such as architects, on an as needed basis.

This Compliance and Monitoring Guide has been designed to assist Parish Staff in the monitoring of disaster recovery grants. The guide provides information regarding the general CDBG-DR monitoring process. It is the responsibility of every grant recipient to ensure that all federal rules and regulations are complied with by each grantee. Grantees must also carry out proper and efficient grant administrative practices. This guide will serve as a tool for those monitoring CDBG-DR programs implemented by the parish, contractors, and sub-recipients.

## **II. Overview of Monitoring Objectives**

Monitoring is an integral management control technique and is required of all CDBG grantees. It is an ongoing process that assesses the quality of a program participant’s performance over a period of time. Monitoring provides information about programs that is critical in making informed judgments about program effectiveness and management efficiency. It also helps in identifying instances of fraud, waste and abuse. The following objectives are accomplished through the monitoring process:

- To determine if a grantee/subrecipient is carrying out its CDBG-DR program and its individual activities as described in the Action Plan, as intended;
- To determine if a grantee/subrecipient is carrying out its activities in a timely manner and in accordance with the schedule included in the contractual agreement;
- To determine if a grantee/subrecipient is incurring only eligible costs;
- To determine if a grantee/subrecipient is conducting its activities with adequate control over program and financial performance and in a way that minimizes opportunities for waste, mismanagement, fraud and abuse;
- To assess if the grantee/subrecipient has a continuing capacity to carry out the approved project, as well as future grants for which it may apply;
- To identify potential problem areas and to assist the grantee/subrecipients in complying with applicable laws and regulations;
- To assist grantee/sub-recipients in resolving compliance problems through discussion, negotiation, and the provision of Technical Assistance and training;
- To provide adequate follow-up measures to ensure that performance and compliance deficiencies are corrected by grantee/subrecipients and not repeated;

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- To comply with the Federal monitoring requirements of 24 CFR 570.501(b) and with 24 CFR 84.51 and 85.40, as applicable;
- To determine if any conflicts of interest exist in the operation of the CDBG-DR program, per 24 CFR 570.611; and
- To ensure that required records are maintained to demonstrate compliance with applicable regulations.

### III. Roles and Responsibilities

Department of Grants Director: Responsible for oversight of all compliance and monitoring activities; signs all relevant letters (e.g. onsite visit strategy letter and monitoring report letter); issues final decisions regarding findings and concerns.

Department of Grants Assistant Director: Responsible for directing the day-to-day activities related to compliance and monitoring, including the completion and maintenance of the risk assessment and monitoring schedule, editing and tracking letters to all entities, and ensuring the compliance and monitoring staff are prepared for and are effectively carrying out all tasks.

CDBG-DR Project Manager: Responsible for completing desk monitoring, onsite monitoring visits, and technical assistance; drafting all relevant letters; completing monitoring checklists; and document management.

Finance Department: Responsible for ensuring that all costs incurred meet applicable local, state, and federal regulations.

Purchasing Department: Responsible for ensuring that all applicable local, state, and federal regulations are followed in the procurement of goods and services.

Legal Department: Responsible for drafting and reviewing all agreements, contracts, and subcontracts for adherence to applicable rules and regulations and reviewing findings and concerns resulting from compliance and monitoring activities to determine if legal action is required.

Outside Internal Auditor Firm: Responsible for evaluating and identifying opportunities to improve the effectiveness of St. Tammany's governance, risk management and control processes over CDBG-DR grants. Ensures compliance with all applicable federal regulations associated with the grant. The outside firm is also responsible for evaluating the monitoring standards and procedures that ensure program compliance, including duplication of benefits. Finally, the outside firm evaluates general grant management procedures, key grant management functions, program operations, record keeping and documentation, program and project progress and grantee goals.

### IV. Risk Assessment

Consistent with HUD requirements detailed in the CPD Monitoring Handbook (6509.2 Rev-6 and updated in CPD-14-04), the Parish will conduct a risk analysis on all entities being

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monitored (including all programs, contractors and sub-recipients), in order to identify those entities and programs that are most susceptible to fraud, abuse, or mismanagement.

The risk analysis provides critical information to effectively target resources toward entities and programs that pose the greatest risk to the integrity of St. Tammany Parish’s CDBG-DR funding, including identification of the grantees to be monitored on-site and remotely, the program areas to be covered, and the depth of the review. The selection process results in identifying grantees and activities that represent the greatest vulnerability to fraud, waste, abuse, and mismanagement. This assessment will allow the parish to minimize potential risk as it administers its CDBG-DR allocation.

St. Tammany Parish will make necessary adjustments in preparing the monitoring strategies and revising them based on new information, such as declining or improvement in participant performance, budget constraints, reprogramming of resources or other unanticipated events.

### 1. St. Tammany Parish CDBG-DR Risk Assessment Sample

Criteria	Description	High Risk	Medium Risk	Low Risk
<b>Funding</b>	Total Funds allocated to the Project (including FEMA and other federal and State funds)	10	5	2
		Over \$1,000,000	\$500,000-\$1,000,000	\$500,000 and below
<b>Complexity</b>	The multiple types of resources and activities associated with the project	10	5	2
		Construction Projects	Demolition only; Loan or Grant Program	Single source funded projects. Buyouts with without Construction
<b>Implementation Method</b>	The use of sub-recipients, vendors, or internal staff to carry out the programs/project	10	5	2
		Sub-recipient	Grantee Staff with contractor Program Management	Contractor
<b>Relevant Experience</b>	The experience of grantee/sub-recipient/contractor administering CDBG funds.	10	5	2
		No Experience	1-3 years of experience	4+ years of experience
		10	5	2

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<b>Compliance History</b>	The grantee’s past compliance with federally funded programs.	Past monitoring visits revealed severe deficiencies; or no evidence of any prior monitoring	Evidence of prior monitoring; deficiencies noted, but none severe	Evidence of prior monitoring; no deficiencies noted
<b>Project Timeline</b>	The projected and defined timeline for project completion, per the agreement.	10	5	2
		12-24+ months	6-12 months	Completion in under 6 months

**High Risk:** 60 – 41 Points **Medium Risk:** 40- 18 Points **Low Risk:** Less than 18 Points

### V. Parish Anti-Fraud, Waste and Abuse (AFWA) Policy

STPG has established policies and procedures to prevent fraud, waste and abuse of funds. These procedures are designed to identify discrepancies and risks in the information provided by third parties. Such discrepancies and risks may be indicative of fraud, waste, and abuse. By implementing these checks, the Parish can verify the accuracy of information provided by program applicants, vendors, and sub-recipients. These checks are conducted systematically, utilizing standardized research methodologies, which flag identification processes for consistency and equitable treatment across relevant sources. Flag codes, notations, and relevant supporting documents are all checked for errors by Parish Staff.

#### 1. Program Applicants

The following checks are run for each applicant and may consist of up to seven components: 1) Social Security Number check (for relevant applicant types); 2) Business status check (for relevant applicant types); 3) Confirmation of association with damaged property address; 4) Check of relevant watch lists and debarment lists; 5) Searches for State of Louisiana tax warrants; 6) Searches for federal tax liens filed in Louisiana; and 7) Searches for State of Louisiana child support warrants (for relevant applicant types). Findings are communicated as necessary to the applicant. There is a clarification process that is utilized to clear up or cure any discrepancies that the applicant may have with the results. In addition, deficient AFWA checks are reviewed by STPG program staff.

#### 2. Vendors

In addition to verifying the accuracy of information provided by program applicants, STPG verifies the accuracy of information provided by its vendors. As part of STPG’s procurement process, contractors are required to complete a vendor background questionnaire and to report any derogatory information relating to the contractor and/or its

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key personnel. Prior to contract execution, STPG’s procedures include, but are not limited to, reviewing debarment lists, searching known databases for information (for example: State of Louisiana tax liens and incorporation documents), conducting internet research, and obtaining information available from State and Federal agencies, such as substantiated investigative findings and audit reports. STPG has established regular channels of communication with other State and local government agencies who are contracting with various entities for services relating to storm recovery efforts in order to be on guard for issues relating to contractor fraud, waste, and abuse. Findings are reported to STPG’s procurement staff.

### 3. Subrecipients

As it does with its vendors, STPG reviews debarment lists and known databases, conducts internet research, and obtains information available from State and Federal agencies, prior to executing agreements with sub-recipients. Findings are reported to STPG’s procurement staff.

### 4. Parish Policies and Personnel

STPG follows a comprehensive fraud, waste and abuse prevention program, which consists of integrity monitoring, internal controls assessments, and investigations in order to create a series of “check and balances” to mitigate risks and ensure compliance with Federal and State regulations. These actions are directed and managed by the Departments of Grants, Procurement, Finance, and Legal.

Effective coordination between all STPG departments and personnel enables all programs, vendors administering STPG programs, departments, and sub-recipients to comply with applicable State and federal regulations, prevent and minimize fraud, waste and abuse, and effectively fulfill the goals set forth in STPG’s Action Plan.

The Department of Grants, in conjunction with Procurement, Finance, and Legal, perform the following tasks: 1) gauge the overall progress and effectiveness of project implementation; 2) identify issues that may compromise program integrity, fund, and service delivery; 3) work with program and operational staff to implement corrective action and resolutions; 4) oversee the implementation of STPG’s recapture process; 5) provide information and input on how STPG’s programs and practices can be improved and enhanced to improve performance, efficiency, and curtail waste, fraud, and abuse; and 6) serve as a layer of oversight to mitigate any potential risks, proactively detect and investigate potential fraud, and identify areas in which to strengthen program capacity and the quality of service delivery.

### 5. Internal Audit

STPG’s monitoring program is supported by an outside audit firm, which provides internal audit coverage for STPG and, as such, serves as STPG’s internal auditor with independent oversight over STPG’s grants management practices and program operations.



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This outside firm will report directly to the CAO's Office, effectively maintaining independence from the departments being reviewed. The outside firm, along with regular monitoring performed by the Departments of Grants, Procurement, Finance, and Legal, help to detect instances of fraud, waste or abuse.

In addition, the outside firm plays an important role in looking for errors and instances of malfeasance for all STPG procurements and program delivery, and specifically as part of the Parish's administration of its CDBG-DR funds. The outside firm evaluates the Parish's procurement policies and procedures. In addition, the outside firm verifies that the Parish has in place procedures to perform price and cost analyses of proposed expenditures of grant funds and that analyses are performed, when required.

The outside firm evaluates documentation maintained by the Parish, regarding price and cost analyses, and verify that it includes evidence that all costs are allowable, allocable and reasonable. Finally, when items are procured with sole-source contracts, the outside firm verifies that the Parish has maintained sufficient documentation supporting its position.

The outside audit firm is responsible for preparing a report that describes all internal control activities, its testing of those controls, and any concerns or issues noted during its review. This report is prepared annually and submitted to the CAO's Office for review. Different functions within program areas are selected each year for internal control review.

As necessary, Grants, along with its partners, develops an appropriate corrective action plan to strengthen the controls that mitigate and address concerns or findings noted in the internal auditor's report. Documentation is required to ensure that corrective action has taken place prior to closing out concerns or findings.

## 6. AFWA Hotline

Finally, Grants is responsible for maintaining a reporting hotline, as it relates to STPG activities, including any contested findings and recommendations. Using this hotline, citizens of the parish may call to report observations of fraud, waste or abuse.

## VI. Monitoring

### 1. Entities to be Monitored

#### *a. Contractors/Vendors*

Contractors/Vendors are entities competitively selected to provide clearly-specified goods or services and the contract price is established through the procurement process. CDBG-DR funds are paid to the contractor as compensation for the satisfactory provision of the goods and services as specified in the contract. The procurement process provides for the initial review of contractors/vendors as they are required to submit such documentation as part of the bid document and qualifications submission.

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However, other than rules relating to bonding, insurance, prevailing wages and other such provisions, most of the standard federal administrative and monitoring requirements (described in 24 CFR Parts 84 and 85, as applicable) including, but not limited to program income, financial management, allowable costs, record retention, and conflict of interest do not apply to contractors, once the procurement process is complete.

### ***b. Subrecipients***

Subrecipients can be Governmental Agencies, Private Non – Profits, Private For-Profits (under the provisions of 24 CFR 570.201 (o), Community Based Development Organizations (CBDOs) who are selected by the grantee to carry out agreed upon eligible activities on behalf of the grantee. Because subrecipients are acting on behalf of the grantee, all administrative requirements which are required of the grantee are transferred to the sub-recipient, causing the administrative and monitoring requirements to be greater for sub-recipients.

### ***c. A. Grantee Implemented Programs***

The grantee may also choose to implement programs directly. In these circumstances, the grantee’s monitoring and compliance department must monitor these programs to ensure that the program is operating in a compliant manner according to all CDBG-DR requirements, federal, state and local laws. To supplement, the outside audit firm monitors the grantee, to ensure compliance with CDBG-DR requirements.

## **2. Areas to be Monitored**

### ***a. Program Review***

Program Review focuses on the review of specific program activities. Program staff is asked to define the program and the monitoring staff should review CDBG-DR eligibility, national objective compliance, and duplication of benefits. Program monitoring should ensure that the program is following all of their written policies and procedures. A review of the overall management of the program is also appropriate in this category.

### ***b. Financial Review***

Financial Review focuses on making the connection between the program budget, expenditures and actual beneficiaries assisted, including evidence of case managers time in client files, reviewing payroll documents for the period applicants are reported, determining eligibility of applicants based on income documentation in client files, the general relationship between the contents of the client files and benefit data reported by the sub-recipient on the same applicants.

### ***c. Program Applicant Files***

When applicable, program applicant files should be reviewed through the formal monitoring process. This is different than regular Quality Assurance /Quality Control

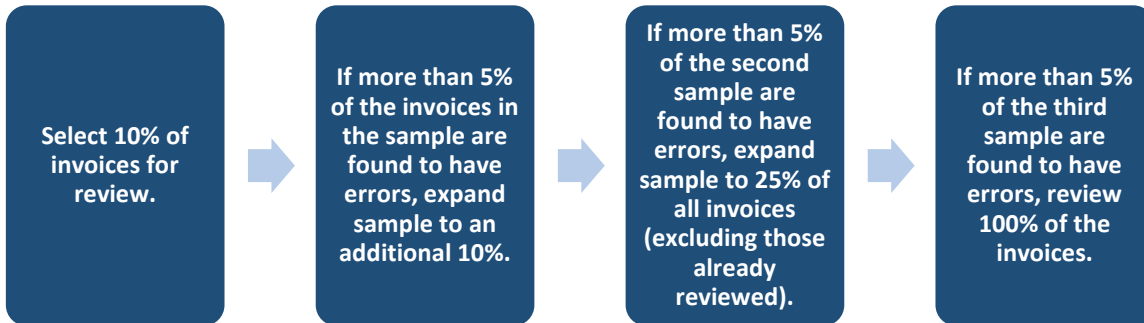


process (QA/QC) which should be a regular part of the programmatic procedures. When completing a monitoring of program applicant files, the monitoring staff should randomly select a sample set of review and normally a set that focus on and reflects approximately 10% of the total applicants served in the program, or more if there appears to be any systemic issues to address.

**d. Invoices**

A sample of submitted invoices are randomly selected for review and traced back from CDBG-DR reimbursements to the original organization's expenditure and client(s) assisted (if appropriate). For example, tracking if exact dollars billed for service by a subcontractor can be traced directly to one contractor. Conversely, a different review model is required when dollars billed provided services and materials from multiple subcontractors on different job sites. It is expected that the monitoring staff would review original invoices, cancelled checks, and other documentation evidencing the dollar expenditure, the relationship to the CDBG-DR program objective, the appropriate proportion of CDBG-DR expenditure in comparison to other funding included in the project budget, and accounting receipt of the federal grant funds.

**e. Sampling methodology:**



**f. Outside Audit Firm's Role**

The outside audit firm procured by the parish selects a sample of expenditures charged to the grant and determines whether each expenditure:

- Is allowable under the terms of the grant;
- Is properly procured (see Section V5);
- Is supported by sufficient and appropriate documentation;
- Was incurred within the grant period;
- Was approved by the appropriate level of management;
- Vendors were paid in a timely manner; and
- The items delivered and paid for are consistent with the purchase order and/or contract for the goods or services.



### **3. Checklists to be Utilized**

#### ***a. Core Checklist***

The Core Checklist should be used to determine if the subrecipient's policies and procedures for the core administrative systems (i.e. financial, procurement, contracting, and monitoring) meet minimum requirements and to verify the effectiveness of these systems at the subrecipient level. This checklist should also be used to review the subrecipient's financial management system, subrecipient management practices, civil rights, and fair housing compliance. The Core Checklist is included as Exhibit A to this manual.

#### ***b. Project Checklist***

The Project Checklist, included as Exhibit B, should be used to review 100% of projects at least once prior to closeout. It should also be used to review a sample of the sub-recipient's projects. The project checklist can be used as both a desk reference and an onsite checklist. Since the activities associated with a project and with a contract vary, all sections of the Project Checklist may not be applicable for each project and associated contract/contractor or subrecipient.

The Project Checklist is comprised of questions related to each the following compliance areas: citizen participation; financial management; procurement; contracting; labor; civil rights; environmental review; acquisition and relocation; property management; monitoring; lead-based paint, asbestos, and mold; and national objective and eligible activities.

#### ***c. Monitoring Schedule***

All program areas should be monitored at least once before program closeout. Monitoring schedule should be based on the risk assessment score outlined in the sample assessment provided in this Monitoring and Compliance guide. The Monitoring Schedule outlines which areas should be monitored and in which order. The Monitoring Schedule is provided as Exhibit C to this manual.

### **4. Types of Monitoring**

#### ***a. Desk Review***

The Desk Review is a limited review of programs, subrecipients and contractors/vendors and is conducted on a pre-determined basis (quarterly, annually, twice a year). The standard desk review can occur quarterly and can coincide with submission of any quarterly reporting required, per the contract or sub-recipient agreement. (Ex. DRGR reporting). The goal of a Desk Review is to provide clarification to a specific unknown that cannot be determined from the subrecipient or contractor/vendor reports, and to identify areas of technical assistance needed. Additionally, desk reviews are an integral part of the initial steps for on-site monitoring as they show an insight into the program.



***b. Vendors/Contractors***

During the Desk Review, contract terms and conditions are reviewed by the CDBG-DR Project Manager. Contractors and vendors are required to submit as part of their initial response and review such documents as:

- Copies of Insurance documentations, i.e., liability and professional liability;
- Copies of Bonding documentation;
- Section 3 Plan;
- EEO Utilization Plan; and
- Financial Statement of Condition.

Additionally, the desk review can be used to review reports documenting progress on the overall project as well as more specific reports on program components such as Section 3, Davis-Bacon and EEO which are submitted to the grantee.

***c. Subrecipients***

During a desk review of a subrecipient, the CDBG-DR Project Manager can review the status of subrecipient agreements, and other documents or areas including, but not limited to:

- Subrecipients Programmatic Policies and Procedures
- Subrecipients accounting system and documentation of financial transactions;
- Previous invoices submitted to the grantee
- Procurement policies and procedures Reporting processes;
- Grant/subrecipient agreement terms;
- Reporting and supporting documents such as insurance, certifications and other documentation required by the grantee.

***d. Grantee Implemented Programs***

During a desk review, the CDBG-DR Project Manager will take the time to review the following items and assess if there are areas where the program needs additional assistance. Additionally, if there are other areas in the program which need assistance, the Project Manager should review those as well.

- Program Policies and Procedures
- Program Quarterly reports

***e. Technical Assistance***

The Parish, may also periodically conduct Technical Assistance (TA) sessions with subrecipients, contractors/vendors, and/or direct beneficiaries to enable them to understand expectations for program compliance and prepare for monitoring and define. The Parish may provide technical assistance throughout the life of a CDBG-DR grant on

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numerous topics as it relates to the implementation of CDBG DR funded projects. Technical Assistance can come in numerous different forms such as:

- Verbal or written advice;
- Formal training; and/or,
- Documentation and guidance.

Very commonly, Technical Assistance can be for new subrecipients/vendors, to introduce them to the requirements of CDBG-DR. However Technical Assistance can also include other more technical areas, which are tailored to one specific program, subrecipient or vendor or to all entities who have a role in administering the CDBG-DR dollars.

As part of Technical Assistance visits, monitoring and compliance staff will answer any questions and provide guidance on the monitoring and compliance process. Grantees should visit the risk assessment, desk monitoring and onsite monitoring to determine the Technical Assistance need of a program, vendor/contractor, or grantee.

Areas commonly covered through Technical Assistance:

- Program Eligibility Criteria
- CDBG-DR requirements including but not limited to
  - CDBG-DR eligible activities
  - CDBG-DR national objectives
- Financial Management Requirements and timely expenditure of funds
- Labor Requirements ( Davis Bacon)
- Section 3 Requirements
- Environmental Review Requirements
- FHEO (LEP, Equal Employment Opportunities, Fair Housing, ADA, Section 3, Section 504)
- Monitoring and Compliance
- Recordkeeping
- Closeout

### *f. Onsite Monitoring*

At least one onsite review should be conducted of all projects prior to closeout. This review should occur early enough in the project life cycle to allow time for technical assistance and/or the resolution of any corrective actions that may be identified.

- Projects requiring follow-up activities and/or corrective actions should take precedence over those not requiring such actions.
- The project risk should also be taken into account when scheduling additional reviews.



The Department of Grants Assistant Director, or her designee will use the following criteria to define the scope and focus of onsite monitoring efforts. Identification of the following occurs:

- The programs/areas/functions to be reviewed;
- Data or information to be submitted by the program participant prior to monitoring (if any);
- The names of any participant staff members who will need to be consulted during the monitoring;
- Anticipated staff who will conduct the monitoring;
- Clearly defined areas of responsibilities for each reviewer (to avoid duplication) if more than one staff person will be conducting the monitoring;
- A schedule for carrying out the monitoring tasks and the anticipated time frames; and
- Required resources.

## **5. Preparing for a Review**

### ***a. Monitoring Strategy Letter***

Prior to an onsite monitoring visit, the STPG Department of Grants will send a “Monitoring Strategy” letter at least 30 day prior to the monitoring visit. The letter discusses the monitoring schedule and identifies the areas to be reviewed and the names and titles of the individuals who will be conducting the monitoring. It also requests that the necessary entity staff, if applicable, be available during the monitoring. The letter confirms the need for any required services (e.g., conference rooms, telephones, and computers).

### ***b. Advance Review***

In preparation for an onsite monitoring visit, the STPG Department of Grants should request relevant policies and procedures, manuals, and guidelines from the entity to be monitored, including documents pertaining to financial management, procurement, contracting, monitoring, and civil rights compliance. To the greatest extent feasible, these documents should be reviewed prior to the onsite visit in order to maximize the time available for reviewing project documents while onsite. The Core Checklist is to be completed in concurrence with the review of the aforementioned documents.

## **6. Performing a Review**

### ***a. Entrance Conference***

The purpose of the entrance conference is to:

- Explain how the monitoring will be conducted;
- Identify/confirm key entity staff that will assist during the monitoring;
- Set up or confirm meeting or interview times (including any staff or personnel who may be interviewed) and, if applicable, schedule physical inspections; and



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- Verify the programs/activities to be reviewed and, if on-site, how access to files and work areas will be granted (some programs files can be sensitive; some work areas can be hazardous).

### ***b. Monitoring Process***

Based on the areas outlined in the monitoring strategy, STPG staff will utilize documents which the parish has created as well as the HUD Monitoring Checklists for the area being monitored. In general, the monitoring processes seeks to answer the following questions:

- Is the program purpose being accomplished?
- Are the program beneficiaries being served as intended?
- Are program requirements being met?
- Is the program adhering to federal CDBG-DR, state and local requirements?
- Do the program files document all of the program pieces from award to closeout

HUD has provided all grantees such as STPG with access to The HUD Community Planning and Development (CPD) Monitoring Handbook 6509.2. This handbook provides exhibits which HUD utilizes in their monitoring of grantees. These exhibits should be utilized in St. Tammany Parish's monitoring of programs run internally, sub-recipients, and vendors/contractors. These exhibits can be accessed on [HUD's website](#).

For each project where STPG is using CDBG-DR funds for project funding, the grantee (parish), subrecipient, or vendor/contractor must maintain adequate records which comply with 24 CFR 570.490(a)(1). Therefore, when monitoring, the first step is to review the program files based on the monitoring strategy. STPG has outlined its Records Management policies in section 13 of *Community Development Block Grant Disaster Recovery Administrative Manual*. The policies outlined in this manual should be utilized as the basis for monitoring the records for each program and ultimately the entire CDBG-DR grant.

For the implementation of grants, STPG has outlined a lengthy *Grant Implementation Checklist* in section 21.0 of the *Community Development Block Grant Disaster Recovery Administrative Manual*. This tool exemplifies the process and the documentation which is needed for each Grant. This should be utilized as the basis for monitoring each grant which is given to a sub-recipient or which is implemented by the Grants Management Office.

For construction projects, STPG has also outlined the process for managing and monitoring construction projects which are funded with CDBG-DR in 10.5.2 of the *Community Development Block Grant Disaster Recovery Administrative Manual* Section. STPG should utilize these codified procedures in the monitoring of construction projects.

Throughout the onsite monitoring, STPG staff will maintain an ongoing dialogue with the entity being monitored. Such communication keeps the entity informed as to how the



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monitoring is progressing, enables discussions of any problem areas encountered and provides the entity an opportunity to make “on-the-spot” adjustments or corrections or present additional information to help the STPG staff responsible for monitoring. It also minimizes the potential for surprises to the entity when the exit conference is held as well as when the monitoring results are formally communicated in writing.

Best practices for monitoring suggest a random sampling of 10-15% of program files (if there are applicant or multiple projects in one program) for each program activity being monitored. If financial files or invoices are being monitored, then a similar sample maybe sampled.

For non-random samples, STPG monitoring staff shall give consideration to the areas outlined in the monitoring strategy as well as unresolved problems remaining from previous monitoring, any new types of activities being undertaken and/or the extent of any activities considered high risk. Any sample review or spot-check of the entity records that raises questions concerning the accuracy of the data indicates the need for further follow-up.

### *c. Exit Conference*

After completion of the monitoring review, the STPG staff onsite conducts an exit conference with the appropriate program officials or staff to discuss preliminary conclusions. In part, this serves to confirm the accuracy and completeness of the information used to form the basis for the monitoring conclusions. It may also highlight areas of disagreement between STPG and the entity being monitored. All conclusions—positive or negative—must be supportable, defensible, and adequately documented.

As a result of monitoring, STPG may reach one or more conclusions that:

- Performance was adequate or exemplary;
- Significant achievements were made;
- Specific concerns need to be brought to the entity's attention;
- Technical assistance was provided or is needed; and/or
- Findings will require corrective actions.

## **7. Monitoring Report**

Within 30 days after completion of monitoring, the Department of Grants Assistant Director, or her designee, will draft and send the Monitoring Report to the subrecipient and/or contractor/vendor describing the results in sufficient detail to clearly describe the areas that were covered and the basis for the conclusions. The monitoring report should outline all findings, concerns and observations from the monitoring visit.

### *a. Observation*

An area where the STPG staff observes some programmatic files or decisions which could lead to a concern or finding if not addressed, but there is not enough evidence at the



time of the monitoring that would warrant a concern or finding. Areas where observations are noted likely result in Technical Assistance which can remedy the Observation.

### *b. Concern*

A deficiency in program performance not based on a statutory, regulatory or other program requirement. Sanctions or corrective actions are not authorized for concerns. However, STPG should bring the concern to the program's attention and, if appropriate, may *recommend* (but cannot require) actions to address concerns and/or provide technical assistance.

### *c. Finding*

A deficiency in program performance based on a statutory, regulatory or program requirement for which sanctions or other corrective actions are authorized. Where an identified deficiency results in a finding, the finding must include the **condition, criteria, cause, effect, and required corrective action**.

- The **condition** describes what was wrong or what the problem was.
- The **criteria** cite the regulatory or statutory requirements that were not met.
- The **cause** explains why the condition occurred.
- The **effect** describes what happened because of the condition.
- The **corrective action** identifies the action(s) needed to resolve the problem and, unless inapplicable or there are extenuating circumstances, should include the time frame by which the participant is to respond to the finding

### *d. Contents of Monitoring Report*

Each Monitoring Report is to include:

- The program, project or entity monitored;
- The dates of the monitoring;
- The name(s) and title(s) of the STPG staff that performed the monitoring review;
- A listing of the program/project/activity areas reviewed (which, in most cases, will repeat the areas outlined in the notification letter to the participant);
- If applicable, a brief explanation of the reasons why an area specified in the notification letter was not monitored (e.g., time constraints, unanticipated problems arising in another area);
- Monitoring conclusions;
- If applicable, clearly labeled findings and concerns;
- If there are findings, an opportunity for the sub-recipient and/or contractor/vendor to demonstrate, within a time prescribed by STPG, that the sub-recipient and/or contractor/vendor has, in fact, complied with the requirements;
- Response time frames, if needed;
- An offer of Technical Assistance, if needed or a description of Technical Assistance provided during the monitoring.

# ST. TAMMANY PARISH GOVERNMENT

## CDBG-DR Compliance and Monitoring Guide



Generally, the tone of the monitoring letter is positive, in recognition of the common goal to responsibly and effectively implement STPG's recovery programs. Significant accomplishments or positive changes are included to establish and maintain constructive relationships and to recognize the dedication and commitment of the sub-recipient and/or contractor/vendor staff to the program missions.

Rather than broad, general statements, conclusions dictated in the monitoring letter must be specific and defensible. For example, a statement such as the sub-recipient and/or contractor/vendor "complied with all applicable rules and regulations" is too vague. Rather, because monitoring reviews cover selected program or technical areas, a more suitable statement is "based upon the materials reviewed and the staff interviewed, the activity/area was found to be in compliance with (specify requirements)."

### **e. Monitoring Response**

Once the subrecipient and/or contractor/vendor has received the Monitoring Report, the entity will have 30 days to respond to STPG. Through this response, the sub-recipient and/or contractor/vendor can provide responses to the findings and concerns and can note to STPG how they are implementing any corrective action which is recommended in the Report.

### **f. Monitoring Follow Up**

Once a response is submitted by the sub-recipient or vendor/contractor, then it will be the STPG's responsibility to then continue dialogue and follow up to ensure that the items which are closed or where corrective action is being implemented. Continued conversation and correspondence via e-mail, letter or verbal conversations will continue to allow STPG to work with their sub-recipients and vendors/contractors to ensure that programs continue to be compliant



*St. Tammany Parish Government*

*Exhibit A*  
*Compliance Monitoring Core Checklist Template*

*August 2018*

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



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# ST. TAMMANY PARISH GOVERNMENT



## Compliance Monitoring Core Checklist Template

### 1. Instructions and Monitoring Prep

This Checklist should be used to determine if the Subrecipient's policies and procedures for the core administrative systems (i.e. financial, procurement, contracting, and monitoring) meet minimum requirements and to verify the effectiveness of these systems at the Subrecipient level. This Checklist should also be used to review the Subrecipient's financial management system, Subrecipient management practices, and civil rights compliance.

**The Monitor should execute this Checklist prior to completing the Project Monitoring Checklist.** The Project Monitoring Checklist should highlight any deficiencies within any administrative systems that are not covered in this Core Checklist. The Monitor should use the OCD Disaster Recovery CDBG Grantee Administrative Manual for guidance on the topics covered within this Checklist. This Manual is located at <http://www.doa.louisiana.gov/cdbg/dr/dradmin-manual.htm>.

The following steps should be taken to perform a review:

1. Review the following to obtain an understanding of the Subrecipient requirements:
  - a. Governing statutes, regulations and official guidance;
  - b. Waivers.
  - c. Grant Agreements and other Binding Agreements;
  - d. Action Plans and Amendments; and,
  - e. Approved Program documents
2. Collect and Review the documentation referenced in Subsection 1.3.
3. Execute the Checklist by providing the appropriate response in the "Response" column. Mark any issues in the "Issue Type" column. If an issue [deficiency] is identified, corrective actions and/or technical assistance may be required. Technical assistance may also be required for any concerns noted. Notate whether corrective actions or technical assistance should be provided within the "Comments" column.

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



**Subrecipient :**

**Monitor:**

**Date Completed:**

1.1 Monitoring Preparation		
Requirements	Response	Comments
<b>Description:</b> Execute this Section to confirm that all pre-monitoring activities have been completed.		
1. Did you review all grant requirements, action plans, amendments and waivers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Did you review contract terms, payment terms, and budget?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Did you review monitoring requirements as contained in the Binding Agreement?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Did you coordinate with appropriate reporting staff and any other required department to ensure all data/information has been captured in current reporting?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Did you review prior year audits, monitoring efforts and results, and documentation supporting completed or ongoing corrective actions?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
6. Did you review relevant documentation and reporting to determine current program progress, status, performance, and compliance for monitoring planning purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Did you schedule meetings with relevant Grantee/ Recipient/Subrecipient staff to discuss program, current performance, issues and contract terms?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Did you set up program monitoring files and collect all relevant documents (see Section 1.3)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Did you draft and send a monitoring notification letter to the Subrecipient and request relevant documents to review?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



**Subrecipient :**

**Monitor:**

**Date Completed:**

1.2 Entrance Conference		
Requirements	Response	Comments
<p><b>Description:</b> An Entrance Conference should be conducted to “kick off” the monitoring visit. This is especially important for onsite reviews. Use this Section to document these pre-monitoring activities.</p>		
1. Was an Entrance Conference Conducted? List the date, time, and location.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Was a log taken of all attendees? List the names and titles of all persons in attendance (or attach a copy of the sign-in log).	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Were designated points of contact identified to assist with the monitoring engagement? List the name, title, assigned area, and contact information for the designated personnel.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Was an agenda drafted and were meeting notes taken to document the topics discussed during the Entrance Conference? List the topics discussed (or attach a copy of the meeting notes).	<input type="checkbox"/> Yes <input type="checkbox"/> No	



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



**Subrecipient :**

**Monitor:**

**Date Completed:**

1.3 Documentation Collection			
Document	For Use in Section	Date Received (or N/A)	Comments
<b>Description:</b> This Section provides a list of documents required to answer the questions within this Checklist. Execute this Section prior to beginning the review.			
1. Procurement Policies and Procedures	2.1		
2. Contracting Policies and Procedures	2.2		
3. Financial Management Policies and Procedures	2.3		
4. Monitoring Policies and Procedures	2.4		
5. Record Keeping Policies and Procedures (onsite only)	2.5		
6. Most Recent Draw Request/Request for Payment and supporting documentation	3.4		
7. Appropriate Audit/Financial Report			
7.1. An A-133 if the Subrecipient has expended more than \$500,000 in federal funds within a fiscal year	3.3		
7.2. Annual sworn financial statement if revenue received was \$50,000 or less	3.3		
7.3. Annual compilation if revenue received was more than \$50,000 but less than \$200,000	3.3		
7.4. An annual review along with the required agreed upon procedure report if revenue received was \$200,000 or more but less than \$500,000	3.3		
8. Federally Approved Indirect Cost Plan, if applicable	3.4		
9. 504 Self Evaluation	4.1		
10. Section 504 Assurance	4.1		
11. Evidence of the administration of a Fair Housing Activity	4.2		
12. Title VI Record Documentation	4.3		

# ST. TAMMANY PARISH GOVERNMENT



Compliance Monitoring Core Checklist Template

Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<b>2.1 Procurement Policies and Procedures</b>			
<p><b>Description:</b> Execute this Section to determine if the Subrecipient is in compliance with applicable regulations.</p> <p><b>Regulations:</b> 24 CFR 84.44, 24 CFR 85.36, and 24 CFR 570.502</p>			
<p>1. Does the Subrecipient have procurement policies and procedures in place? [24 CFR 85.36; 24 CFR 84.44]</p> <p><i>If no, the remaining questions within this Section are not applicable. Technical Assistance should be provided.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2. Have the Subrecipient's procurement policies and procedures been reviewed during a previous monitoring review?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2.1. Have any issues been discovered based on prior reviews of the Subrecipient's procurement policies and procedures or have any revisions been made since the previous review?</p> <p><i>If No, mark the remaining questions in this Section as "N/A".</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>3. Are the policies and procedures documented?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>4. Does the Subrecipient have a process in place for communicating policies and procedures (including updates) to staff?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>Procurement Policies and Procedures Requirements</b>			
<p>5. <u>Requirements</u> - Do the Procurement policies and procedures include a Code of Conduct?</p> <p>24 CFR 85.36 and 84.42 requires the Code of Conduct to contain these minimum requirements:</p> <ul style="list-style-type: none"> <li>No employee, officer or agent of the Grantee/ Recipient/ Subrecipient or sub Grantee/ Recipient/ Subrecipient shall participate in selection, or in the award or administration of a contract supported by Federal funds if a conflict of interest would be involved</li> <li>Officers, employees or agents will neither solicit nor accept gratuities, favors or anything of monetary value from contractors, potential contractors, or parties to sub-agreements</li> <li>Penalties, sanctions, or other disciplinary actions for violations are included</li> <li>The Code of Conduct is consistent with the Louisiana Code of Governmental Ethics (Louisiana Revised Statutes 42:1101)</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<p>6. <u>Requirements</u> - Do the Procurement policies and procedures include guidance on using the appropriate solicitation methods, contract types and contract price?</p> <p>For Grantees/ Recipients, 24CFR85.36(b)(9) requires:</p> <ul style="list-style-type: none"> <li>• Only one of the solicitation methods (Small Purchase, Sealed Bid/formal advertising, Competitive Proposals, Noncompetitive Proposals) are employed for each procurement</li> <li>• The requirements for the applicable solicitation method are followed</li> <li>• Only the appropriate contract types (Purchase Order, Fixed Price, Cost Reimbursement) are employed for each procurement</li> <li>• A “cost plus a percentage of cost” or a “percentage of construction cost” type pricing is not used for contracts [24 CFR 85.36 (f) (4)and 84.44(c)]</li> <li>• A “time and material” type contract is only used after a determination is made that no other contract is suitable and the contract includes a ceiling price that the contractor exceeds at its own risk [24 CFR 85.36 (b)(10)]</li> <li>• Contract is price appropriately, as determined by contract services (Lump sum pricing, unit pricing, or reimbursement of costs)</li> </ul> <p>For Subrecipients of Institutions of Higher Education, Hospitals, or Other Non-Profit Recipients, 24CFR 84.44(a) and 24CFR84.84(e) requires that written procurement procedures that shall provide for, at a minimum:</p> <ul style="list-style-type: none"> <li>• Recipients avoid purchasing unnecessary items.</li> <li>• Where appropriate, an analysis is made of lease and purchase alternatives to determine which would be the most economical and practical procurement for the Federal Government.</li> <li>• Solicitations for goods and services provide for all of the following.</li> <li>• A clear and accurate description of the technical requirements for the material, product or service to be procured</li> <li>• Requirements which the bidder/offeror must fulfill and all other factors to be used in evaluating bids or proposals.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<p>7. <u>Requirements</u> - Do the Procurement policies and procedures include a requirement that staff review proposed procurements for Cost reasonableness?</p> <p>24 CFR 85.36; 24 CFR 84.45, 84.84 requires that cost reasonableness is reviewed:</p> <ul style="list-style-type: none"> <li>To avoid unnecessary purchases;</li> <li>To avoid duplicative purchases, and;</li> <li>Ensure costs are reasonable.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>8. <u>Requirements</u> - Do the Procurement policies and procedures include a requirement that staff review proposed procurements to ensure contractors are eligible?</p> <p>24 CFR 85.35; 24 CFR 84.13 requires that awards are not made to any party which is debarred or suspended or is otherwise excluded from or ineligible for participation in Federal assistance programs under Executive Order 12549, "Debarment and Suspension".</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>9. <u>Requirements</u> - Do the Procurement policies and procedures include a requirement that affirmative efforts be undertaken to hire women's business enterprises, minority firms and labor surplus firms?</p> <p>[24 CFR 85.36(e); 24 CFR 84.44(b), 24CFR84.84(e)(2)]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>10. <u>Requirements</u> - Do the Procurement policies and procedures include a requirement that all disputes relating to procurement actions be handled, resolved, and disclosed?</p> <p>[24 CFR 85.36(b)(12); 24 CFR 84.84]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>11. <u>Requirements</u> - Do the Procurement policies and procedures include a requirement that all procurements be conducted using "open and free competition," unless an exception applies?</p> <p>[24 CFR 85.36(c); 24 CFR 84.84(d)]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>12. <u>Requirements</u> - Do the Procurement policies and procedures include a requirement to eliminate unfair competitive advantages in procurements?</p> <p>[24 CFR 85.36(c); 24 CFR 84.84(d); 24CFR84.43]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<b>2.2 Contract Administration Policies and Procedures</b>			
<p><b>Description:</b> Use this Section to determine if the Subrecipient has developed a contract administration system which ensures that contractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders. This section provides best practices that may be utilized in an adequate contract administration system.</p> <p><b>Regulation:</b> 24 CFR 85.36(b)(2), 24 CFR 84.47, 24 CFR 84.84(h)</p>			
<p>1. Does the Subrecipient have contract administration policies and procedures in place? <i>If no, the remaining questions within this Section are not applicable. Technical Assistance should be provided.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2. Has the Grantee/ Recipient/ Subrecipient's contract administration policies and procedures been reviewed during a previous monitoring review?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2.1. Have any issues been discovered based on prior reviews of the contract administration policies and procedures or have any revisions been made since the previous review? <i>If No, mark the remaining questions in this Section as "N/A".</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>3. Are the policies and procedures documented?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>4. Does the Subrecipient have a process in place for communicating policies and procedures (including updates) to staff?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>5. Are the Subrecipient's contract administration policies and procedures adequate?</p> <p>Contract Administration best practices include:</p> <ul style="list-style-type: none"> <li>Utilizing Contract Templates for developing contract;</li> <li>Identifying a contract administrator for each contract executed;</li> <li>Implementing a process to ensure contractor abides by the terms of the contract procedures;</li> <li>Implementing a deliverable review/approval process; and,</li> <li>Implementing a process for managing issues that may arise with the contractor.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<b>Isaac Only</b>			
Grantees implementing projects utilizing funding from the Hurricane Isaac allocation are required to meet these guidelines.			
6. Does the Subrecipient maintain a record of achieving certification of a comprehensive green building program or completion of the HUD CPD Green Building Retrofit Checklist, as appropriate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6.1 If yes, proceed to question 2.			
6.2 If no, is the Subrecipient exempt from meeting the green building standard?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
7. Did the Subrecipient require procured contracts to contain (1) performance measures and associated penalties and (2) a period of performance or the date of completion?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
8. If an Action Plan Amendment is submitted after 11/18/2013, did the subrecipient describe its process for the selection and design of green infrastructure projects or activities, and/or how selected projects or activities will incorporate green infrastructure components? (Per Fed. Reg. 78 No. 222)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.3 Financial Management Policies and Procedures			
<b>Description:</b> Use this Section to determine if the Grantee Recipient/Subrecipient's financial management policies and procedures meet the requisite standards. <b>Regulations:</b> 24 CFR 84.21, 24 CFR 85.20, 24 CFR 570.502			
1. Does the Subrecipient have financial management policies and procedures in place? <i>If no, the remaining questions within this Section are not applicable. Technical Assistance should be provided.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Have the Subrecipient's financial management policies and procedures been reviewed during a previous monitoring review?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
2.1. Have any issues been discovered based on prior reviews of the Subrecipient's financial management policies and procedures or have any revisions been made since the previous review?  <i>If no, mark "N/A" for the remaining questions in this Section.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Are the policies and procedures documented?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Does the Subrecipient have a process in place for communicating policies and procedures (including updates) to staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
Financial Management Policy and Procedures Requirements			
5. <u>Internal Controls Requirements</u> - Do the financial management policies and procedures require defined staff qualifications and duties, lines of authority, and separation of functions?  [24CFR85.20(b)(3) and 84.21(a)(3)]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6. <u>Internal Controls Requirements</u> - Do the financial management policies and procedures require control over secure access to assets, blank forms, and confidential documents?  [24CFR85.20(b)(3) and 84.21(b)(3)]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
7. <u>Internal Controls Requirements</u> - Do the financial management policies and procedures include a process for approving and recording transactions?  [24CFR85.20(b)(3) and 84.21(b)(3)]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
8. <u>Internal Controls Requirements</u> - Do the financial management policies and procedures include a process to periodically compare financial records to actual assets and liabilities?  [24CFR85.20(b)(4) and 84.21(b)(4)]	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT



Compliance Monitoring Core Checklist Template

Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<p>9. <u>Support Documentation Requirement</u> - Do the financial management policies and procedures require that documentation (receipts, invoices, canceled checks, etc.) is available to support accounting record entries?</p> <p>[24CFR85.20(b)(6) and 84.21(b)(7)]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>10. <u>Allowable Cost Requirement</u> - Do the financial management policies and procedures clearly define reasonableness, allowability, and allocability of costs incurred that's consistent with OMB Circulars A-87 or A-122?</p> <p>[24CFR85.20(b)(5) and 84.21(b)(6)]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>11. <u>Financial Reporting Requirement</u> - Do the financial management policies and procedures require that financial statements and reporting are complete, current, reviewed periodically and provide complete disclosure of the financial results of each Federally-sponsored project or program?</p> <p>[24CFR85.20(b)(1) and 84.21(b)(1)]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>12. <u>Financial Reporting Requirements</u> - Do the Subrecipient's financial management policies and procedures require that all of the following required HUD CDBG activities are captured within its reports?</p> <ul style="list-style-type: none"> <li>• Amount budgeted</li> <li>• Advances/reimbursements received to date</li> <li>• Program income &amp; other miscellaneous receipts</li> <li>• Actual expenditures/disbursements</li> <li>• Current encumbrances/obligations</li> <li>• Unpaid requests for payments</li> </ul> <p>[24CFR84.52 and 24CFR85.41]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>13. <u>Cash Management Requirement</u> - Do the financial management policies and procedures include a process to accurately project the cash needs of the organization?</p> <p>[24CFR85.20(b)(7) and 84.21(b)(5)]</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
14. <u>Audits and Audit Findings Requirements</u> - Do the financial management Policies and Procedures require that audits are conducted in a timely manner and in accordance with applicable standards, including a systematic method to assure timely and appropriate resolution of audit findings and recommendations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>2.4 Monitoring Policies and Procedures</b>			
<p><b>Description:</b> Use this Section to determine if the Subrecipient’s monitoring policies and procedures sufficiently outline the monitoring of each project, program, function or activity to assure compliance with applicable Federal requirements and that performance goals are being achieved. .</p> <p><b>Regulations:</b> 24 CFR 84.51; 24 CFR 85.40</p>			
1. Does the Subrecipient have monitoring policies and procedures in place? <i>If no, the remaining questions within this Section are not applicable. Technical Assistance should be provided.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Have the Subrecipient’s monitoring policies and procedures been reviewed during a previous monitoring review?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.1. Have any issues been discovered based on prior reviews of the monitoring policies and procedures or have any revisions been made since the previous review? <i>If yes, continue through this Section. If no, continue to next Section.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Are the policies and procedures documented?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Does the Subrecipient have a process in place for communicating policies and procedures (including updates) to staff?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
<p>5. Do the monitoring policies and procedures provide guidance on conducting, documenting, and reporting on monitoring activities and on follow up on areas of non-compliance?</p> <p>Monitoring best practices may include:</p> <ul style="list-style-type: none"> <li>• Prioritizing based on Risk</li> <li>• Prescribing a Sampling methodology</li> <li>• Monitoring Performance</li> <li>• Implementing a tracking system</li> <li>• Technical Assistance procedures</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>6. Do the monitoring policies and procedures include monitoring Project/Program performance?</p> <p>Monitoring best practices may include monitoring based on:</p> <ul style="list-style-type: none"> <li>• Compliance with approved application scope, funding specifications, and other requirements</li> <li>• Program guidelines</li> <li>• Implementation schedule and milestones</li> </ul> <p>[24CFR84.51 and 24 CFR 85.40</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.5 Record Keeping Policies and Procedures – ONSITE ONLY			
<p><b>Description:</b> Use this Section to determine if the Subrecipient’s Record Keeping Policies and Procedures are sufficient. <b>Regulations:</b> 24 CFR 85.40, 24 CFR 84.53, 24 CFR 570.506, and 24 CFR 570.490</p>			
<p>1. Does the Subrecipient have Record Keeping policies and procedures in place?</p> <p><i>If no, mark “No” for the remaining questions in this Section.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2. Have the Subrecipient’s record keeping policies and procedures been reviewed during a previous monitoring review?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2.1. Have issues been discovered based on prior reviews of the record keeping policies and procedures or have any revisions been made since the previous review?</p> <p><i>If no, mark “N/A” for the remaining questions in this Section.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>3. Are the policies and procedures documented?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>4. Does the Subrecipient have a process in place for communicating policies and procedures (including updates) to staff?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
Recordkeeping Policies and Procedures			

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

2. Policies and Procedures Review			
Requirements	Response	Issue Type	Comments
5. Do the recordkeeping policies and procedures describe the information that needs to be collected and why?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6. Do the recordkeeping policies and procedures describe when the information should be collected and how often?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
7. Do the recordkeeping policies and procedures describe how the information should be acquired, organized (in an orderly manner that provides ease of examination by any applicable parties and stored in a secure, central location)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
8. Do the recordkeeping policies and procedures describe how the information should be reported?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
9. Do the recordkeeping policies and procedures describe the required retention period for records (minimum of five years)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
10. <u>Access to Records</u> – Do the record keeping procedures provide access to records and/or personnel by authorized agencies and/or citizens as required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT



Compliance Monitoring Core Checklist Template

Subrecipient :

Monitor:

Date Completed:

3. Validation of Financial Management System			
Requirements	Response	Issue Type	Comments
<b>3.1 Establishing DR CDBG Funds Account</b>			
<b>Description:</b> Use this Section to assure that the applicable process has been followed to establish the Subrecipient's DR CDBG Funds Account.			
1. Has the Subrecipient's disaster recovery CDBG funds account been reviewed during a previous monitoring review?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
1.1. Have any issues been discovered based on prior reviews of the Subrecipient's DR CDBG funds account? <i>If no, mark "N/A" for the remaining questions in this Section.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Has the Subrecipient setup a non-interest bearing account for disaster recovery funds?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Is the Subrecipient using its general bank account?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1. If the Subrecipient is using this account, is this an interest-bearing account? Note: If interest is accrued on Disaster Recovery CDBG funds, the OCD/DRU must collect it from the Subrecipient.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Is the account used by the Subrecipient FDIC insured?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4.1. If applicable, is the bank providing collateral to secure all funds in excess of FDIC limits?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>3.2 Financial Administration</b>			
<b>Description:</b> Review the Subrecipient's Financial Administration System and use this Section to assure that it meets the standards set forth in 24 CFR 84.21, 24 CFR 85.20, and 24 CFR 570.502			
1. Has the Subrecipient's financial administration system been reviewed during a previous monitoring review?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
1.1. Were issues identified in previous reviews? <i>If yes, continue through this Section. If no, continue to next Section.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Has the Subrecipient designated someone to be responsible for financial management?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Does the Subrecipient have an accounting system in place that allows for the tracking of receipts and expenditures and the generation of financial statements?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

3. Validation of Financial Management System			
Requirements	Response	Issue Type	Comments
3.1. Is the Subrecipient accounting for the Disaster Recovery CDBG funds using a modified accrual basis?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2. Is the Subrecipient tracking and reporting on each project separately?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>3.3 Financial Reporting and Audits</b>			
<p><b>Description:</b> Use this Section to assure compliance with audit/reporting requirements.</p> <p><b>Regulations:</b> 24 CFR 84.26 and/or 24 CFR 85.26.</p>			
1. Has the Subrecipient conducted an A-133, if required?  An A-133 is required if the Subrecipient has expended more than \$500,000 in federal funds within a fiscal year. Obtain the nine digit EIN off of the W-9 and use <a href="http://harvester.census.gov/sac">harvester.census.gov/sac</a> to determine if the A-133 was submitted	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. If an A-133 is not required, has the Grantee/ Recipient/Subrecipient submitted the other appropriate financial report? <ul style="list-style-type: none"> <li>• Annual sworn financial statement if revenue received was \$50,000 or less</li> <li>• Annual compilation if revenue received was more than \$50,000 but less than \$200,000</li> <li>• Annual Review, plus agreed upon procedures if revenue received was \$200,000 or more but less than \$500,000</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Were findings disclosed in the financial statements that related to issues with internal control and/or compliance with laws, regulations, and provisions of contracts or grant agreements?  <i>If yes, document management's response to these findings and set time frame to ensure these issues were corrected.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>3.4 Expenditure Review</b>			
<p><b>Description:</b> Use this Section to assure that Subrecipient's expenditures are in compliance with applicable requirements by reviewing the most recent Request for Payment and answering the following questions accordingly.</p>			
1. Do the Requests for Payment submitted by the Subrecipient include the appropriate certifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. If there's program income, is the Grantee/ Recipient/Subrecipient disbursing program income prior to making further draw requests?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

3. Validation of Financial Management System			
Requirements	Response	Issue Type	Comments
3. Has the Subrecipient charged any indirect costs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1. If yes, did the Subrecipient submit a federally-approved Indirect Cost Plan to OCD/DRU?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Are the Subrecipient's administrative costs at or below the authorized threshold?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. <u>Internal Controls</u> – Is there evidence that there are appropriate separation of duties in the approving of a Request for Payment and the payment of invoices?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Subrecipient :

Monitor:

Date Completed:

4. Civil Rights			
Requirements	Response	Issue Type	Comments
<b>4.1 Section 504</b>			
<b>Description:</b> Section 504 of the Rehabilitation Act of 1973, as amended, requires that no handicapped individual can be excluded from participation (including employment), denied program benefits, or subjected to discrimination based solely on his or her handicap.			
1. Has the Subrecipient's Section 504 Compliance been previously reviewed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
1.1. Were issues identified during the previous review? <i>If yes, continue through this Section. If no, continue to next Section.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Has the Subrecipient submitted a Section 504 Self Evaluation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Has the Subrecipient completed the Section 504 Assurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Have any complaints been received?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4.1. If yes, have the complaints been resolved?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
<b>4.2 Fair Housing</b>			
<b>Description:</b> Title VIII of the Civil Rights Act of 1968, as amended (referred to as the "Fair Housing Act") prohibits discrimination in housing on the basis of race, color, religion, sex, or national origin. The Subrecipient is required to administer at least one fair housing activity annually.			
1. Is the Subrecipient ensuring that all activities are implemented to affirmatively promote fair housing?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Has the Subrecipient administered at least one fair housing activity within the last year? Notate the date and identify the type of activity of the most recent fair housing activity within the Comments field.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Have any complaints been received?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
3.1. If yes, have the complaints been resolved?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

# ST. TAMMANY PARISH GOVERNMENT



## Compliance Monitoring Core Checklist Template

Subrecipient :

Monitor:

Date Completed:

4. Civil Rights			
Requirements	Response	Issue Type	Comments
<b>4.3 Title VI</b>			
<p><b>Description:</b> Title VI of the Civil Rights Act of 1964 states that no person shall be excluded from participation, denied program benefits, or subjected to discrimination on the basis of race, color, or national origin.</p>			
1. Is the Subrecipient maintaining a record of applicants, direct and indirect beneficiaries by race, color, sex, national origin, age and handicap to ensure compliance with Title VI of the Civil Rights Act of 1964?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Have any complaints been received?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.1. If yes, have the complaints been resolved?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>4.4 Section 3</b>			
Requirement	Response	Issue	Comments
<p><b>Description:</b> Section 3 of the Housing and Urban Development Act of 1968 [12 U.S.C. 1701u and 24 CFR Part 135] is HUD’s legislative directive for providing preference to low- and very low-income residents of the local community (regardless of race or gender), and the businesses that substantially employ these persons, for new employment, training, and contracting opportunities resulting from HUD-funded projects. A “covered project” is a project for which Section 3 applies. “Covered funds” are those funds used to fund a “covered project”.</p> <p>This Section of the Core Checklist is to be used to determine if Section 3 is triggered for the Grantee/ Recipient/ Subrecipient and, if applicable, that the Subrecipient has procedures in place for ensuring compliance. Implementation of the Subrecipient’s Section 3 procedures will be reviewed using the project checklist by reviewing RFPs, contracts, contractor Section 3 procedures and other supporting documentation.</p> <p><i>Section 3 Residents are:</i></p> <ul style="list-style-type: none"> <li>Residents of Public and Indian Housing, or</li> <li>Individuals that reside in the metropolitan area or nonmetropolitan parish in which the Section 3 covered assistance is expended and whose income does not exceed the local HUD income limits set forth for low- or very low-income households.</li> </ul> <p><i>Section 3 Business Concerns are One of the Following:</i></p> <ul style="list-style-type: none"> <li>Businesses that are 51 percent or more owned by Section 3 residents;</li> <li>Businesses with 30 percent or more permanent, full-time employees whom are currently Section 3 residents, or were Section 3 residents within three years of the date of first employment; or</li> <li>Businesses that provide evidence of a commitment to subcontract in excess of 25 percent of the dollar amount of all subcontracts to be awarded to businesses that meet the qualifications described above.</li> </ul>			
1. Has the Subrecipient allocated \$200,000 or more DR-CDBG funds into projects/activities involving housing construction, demolition, rehabilitation, or other public construction— i.e., roads, sewers, community centers, etc.? <i>If no, mark “N/A” for the remaining questions within this Section.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT



## Compliance Monitoring Core Checklist Template

Subrecipient :

Monitor:

Date Completed:

4. Civil Rights			
Requirements	Response	Issue Type	Comments
2. Does the Subrecipient have written procedures (i.e., "Section 3 Plan") governing how Section 3 residents are to be notified about employment and training opportunities generated by program participant or its contractors as a result of the expenditure of covered financial assistance?  [24CFR 135.32 (a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Does the Subrecipient have written procedures (i.e., "Section 3 Plan") governing how Section 3 <b>business concerns</b> are to be notified about contracting (or subcontracting) opportunities generated by the program participant or its contractors involving covered financial assistance?  [24 CFR 135.32 (a)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Does the Subrecipient have written procedures (i.e., "Section 3 Plan") governing how applicable entities are notified about their requirements pursuant to Section 3?  [24 CFR 135.32(b) and 24 CFR 135.32(f)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. Does the Subrecipient have written procedures (i.e., "Section 3 Plan") governing how compliance with the requirements of Section 3 will be monitored?  [24 CFR 135.32(d) and 24 CFR 135.32(f)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6. Does the Subrecipient have written procedures (i.e., "Section 3 Plan") describing the steps taken to facilitate meeting the minimum numerical goals for employment and contracting opportunities?  [24 CFR 135.32(c)]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT



Compliance Monitoring Core Checklist Template

Grantee/ Recipient/ Subrecipient :

Monitor:

Date Completed:

5. File Review – ONSITE ONLY			
Requirements	Response	Issue Type	Comments
<p><b>Instructions:</b> Use this Section to indicate the completeness of the files reviewed during the onsite review. Refer to Section 4 of the OCD Disaster Recovery CDBG Grantee Administrative Manual for a list of documents that should be kept in each file. Additionally, if a Project Review has recently occurred (or is underway), the Monitor may use the results of the Project Review to draw conclusions regarding the sufficiency of the files.</p>			
1. Are the Subrecipient’s General files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Review the Subrecipient’s Citizen Participation Files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Pull a sample of the Subrecipient’s Procurement and Contracting files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Pull a sample of the Subrecipient’s Management/Personnel files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. Pull a sample of the Subrecipient’s monitoring files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6. Pull a sample of the Subrecipient’s Acquisition files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
7. Pull a sample of the Subrecipient’s Relocation files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
8. Pull a sample of the Subrecipient’s Section 504 files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
9. Pull a sample of the Subrecipient’s Equal Opportunity files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
10. Pull a sample of the Subrecipient’s Labor files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
11. Pull a sample of the Subrecipient’s audit files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
12. Pull a sample of the Subrecipient’s Environmental Review files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
13. Pull a sample of the Subrecipient’s Close-Out files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	
14. Pull a sample of the Subrecipient’s National Objective / Eligible Activities files. Are the files adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Finding <input type="checkbox"/> Concern	



*St. Tammany Parish Government*

*Exhibit B*  
*Compliance Monitoring Project Checklist Template*

*August 2018*



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

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# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

### 1. Monitoring Instructions

The Monitor should be familiar with the overall monitoring strategy prior to executing this checklist. The Monitor should use this checklist to review each Project. The results of all Project Reviews will be used to determine the adequacy of the Grantee/ Recipient/ Subrecipient's policies and procedures, compliance with program/project requirements, and need for technical assistance.

The following steps should be taken to perform a Project Review:

1. Review the following to obtain an understanding of the program/project grant requirements:
  - a. Governing statutes, regulations and official guidance;
  - b. Grant Agreements;
  - c. Action Plans and Amendments; and,
  - d. Waivers.
2. Review the following to obtain an understanding of the project:
  - a. Grantee/ Recipient/ Subrecipient's Procurement, Contract Management, Financial Management, and Monitoring Policies and Procedures
  - b. Contractor's policies and procedures as it relates to project execution;
  - c. Binding Agreement executed between the Grantee/ Recipient/ Subrecipient and the OCD/DRU; and,
  - d. Project Application.
3. Complete Monitoring Prep Section
  - a. Execute Section 2 of this Checklist, "Monitoring Prep - Preliminary Data Collection"
  - b. Collect the required documentation (See Section 3 of this Checklist, "Monitoring Prep – Document Collection")
4. Select contractors/contracts to be reviewed. (Worksheets should be completed for each contractor/contracts selected to review procurement, contract, financial management, and labor documentation.)
  - a. Select 50% or a minimum of two contractors/contracts.
  - b. If issues are found within the selected sample, broaden the sample to include additional contractors/contracts.
5. Select a sample of invoices per contractor to be reviewed ("invoice sample") to execute Worksheet 2.
  - a. Determine the total number of invoices that have been submitted to the Grantee/ Recipient/ Subrecipient from the contractor based on the date of the last review.
  - b. Based upon the total number of invoices submitted since the last review, use the Invoice Selection Sampling Methodology to determine number of invoices required to be reviewed per contractor within the sample.
  - c. Invoice Selection Sampling Methodology:
    - i. Less than 20 invoices have been submitted since the last review, select 3
    - ii. If 20 - 49 invoices have been submitted since the last review, select 5
    - iii. If 50 - 99 invoices have been submitted since the last review, select 10
6. Execute the remaining applicable Checklist Sections and Worksheets (Worksheets are to be completed for each contractor reviewed.)

*Note: All Sections will not be relevant to each Project Type*

  - a. Each Section contains a description, detailed instructions, and a list of documents required to complete the Section.
  - b. Refer to the applicable section within the OCD Disaster Recovery CDBG Grantee Administrative Manual for additional guidance
  - c. Complete all questions as indicated. As applicable, mark "N/A", "Finding", or "Concern" to identify any issues. Provide comments for your responses in the identified areas.
7. Complete the Conclusion Section of the Checklist.



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

## 2. Monitoring Prep – Preliminary Data Collection

11. Grantee/ Recipient/ Subrecipient:

12. Project ID:

Project Type: Infrastructure Housing Econ Dev Planning

13. Project Description:

14. Project Budget:

14.1. More than \$200,000?  Yes  No

15. Project Risk: High  Medium  Low

16. Is Construction Involved?  Yes  No

17. Was Property Acquired?  Yes  No

17.1. Were owner-occupants, tenants, or businesses displaced?  Yes  No

18. National Objective(s) selected

<input type="checkbox"/> Low to Moderate Income (LMI) Area	<input type="checkbox"/> S/B Spot Basis
<input type="checkbox"/> LMI Limited Clientele	<input type="checkbox"/> Urgent Need
<input type="checkbox"/> LMI Housing	<input type="checkbox"/> None (Planning/Capacity Building/Admin/Technical Assistance Activities)
<input type="checkbox"/> LMI Job Creation and Retention	<input type="checkbox"/> Planning only grants
<input type="checkbox"/> Slum and Blight (S/B) Area	

19. Eligible Activity(ies) selected:

<input type="checkbox"/> 105(a)(1) – Acquisition of Real Property	<input type="checkbox"/> 105(a)(15) – Activities Carried Out through Nonprofit Development Organizations – Neighborhood Revitalization, Community Economic Develop, or Energy Conservation
<input type="checkbox"/> 105(a)(2) – Public Facilities and Improvements and Privately-Owned Utilities	<input type="checkbox"/> 105(a)(16) – Planning and Capacity Building – Energy Conservation
<input type="checkbox"/> 105(a)(3) – Code Enforcement	<input type="checkbox"/> 105(a)(17) – Economic Development Assistance to For-Profit Business
<input type="checkbox"/> 105(a)(4) – Clearance, Rehabilitation, Reconstruction, and Construction of Buildings (Including Housing)	<input type="checkbox"/> 105(a)(18): Rehabilitation or Development of Housing
<input type="checkbox"/> 105(a)(5) – Architectural Barrier Removal	<input type="checkbox"/> 105(a)(19) – Technical Assistance to Public or Nonprofit Entities
<input type="checkbox"/> 105(a)(6) – Loss of Rental Income	<input type="checkbox"/> 105(a)(20) – Housing Services
<input type="checkbox"/> 105(a)(7) – Disposition of Real Property	<input type="checkbox"/> 105(a)(21) – Assistance to Institutions of Higher Education
<input type="checkbox"/> 105(a)(8) – Public Services	<input type="checkbox"/> 105(a)(22) – Microenterprise Assistance
<input type="checkbox"/> 105(a)(9) – Payment of Non-Federal Share	<input type="checkbox"/> 105(a)(23) – In Rem Housing
<input type="checkbox"/> 105(a)(10) – Completion of Federal Urban Renewal Projects	<input type="checkbox"/> 105(a)(24) – Homeownership Assistance
<input type="checkbox"/> 105(a)(11) – Relocation	<input type="checkbox"/> 105(a)(25) – Lead-based Paint Hazard Evaluation and Reduction
<input type="checkbox"/> 105(a)(12) – Planning and Capacity Building – Community Development	
<input type="checkbox"/> 105(a)(13) – Program Administration Costs	
<input type="checkbox"/> 105(a)(14) – Activities Carried Out through NPSs Acquisition, Construction, Reconstruction, Installation, Rehabilitation, or Planning	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

## 2. Monitoring Prep – Preliminary Data Collection

### 20. Contractor Summary

Contractor	Contract Start Date	Contract Expiration Date	Contract Value	Brief Description of Scope of Services
20.1.				
20.2.				
20.3.				
20.4.				
20.5.				
20.6.				
20.7.				
20.8.				
20.9.				
20.10.				
20.11.				
20.12.				
20.13.				

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

### 3. Monitoring Prep - Document Collection

**Description:** The Monitor must collect the following documents in order to execute the Project Checklist.

**Instructions:** Work with the appropriate staff to follow up with the Grantee/ Recipient/ Subrecipient until the requisite documents are received. Check the box in the “Received?” column once received.

Section	Type of Applicable Project	Required Documents	Received?
Section 4: Citizen Participation	All	Citizen Participation Plan, if applicable	<input type="checkbox"/>
		Evidence of Citizen Participation (Public hearing meeting notices, attendance logs, minutes, etc.)	<input type="checkbox"/>
Section 5: National Objective and Eligible Activities	All	Project Application	<input type="checkbox"/>
Section 6: Monitoring	All	Monitoring Policies and Procedures (Monitoring Plan)	<input type="checkbox"/>
		Monitoring Plan Schedule	<input type="checkbox"/>
		Monitoring Results	<input type="checkbox"/>
Section 7: Procurement and Contract Review	All	Procurement Policies and Procedures	<input type="checkbox"/>
		For each Procurement/Contract: Justification of services, supplies, procured item(s)	<input type="checkbox"/>
		Advertisement/Publication <i>(Not applicable if services, supplies, or items are procured through the Small Purchase Method)</i>	<input type="checkbox"/>
		Proposals, Statement of Qualifications, Bids, or Quotes received	<input type="checkbox"/>
		Evaluation of all Proposals, Statement of Qualifications, or Bids received <i>(Not applicable if services, supplies, or items are procured through the Small Purchase Method)</i>	<input type="checkbox"/>
		Cost/Price Analysis	<input type="checkbox"/>
		Notice of Contract Award	<input type="checkbox"/>
Section 8: Labor	All Construction Projects	For each Contractor, as applicable: Proof of Insurance	<input type="checkbox"/>
		Contractor Clearance Form	<input type="checkbox"/>
		Evidence of Labor Compliance Officer (LCO) Labor Interviews	<input type="checkbox"/>
		Proof of approval from the OCD/DRU to use Force Account Labor, if applicable	<input type="checkbox"/>
		LCO Labor Issues Log (including description, issue type, restitution amount, if any)	<input type="checkbox"/>
		For each Contractor: Verification of Wage Decision Form <i>(Construction contracts exceeding \$2,000 Only)</i> Two Weekly Payrolls	<input type="checkbox"/>
Section 9: Financial Management	All	Financial Management Policies and Procedures	<input type="checkbox"/>
		Chart of Accounts	<input type="checkbox"/>
		Project Budget	<input type="checkbox"/>
		Revenue/Expenditure Report (or “Financial Status Report”)	<input type="checkbox"/>
		Bank Statement (Or other documentation required to review Cash Management)	<input type="checkbox"/>
		Most recent reconciliation	<input type="checkbox"/>



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Section	Type of Applicable Project	Required Documents	Received?
		For each Contractor: Invoice Sample Required Number of Invoices <i>(See Monitoring Instructions for steps to determine invoice sample)</i>	<input type="checkbox"/>
		Supporting Documentation for each Invoice	<input type="checkbox"/>
Section 10: Section 3 of the HUD Act of 1968	All housing const., rehab, or other public service const. projects if the Grantee/ Recipient/ Subrecipient has been obligated \$200,000 or more to these project types <b>OR</b> All housing const. rehab or other public service const. projects where a contractor or subcontractor is performing work for which the amount of assistance exceeds \$200,000 and the contract or subcontract exceeds \$100,000.	Section 3 Plan <i>(Only for Construction contracts exceeding \$100,000 to execute a Section 3 covered project.)</i>	<input type="checkbox"/>
Section 11: Environmental Review	All	Applicable Notice: (Notice of Acceptance of Exemption, Notice of Release of Funds, Certification of Categorical Exclusion)	<input type="checkbox"/>
		First Draw Request	<input type="checkbox"/>
Section 12: Acquisition and Relocation	Projects for which property was acquired	Acquisition/Relocation Log (including property addresses and acquisition type)	<input type="checkbox"/>
		For Property within URA Property Sample: Address	<input type="checkbox"/>
		Valuation or Appraisal (and review appraisal)	<input type="checkbox"/>
		Statement of Just Compensation (only if acquisition is subject to URA)	<input type="checkbox"/>
		Act of Sale	<input type="checkbox"/>
		Statement of Settlement Costs	<input type="checkbox"/>
		Deed (showing transfer to Grantee/ Recipient/ Subrecipient)	<input type="checkbox"/>
		Proof of Purchase Price (canceled check)	<input type="checkbox"/>
		Relocation Notices	<input type="checkbox"/>
		Proof of Relocation Services Provided	<input type="checkbox"/>
Section 13: Property Management	Projects where real property was purchased	Property Control Tracking Log (including evidence of the most recent inventory)	<input type="checkbox"/>
		Notification to the OCD/DRU if property has been disposed of	<input type="checkbox"/>
Section 14: Lead-Based Paint, Asbestos, and Mold	Construction Projects	Lead-Based Paint Evaluation or Assessment	<input type="checkbox"/>
		Lead-Hazard Clearance Report	<input type="checkbox"/>
		Documentation that owners are providing tenants appropriate Lead-based paint pamphlets and disclosure statements (Housing Projects Only)	<input type="checkbox"/>
		Asbestos statutory checklist	<input type="checkbox"/>
		Mold inspection	<input type="checkbox"/>



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:**                      **Project ID:**                      **Monitor:**                      **Date Completed:**

## 4. Citizen Participation

Requirement	Response	Issue Type	Comments
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**Description:** The citizen participation requirements were waived for disaster assistance related to Hurricanes Katrina, Rita, Gustav and Ike and replaced with alternate requirements. However, the waiver and alternate requirements still provide for reasonable public notice, appraisal, examination, and comment on the activities proposed for the use of disaster recovery CDBG funds.

**Monitoring Instructions:** Review the methods the Grantee/ Recipient/ Subrecipient used (e.g., public hearing notices, advertisements in print or online media, websites for public comment, etc.) to provide an opportunity for and encourage citizen participation. Complete the following questions as indicated. As applicable, mark “N/A”, “Finding”, or “Concern” to identify any issues. Provide comments for your responses in the identified areas.

**Documents Needed:**

- Project Application
- Citizen Participation Plan, if applicable
- Evidence of Citizen Participation (Public hearing meeting notices, attendance logs, minutes, etc.)

1. Is there sufficient evidence the Project underwent a citizen participation period prior to project approval?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

## 5. National Objective and Eligible Activities

Requirement	Response	Issue Type	Comments
<p><b>Description:</b> Any activity undertaken by a Grantee/ Recipient/ Subrecipient must be eligible under the HCDA (Housing and Community Development Act) and meet at least one CDBG National Objective.</p> <p><b>Monitoring Instructions:</b> Obtain an understanding of all project activities prior to completing this section. Compare the activities identified in the Project Application to these activities to determine if the activities undertaken throughout the project meet the requirements set forth by the National Objective and Eligible Activities selected.</p> <p><b>Documents Needed:</b></p> <ul style="list-style-type: none"> <li>Project Application + an understanding of all project activities</li> </ul>			
1. Review the National Objective(s) selected for the project (see project application and/or Section 2). Are policies and procedures in place to ensure that the project meets a National Objective (24 CFR 570.483)? Note any discrepancies.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Are the written policies and procedures sufficient for ensuring that the program/project meets a National Objective?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Review the Eligible Activity(ies) selected for the project (see project application and/or Section 2). Are policies and procedures in place to ensure that project activities align with those listed in the project application? Note any discrepancies.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Are the policies and procedures being followed as written?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

### 6. Monitoring

Requirement	Response	Issue Type	Comments
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**Description:** Grantee/ Recipient/ Subrecipients are responsible for ensuring that programs meet the compliance requirements within executed agreements, applicable federal, state, and local laws, regulations, and codes. This includes monitoring their projects, project administrators, contractors, and subcontractors.

**Monitoring Instructions:** Obtain an understanding of the Grantee/ Recipient/ Subrecipient’s Monitoring Policies and Procedures. Review the Grantee/ Recipient/ Subrecipient’s Monitoring Plan to determine the monitoring schedule. Complete the following questions as indicated. As applicable, mark “N/A”, “Finding”, or “Concern” to identify any issues. Provide comments for your responses in the identified areas.

**Documents Needed:**

- Monitoring Policies and Procedures (Monitoring Plan)
- Monitoring Plan Schedule
- Grantee/ Recipient/ Subrecipient’s Monitoring Reports, if any

5. Does the Grantee/ Recipient/ Subrecipient have an approved Monitoring Plan in place that sufficiently evaluates compliance with contractual, financial, and CDBG requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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6. Are there sufficient procedures for ensuring the quality of monitoring efforts, including documentation and intended actions, and follow-through on promised actions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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6.1. If no, is the project due for a review, according to the Monitoring Plan/Schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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6.2. If yes, notate any concerns or findings identified as a result of the Grantee/ Recipient/ Subrecipient’s monitoring efforts.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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#### 6.1 Duplication of Benefits

1. Does the Grantee/ Subrecipient have documentation showing that it reviewed and monitored the activity for duplication of benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

## 7. Procurement and Contract Review

Requirement	Response	Issue Type	Comments
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**Description:** The Monitor is charged with determining if the Grantee/ Recipient/ Subrecipient is in compliance with the required standards relating to procurement of equipment, supplies, real property (land, including all the natural resources and permanent buildings on it), and services (including consulting and construction services, among others). The Monitor is also charged with determining if the contracts resulting from the procurement are complete and consistent with the requirements of the procurement solicitation and the program or project policies and procedures. The checklist questions build upon requirements contained in federal and state statutes, regulations, Executive Orders, and other directives (e.g., OMB Circulars).

Depending upon the nature of the procurement (equipment or supplies, consulting, professional services) or if the procurement involves IT services or acquisition of real property (land, including all the natural resources and permanent buildings on it), specific standards will apply. Grantee/ Recipient/ Subrecipients often have prescribed processes that are to be used for negotiating, executing and implementing contracts. These are usually prepared under the supervision and guidance of attorneys.

**Monitoring Instructions:** Obtain an understanding of the Grantee/ Recipient/ Subrecipient’s Procurement and Contract Management Policies and Procedures. Execute the “**Procurement And Contract Review Worksheet**” for each procurement/contract reviewed by marking “N/A”, “Finding”, or “Concern” to identify any issues, as applicable. Provide comments for your responses in the identified areas.

Complete this Section based upon the procurement process associated with each Contractor within the contract sample. Complete the following questions as indicated.

<p>1. After completing the <b>Procurement and Contract Review (Worksheet 1)</b> for each contractor, is there evidence that all procurements were performed according to all applicable federal, state, and local laws, regulations, and codes?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2. After completing the <b>Procurement and Contract Review (Worksheet 1)</b> for each contractor, is there evidence that all contracts were executed according to all applicable federal, state, and local laws, regulations, and codes?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>3. After completing the <b>Procurement and Contract Review (Worksheet 1)</b> for each contractor, is there a potential conflict of interest because of one firm providing multiple services? i.e. administrative consultant services and engineering services.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/  
Subrecipient:

Project ID:

Monitor:

Date Completed:

## 8. Labor

Requirement	Response	Issue Type	Comments
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**Description:** Grantee/ Recipient/ Subrecipients and Contractors implementing projects involving construction contracts are required to comply with applicable labor-related laws and regulations. Execute “**Worksheet 2: Contractor Labor Review**” for all contracts within the sample.

Then, answer the following questions as directed and mark “N/A”, “Finding”, or “Concern” to identify any issues, as applicable. Provide comments for your responses in the identified areas.

### Documents Needed (if Grantee/ Recipient/ Subrecipient is not exempt from Labor Requirements [see Question 1]):

- Evidence of Labor Compliance Officer (LCO) Labor Interviews
- Proof of approval from the OCD/DRU to use Force Account Labor, if applicable
- LCO Labor Issues Log (including description, issue type, restitution amount, if any)
- Verification of Wage Decision Form
- Contract (including Wage Decision included within contract)
- Contractor Clearance Form

<p>1. Is the Grantee/ Recipient/ Subrecipient exempt from Davis-Bacon and Related Acts and the Copeland Anti-Kickback requirements? If yes, do not execute the remainder of this Section.</p> <p><i>All contracts must meet at least one of the following in order for the Grantee/ Recipient/ Subrecipient to be exempt:</i></p> <ul style="list-style-type: none"> <li>• Construction contracts at or below \$2,000</li> <li>• Rehabilitation or construction of residential structures containing less than eight units;</li> <li>• Simple water and sewer line extensions without pumps, tanks, etc.</li> <li>• Separate and distinct projects. (Contact the OCD/DRU for guidance); or,</li> <li>• Contracts solely for demolition, when no federally-funded construction is anticipated on the site.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>2. Has the Grantee/ Recipient/ Subrecipient designated a Labor Compliance Officer (LCO)?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>3. If yes, is there evidence that the LCO is ensuring labor compliance requirements are met by contractors and subcontractors?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>4. Is there evidence that the contractors/subcontractors have been informed of their responsibilities regarding labor compliance? (Typically found within the contract.)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<p>5. After completing the <b>Contractor Labor Review (Worksheet 2)</b> for each Contractor, is there evidence that the Grantee/ Recipient/ Subrecipient is in compliance?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

### 8.1 Onsite Interviews

<p>1. Is there evidence that contractor employee interviews are being performed by the Grantee/ Recipient/ Subrecipient’s LCO?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/  
Subrecipient:

Project ID:

Monitor:

Date Completed:

<b>8. Labor</b>			
<b>Requirement</b>	<b>Response</b>	<b>Issue Type</b>	<b>Comments</b>
2. Is there evidence that the LCO confirmed that the job site met all federal requirements regarding the posting of labor-related information?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>8.2 Force Account Labor</b>			
1. Has the Grantee/ Recipient/ Subrecipient elected to utilize Force Account Labor in implementing the project?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Did the Grantee/ Recipient/ Subrecipient receive written approval from the OCD/DRU prior to utilizing Force Account Labor?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>8.3 Issue Identification and Compliance Enforcement</b>			
1. Has the LCO identified any labor compliance issues?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Did the LCO notify the contractor of all issues and request certified corrected payrolls?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.1. Did the contractor provide certified corrected payrolls for all labor compliance issues?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Did any issues require restitution to the employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Did the contractor provide evidence that restitution was paid to the employee within its certified corrected payrolls?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. If the issue was related to overtime, did the LCO inform the contractor of its options (request waiver or pay liquidated damages)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5.1. Were the procedures described in the OCD Disaster Recovery CDBG Grantee Administrative Manual followed to resolve the liquidated damages issue?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6. Have all labor compliance issues been resolved?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
<b>8.4 Labor Files Review - ONSITE ONLY</b>			
1. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain Contractor's License Number? (LA RS 38:2212 requires the LA Contractors License Number)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain evidence of apprenticeship/trainee registration & certification if apprentice/trainee rates were paid?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain complaints from workers, if any, and actions taken?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/  
Subrecipient:**

**Project ID:**

**Monitor:**

**Date Completed:**

<b>8. Labor</b>			
<b>Requirement</b>	<b>Response</b>	<b>Issue Type</b>	<b>Comments</b>
4. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain Supplementary Statement?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain Labor Standards Enforcement Report?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
6. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain Notification of Underpayment or Withholding?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
7. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain Wage Rate Determination?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
8. Do the Grantee/ Recipient/ Subrecipient's Labor Standards Files contain Payroll Documentation, to include the following: <ul style="list-style-type: none"> <li>• Payroll deduction authorizations</li> <li>• Contractor's/Subcontractor's New Employee Information Form</li> <li>• Fringe Benefit Verification</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



Grantee/ Recipient/ Subrecipient: \_\_\_\_\_ Project ID: \_\_\_\_\_ Monitor: \_\_\_\_\_ Date Completed: \_\_\_\_\_

### 9. Financial Management

Requirements	Response	Issue Type	Comments
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**Description:** A Grantee/ Recipient/ Subrecipient’s financial management system must ensure that all expenditures are reasonable and related to allowable activities, are in compliance with applicable laws, rules, and regulations, and are properly supported by appropriate documentation. Grantee/ Recipient/ Subrecipients must track and report each project separately.

**Monitoring Instructions:** Obtain an understanding of the Grantee/ Recipient/ Subrecipient’s Financial Management Policies and Procedures. Review the total amount budgeted and total amount expended for the Project. Complete **“Worksheet 3: Contractor Support Documentation/Allowable Costs Review”** for all contractors reviewed.

**Documents Needed:**

- Policies and Procedures
- Project Budget Report
- Revenue/Expenditure Report (or “Financial Status Report”)
- Chart of Accounts
- Bank Statement (Or other documentation required to review cash management)
- Most recent reconciliation
- Execute Worksheet 3 for each Contractor reviewed

#### 9.1 Expenditure Review

1. Were indirect costs charged to the project?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
1.1. If yes, did the Grantee/ Recipient/ Subrecipient submit a federally-approved Indirect Cost Plan to the OCD/DRU?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Do the Project Delivery Costs fall within 15% of total project budget? <i>Notate the Project Budget, Project Costs, and Project Delivery Costs.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

#### 9.2 Support Documentation/Allowable Costs Summary

1. Based on the completion of <b>WORKSHEET 3</b> , was all support documentation complete and costs allowable?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
--	---	--	--

#### 9.3 Cash Management Review

1. Has the Grantee/ Recipient/ Subrecipient minimized the time between funds receipt and disbursal? (Generally disbursed within 3 working days). <i>Notate the date funds were received from OCD/DRU and the date the funds were disbursed to the contractor/Subrecipient</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
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# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/ Subrecipient:

Project ID:

Monitor:

Date Completed:

9. Financial Management					
Requirements	Response	Issue Type	Comments		
<b>9.4 Budget to Actual Reconciliation Review</b>					
<b>Instructions:</b> Review the Project Budget and the current expenditures. List items identified as Project Delivery Costs from Project Application under the heading labeled “3.1 Project Delivery Costs”. List items identified as Project Costs from Project Application under the heading labeled “3.2 Project Costs”. See Note 3 for a description of project costs verses project delivery costs.					
1. Total Project Budget:					
1.1. Budget Approval Date:					
2. Current Amount Expended:					
2.1. Reconciliation Date:					
3. Budget/Actual Detail	Budgeted Amount	Actual Amount	On Track?		
3.1. Project Delivery Costs			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1.1.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1.2.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1.3.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1.4.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2. Project Costs			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2.1.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2.2.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2.3.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

**Note 3: Project Delivery Costs vs. Project Costs**

- Project Delivery Costs are used specifically to meet the requirements to complete a particular project, especially as it applies to meeting CDBG requirements. This would include such things as eligibility verification, environmental clearance, project monitoring, application development, etc.
- Project Costs are the direct costs of the project, such as the amount of the actual loan or grant provided, construction costs, etc.



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:**                      **Project ID:**                      **Monitor:**                      **Date Completed:**

## 10. Section 3 of the HUD Act of 1968

Requirements	Response	Issue Type	Comments
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**Description:** Section 3 of the Housing and Urban Development Act of 1968 [12 U.S.C. 1701u and 24 CFR Part 135] is HUD’s legislative directive for providing preference to low- and very low-income residents of the local community (regardless of race or gender), and the businesses that substantially employ these persons, for new employment, training, and contracting opportunities resulting from HUD-funded projects. A “covered project” is a project for which Section 3 applies. “Covered funds” are those funds used to fund a “covered project”.

*Section 3 Residents are:*

- Residents of Public and Indian Housing, or
- Individuals that reside in the metropolitan area or nonmetropolitan parish in which the Section 3 covered assistance is expended and whose income does not exceed the local HUD income limits set forth for low- or very low-income households.

*Section 3 Business Concerns are One of the Following:*

- Businesses that are 51 percent or more owned by Section 3 residents;
- Businesses with 30 percent or more permanent, full-time employees whom are currently Section 3 residents, or were Section 3 residents within three years of the date of first employment; or
- Businesses that provide evidence of a commitment to subcontract in excess of 25 percent of the dollar amount of all subcontracts to be awarded to businesses that meet the qualifications described above.

**Monitoring Instructions:**

Complete the following questions by marking the appropriate box for “Yes”, “No”, or “N/A”. As applicable, mark “N/A”, “Finding” or “Concern” to identify any issues. Provide comments describing the basis for your response in the space provided.

**Required:**

- Knowledge of Grantee/ Recipient/ Subrecipient’s total allocation and all project activities
- Executed Worksheet 1 for the contractor (or the applicable procurement solicitation)
- Contract
- Contractor’s Section 3 Plan

1. Has the Grantee allocated \$200,000 or more DR-CDBG funds into projects/activities involving housing construction, demolition, rehabilitation, or other public construction—i.e., roads, sewers, community centers, etc.? (See the Core Checklist, Section 4.4.) <i>If no, the remaining questions within this Section are not applicable.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. After completing <b>Procurement and Contract Review (Worksheet 1, Procurement Requirements: Question 6.5)</b> for each contractor in the sample, was it determined that the Grantee included a Section 3 clause within the applicable procurement solicitations?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. After completing <b>Procurement and Contract Review (Worksheet 1, Contract Requirements: Question 6.5)</b> for each contract in the sample, was it determined that the Grantee included a Section 3 clause within each of the applicable contracts?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/ Subrecipient:

Project ID:

Monitor:

Date Completed:

## 10. Section 3 of the HUD Act of 1968

Requirements	Response	Issue Type	Comments
4. <b><u>New Hire Goal</u></b> – After completing the Section 3 Review (Worksheet 4, Question 10) for each contract within the sample, have any contractors hired employees to work on this project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4.1 If Question 4 is “Yes”, were at least 30% of each contractors’ new hires Section 3 residents?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4.2 If Question 4.1 is “No”, has each contractor within the sample demonstrated that, to the greatest extent feasible, it has made an effort to ensure that the employment objectives of its Section 3 Plan(s) are met?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. <b><u>Contracting Goal</u></b> - After completing the Section 3 Review (Worksheet 4, Question 11) for each contract within the sample, has any contractor entered into any contracts to execute this Project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5.1 If Question 5 is “Yes”, did all contractors meet their Section 3 contracting goals?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5.2 If Question 5.1 is “No”, has each contractor within the sample demonstrated that, to the greatest extent feasible, it has made an effort to ensure that the contracting objectives of its Section 3 Plan are met?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

**Grantee/ Recipient/ Subrecipient:** \_\_\_\_\_ **Project ID:** \_\_\_\_\_ **Monitor:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

## 11. Environmental Review

Requirements	Response	Issue Type	Comments
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**Description:** Every project undertaken with DR CDBG funds is subject to the provisions of the National Environmental Policy Act of 1969 (NEPA), as well as the HUD environmental review regulations at 24 CFR Part 58. The Grantee/ Recipient/ Subrecipient is responsible for ensuring that an Environmental Review Record (ERR) is prepared for all activities associated with a project and environmental clearance is obtained prior to committing funds. No party involved with the project, including Grantee/ Recipient/ Subrecipients, may commit funds to the project, including incurring project costs, until the Grantee/ Recipient/ Subrecipient completes the appropriate environmental review and public notification process, and HUD approves a certification of compliance with environmental laws and request for release of funds from environmental conditions.

**Monitoring Instructions:** The Grantee/ Recipient/ Subrecipient is required to submit various documents to the OCD/DRU throughout the establishment of the Environmental Review Record. The OCD/DRU will issue a “*Notice of Acceptance of Exemption*” or “*Notice of Release of Funds*” once all environmental requirements have been satisfied. Complete the following questions by marking the appropriate box for Yes/No. Also notate the date that the Notice was received and the date the first costs were obligated by the Grantee/ Recipient/ Subrecipient. As applicable, mark “N/A”, “Finding”, or “Concern” to identify any issues. Provide comments for your responses in the identified areas.

**Documents Needed:**

- The appropriate notice(s):
  - *Notice of Acceptance of Exemption* (if exempt)
  - *Notice of Release of Funds* (if excluded and subject to 24 CFR part 58.35(a) or not exempt or excluded)
  - *Certification of Categorical Exclusion* (if categorically excluded)
- Date first costs were obligated

1. Are policies and procedures in place mandating that an environmental review be conducted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Are policies and procedures in place mandating that the proper Notice/Certification be obtained prior to commitment of funds (24 CFR 58.22)? <i>Note the date the Notice of Acceptance of Funds, Notice of Release of Funds or Certification of Categorical Exclusion was received and date first costs were obligated</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

### 11.1 Environmental Records – ONSITE ONLY

1. Does the Grantee/ Recipient/ Subrecipient maintain a copy of the Environmental Record that includes and accurate description of the project/activity, including all documentation related to determination, findings, public notices, consultation letters, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Does the Grantee/ Recipient/ Subrecipient have a copy of the Release of Funds in the files?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Does the Grantee/ Recipient/ Subrecipient have proof of current NFIP flood insurance if the activity is a structure located in a flood zone?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template



Grantee/ Recipient/  
Subrecipient:

Project ID:

Monitor:

Date Completed:

## 12. Acquisition and Relocation

Requirements	Response	Issue Type	Comments
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**Description:** If property is acquired and/or occupants are displaced as a result of project activities, the Grantee/ Recipient/ Subrecipient is required to abide by the requirements of the Uniform Relocation Act (URA), the Real Property Acquisition Act of 1970, as amended, and Section 104(d) of the Housing and Community Development Act of 1974 (HCDA) and the implementing regulations at 24 CFR Part 570.496(a). The URA’s purpose is to establish a uniform policy for fair and equitable treatment of persons displaced as a result of federal and federally assisted programs. For additional information, refer to the OCD Disaster Recovery CDBG Grantee Administrative Manual.

**Monitoring Instructions:** Review the Grantee/ Recipient/ Subrecipient’s Acquisition/Relocation Log. Select two acquired properties that are subject to URA and two properties that are not subject to URA. If the Grantee/ Recipient/ Subrecipient has only acquired property that is subject to URA, select four of these properties, preferably with different relocation types (i.e., permanent, temporary, manufactured home, or business). Answer the appropriate sections of the following checklist based on the acquisition and relocation types. Complete the following questions as indicated. As applicable, mark “N/A”, “Finding”, or “Concern” to identify any issues. Provide comments for your responses in the identified areas.

**Documents Needed:**

- Acquisition/Relocation Log (including property addresses and acquisition type)
- For Selected Properties:
  - Address
  - Deed (showing transfer to Grantee/ Recipient/ Subrecipient)
  - Valuation or Appraisal (and review appraisal)
  - Proof of Purchase Price (canceled check)
  - Statement of Just Compensation (only if acquisition is subject to URA)
  - Relocation Notices
  - Act of Sale
  - Proof of Relocation Services Provided
  - Statement of Settlement Costs

1. Was any land, including all the natural resources and permanent buildings on it (“real property”), acquired <b>or improved</b> (see note below) with DR CDBG funds? <i>If no, continue to Question 3. If yes, continue to Question 2.</i>  <i>Note: CDBG funds spent on acquisition, rehabilitation, or new construction connected with a demolition project funded with non-federal funds must also comply with Section 104(d).</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2. Were occupants displaced as a result of any of the project activities?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/  
Subrecipient:

Project ID:

Monitor:

Date Completed:

12. Acquisition and Relocation				
Requirements	Response	Issue Type		Comments
3. If any real property (land, including all the natural resources and permanent buildings on it) was purchased, was it in excess of \$25,000? [24 CFR 570.505]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern		
3.1. Does the CEA/binding agreement explicitly list the use of the real property?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2. Will the property be used by the Grantee/ Recipient/ Subrecipient to continue to meet one of the project's National Objectives for at least five years after the expiration of the CEA/binding agreement?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Identify the type of project activity <u>Activities Not Applicable to URA</u> (Execute Section 12.1) <ul style="list-style-type: none"> <li>• Acquisition from another public agency</li> <li>• Temporary Construction Servitudes of Easements</li> <li>• Leases for a duration less than 15 years (including any options to renew)</li> <li>• Voluntary Acquisition</li> <li>• Acquisition of Streets under LRS 48:49</li> </ul> <u>Activities Applicable to URA</u> (Execute Section 12.2) <ul style="list-style-type: none"> <li>• Acquisition of Specific Parcels of Property by Purchase</li> <li>• Acquisition by Private Entities</li> <li>• Purchases, Donations, Partial Donations</li> <li>• Additional Rights of Way – Street Projects</li> <li>• Leases for a duration of 15 years or longer, or less than 15 but are automatically renewable</li> <li>• <input type="checkbox"/> Rehabilitation (No acquisition involved)</li> </ul>		N/A	N/A	



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.1 Acquisition Not Subject to URA	Property 1	Property 2
<b>Instructions:</b> From the Acquisition Log, select two properties acquired that are not subject to URA to answer the following questions.		
1. Address of the acquired property (selected from Acquisition Log):		
2. How was the value of the property established?	<input type="checkbox"/> Appraisal <input type="checkbox"/> Written Valuation	<input type="checkbox"/> Appraisal <input type="checkbox"/> Written Valuation
3. Review the Appraisal and the Review Appraisal or the Written Evaluation. Compare these documents to the Act of Sale. Is the sale price of the property listed within the Act of Sale consistent with the stated value of the property?  <i>Comments:</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No  Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	<input type="checkbox"/> Yes <input type="checkbox"/> No  Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
4. Based on information obtained for this review, did the Grantee/ Recipient/ Subrecipient carry out the acquisition process in a manner that minimized hardships to the owners, and was the Grantee/ Recipient/ Subrecipient consistent with its treatment of other owners?  <i>Comments:</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No  Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	<input type="checkbox"/> Yes <input type="checkbox"/> No  Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.2 Acquisition Subject to URA	Property 3	Property 4
<b>Instructions:</b> Select two properties acquired that are subject to URA to answer the following questions.		
1. Address of the properties Subject to URA (selected from Relocation Log):		
2. Type of Property:	<input type="checkbox"/> Residential – Owned, Stick-Built (including modular) Home <input type="checkbox"/> Residential – Rental, Stick-Built (including modular) Home <input type="checkbox"/> Residential – Owned, Manufactured Home <input type="checkbox"/> Business	<input type="checkbox"/> Residential – Owned, Stick-Built (including modular) Home <input type="checkbox"/> Residential – Rental, Stick-Built (including modular) Home <input type="checkbox"/> Residential – Owned, Manufactured Home <input type="checkbox"/> Business
3. Were there occupants?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Were the owner occupants or tenants displaced as a result of this project?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.1. If yes, which type of displacement occurred:	<input type="checkbox"/> Permanent (execute Section 12.3) <input type="checkbox"/> Temporary (execute Section 12.4)	<input type="checkbox"/> Permanent (execute Section 12.3) <input type="checkbox"/> Temporary (execute Section 12.4)
5. Was property rehabilitated with no acquisition involved? <i>If yes, continue to Section 12.3. If no, continue to Question 6.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Was an appraisal required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Review the Appraisal and the Review Appraisal or the Written Evaluation. Compare these documents to the Statement of Just Compensation. Is the sale price of the property listed within the Statement of Just Compensation consistent with the stated value of the property? <i>Comments:</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No  Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	<input type="checkbox"/> Yes <input type="checkbox"/> No  Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
8. Did the Grantee/ Recipient/ Subrecipient execute the following documents sequentially for the acquired property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.1. Preliminary Acquisition Notice <i>Date Sent to Owner:</i>		
8.2. Written Offer <i>Date Sent to Owner:</i>		
8.3. Notice of Eligibility for Relocation Assistance <i>Date Sent to Owner Occupants or Tenants:</i>		
8.3.1. Was the Notice of Eligibility for Relocation Assistance within the 30 days of submitting the Written Offer to the Owner?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.4. Act of Sale <i>Date Executed</i> <i>Comments:</i>	Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

12.2 Acquisition Subject to URA	Property 3	Property 4
<p>9. Based on the available evidence, did the Grantee/ Recipient/ Subrecipient carry out the acquisition process in a manner that minimized hardships to the owners?</p> <p><i>Comments:</i></p>	<p><input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Issue Type</p> <p><input type="checkbox"/>N/A</p> <p><input type="checkbox"/>Finding</p> <p><input type="checkbox"/>Concern</p>	<p><input type="checkbox"/>Yes <input type="checkbox"/>No</p> <p>Issue Type</p> <p><input type="checkbox"/>N/A</p> <p><input type="checkbox"/>Finding</p> <p><input type="checkbox"/>Concern</p>

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.2.1 Residential Relocation File Review – ONSITE ONLY	Property 3	Property 4
1. For each residential relocation claim, does the Grantee/ Recipient/ Subrecipient’s Relocation File contain the following: <i>Comments:</i>	DEPENDENT ON RESPONSES TO SUBQUESTIONS <u>Issue Type</u> <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	DEPENDENT ON RESPONSES TO SUBQUESTIONS <u>Issue Type</u> <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
1.1. Evidence and dates of personal contacts; and description of services provided?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.2. Identification of person, displacement property, racial/ethnic group classification, age and sex of all members of household, monthly rent and utility costs for displacement and replacement housing, type of enterprise, and relocation needs and preferences?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.3. Recipient Interview and Survey (Household Case Record form for replacement-housing needs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.4. Identification of referrals to replacement properties, date of referral, sale price or rent/utility costs (if dwelling), date of availability, and reason(s) for declining referral?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.5. Identification of actual replacement property, sale price or rent/utility costs (if dwelling), and date of relocation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.6. Replacement dwelling inspection report; and date of inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.7. A copy of each approved claim form and related documentation; evidence that the person received payment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.8. Copy of any appeal or complaint filed and recipient's response?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.9. Copy of deferred loan lien agreement that has been filed with the clerk of courts office?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.10. Acknowledgement of Receipt of Relocation Payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

12.3 Relocation Benefits - Permanent Displacement	Property 3	Property 4
<p><b><u>EXECUTE THIS SECTION ONLY IF:</u></b></p> <ul style="list-style-type: none"> <li>• Activity is subject to URA</li> <li>• Property is not a manufactured home</li> <li>• Owner Occupants or tenants were permanently displaced</li> </ul> <p>The Relocation Process undertaken for the property identified within Section 12.2, Question 1 should be used to answer the following questions.</p>		
<p>1. Based on the property and displacement type, do occupants qualify to receive permanent displacement relocation benefits? <i>If yes, continue. If no, skip to Section 12.4</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2. Was the 90-day Notice to Vacate issued after the Notice of Displacement?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2.1. Notice of Displacement <i>Date Issued:</i></p>		
<p>2.2. 90-day Notice to Vacate <i>Date Issued:</i> <i>Comments:</i></p>	<p>Issue Type</p> <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	<p>Issue Type</p> <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
<p>3. Which type of Relocation Assistance was provided?</p>	<input type="checkbox"/> Advisory Services <input type="checkbox"/> Relocation to a comparable unit <input type="checkbox"/> 180-day Homeowner Replacement Housing Payment <input type="checkbox"/> 90-day Tenant or Homeowner Rental Assistance Payment <input type="checkbox"/> 90-day Tenant or Homeowner Down Payment Assistance Payment <input type="checkbox"/> Moving Expenses	<input type="checkbox"/> Advisory Services <input type="checkbox"/> Relocation to a comparable unit <input type="checkbox"/> 180-day Homeowner Replacement Housing Payment <input type="checkbox"/> 90-day Tenant or Homeowner Rental Assistance Payment <input type="checkbox"/> 90-day Tenant or Homeowner Down Payment Assistance Payment <input type="checkbox"/> Moving Expenses



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

12.3.1 Residential Relocation File Review (Benefits) – ONSITE ONLY	Property 3	Property 4
1. If <b>Relocation to a Comparable Unit</b> was provided, were at least three comparable dwellings made available to the displaced person?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2. If a <b>180-day Homeowner Replacement Housing Payment</b> was made, did the Grantee/ Recipient/ Subrecipient follow the following steps?	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2.1. Did the displaced person own and occupy the displacement dwelling for at least 180 days prior to the initiation of acquisition negotiations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.2. Did the displaced person purchase and occupy a comparable replacement dwelling prior to receiving payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.3. Did the 180-day Homeowner Replacement Housing Payment exceed the maximum allowable payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. If a <b>90-day Tenant or Homeowner Rental Assistance Payment</b> was made, did the Grantee/ Recipient/ Subrecipient follow the following steps?	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3.1. Did the displaced person own and occupy the displacement dwelling for at least 90 days prior to the initiation of acquisition negotiations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.2. Did the displaced person rent or purchase and occupy a comparable replacement dwelling prior to receiving payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.3. Did the 90-day Tenant or Homeowner Rental Assistance Payment exceed the maximum allowable payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.4. Did the displaced person file their relocation assistance form within 1 year of moving to their replacement dwelling?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.5. Was the replacement rental unit selected by the displaced person inspected by the Grantee/ Recipient/ Subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. If a <b>90-day Tenant or Homeowner Down Payment Assistance Payment</b> was made, did the Grantee/ Recipient/ Subrecipient follow the following steps?	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4.1. Did the displaced person own and occupy the displacement dwelling for at least 90 days prior to the initiation of acquisition negotiations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2. Did the displaced person file a down payment assistance form with the Grantee/ Recipient/ Subrecipient?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3. Did the 90-day Homeowner Down Payment Assistance Payment exceed the maximum allowable payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. If <b>Moving Expenses</b> were paid, did the Grantee/ Recipient/ Subrecipient ensure that all expenses were reasonable and eligible?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6. If <b>Advisory Services</b> were provided, did the Grantee/ Recipient/ Subrecipient follow the following steps?	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
6.1. Did the Grantee/ Recipient/ Subrecipient provide information about the upcoming project and the earliest date they will have to vacate the property	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.2. Did the Grantee/ Recipient/ Subrecipient provide a complete explanation of their eligibility for relocation benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.3. Did the Grantee/ Recipient/ Subrecipient provide assistance in understanding their best alternatives?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.4. Did the Grantee/ Recipient/ Subrecipient provide assistance in following the required procedures to receive payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.5. Did the Grantee/ Recipient/ Subrecipient provide current information on the availability and cost to purchase or rent suitable replacement locations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.6. Did the Grantee/ Recipient/ Subrecipient provide assistance, including referrals, to help the business obtain an alternative location and become reestablished?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No



# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

<b>12.3.1 Residential Relocation File Review (Benefits) – ONSITE ONLY</b>	<b>Property 3</b>	<b>Property 4</b>
6.7. Did the Grantee/ Recipient/ Subrecipient provide referrals to state or federal programs that may help the business reestablish and apply for funds?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.8. Did the Grantee/ Recipient/ Subrecipient provide assistance in completing relocation claim forms?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.4 Relocation Benefits - Temporary Displacement	Property 3	Property 4
<p><b>EXECUTE THIS SECTION ONLY IF:</b></p> <ul style="list-style-type: none"> <li>Acquisition activity is subject to URA</li> <li>Property is a Stick-Built (including modular) Home</li> <li>Owner Occupants or tenants were temporarily displaced</li> </ul> <p>The Relocation Process undertaken for the property identified within Section 12.2, Question 1 should be used to answer the following questions.</p>		
<p>1. Based on the property and displacement type, do occupants qualify to receive permanent displacement relocation benefits? <i>If yes, continue. If no, go to Section 12.5.</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2. Was the owner temporarily displaced as a result of this project?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2.1. Did the Grantee/ Recipient/ Subrecipient provide assistance to an owner-occupant who voluntarily participated in a housing rehabilitation program?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2.2. If yes, was the owner faced with a “hardship” as described within the Grantee/ Recipient/ Subrecipient’s URA policy? <i>Comments:</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
<p>3. Was a tenant temporarily displaced as a result of this project?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>4. Was the Temporary Notice issued after the Notice of Non-displacement?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>4.1. Notice of Non-displacement <i>Date Issued:</i></p>		
<p>4.2. Temporary Relocation Notice <i>Date Issued:</i> <i>Comments:</i></p>	Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
<p>5. Which type of Relocation Assistance was provided to the tenant?</p>	<input type="checkbox"/> Appropriate advisory services <input type="checkbox"/> Reimbursement for all reasonable out-of-pocket expenses	<input type="checkbox"/> Appropriate advisory services <input type="checkbox"/> Reimbursement for all reasonable out-of-pocket expenses

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.5 Relocation Benefits - Business Displacement	Property 3	Property 4
<p><b><u>ONLY EXECUTE THIS SECTION IF:</u></b></p> <ul style="list-style-type: none"> <li>Acquisition activity is subject to URA</li> <li>Property is a Business</li> </ul> <p>The Relocation Process undertaken for the property identified within Section 12.2, Question 1 should be used to answer the following questions.</p>		
<p>1. Based on the property and displacement type, do occupants qualify to receive permanent displacement relocation benefits? <i>If yes, continue. If no, skip to Section 12.6</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>2. Was the Notice of Relocation Eligibility issued after the General Information Notice?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>2.1. General Information Notice <i>Date Notice Issued:</i></p>		
<p>2.2. Notice of Relocation Eligibility <i>Date Notice Issued:</i> <i>Comments:</i></p>	<p>Issue Type  <input type="checkbox"/> N/A  <input type="checkbox"/> Finding  <input type="checkbox"/> Concern</p>	<p>Issue Type  <input type="checkbox"/> N/A  <input type="checkbox"/> Finding  <input type="checkbox"/> Concern</p>
<p>3. Did the Notice of Relocation Eligibility meet the following requirements?</p>	<p><i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i>  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>	<p><i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i>  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p>
<p>3.1. Inform the business of the effective date of their eligibility</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>3.2. Describe the assistance available and procedures</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>3.3. If necessary, a 90-day Notice to Move may be sent after the initiation of negotiations.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>3.4. The business must be told as soon as possible that they are required to:</p> <ul style="list-style-type: none"> <li>Allow inspections of both the current and replacement sites by the Grantee/ Recipient/ Subrecipient’s representatives, under reasonable terms and conditions;</li> <li>Keep the Grantee/ Recipient/ Subrecipient informed of their plans and schedules;</li> <li>Notify the Grantee/ Recipient/ Subrecipient of the date and time they plan to move (unless this requirement is waived); and,</li> <li>Provide the Grantee/ Recipient/ Subrecipient with a list of the property to be moved or sold.</li> </ul>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Issue Type  <input type="checkbox"/> N/A  <input type="checkbox"/> Finding  <input type="checkbox"/> Concern</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Issue Type  <input type="checkbox"/> N/A  <input type="checkbox"/> Finding  <input type="checkbox"/> Concern</p>
<p>4. Which type of Relocation Assistance was provided? (Mark all that apply.)</p>	<p><input type="checkbox"/> Advisory Services  <input type="checkbox"/> Direct Loss Payment  <input type="checkbox"/> Substitute Equipment Payment  <input type="checkbox"/> Replacement Location Search Expense  <input type="checkbox"/> Reimbursement of Actual Moving Expenses  <input type="checkbox"/> Other Moving and Related Expenses  <input type="checkbox"/> Reestablishment Expenses  <input type="checkbox"/> Fixed Payments</p>	<p><input type="checkbox"/> Advisory Services  <input type="checkbox"/> Direct Loss Payment  <input type="checkbox"/> Substitute Equipment Payment  <input type="checkbox"/> Replacement Location Search Expense  <input type="checkbox"/> Reimbursement of Actual Moving Expenses  <input type="checkbox"/> Other Moving and Related Expenses  <input type="checkbox"/> Reestablishment Expenses  <input type="checkbox"/> Fixed Payments</p>





# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template

12.5.1 Business Relocation File Review (Benefits) – ONSITE ONLY	Property 3	Property 4
1. If <b>Advisory Services</b> were provided, did the Grantee/ Recipient/ Subrecipient follow the following steps?	DEPENDENT ON RESPONSES TO SUBQUESTIONS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	DEPENDENT ON RESPONSES TO SUBQUESTIONS <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
1.1. Did the Grantee/ Recipient/ Subrecipient provide information about the upcoming project and the earliest date they will have to vacate the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.2. Did the Grantee/ Recipient/ Subrecipient provide a complete explanation of their eligibility for relocation benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.3. Did the Grantee/ Recipient/ Subrecipient provide assistance in understanding their best alternatives?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.4. Did the Grantee/ Recipient/ Subrecipient provide assistance in following the required procedures to receive payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.5. Did the Grantee/ Recipient/ Subrecipient provide current information on the availability and cost to purchase or rent suitable replacement locations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.6. Did the Grantee/ Recipient/ Subrecipient provide assistance, including referrals, to help the business obtain an alternative location and become reestablished?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.7. Did the Grantee/ Recipient/ Subrecipient provide referrals to state or federal programs that may help the business reestablish and apply for funds?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.8. Did the Grantee/ Recipient/ Subrecipient provide assistance in completing relocation claim forms?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. If a <b>Direct Loss Payment</b> was made, was the Payment made to cover only one of the following? <i>Notate the covered expense.</i> <ul style="list-style-type: none"> <li>• Losses associated with personal property that would not be moved</li> <li>• Losses associated with discontinuing the business, nonprofit or farm?</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3. If a <b>Direct Loss Payment</b> was made, was the Payment based on the lesser of the following? <i>Notate the calculation used.</i> <ul style="list-style-type: none"> <li>• The fair market value of the item for continued use at the displacement site, minus the proceeds from the sale</li> <li>• The estimated cost to move the item, with no allowance for the following: storage, or reconnecting a piece of equipment if the equipment is in storage or not being used at the acquired site. If the business is discontinuing, the cost to move is based on a moving distance of 50 miles.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4. If a <b>Substitute Equipment Payment</b> was made, was the Payment made to cover pay for an item used by the business, nonprofit, or farm is left in place, but promptly replaced with a substitute item that performs a comparable function at the new site?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5. If <b>Replacement Location Search Expenses</b> were paid, did Grantee/ Recipient/ Subrecipient ensure that costs were reasonable? <i>Costs may include: Transportation, meals and lodging away from home, time spent while searching, based on a reasonable pay salary or earnings, and Fees paid to a real estate agent or broker while searching for the site.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6. If <b>Reimbursement of Actual Moving Expenses</b> were paid, did the Grantee/ Recipient/ Subrecipient ensure that costs were eligible, reasonable and necessary?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.5.1 Business Relocation File Review (Benefits) – ONSITE ONLY	Property 3	Property 4
7. If <b>Other Moving and Related Expenses</b> were paid, did the Grantee/ Recipient/ Subrecipient ensure that costs were eligible, reasonable and necessary?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
8. If <b>Other Moving and Related Expenses</b> were paid to move low value, high bulk items, did the Grantee/ Recipient/ Subrecipient ensure that the allowable moving cost payment did not exceed the lesser of: a. The amount which would be received if the property were sold at the site; or, b. The replacement cost of a comparable quantity delivered to the new business location.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
9. If <b>Reestablishment Expenses</b> were paid, does the business qualifying for the reestablishment expenses qualify as a small business? <i>“Small Businesses” for this purpose are defined as those with at least one and no more than 500 people working at the project site.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10. If <b>Reestablishment Expenses</b> were paid, did the Reestablishment Expenses exceed \$10,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11. If <b>Fixed Payments</b> were paid, were the following criteria met?	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<i>DEPENDENT ON RESPONSES TO SUBQUESTIONS</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11.1. Was the HUD Form 40056 (or equivalent) submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.2. Is the Fixed Payment between \$1,000 and \$20,000	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.3. Does the business meet the eligibility criteria? ( <i>See OCD Disaster Recovery CDBG Grantee Administrative Manual, Section 10</i> )	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



12.6 Relocation Benefits - Manufactured Homeowner Displacement	Property 3	Property 4
<p><b><u>ONLY EXECUTE THIS SECTION IF:</u></b></p> <ul style="list-style-type: none"> <li>Acquisition activity is subject to URA</li> <li>Property is a Manufactured Home</li> </ul> <p>The Relocation Process undertaken for the property identified within Section 12.2, Question 1 should be used to answer the following questions.</p>		
1. Based on the property and displacement type, do occupants qualify to receive permanent displacement relocation benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Was the 90-day Notice to Vacate issued after the Notice of Displacement?		
2.1. Notice of Displacement <i>Date Issued</i>		
2.2. 90-day Notice to Vacate <i>Date Issued</i>	Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	Issue Type <input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern
3. Which type of Relocation Assistance was provided?	<input type="checkbox"/> Homepad Rental Assistance <input type="checkbox"/> Replacement Housing Assistance <input type="checkbox"/> Costs to Move a <input type="checkbox"/> Manufactured Home	<input type="checkbox"/> Homepad Rental Assistance <input type="checkbox"/> Replacement Housing Assistance <input type="checkbox"/> Costs to Move a <input type="checkbox"/> Manufactured Home



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/ Subrecipient:

Project ID:

## 13. Property Management

Requirements	Response
<p><b>Description:</b> If Disaster Recovery CDBG funds are used to acquire personal property, the Grantee/ Recipient/ Subrecipient is responsible for:</p> <ul style="list-style-type: none"> <li>The property continues to be used for its intended (and approved) purposes;</li> <li>Property records are maintained to keep track of the property;</li> <li>Measures are in place to safeguard and protect the property, and</li> <li>If the property is sold, proper disposition procedures are followed.</li> </ul> <p><b>Monitoring Instructions:</b> Review the Grantee/ Recipient/ Subrecipient's Property Control Tracking Log and complete the following questions.</p> <p><b>Documents Needed:</b></p> <ul style="list-style-type: none"> <li>Property Control Tracking Log (including evidence of the most recent inventory)</li> <li>Notification to the OCD/DRU if property has been disposed of</li> </ul>	
1. Has any equipment been acquired through the use of DR CDBG funds to administer/implement this project? <i>If yes, continue. If no, skip to Section 13. Monitoring.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are the policies and procedures sufficient to adequately identify CDBG property and assets and maintain the appropriate property? (i.e., Property Tags, Inventory Listing, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3. Is there evidence that a physical inventory was conducted within the last year and that the results reconcile with property records?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4. Does the Grantee/ Recipient/ Subrecipient's Control Tracking Log contain the following fields? <ul style="list-style-type: none"> <li>Property Description</li> <li>Identification Number</li> <li>Funding Source</li> <li>Title Holder</li> <li>Acquisition date and cost</li> <li>Federal share of cost</li> <li>Location</li> <li>Use</li> <li>Condition</li> <li>Unit acquisition cost</li> <li>Disposition data (if applicable)</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5. Is there evidence of a disposal of equipment/property that was purchased with CDBG Disaster Recovery funds? If yes, was the disposal completed in accordance with CDBG requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

### 13.1 Property Management File Review – ONSITE ONLY

Requirement	Response	Issue Type	Comments
<p><b>Instructions:</b> Select a random sample of the property acquired to implement this project (from the Grantee/ Recipient/ Subrecipient's tracking log) using the transaction-based sampling. Identify the property selected within Question 1. Answer Question 2 for each piece of property selected within the sample within the column that coordinates with the Project identified within Question 1.</p> <ul style="list-style-type: none"> <li>If 50 – 99 pieces of property have been acquired, select 10</li> <li>If 100 -199 pieces of property have been acquired, select 20</li> <li>If 200 or more pieces of equipment have been acquired, select 65</li> </ul>			
1. Property Sample Data	N/A	N/A	N/A

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



13.1 Property Management File Review – ONSITE ONLY			
Requirement	Response	Issue Type	Comments
A. Notate Property ID Number	#	N/A	
B. Notate Property ID Number	#	N/A	
C. Notate Property ID Number	#	N/A	
D. Notate Property ID Number	#	N/A	
E. Notate Property ID Number	#	N/A	
2. Does the Grantee/ Recipient/ Subrecipient’s Control Tracking Log contain the following data for the property within the property sample? (Mark an X for each piece of property within sample.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	
<b>PROPERTY ID</b> (from Question 1)	<b>A B C D E</b>	N/A	N/A
2.1. Property Description	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.2. Funding Source	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.3. Title Holder	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.4. Acquisition date	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.5. Cost	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.6. Federal Share of Cost	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.7. Location	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.8. Use	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.9. Condition	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.10. Unit acquisition cost	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
2.11. Disposition date (if applicable)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3. Review the Property Control Tracking Log. Has any equipment that was purchased for this project been disposed of? <i>If yes, continue to Question 3.1. If no, continue to Question 4.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.1. Is there support for the Grantee/ Recipient/ Subrecipient notifying the OCD/DRU prior to disposal of the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.2. Was the current per-unit fair market value greater than \$5,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
3.3. If yes, was the Grantee/ Recipient/ Subrecipient compensation calculated correctly?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	

# ST. TAMMANY PARISH GOVERNMENT

## Compliance Monitoring Core Checklist Template



### 13.1 Property Management File Review – ONSITE ONLY

Requirement	Response	Issue Type	Comments
3.4. Were the net proceeds from the sale considered as program income?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
4. Is there evidence that a physical inventory of the property has been performed within the last year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	
5. Is there evidence that the Property Control Tracking Log is being maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> N/A <input type="checkbox"/> Finding <input type="checkbox"/> Concern	



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/ Subrecipient:

Project ID:

## 14. Lead-Based Paint, Asbestos, and Mold

Requirement	Response
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**Description:** Legislation implemented by HUD requires Grantee/ Recipient/ Subrecipients to ensure that potential lead-based paint must be performed in accordance to applicable federal, state, and local requirements.

**Monitoring Instructions:** Review the Grantee/ Recipient/ Subrecipient's records of inspections, evaluations or assessments, clear any issues. Provide comments for your responses in the identified areas.

**Documents Needed:**

- Binding Agreement executed between the Grantee/ Recipient/ Subrecipient and the OCD/DRU (including any amendment)
- Lead-Based Paint Evaluation or Assessment
- Lead-Hazard Clearance Report
- Grantee/ Recipient/ Subrecipient's documentation that owners are providing tenants appropriate Lead-based paint pamphlet
- Asbestos statutory checklist
- Mold inspection

### 14.1 Lead-Based Paint Hazard Mitigation

1. Is construction involved with the project? <i>If yes, continue. If no, activities are exempt from lead-based paint requirements and completion of this Section of the checklist is not required.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
1.1. If yes, are structures built prior to January 1, 1978 included within the project activities? <i>If yes, continue. If no, activities are exempt from lead-based paint requirements and completion of this Section of the checklist is not required.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2. Was the appropriate evaluation or assessment conducted for this housing project or activity? ( <i>Lead Safe Housing Rule</i> ) Notate the evaluation or assessment method used (Visual Assessment, Paint Testing, Risk Assessment, Paint Inspection, Lead Hazard Screen)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3. Was lead hazard remediation required? If so, notate the method used (abatement, interim controls, standard treatments).	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4. Were Lead-safe work practices employed during Lead Hazard Reduction, rehabilitation, and maintenance work?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4.1. If not, were they exempt?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5. Was a clearance report provided for maintenance work?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

### 14.2 Lead-Based Paint Disclosure

1. Are housing activities associated with the project? <i>If yes, continue. If no, skip to Section 15</i>	<input type="checkbox"/> No <span style="float: right;"><input type="checkbox"/> Yes</span>
2. If yes, are structures built prior to January 1, 1978 included within the project activities? <i>If yes, continue. If no, activities are exempt from lead-based paint requirements and completion of this Section of the checklist is not required.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3. Is Grantee/ Recipient/ Subrecipient ensuring that tenants are provided with the Lead Hazard Information Pamphlet or an EPA-approved equivalent?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4. Is Grantee/ Recipient/ Subrecipient ensuring that tenants are provided a disclosure form prior to signing a lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A



# ST. TAMMANY PARISH GOVERNMENT

Compliance Monitoring Core Checklist Template

Grantee/ Recipient/ Subrecipient:

Project ID:

## 14. Lead-Based Paint, Asbestos, and Mold

Requirement	Response
<b>14.3 Asbestos and Mold</b>	
1. Is renovation or demolition involved with the project?	<input type="checkbox"/> No <input type="checkbox"/> Yes
2. Were structures inspected prior to performing any renovation or demolition activities to determine the presence of asbestos?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3. Were Clean Air Act and Occupational Safety and Health Administration regulations employed if asbestos was found or disturbed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4. Were structures inspected prior to performing any renovation or demolition activities to determine the presence of mold?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A





*St. Tammany Parish Government*

*Exhibit C*  
*Monitoring Schedule*

*August 2018*



**Instructions to execute the Schedule Template**

- Column A            Enter the Program Name
- Column B            Enter Subrecipient or Vendor Name if applicable
- Column C            Enter the approved date of the CEA or Vendor Contract if applicable
- Column D            Enter the starting date of the CEA or Vendor Contract if applicable
- Column E            Enter the CEA or Vendor Contract Term Date if applicable
- Column F            Enter the Risk Assessment Score calculated for the subrecipient or vendor
- Column G            Enter the date of for the start of construction or the first service provided.
- Column H            Enter the date of the first invoice.

*For all target dates entered, target dates in less than two weeks should be highlighted in red and those due in less than one month should be highlighted in yellow.*

Columns I and J    Enter the target date and the completion date for the first site visit or desk review to occur within the first two months of the CEA or Vendor Contract approved date. Initial monitoring will take place within the first two months. The Technical Assistance review will occur in the second quarter only if no action is taken in the first quarter.

Columns K and L    If no action is taken in the first quarter, enter the target date and the completion date for the Technical Assistance Review to occur in the second quarter.

Columns M and N    Onsite monitoring will be conducted within 6 months of the subagreement date or within 9 months if a Technical Assistance Review is needed in the second quarter. Enter the completion date for the onsite monitoring in this column.

Columns O and P    If the project or service is considered hi-risk follow-up onsite monitoring will be conducted within 6 months of the first onsite monitoring date. Enter the target date and completion dates for the hi-risk onsite monitoring .

*The additional monitoring review information is to be entered during onsite monitoring reviews.*

Columns Q and R    Enter the Environmental Review completion date into column Q for the first onsite review. Enter the completion date into column R for the follow-up onsite review.

Columns S and T    Enter the Procurement review completion date into column S for the first onsite review. Enter the completion date into column T for the follow-up onsite review.

Columns U and V	Enter the Labor Compliance review completion date into column U for the first onsite review. Enter the completion date into column V for the follow-up onsite review.
Columns W and X	Enter the Financial Management review completion date into column V for the first onsite review. Enter the completion date into column W for the follow-up onsite review.
Columns Y and Z	Enter the Section 504 review completion date into column V for the first onsite review.
Columns AA	Enter the completion date into column W for the follow-up onsite review.
Column AB	Enter the completion date for the Section 3/MWBE review.
Column AB	Enter the percentage for minority business enterprises.