

INSTRUCTIONS FOR NYS CDBG GRANT CLOSEOUT TRANSMITTAL FORM

1. Review of the Grant Closeout Transmittal

The Grant Closeout Transmittal Form will be issued by the Office of Community Renewal when all of the following have occurred:

- i. The project has been monitored and any outstanding monitoring findings or concerns have been resolved.
- ii. A FINAL Request for Funds has been submitted.
- iii. A FINAL Annual Performance Report has been submitted and approved and all accomplishments have been reported.
- iv. Any outstanding single audit findings or concerns have been resolved.

The Grant Closeout Transmittal Form will be transmitted to the CEO and Local Grant Contact electronically, the entire form with original signatures must be returned to OCR.

A. Confirm Recipient Name

- i. This is the name of the municipality identified on the grant agreement at the time of award.

B. Confirm the CDBG Project Number

- i. This is the project number assigned by the Office of Community Renewal at the time of award.
- ii. A copy of the fully executed Grant Closeout Transmittal will be submitted to the Recipient following approval by the OCR.

C. Review Items 1-7

D. Sign the Grant Closeout Transmittal Form

- i. Recipients are releasing all liabilities for the Office of Community Renewal (OCR) and confirming that no costs will be incurred after the completion date of project, that no further requests for funds will be submitted and that the balance of funds will be deobligated.
- ii. The Chief Elected Official must sign and date the form in front of a witness who must also sign the form.
- iii. The assigned Community/Economic Developer will sign the closeout packet when returned to OCR

2. Schedule B and Final Budget and Accomplishment

A. This is a summary of all NYS CDBG expenditures, please review this carefully, it must match local financial statements.

- i. All funds identified under Balance Remaining will be deobligated following the submission of this closeout.

B. This is a summary by activity of all reported accomplishments, i.e., jobs created, housing units completed or persons benefitting from public facility improvements.

C. The date of the last drawdown is the last date that the OCR has for the expenditure of funds and is the date that the request was received by the OCR, not necessarily the date that the funds were received by the Recipient.

D. If there is any discrepancy between the Final Schedule B issued by OCR and the Recipient records, please contact the assigned Community Developer before submitting to OCR.

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3. Program Income Register

Any Program Income generated as a result of any CDBG funded activity that was awarded prior to Program Year 2000, should not be included on this closeout.

A. Program Income Applicability

- i. Enter the CDBG Project # that is being closed out.
- ii. Select one of the following:
 1. This project will not result in any program income being generated
 2. Including program income generated as result of this project, program income from all NYS CDBG funded activities is not anticipated to be in excess of \$35,000
 3. Including program income generated as a result of this project, program income from all NYS CDBG funded activities is in excess or may be in excess of \$35,000
 4. This project has generated program income as the result of a revolving loan fund
 - a. **If 1 or 2 is selected, check N/A under Section B**
 - b. **If 3 or 4 is selected, Section B MUST BE COMPLETED**

B. Program Income Plans

- i. If the CDBG funded activity that is the subject of this Grant Closeout Transmittal has or may result in any Program Income being generated;
 1. If the Program Income Implementation Plan or Revolving Loan Fund Plan for this activity been submitted to OCR, select this and provide the date it was submitted
 2. If this is a new Program Implementation Plan or Revolving Loan Fund, select this and attach the Plan to this Grant Closeout Transmittal

C. Interest Earned on Program Income

- i. Any interest earned on program income in excess of \$100, less documented annual administrative expenditures, must be returned to the Housing Trust Fund Corporation (HTFC). If applicable, please provide the information requested.

D. Certification of Program Income Register

- i. Provide the name of the municipality as requested
- ii. The Chief Elected Official (CEO) **AND** the Chief Financial Officer (CFO) must both sign and date the form.
- iii. If the CEO and CFO is the same person, please indicate by stating "SAME" on the CFO signature line.

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4. Real Property Register Form

This form is only completed for real property directly purchased by the Recipient using CDBG funds and is not to be used for real property that is purchased through a homeownership assistance program or by a Subrecipient.

This page must be included in the closeout packet even if N/A is selected.

- A. Property Description: Describe the property conditions
 - i. Commercial, industrial, residential (single or multi-family), etc
- B. Serial/ID # - Provide the local identification number for the property.
- C. Source of Property - Provide the name of the person or company from whom the property was acquired.
- D. Who Holds the Title: The name of the person (s) or organization the title is under.
- E. Acquisition Date: Date the property was purchased.
- F. Purchase Order/check #: Complete the following:
 - Cost per Unit
 - Total Cost
 - % of CDBG Participation
- G. Source(s) of funds: Enter all sources of funding for the purchase.
- H. Location: Enter the Address of Property.
- I. Use: Identify what the property will be used for.
- J. Condition: Describe the condition of the property at the time of purchase.
- K. Disposition Date: Enter the date the property was sold.
- L. Sale Price: Enter the sale price of the property.
- M. Description: Describe the condition of the property at the time of sale.