#### **DETAILED MODEL PLAN (LIHEAP)**

Mandatory Grant Application SF-424

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

* 1.a. Type of Submission:		* 1.b. Frequency:  Annual		* 1.c. Consolidated Application/Plan/Funding Request? Explanation:			* 1.d. Version:	
				2. Date Receive			State Use Only.	
				3. Applicant Id		: C*	5. Date Received By State:	
				4b. Federal Aw			6. State Application Identifier:	
				40. Federal Av	varu iuen	unier:	o. State Application Identifier:	
7. APPLICANT	7. APPLICANT INFORMATION							
* a. Legal Name	e: Seneca Cayuga Nation							
* b. Employer/7	Taxpayer Identification N	Number (EIN/TIN): 73-	-1015881	* c. Organizati	onal DUN	<b>IS:</b> 048561484	1	
* d. Address:								
* Street 1:	SENECA-CAY	UGA TRIBE OF OKLAF	HOMA	Street 2:		PO Box 45322	20	
* City:	GROVE			County:		Ottawa		
* State:	OK			Province:				
* Country:	United States			* Zip / Posta	al Code:	74345-3220		
e. Organization	e. Organizational Unit:							
Department Na	me:			Division Name:				
f. Name and cor	tact information of person	on to be contacted on ma	tters involving tl	his application:				
Prefix:	* First Name: Cheryl		Middle Name:	* Last Name: Barton				
Suffix:	Title: Government Specialist		Organizational Seneca Cayuga					
* Telephone Number: 918-787-5452 ext 202	Number: 918-787-5521 cbarton@sctr 918-787-5452			ibe.com				
* <b>8a. TYPE OF</b> I: Indian/Native	APPLICANT: American Tribal Governm	ent (Federally Recognized	1)					
b. Additional	Description:							
* 9. Name of Federal Agency:								
			og of Federal Dom ssistance Number:				CFDA Title:	
10. CFDA Numbe	ers and Titles	93568			Low-Inco	me Home Energ	y Assistance	
	11. Descriptive Title of Applicant's Project Seneca Cayuga Nation LIHEAP Program							
12. Areas Affect 50 miles radius	ted by Funding: of tribal headquarters in C	Grove, OK (includes Ottaw	va & Delaware co	unties in NE OK	)			
	SIONAL DISTRICTS OF	<u> </u>						
* a. Applicant				b. Program/Project:				

Attach an additional list of Program/Project Congressional Districts if needed.						
14. FUNDING PERIOD:		15. ESTIMA	TED FUNDING:			
<b>a. Start Date:</b> 10/01/2015 <b>b. End Date:</b> 09/30/2016			* a. Federal (\$): \$0	<b>b. Match (\$):</b> \$0		
* 16. IS SUBMISSION SUBJECT TO R	EVIEW BY STATE UNDER EXECUTI	VE ORDER 12	2372 PROCESS?			
a. This submission was made availab	le to the State under the Executive Order	12372				
Process for Review on :						
b. Program is subject to E.O. 12372 b	out has not been selected by State for revi	iew.				
c. Program is not covered by E.O. 12	372.					
* 17. Is The Applicant Delinquent On Any Federal Debt?  O YES  NO						
Explanation:						
18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)  **I Agree						
** The list of certifications and assurance	es, or an internet site where you may obt	ain this list, is	contained in the announcem	ent or agency specific instructions.		
18a. Typed or Printed Name and Title o	f Authorized Certifying Official		18c. Telephone (area code, number and extension)			
Cheryl Barton			18d. Email Address cbarton@sctribe.com			
18b. Signature of Authorized Certifying Official			<b>18e. Date Report Submitte</b> 08/28/2015	d (Month, Day, Year)		
Attach supporting documents as specified in agency instructions.						

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

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#### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) **MODEL PLAN** SF - 424 - MANDATORY

Department of Health and Human Services Administration for Children and Families Office of Community Services Washington, DC 20447

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01

OMB Approval No. 0970-0075 Expiration Date: 02/28/2005

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)Use of this model plan is optional. However, the information requested is required in order to receive a Low Income Home Energy Assistance Program (LIHEAP) grant in years in which the grantee is not permitted to file an abbreviated plan. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a

#### collection of information unless it displays a currently valid OMB control number. Section 1 Program Components Program Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C) 1.1 Check which components you will operate under the LIHEAP program. **Dates of Operation** (Note: You must provide information for each component designated here as requested elsewhere in this plan.) **End Date Start Date** 10/01/2015 Heating assistance 03/15/2016 V 03/16/2016 09/30/2016 Cooling assistance V Crisis assistance 10/01/2015 09/30/2016 V Weatherization assistance Provide further explanation for the dates of operation, if necessary Estimated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16 1.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: The total of all percentages must add up to Percentage (%) 40.00% Heating assistance Cooling assistance 40.00% 20.00% Crisis assistance Weatherization assistance 0.00% Carryover to the following federal fiscal year 0.00% Administrative and planning costs 0.00% 0.00% Services to reduce home energy needs including needs assessment (Assurance 16) 0.00% Used to develop and implement leveraging activities TOTAL 100.00% Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C) 1.3 The funds reserved for winter crisis assistance that have not been expended by March 15 will be reprogrammed to:

	Hea	ting assistance	<u> </u>	Coo	ling assistance				
	We	ntherization assistance		Oth	er (specify:)				
~		2007(1)(2)(1)	Z1/1\						
Ť		, 2605(b)(2)(A) - Assurance 2, 2605(c) ouseholds categorically eligible if one l				otozo-	ios of honofits i 41	ho left -	olumn bolow?
Yes	O No	busenoids categorically engible if one i	nousenoid member rece	eives one	of the following ca	ategor	ries of denemits in ti	пе іеп с	olumn below?
If you	ı answered "Yes	' to question 1.4, you must complete the	he table below and ansv	ver ques	tions 1.5 and 1.6.				
			Heating		Cooling	_	Crisis		Weatherization
TANF	'		⊙ Yes O No		es O No	_	res O No	-	es C No
SSI			C Yes O No		es 🖸 No	_	Yes 🖲 No		es C No
SNAP			⊙ Yes O No		es O No	-	Yes O No		es O No
Means	s-tested Veterans F	1	○Yes •No	U Y	es 💽 No	O	Yes 💽 No	CY	es O No
Othor	(Canada) 1	Program Name	Heating  O Yes O No		Cooling O Yes O No	Crisis C Yes C No			Weatherization  O Yes O No
	(Specify) 1						Yes UNO		Yes O No
		ally enroll households without a direct	annual application?	Yes 🕒	No				
II Yes	s, explain:								
		e there is no difference in the treatmen	nt of categorically eligib	le house	holds from those 1	not re	ceiving other publi	c assist	ance when
		and benefit amounts?  fference in treatment of households eligi	tible because of their inco	me and t	hose eligible under	other	means, the LIHEA	P Coord	inator refers to a
Paym	ent Matrix to prov	vide a specific amount of heating/cooling those not receiving other public assistant	g/crisis assistance based	on certair	household income	e level	s, and does not diffe	erentiate	between categorically
		<i>g</i>							
SNAI	P Nominal Payme	nts							
1.7a I	Do you allocate I	IHEAP funds toward a nominal payn	ment for SNAP househo	lds? 🔘 Y	res 🖸 No				
		' to question 1.7a, you must provide a	response to questions	.7b, 1.7c	, and 1.7d.				
		nal Assistance: \$0							
1.7c I	Frequency of Ass	istance							
	Once Per Year								
	Once every five	years							
	Other - Describ	e:							
1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need?									
Deter	mination of Eligib	pility - Countable Income							
1.8. I	1	nousehold's income eligibility for LIH	EAP, do you use gross i	ncome o	r net income ?				
~	Gross Income								
Net Income									
1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP									
<b>V</b> Wages									
~	Self - Employment Income								
~	Contract Incom	ne							
	Payments from	mortgage or Sales Contracts							
~	Unemployment	insurance							
	Strike Pay								

<b>~</b>	Social Security Administration (SSA ) benefits
	Including MediCare deduction Excluding MediCare deduction
<b>~</b>	Supplemental Security Income (SSI )
~	Retirement / pension benefits
	General Assistance benefits
<b>~</b>	Temporary Assistance for Needy Families (TANF) benefits
	Supplemental Nutrition Assistance Program (SNAP) benefits
	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits
	Loans that need to be repaid
	Cash gifts
	Savings account balance
	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
	Jury duty compensation
	Rental income
	Income from employment through Workforce Investment Act (WIA)
	Income from work study programs
	Alimony
	Child support
~	Interest, dividends, or royalties
	Commissions
	Legal settlements
	Insurance payments made directly to the insured
	Insurance payments made specifically for the repayment of a bill, debt, or estimate
	Veterans Administration (VA) benefits
	Earned income of a child under the age of 18
	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
	Income tax refunds
	Stipends from senior companion programs, such as VISTA

Funds received by household for the care of a foster child
Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
Reimbursements (for mileage, gas, lodging, meals, etc.)
Other
ny of the above questions require further explanation or clarification that could not be made in the fields provided, ch a document with said explanation here.

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	Section 2 - Heating Assistance							
Eligibility, 2605(b)(2	2) - Assurance 2							
2.1 Designate the in	come eligibility threshold used for the heatin	g compone	enet:					
Add	Household size Eligibility Guideline Eligibility Thre							
1	All Household Sizes		HHS Poverty Guidelines	150.00%				
2.2 Do you have add HEATING ASSITA	ditional eligibility requirements for NCE?	C Yes	<b>⊙</b> No					
2.3 Check the appro	opriate boxes below and describe the policies	for each.						
Do you require an A	Assets test ?	CYes	⊙ <sub>No</sub>					
Do you have addition	onal/differing eligibility policies for:	"						
Renters?		C Yes	<b>⊙</b> No					
Renters Livin	g in subsidized housing ?	Oyes	⊙ No					
Renters with	utilities included in the rent ?	⊙ Yes	C <sub>No</sub>					
Do you give priority	y in eligibility to:	<u> </u>						
Elderly?	-	⊙ Yes	C <sub>No</sub>					
Disabled?		<b>⊙</b> Yes						
Young childre	en?	<b>⊙</b> Yes						
Households w	vith high energy burdens ?	C Yes						
Other?		-	C Yes ⊙No					
Explanations of pol	licies for each "yes" checked above:							
all applicants and pla requirements are pro	aces individuals into benefit level categories bas	ed on fami nerable mei	mbers, but during each heating and cooling season, the LI ily size, monthly income and energy source. Applicants r mbers of the population. To be eligible for LIHEAP, the ix is attached for reference.	meeting the priority eligibility				
Determination of Be	nefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)							
2.4 Describe how yo	ou prioritize the provision of heating assistan	ce tovulne	rable populations,e.g., benefit amounts, early applicat	tion periods, etc.				
all applicants and pla	aces individuals into benefit level categories bas	ed on fami	mbers, but during each heating and cooling season, the LI ily size, monthly income and energy source. Applicants r mbers of the population. The 2015 Payment Matrix is att	meeting the priority eligibility				
2.5 Check the varia	bles you use to determine your benefit levels.	(Check al	ll that apply):					
<b>✓</b> Income								
Family (house	ehold) size							
<b>✓</b> Home energy	cost or need:							
✓ Fuel ty	rpe							
Climate/region								
	lual bill							
Dwellir								
	burden (% of income spent on home energy	)						

Energy need					
Other - Describe:					
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)					
2.6 Describe estimated benefit levels for FY 2016:					
Minimum Benefit	\$1	Maximum Benefit	\$350		
2.7 Do you provide in-kind (e.g., blankets, space heaters) and/	or other forms	of benefits? • Yes O No			
If yes, describe.					
Eligible heating and crisis assistance clients may elect to receive a window unit heater in lieu of cash payment to an energy provider.					
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.					

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	Section 3 - Cooling Assistance						
Eligibility, 2605(c)	(1)(A), 2605 (b)(2) - Assurance 2						
	income eligibility threshold used for the Coolin	ng compon	enet:				
Add	Household size		Eligibility Guideline	Eligibility Threshold			
1	All Household Sizes		HHS Poverty Guidelines	150.00%			
3.2 Do you have ad COOLING ASSITA	dditional eligibility requirements for ANCE?	O Yes	<b>⊙</b> No				
3.3 Check the appr	ropriate boxes below and describe the policies	-					
Do you require an	Assets test ?	O Yes	⊙ No				
Do you have addit	tional/differing eligibility policies for:						
Renters?		C Yes	<b>⊙</b> No				
Renters Livi	ing in subsidized housing ?	C Yes	© No				
Renters with	h utilities included in the rent ?	⊙ Yes (	C <sub>No</sub>				
Do you give priori	ty in eligibility to:						
Elderly?		⊙ Yes (	C <sub>No</sub>				
Disabled?		⊙ Yes (	O <sub>No</sub>				
Young childs	ren?	⊙ Yes (	O No				
Households	with high energy burdens ?	O <sub>Yes</sub> (	⊙ No				
Other?	-	C Yes					
Explanations of po	olicies for each "yes" checked above:	1					
all applicants and pl requirements are pro-	places individuals into benefit level categories base	sed on family nerable mem	abers, but during each heating and cooling season, the I y size, monthly income and energy source. Applicants abers of the population. To be eligible for LIHEAP, the is attached for reference.	s meeting the priority eligibility			
3.4 Describe how y	you prioritize the provision of cooling assistanc	ce tovulner	able populations,e.g., benefit amounts, early applica	ation periods, etc.			
3.4 Describe how you prioritize the provision of cooling assistance tovulnerable populations, e.g., benefit amounts, early application periods, etc.  The Nation generally has sufficient LIHEAP funds to meet the needs of its members, but during each heating and cooling season, the LIHEAP Coordinator properly screens all applicants and places individuals into benefit level categories based on family size, monthly income and energy source. Applicants meeting the priority eligibility requirements are processed first - as these are typically the most vulnerable members of the population. To be eligible for LIHEAP, the applicant must have a due or past due notice from a utility company or energy provide. The 2015 Payment Matrix is attached for reference.							
Determination of B	Senefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)						
	iables you use to determine your benefit levels.	(Check all	that apply):				
<b>✓</b> Income							
Family (hous	sehold) size						
<b>✓</b> Home energy	y cost or need:						
Fuel ty							
	ate/region						
DWein	ling type						

T					
Energy burden (% of income spent on home ener	Energy burden (% of income spent on home energy)				
Energy need					
Other - Describe:					
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)					
3.6 Describe estimated benefit levels for FY 2016:					
Minimum Benefit	\$1	Maximum Benefit	\$350		
3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or	other forms of	f benefits? • Yes O No			
If yes, describe.					
Eligible heating and crisis assistance clients may elect to receive a window unit A/C in lieu of cash payment to an energy provider.					
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.					

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	Section 4: CRISIS ASSISTANCE					
Eligibility - 2604(c)	), 2605(c)(1)(A)					
4.1 Designate the in	ncome eligibility threshold used for the crisis component					
Add	Household size	Eligibility Guideline	Eligibility Threshold			
1	All Household Sizes	HHS Poverty Guidelines	150.00%			
4.2 Provide your L	4.2 Provide your LIHEAP program's definition for determining a crisis.					
Cut-off notice or ho	ome energy source already cut off.					
4.3 What constitute	es a <u>life-threatening crisis?</u>					
Temperatures below	v 32 degrees in winter, above 90 degrees in summer and/or sma	all children, elderly, disabled, or ill individuals in the	home.			
Crisis Requiremen	at, 2604(c)					
4.4 Within how ma	any hours do you provide an intervention that will resolve t	he energy crisis for eligible households? 24Hours	S			
4.5 Within how ma	any hours do you provide an intervention that will resolve the	he energy crisis for eligible households in life-thro	eatening situations? 12Hours			
Crisis Eligibility, 26	505(c)(1)(A)					
4.6 Do you have ad	lditional eligibility requirements for CRISIS ASSISTANCE	? C Yes O No				
4.7 Check the appr	ropriate boxes below and describe the policies for each					
Do you require an	Assets test ?	C Yes O No				
Do you give priorit	ty in eligibility to :					
Elderly?						
Disabled?		⊙ Yes C No				
Young Child	ren?	⊙ Yes ○ No				
Households v	with high energy burdens?	○ Yes				
Other?		C Yes O No				
In Order to receive	e crisis assistance:	,				
Must the hou tank?	usehold have received a shut-off notice or have a near empty	y O Yes O No				
Must the hou	usehold have been shut off or have an empty tank?	O Yes ⊙ No				
Must the hou	usehold have exhausted their regular heating benefit?	C Yes O No				
Must renters eviction notice ?	Must renters with heating costs included in their rent have received an Ves No					
Must heating	Must heating/cooling be medically necessary?					
Must the hou	Must the household have non-working heating or cooling equipment?					
Other? C Yes © No						
Do you have additi	ional / differing eligibility policies for:					
Renters?		C Yes <b>⊙</b> No				
Renters livin	g in subsidized housing?	C Yes ⊙ No				
	. <u> </u>					

Renters with utilities in	cluded in the rent?		(	⊙ Yes C No	
Explanations of policies for ea	ach "yes" checked above:				
To be eligible for LIHEAP, the	applicant must have a due or	past due notic	ce from a utilit	ty company or energy provider.	
Determination of Benefits					
4.8 How do you handle crisis	situations?				
	Separate component				
<u> </u>	Fast Track				
	Other - Describe:				
4.9 If you have a separate con	nponent, how do you detern	nine crisis ass	sistance benef	its?	
	Amount to resolve the cris	is.			
	Other - Describe:				
Crisis Requirements, 2604(c)	P.				
	ns for energy crisis assistan	ce at sites tha	t are geogran	phically accessible to all households in the area to be served?	
• Yes O No Explain.					
		al members, w	ithin a 50 mile	e radius. Also applications are available online and may be submitted via email, mail	
4.11 Do you provide individua	als who are physically disab	led the means	s to:		
Submit applications for cris	sis benefits without leaving	their homes?			
<b>⊙</b> Yes <b>○</b> No If No, exp	lain.				
Travel to the sites at which	applications for crisis assis	tance are acc	epted?		
Yes O No If No, exp	lain.				
If you answered "No" to both	options in question 4.11, p	lease explain	alternative m	eans of intake to those who are homebound or physically disabled?	
Benefit Levels, 2605(c)(1)(B)					
4.12 Indicate the maximum be	enefit for each type of crisis	assistance of	fered.		
Winter Crisis \$650	) maximum benefit				
Summer Crisis \$650	maximum benefit				
	) maximum benefit				
4.13 Do you provide in-kind (		fans) and/or	other forms	of benefits?	
Yes No If yes, Descr	ribe				
Individuals eligible for crisis assistance may elect to receive a window unit heater in Winter or A/C in Summer.					
4.14 Do you provide for equipment repair or replacement using crisis funds?					
C Yes					
If you answered "Yes" to question 4.14, you must complete question 4.15.					
4.15 Check appropriate boxes below to indicate type(s) of assistance provided.					
		Winter Crisis	Summer Crisis	Year-round Crisis	
Heating system repair					
Heating system replacement					
Cooling system repair					
Cooling system replacement					
Wood stove purchase					
Pellet stove purchase					
1 chet stove purchase					

Solar panel(s)					
Utility poles / gas line hook-ups					
Other (Specify):					
4.16 Do any of the utility vendors you work with enforce	a moratoriur	n on shut offs	?		
⊙ Yes O No					
If you responded "Yes" to question 4.16, you must respond to question 4.17.					
4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.					
The regulated electric companies observe a shut-off moratorium if the temperatures are below freezing. No special dispensation is given to LIHEAP clients; the moratorium covers all the utility's clients. However, LIHEAP clients with a promise to pay from the Nation will not be shut off even when the moratorium is lifted.					
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.					

#### Section 5 - WEATHERIZATION ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES

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S	ection 5: WEATHE	RIZATION ASSISTANCE		
Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assurance	re 2			
5.1 Designate the income eligibility threshold us	sed for the Weatherization co	mponent		
Add Housel	nold Size	Eligibility Guideline	Eligibility Threshold	
1			0.00%	
5.2 Do you enter into an interagency agreement	t to have another government	agency administer a WEATHERIZATION comp	oonent? CYes ONo	
5.3 If yes, name the agency.				
5.4 Is there a separate monitoring protocol for	weatherization? 🗖 Yes 🛭 🖸 N	(o		
WEATHERIZATION - Types of Rules				
5.5 Under what rules do you administer LIHEA	AP weatherization? (Check on	ly one.)		
Entirely under LIHEAP (not DOE) rules				
Entirely under DOE WAP (not LIHEAP)	) rules			
Mostly under LIHEAP rules with the foll	owing DOE WAP rule(s) whe	re LIHEAP and WAP rules differ (Check all that	t apply):	
Income Threshold				
Weatherization of entire multi-fam become eligible within 180 days	ily housing structure is permi	tted if at least 66% of units (50% in 2- & 4-unit b	uildings) are eligible units or will	
Weatherize shelters temporarily ho	ousing primarily low income p	ersons (excluding nursing homes, prisons, and sin	milar institutional care facilities).	
Other - Describe:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
Mostly under DOE WAP rules, with the	following LIHEAP rule(s) who	ere LIHEAP and WAP rules differ (Check all tha	at apply.)	
Income Threshold				
Weatherization not subject to DOE	WAP maximum statewide av	erage cost per dwelling unit.		
Weatherization measures are not su	ubject to DOE Savings to Inve	stment Ration (SIR ) standards.		
Other - Describe:				
Eligibility, 2605(b)(5) - Assurance 5				
5.6 Do you require an assets test?	C Yes C No			
5.7 Do you have additional/differing eligibility	policies for :			
Renters	C Yes C No			
Renters living in subsidized housing?	ising? C Yes C No			
5.8 Do you give priority in eligibility to:	-11			
Elderly?	C Yes C No			
Disabled?	C Yes C No			
Young Children?	O Yes O No			
House holds with high energy burdens?	O Yes O No			
Other?	O Yes O No			
If you selected "Yes" for any of the options in o		nust provide further explanation of these policies	in the text field below.	

Benefit Levels				
5.9 Do you have a maximum LIHEAP weatherization benefit/expenditure per hous	sehold? O Yes O No			
<b>5.10</b> If yes, what is the maximum? \$0				
Types of Assitance, 2605(c)(1), (B) & (D)				
5.11 What LIHEAP weatherization measures do you provide? (Check all categori	es that apply.)			
Weatherization needs assessments/audits	Energy related roof repair			
Caulking and insulation	Major appliance Repairs			
Storm windows	Major appliance replacement			
Furnace/heating system modifications/ repairs	Windows/sliding glass doors			
Furnace replacement	Doors			
Cooling system modifications/ repairs	Water Heater			
Water conservation measures	Cooling system replacement			
Compact florescent light bulbs	Other - Describe:			
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.				

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

Section 6: Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)
6.1 Select all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance available:
Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.
Publish articles in local newspapers or broadcast media announcements.
Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance.
Mass mailing(s) to prior-year LIHEAP recipients.
Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs.
Execute interagency agreements with other low-income program offices to perform outreach to target groups.
Other (specify):
Distribute information at yearly General Council and monthly tribal meetings as well as ceremonial and social activities.
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

attach a document with said explanation here.

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

	SF - 424 - MANDATORY			
	Section 7: Coordination, 2605(b)(4) - Assurance 4			
7.1 Des	scribe how you will ensure that the LIHEAP program is coordinated with other programs available to low-income households (TANF, SSI, WAP, etc.).			
	Joint application for multiple programs			
~	Intake referrals to/from other programs			
	One - stop intake centers			
	Other - Describe:			
The Se	neca Cayuga Nation also maintains contact with other local tribes and with DHS to ensure that all LIHEAP programs available locally coordinate intake referrals.			
If an	y of the above questions require further explanation or clarification that could not be made in the fields provided,			

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

## LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Required for state grantees and the Commonwealth of Puerto Rico) 8.1 How would you categorize the primary responsibility of your State agency? **Administration Agency** Commerce Agency **Community Services Agency Energy / Environment Agency** Housing Agency Welfare Agency Other - Describe: Alternate Outreach and Intake, 2605(b)(15) - Assurance 15 If you selected "Welfare Agency" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable. 8.2 How do you provide alternate outreach and intake for HEATING ASSISTANCE? **8.3 How do you provide alternate outreach and intake for** COOLING ASSISTANCE? **8.4 How do you provide alternate outreach and intake for** CRISIS ASSISTANCE? 8.5 LIHEAP Component Administration. Heating Cooling Crisis Weatherization 8.5a Who determines client eligibility? 8.5b Who processes benefit payments to gas and electric 8.5c who processes benefit payments to bulk fuel vendors? 8.5d Who performs installation of weatherization If any of your LIHEAP components are not centrally-administered by a state agency, you must complete questions 8.6, 8.7, 8.8, and, if applicable, 8.9. 8.6 What is your process for selecting local administering agencies? 8.7 How many local administering agencies do you use?

8.8 Have you changed any local administering agencies in the last year?  Yes  No				
8.9 If so	why?			
	Agency was in noncompliance with grantee requirements for LIHEAP -			
	Agency is under criminal investigation			
	Added agency			
	Agency closed			
	Other - describe			
	of the above questions require further explanation or clarification that could not be made in the fields provided, a document with said explanation here.			

attach a document with said explanation here.

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Expiration Date: 04/30/2014

### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7				
9.1 Do you make payments directly to home energy suppliers?				
Heating • Yes C No				
Cooling • Yes O No				
Crisis © Yes C No				
Are there exceptions? C Yes O No				
If yes, Describe.				
Payments are made directly to home energy suppliers based on information provided on the client's bill or past due or disconnect notice. Vendors are notified by fax or phone call that payment will be made on the client's behalf, including the name, account number and amount of payment.				
9.2 How do you notify the client of the amount of assistance paid?				
Clients receive formal notification by letter but also receive informal notification in person or by phone to ensure they know assistance has been approved or denied and in what amount.				
9.3 How do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of th home energy and the amount of the payment?				
The Seneca Cayuga Nation maintains agreements with most common energy suppliers in the region. In addition, notifications sent to energy suppliers contain notification that acceptance of the payment constitutes an agreement to charge the client the difference between the actual cost and the amount of the payment.				
9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assistance?				
The Seneca Cayuga Nation maintains agreements with most common energy suppliers in the region. These suppliers are, by and large, familiar with the LIHEAP program and welcome the Nation's involvement. In addition, notifications sent to energy suppliers contain language that acceptance of the payment constitutes an agreement that the client will not be treated adversely as a result of the LIHEAP assistance.				
9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households?  Yes No				
If so, describe the measures unregulated vendors may take.				
If any of the above questions require further explanation or clarification that could not be made in the fields provided				

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 06/30/2017

## LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section	n 10:	Program.	Fiscal	Monitoring,	and Audit	. 26050	(b)	(10)	)

10.1.	How do	vou ensure goo	d fiscal accounting	g and tracking	of LIHEAP funds?

All LIHEAP and all other financial transactions are recorded in the Nation's accounting software, currently provided by contract accounting services. Most accounting functions are outsourced to Finley & Cook, CPAs specializing in tribal financial accounting. With assistance from Finley & Cook, the Nation has improved audits, instituted stronger financial policies and procedures, and implemented robust internal reporting structures to ensure that all federal funds are properly accounted for, managed and expended as required under the appropriate CFRs, and reported in accordance with the CFRs, GAAP, and other financial standards.

	_
Andit	Process

10.2. Is your LIHEAP program audited annually under the Single Audit Act and OMB Circular A - 133? 
•• Yes No

10.3. Describe any audit findings rising to the level of material weakness or reportable condition cited in the A-133 audits, Grantee monitoring assessments, inspector general reviews, or other government agency reviews of the LIHEAP agency from the most recently audited fiscal year.

No Findings

Finding	Туре	Brief Summary	Resolved?	Action Taken
1	financial	Prior period financial statements contained material misstatements. This is one of the reasons the current (new) administration brought in outside accountants to review the financials, prepare for the independent audit, and ultimately outsourced finance to Finley & Cook, CPAs to ensure compliance with all federal regulations and accounting best-practice standards. Staffing, procedures and policies, and training activities have all changed and been strengthened since.	Yes	staffing/management changes
2	financial	Claims Department, under former administration, appears to have made improper payments. An investigation is ongoing. Significant changes in staffing and procedures have been implemented.	In Progress	procedure/policy changes
3	financial	Supporting documentation for 4 journal entries made prior to the changes mentioned above could not be located. Contract Finance department now tracks and documents all journal entries.	Yes	staffing/management changes
4	financial	Nation did not have a physical inventory of fixed assets. In addition to outsourcing Finance and implementing new policies and procedures, the Nation has hired an individual specifically to catalog and manage inventory. All new acquisitions are now catalogued and the inventory of existing capitalized and certain non-capitalized equipment and assets is under way.	In Progress	staffing/management changes
5	monitoring	Prior to the changes mentioned above, the Nation did not require employees paid from multiple funding sources to record actual hours worked for each program on timecards. New timecards and new procedures are now in place to correct this.	Yes	procedure/policy changes

10.4. Audits of Local Administering Agencies
What types of annual audit requirements do you have in place for local adminstering agencies/district offices? Select all that apply.
Local agencies/district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133
Local agencies/district offices are required to have an annual audit (other than A-133)
Local agencies/district offices' A-133 or other independent audits are reviewed by Grantee as part of compliance process.
Grantee conducts fiscal and program monitoring of local agencies/district offices
Compliance Monitoring
10.5. Describe the Grantee's strategies for monitoring compliance with the Grantee's and Federal LIHEAP policies and procedures: Select all that apply
Grantee employees:
✓ Internal program review
<b>☑</b> Departmental oversight
Secondary review of invoices and payments
Other program review mechanisms are in place. Describe:
The LIHEAP Coordinator reports to the Government Specialist, who provides program oversight and conducts internal program reviews. In addition, every payment request is reviewed by the Government Specialist or Executive Director and then at least two members of the Business Committee before being approved for payment. CPA firm Finley & Cooks then receives and reviews payment requests to ensure compliance with CFRs and internal policies before issuing payment.
Local Adminstering Agencies / District Offices:
On - site evaluation
Annual program review
Monitoring through central database
Desk reviews
Client File Testing / Sampling
Other program review mechanisms are in place. Describe:
The Nation has a centralized government headquarters location at which the LIHEAP program is located. The Nation does not have other local administering agencies or district offices.
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
N/A
10.7. Describe how you select local agencies for monitoring reviews.
Site Visits:
N/A
Desk Reviews:
N/A
10.8. How often is each local agency monitored ? $${\rm N/A}$$
10.9. What is the combined error rate for eligibility determinations? OPTIONAL N/A

10.10. What is the combined error rate for benefit determinations? OPTIONAL

N/A

10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? 0

10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 0

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

#### Section 11 - Timely and Meaningful Public Participation, , 2605(b)(12) - Assurance 12, 2605(c)(2)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

Section 11: Timely and Meaningful Public Participation, 2605(b)(12), 2605(C)(2)				
11.1 How did you obtain input from the public in the development of Select all that apply.	of your LIHEAP plan?			
<b>✓</b> Tribal Council meeting(s)				
Public Hearing(s)				
Draft Plan posted to website and available for comment				
Hard copy of plan is available for public view and comme	ent			
Comments from applicants are recorded				
Request for comments on draft Plan is advertised				
Stakeholder consultation meeting(s)				
Comments are solicited during outreach activities				
Other - Describe:				
11.2 What changes did you make to your LIHEAP plan as a result of this participation?  Last year, the LIHEAP program was moved under the Housing Administrator in order to better coordinate LIHEAP funds with other assistance programs. No changes were made this year.				
Public Hearings, 2605(a)(2) - For States and the Commonwealth of	Puerto Rico Only			
11.3 List the date and location(s) that you held public hearing(s) on	n the proposed use and distribution of your LIH	EAP funds?		
	Date	Event Description		
1				
11.4. How many parties commented on your plan at the hearing(s)?				
11.5 Summarize the comments you received at the hearing(s).				
11.6 What changes did you make to your LIHEAP plan as a result of the comments received at the public hearing(s)?				
If any of the above questions require further explanation a document with said explanation here.	lanation or clarification that could	not be made in the fields provided,		

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

#### LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) **MODEL PLAN**

SF - 424 - MANDATORY	

SF - 424 - MANDATORY
Section 12: Fair Hearings, 2605(b)(13) - Assurance 13
12.1 How many fair hearings did the grantee have in the prior Federal fiscal year? 0
12.2 How many of those fair hearings resulted in the initial decision being reversed? 0
12.3 Describe any policy and/or procedural changes made in the last Federal fiscal year as a result of fair hearings?
N/A
12.4 Describe your fair hearing procedures for households whose applications are denied.
All individuals may appeal program decisions to the Nation's Business Committee.
12.5 When and how are applicants informed of these rights?
Notification of rights is a part of the application process and is physically attached to the application for services. In addition, notices are posted around the Nation's office with the right of appeal process outlined.
12.6 Describe your fair hearing procedures for households whose applications are not acted on in a timely manner.
Same as above.
12.7 When and how are applicants informed of these rights?
At the time of application. Also notices are continuously posted around the Nation's offices.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

attach a document with said explanation here.

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 06/30/2017

Section 13: Reduction of home energy needs, 2605(b)(16) - Assurance 16
13.1 Describe how you use LIHEAP funds to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance?
The Seneca Cayuga Nation does not include this element in its program. The Housing Office, which administers the LIHEAP funds, does provide public service information on energy effficiency as part of outreach through other programs.
13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities?
$\mathbf{N}/\mathbf{A}$
13.3 Describe the impact of such activities on the number of households served in the previous Federal fiscal year.
$\mathbf{N}/\mathbf{A}$
13.4 Describe the level ofdirect benefitsprovided to those households in the previous Federal fiscal year.
$\mathbf{N}/\mathbf{A}$
13.5 How many households applied for these services? 0
13.6 How many households received these services? 0
If any of the above questions require further explanation or clarification that could not be made in the fields provided,

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

# LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 14:Leveraging Incentive Program, 2607(A)
1.1 Do you plan to submit an application for the leveraging incentive program?  Yes No
1.2 Describe instructions to any third parties and/or local agencies for submitting LIHEAP leveraging resource information and retaining records.
l.3 For each type of resource and/or benefit to be leveraged in the upcoming year that will meet the requirements of 45 C.F.R. § 96.87(d)(2)(iii),describe the llowing:

Resource	What is the type of resource or benefit ?	What is the source(s) of the resource ?	How will the resource be integrated and coordinated with LIHEAP?
1			

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB\_Clearance\_No.: 0970-0075

Expiration Date: 06/30/2017

Section 15: Training					
15.1 Describe the training you provide for each of the following groups:					
a. Grantee Staff:					
Formal training on grantee policies and procedures					
How often?					
Annually					
Biannually					
✓ As needed					
Other - Describe:					
Employees are provided with policy manual					
Other-Describe:					
b. Local Agencies:					
Formal training conference					
How often?					
Annually					
Biannually					
As needed					
Other - Describe:					
On-site training					
How often?					
Annually					
Biannually					
As needed					
Other - Describe:					
Employees are provided with policy manual					
Other - Describe					
c. Vendors					
Formal training conference					
How often?					
Annually					
Biannually					
As needed					
Other - Describe:					
<b>☑</b> Policies communicated through vendor agreements					

	Policies are outlined in a vendor manual
	Other - Describe:
15.2 Do • Yes • No	ses your training program address fraud reporting and prevention?
	of the above questions require further explanation or clarification that could not be made in the fields provided, a document with said explanation here.

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

## LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 16: Performance Goals and Measures, 2605(b) - Required for States Only

16.1 Describe your progress toward meeting the data collection and reporting requirements of the four required LIHEAP performance measures. Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075

Expiration Date: 06/30/2017

Section 17: Program Integrity, 2605(b)(10)						
17.1 Fraud Reporting Mechanisms						
a. Describe all mechanisms available to	the public for reporting cases of suspecte	d waste, fraud, and abuse. Select all that a	apply.			
Online Fraud Reporting						
Dedicated Fraud Reporting	Hotline					
Report directly to local ager	ncy/district office or Grantee office					
Report to State Inspector G	eneral or Attorney General					
Forms and procedures in pl	ace for local agencies/district offices and v	vendors to report fraud, waste, and abuse				
Other - Describe:						
General public may report suspected waste, fraud or abuse to the supervisor of the program, to the Executive Director, to the Nation's Business Committee or to the Nation's Grievance Committee (which has the authority to discipline or remove a Business Committee member for such actions) as well as to appropriate federal law enforcement agencies.						
b. Describe strategies in place for adver	rtising the above-referenced resources. Sel	lect all that apply				
<b>V</b> Printed outreach materials						
Addressed on LIHEAP app	lication					
Website						
Other - Describe:						
Information about the Nation's constitutional structure, procedures for reporting malfeasance, and program operation are in the Nation's Personnel Policies and at the Nation's offices and General Council meeting.  17.2. Identification Documentation Requirements						
a. Indicate which of the following forms	s of identification are required or requeste	ed to be collected from LIHEAP applicant	ts or their household members.			
Type of Identification Collected		Collected from Whom?	1			
Type of Identification Conected	Applicant Only	All Adults in Household	All Household Members			
Social Security Card is photocopied and retained	Required	Required	Required			
	Requested	Requested	Requested			
Social Security Number (Without actual Card)	Required	Required	Required			
	Requested	Requested	Requested			
Government-issued identification card	Required	Required	Required			
			4 1			

(i.e.: driver's license, state ID, Tribal ID, passport, etc.)	Requested		Requested		Requested	
Other	Applicant Only Required	Applicant Only Requested	All Adults in Household Required	All Adults in Household Requested	All Household Members Required	All Household Members Requested
1						
b. Describe any exceptions to the above policies.  Tribal ID cards are required for all Native American household members; other government id is not required of non-Native household members.						
17.3 Identification Verification						
Describe what methods are used to ver	ify the authenticity of ide	entification documen	nts provided by clien	ts or household memb	ers. Select all that a	pply
Verify SSNs with Social Securit	y Administration					
Match SSNs with death records	from Social Security Ad	ministration or state	e agency			
Match SSNs with state eligibilit	y/case management syste	m (e.g., SNAP, TAN	IF)			
Match with state Department of	f Labor system					
Match with state and/or federal	corrections system					
Match with state child support	system					
Verification using private softw	are (e.g., The Work Num	iber)				
In-person certification by staff	(for tribal grantees only)					
Match SSN/Tribal ID number v	vith tribal database or en	rollment records (fo	or tribal grantees onl	<b>y</b> )		
Other - Describe:						
17.4. Citizenship/Legal Residency Veri		**************************************			1D1 810C1	
What are your procedures for ensuring	-		r aliens who are qua	lified to receive LIHE	AP benefits? Select	all that apply.
Client's submission of Social S			idency			
Noncitizens must provide docu			lucincy			
Citizens must provide a copy of			s, or passport			
Noncitizens are verified through	·		,			
✓ Tribal members are verified the	-	t records/Tribal ID	card			
Other - Describe:	U					
17.5. Income Verification						
What methods does your agency utilize	e to verify household inco	me? Select all that a	apply.			
Require documentation of incomparison of incom	me for all adult household	d members				
Pay stubs						
Social Security award le	tters					
Bank statements						
✓ Tax statements						
Zero-income statements						
<b>✓</b> Unemployment Insurance letters						
Other - Describe:						
Computer data matches:						
Income information matched against state computer system (e.g., SNAP, TANF)						
Proof of unemployment benefits verified with state Department of Labor						

Social Security income verified with SSA					
Utilize state directory of new hires					
Other - Describe:					
17.6. Protection of Privacy and Confidentiality					
Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.					
Policy in place prohibiting release of information without written consent					
Grantee LIHEAP database includes privacy/confidentiality safeguards					
Employee training on confidentiality for:					
<b>✓</b> Grantee employees					
Local agencies/district offices					
Employees must sign confidentiality agreement					
✓ Grantee employees					
Local agencies/district offices					
✓ Physical files are stored in a secure location					
Other - Describe:					
17.7. Verifying the Authenticity					
What policies are in place for verifying vendor authenticity? Select all that apply.					
All vendors must register with the State/Tribe.					
All vendors must supply a valid SSN or TIN/W-9 form					
✓ Vendors are verified through energy bills provided by the household					
Grantee and/or local agencies/district offices perform physical monitoring of vendors					
Other - Describe and note any exceptions to policies above:					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history  Account is properly credited with benefit					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history  Account is properly credited with benefit  Other - Describe:					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history  Account is properly credited with benefit  Other - Describe:  Centralized computer system/database tracks payments to all utilities					
Other - Describe and note any exceptions to policies above:  17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history  Account is properly credited with benefit  Other - Describe:  Centralized computer system/database tracks payments to all utilities  Centralized computer system automatically generates benefit level					
17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history  Account is properly credited with benefit  Other - Describe:  Centralized computer system/database tracks payments to all utilities  Centralized computer system automatically generates benefit level  Separation of duties between intake and payment approval					
17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency  Applicants must submit current utility bill  Data exchange with utilities that verifies:  Account ownership  Consumption  Balances  Payment history  Account is properly credited with benefit  Other - Describe:  Centralized computer system/database tracks payments to all utilities  Centralized computer system automatically generates benefit level  Payments coordinated among other energy assistance programs to avoid duplication of payments					
17.8. Benefits Policy - Gas and Electric Utilities  What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.  ✓ Applicants required to submit proof of physical residency  ✓ Applicants must submit current utility bill  Data exchange with utilities that verifies:  ✓ Account ownership  ✓ Consumption  ✓ Balances  ✓ Payment history  ✓ Account is properly credited with benefit  □ Other - Describe:  ✓ Centralized computer system/database tracks payments to all utilities  Centralized computer system automatically generates benefit level  ✓ Separation of duties between intake and payment approval  ✓ Payments coordinated among other energy assistance programs to avoid duplication of payments  ✓ Payments to utilities and invoices from utilities are reviewed for accuracy					
Other - Describe and note any exceptions to policies above:   17.8. Benefits Policy - Gas and Electric Utilities   What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.   ✓ Applicants required to submit proof of physical residency   ✓ Applicants must submit current utility bill   □ Data exchange with utilities that verifies:   ✓ Account ownership   ✓ Consumption   ✓ Balances   ✓ Payment history   ✓ Account is properly credited with benefit   □ Other - Describe:   ✓ Centralized computer system/database tracks payments to all utilities   ○ Centralized computer system automatically generates benefit level   ✓ Separation of duties between intake and payment approval   ✓ Payments coordinated among other energy assistance programs to avoid duplication of payments   ✓ Payments to utilities and invoices from utilities are reviewed for accuracy   ✓ Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities					

Other - Describe:
17.9. Benefits Policy - Bulk Fuel Vendors
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fue vendors? Select all that apply.
<b>V</b> endors are checked against an approved vendors list
Centralized computer system/database is used to track payments to all vendors
Clients are relied on for reports of non-delivery or partial delivery
Two-party checks are issued naming client and vendor
Direct payment to households are made in limited cases only
Vendors are only paid once they provide a delivery receipt signed by the client
Conduct monitoring of bulk fuel vendors
Bulk fuel vendors are required to submit reports to the Grantee
Vendor agreements specify requirements selected above, and provide enforcement mechanism
Other - Describe:
17.10. Investigations and Prosecutions
Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.
Refer to state Inspector General
Refer to local prosecutor or state Attorney General
Refer to US DHHS Inspector General (including referral to OIG hotline)
Local agencies/district offices or Grantee conduct investigation of fraud complaints from public
Grantee attempts collection of improper payments. If so, describe the recoupment process
If possible checks are voided before they are cashed. We have not had a case in recent memory where an improper payment was actually made, but we would issue a bill for the payment and pursue all appropriate means of collection to recoup if necessary.
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? permanently
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
<b>Vendors found to have committed fraud may no longer participate in LIHEAP</b>
Other - Describe:
If any of the above questions require further explanation or clarification that could not be made in the fields provided attach a document with said explanation here.

### Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters

Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

Instructions for Certification

- 1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
- 2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- 3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.BrBbr.
- 4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
- 6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
- 7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled ``Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or

agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

- 8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
- 9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
- (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions

Instructions for Certification

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
- 4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal that, [[Page 33043]] should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is

normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

### Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--Lower Tier Covered Transactions

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.
- **☑** By checking this box, the prospective primary participant is providing the certification set out above.

#### Section 19: Certification Regarding Drug-Free Workplace Requirements

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central pint is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

**Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)** 

- 1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
- 2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
- 3. For grantees other than individuals, Alternate I applies.
- 4. For grantees who are individuals, Alternate II applies.
- 5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
- 6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
- 7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).
- 8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

Controlled substance means a controlled substance in Schedules I through V of the

Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

Conviction means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

Criminal drug statute means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

Employee means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

Certification Regarding Drug-Free Workplace Requirements

Alternate I. (Grantees Other Than Individuals)

The grantee certifies that it will or will continue to provide a drug-free workplace by:,

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --
- (1) Abide by the terms of the statement; and
- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction:
- (e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant; (f)Taking one of the following actions, within 30 calendar days of receiving notice under
- (f)Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted -(1) Taking appropriate

personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).
- (B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

23701 S. 655 Rd  * Address Line 1					
Address Line 2					
Address Line 3					
Grove <u>* City</u>	ok <mark>≛ State</mark>	74344 <b>* Zip Code</b>			

Check if there are workplaces on file that are not identified here.

Alternate II. (Grantees Who Are Individuals)

- (a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;
- (b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

[55 FR 21690, 21702, May 25, 1990]

☑ By checking this box, the prospective primary participant is providing the certification set out above.

#### Section 20: Certification Regarding Lobbying

The submitter of this application certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By checking this box, the prospective primary participant is providing the certification set out above.

Assurances

- (1) use the funds available under this title to--
- (A) conduct outreach activities and provide assistance to low income households in meeting their home energy costs, particularly those with the lowest incomes that pay a high proportion of household income for home energy, consistent with paragraph (5);
- (B) intervene in energy crisis situations;
- (C) provide low-cost residential weatherization and other cost-effective energy-related home repair; and
- (D)plan, develop, and administer the State's program under this title including leveraging programs, and the State agrees not to use such funds for any purposes other than those specified in this title;
- (2) make payments under this title only with respect to--
- (A) households in which one or more individuals are receiving--
  - (i)assistance under the State program funded under part A of title IV of the Social Security Act;
  - (ii) supplemental security income payments under title XVI of the Social Security Act;
  - (iii) food stamps under the Food Stamp Act of 1977; or
  - (iv) payments under section 415, 521, 541, or 542 of title 38, United States Code, or under section 306 of the Veterans' and Survivors' Pension Improvement Act of 1978; or
- (B) households with incomes which do not exceed the greater of -
  - (i) an amount equal to 150 percent of the poverty level for such State; or
  - (ii) an amount equal to 60 percent of the State median income;

(except that a State may not exclude a household from eligibility in a fiscal year solely on the basis of household income if such income is less than 110 percent of the poverty level for such State, but the State may give priority to those households with the highest home energy costs or needs in relation to household income.

- (3) conduct outreach activities designed to assure that eligible households, especially households with elderly individuals or disabled individuals, or both, and households with high home energy burdens, are made aware of the assistance available under this title, and any similar energy-related assistance available under subtitle B of title VI (relating to community services block grant program) or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;(4) coordinate its activities under this title with similar and related programs administered by the Federal Government and such State, particularly low-income energy-related programs under subtitle B of title VI (relating to community services block grant program), under the supplemental security income program, under part A of title IV of the Social Security Act, under title XX of the Social Security Act, under the low-income weatherization assistance program under title IV of the Energy Conservation and Production Act, or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;(5) provide, in a timely manner, that the highest level of assistance will be furnished to those households which have the lowest incomes and the highest energy costs or needs in relation to income, taking into account family size, except that the State may not differentiate in implementing this section between the households described in clauses 2(A) and 2(B) of this subsection:
- (6) to the extent it is necessary to designate local administrative agencies in order to carry out the purposes of this title, to give special consideration, in the designation of such agencies, to any local public or private nonprofit agency which was receiving Federal funds under any low-income energy assistance program or weatherization program under the Economic Opportunity Act of 1964 or any other provision of law on the day before the date of the enactment of this Act, except that -
- (A) the State shall, before giving such special consideration, determine that the agency involved meets program and fiscal requirements established by the State; and
- (B) if there is no such agency because of any change in the assistance furnished to programs for economically disadvantaged persons, then the State shall give special consideration in the designation of local administrative agencies to any successor agency which is operated in substantially the same manner as the predecessor agency which did receive funds for the fiscal year preceding the fiscal year for which the determination is made;
- (7) if the State chooses to pay home energy suppliers directly, establish procedures to --

- (A) notify each participating household of the amount of assistance paid on its behalf;
- (B) assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment made by the State under this title;
- (C) assure that the home energy supplier will provide assurances that any agreement entered into with a home energy supplier under this paragraph will contain provisions to assure that no household receiving assistance under this title will be treated adversely because of such assistance under applicable provisions of State law or public regulatory requirements; and
- (D) ensure that the provision of vendor payments remains at the option of the State in consultation with local grantees and may be contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households, including providing for agreements between suppliers and individuals eligible for benefits under this Act that seek to reduce home energy costs, minimize the risks of home energy crisis, and encourage regular payments by individuals receiving financial assistance for home energy costs;
- (8) provide assurances that,
- (A) the State will not exclude households described in clause (2)(B) of this subsection from receiving home energy assistance benefits under clause (2), and
- (B) the State will treat owners and renters equitably under the program assisted under this title;
- (9) provide that--
- (A) the State may use for planning and administering the use of funds under this title an amount not to exceed 10 percent of the funds payable to such State under this title for a fiscal year; and
- (B) the State will pay from non-Federal sources the remaining costs of planning and administering the program assisted under this title and will not use Federal funds for such remaining cost (except for the costs of the activities described in paragraph (16));
- (10) provide that such fiscal control and fund accounting procedures will be established as may be necessary to assure the proper disbursal of and accounting for Federal funds paid to the State under this title, including procedures for monitoring the assistance provided under this title, and provide that the State will comply with the provisions of chapter 75 of title 31, United States Code (commonly known as the "Single Audit Act");
- (11) permit and cooperate with Federal investigations undertaken in accordance with section 2608;

- (12) provide for timely and meaningful public participation in the development of the plan described in subsection (c);
- (13) provide an opportunity for a fair administrative hearing to individuals whose claims for assistance under the plan described in subsection (c) are denied or are not acted upon with reasonable promptness; and
- (14) cooperate with the Secretary with respect to data collecting and reporting under section 2610.
- (15) \* beginning in fiscal year 1992, provide, in addition to such services as may be offered by State Departments of Public Welfare at the local level, outreach and intake functions for crisis situations and heating and cooling assistance that is administered by additional State and local governmental entities or community-based organizations (such as community action agencies, area agencies on aging and not-for-profit neighborhood-based organizations), and in States where such organizations do not administer functions as of September 30, 1991, preference in awarding grants or contracts for intake services shall be provided to those agencies that administer the low-income weatherization or energy crisis intervention programs.
- \* This assurance is applicable only to States, and to territories whose annual regular LIHEAP allotments exceed \$200,000. Neither territories with annual allotments of \$200,000 or less nor Indian tribes/tribal organizations are subject to Assurance 15.
- (16) use up to 5 percent of such funds, at its option, to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance, including needs assessments, counseling, and assistance with energy vendors, and report to the Secretary concerning the impact of such activities on the number of households served, the level of direct benefits provided to those households, and the number of households that remain unserved.

#### Plan Attachments

PLAN ATTACHMENTS
The following documents must be attached to this application
• Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.
• Heating component benefit matrix, if applicable
Cooling component benefit matrix, if applicable
Minutes, notes, or transcripts of public hearing(s).