

CDBG LBP Compliance Plan Certification – Rehabilitation or Homeownership/Acquisition Assistance with Rehabilitation

<b>Recipient Name</b> _____ <b>CDBG Project #</b> _____	
<b>Certifications of Compliance</b>	
<b>1. Exemption</b> If a property meets an exemption in 24 CFR 35.115, the grantee will certify and document the exemption and maintain evidence of the exemption within each project file.	<input type="checkbox"/>
<b><u>If exempt, no certifications below apply to the property.</u></b>	
<b>2. Preliminary Work Scope</b> The grantee will develop a preliminary scope of work and cost estimates for purposes of the Federal Rehabilitation Assistance calculation and will provide the scope of work to the risk assessor prior to completing a risk assessment. (if required).	<input type="checkbox"/>
<b>3. Federal Rehabilitation Assistance (FRA) calculation</b> The grantee will complete and document the per assisted unit Federal Rehabilitation Assistance calculation (GAM Exhibit 5-9) following the guidance in GAM Section V.F. prior to executing contracts. A completed Exhibit 5-9 will be retained with each project file.	<input type="checkbox"/>
<b>4. Notices</b> The grantee will provide the following notices to each owner and occupant: a. EPA Renovate Right – prior to work b. Protect Your Family From Lead in Your Home – prior to work c. (If inspection or risk assessment is conducted) Summary Notice (GAM, Exhibit 5-8) d. (If clearance is done) Notice of Completion (GAM Exhibit 5-8) e. Evidence of receipt of each of the above items will be retained with each project file.	<input type="checkbox"/>
<b>5. Evaluation</b> The grantee will conduct and document for each housing rehabilitation project, one of the following: a. If the FRA calculation is less than or equal to \$5,000 per assisted unit, any painted surface to be disturbed will be tested for lead by an EPA-certified inspector or risk assessor per 24 CFR 35.1320(a) or, with the OCR prior concurrence, presumed to have lead. b. If the FRA calculation is above \$5,000 per assisted unit, an EPA certified risk assessor will be retained to conduct a risk assessment per 24 CFR 35.1320(b).	<input type="checkbox"/>
<b>6. Contractor</b> The grantee will hire EPA-certified Renovators under 40 CFR 745.226 for rehabilitation work in non-exempt properties. a. If abatement is required (the Federal Rehabilitation Assistance calculation exceeds \$25,000), an EPA abatement firm will be contracted to perform all abatement activities. b. Evidence of EPA certification for each contractor will be retained with each project file.	<input type="checkbox"/>
<b>7. Occupant protection</b> The grantee will ensure that the occupants and occupant belongings will be protected during any hazard control work per the requirements of 24 CFR 35.1345(a), including restricted access, protection of belongings, and temporary relocation if needed.	<input type="checkbox"/>
<b>8. Clearance</b> The grantee will require clearance by an EPA certified professional for all hazard control work in compliance with 24 CFR 35.1340, unless the total painted surfaces disturbed by rehabilitation are less than the de minimis levels of 24 CFR 35.1350(d), as follows: a. If the Federal Rehabilitation Assistance calculation does not exceed \$5,000, clearance of hazard worksites. b. If the Federal Rehabilitation Assistance calculation exceeds \$5,000, clearance of the unit/property.	<input type="checkbox"/>

<p>9. <b>Monitoring</b> The grantee will monitor each project for compliance with these requirements as part of its overall project monitoring.</p>	<input type="checkbox"/>
<p>10. <b>Records</b> The grantee will maintain records that fully document compliance with all requirements in this certification for a minimum period of five years from the closeout of this project.</p>	<input type="checkbox"/>

**Recipient Certification** (Must be completed by the Recipient)

**Certification:**  
The undersigned certifies that the Recipient will comply with the requirements of 24 CFR Part 35 and 40CFR Part 745 as summarized above for each property in the program, and agrees that failure to comply could result in requirements for the grantee to correct any non-compliance at its expense and/or repay the federal funds provided.

Chief Elected Official: \_\_\_\_\_  
(signature)

Chief Elected Official: \_\_\_\_\_  
(typed name)

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**Subrecipient Certification** (in addition to Recipient Certification, if applicable)

**Certification:**  
The undersigned certifies that the Subrecipient, on behalf of the Recipient will comply with the requirements of 24 CFR Part 35 and 40 CFR Part 745 as summarized above for each property in the program, and agrees that failure to comply could result in requirements for the subrecipient on behalf of the Recipient to correct any non-compliance at its expense and/or repay the federal funds provided.

Name of Subrecipient: \_\_\_\_\_

Authorized Official: \_\_\_\_\_  
(signature)

Authorized Official: \_\_\_\_\_  
(typed name)

Title: \_\_\_\_\_

Date: \_\_\_\_\_