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

Program Name: Low Income Home Energy Assistance Grantee Name: NORTHERN CALIFORNIA INDIAN DEVELOPMENT COUNCIL, INC Report Name: DETAILED MODEL PLAN (LIHEAP) Revision # 1 Report Period: 10/01/2016 to 09/30/2017 Report Status: Submission Accepted by CO (Revision #1)

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<b>Mandatory Gra</b>	int Applicati	on SF-424
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	TMENT OF HEALT ATION FOR CHILD			ES		Au	igust 19	87, revi	ised 05/92,02/95,03/96,12/98,1 OMB Clearance No.: 0970- Expiration Date: 06/30/	0075
	LOW	INCOM		ENERGY A Modei F - 424 - M	L PLAN		ROGR	AM(L	IHEAP)	
			* 1.b. Frequency: • Annual		* 1.c. Consolidated Application/Plan/Funding Request? Explanation:		est?	* 1.d. Version: Initial Resubmission Revision Update		
					2. Date Recei	ved:			State Use Only:	
					3. Applicant					
					4a. Federal E	-			5. Date Received By State:	
					4b. Federal A	ward Iden	tifier:		6. State Application Identifier:	
7. APPLICANT	INFORMATION				8					
* a. Legal Nam	e: Northern California	Indian Dev	elopment Council	, Inc.						
* b. Employer/	Taxpayer Identificatio	n Number	(EIN/TIN): 51	0189400	* c. Organiza	tional DUN	NS: 032	2129983		
* d. Address:	Æ				4		10			
* Street 1:	241 F Street				Street 2:					
* City:	EUREKA				County:		HUMI	BOLDT		
* State:	CA				Province:					
* Country:	United States				* Zip / Pos	stal Code:	95501	-		
e. Organization										
Department Na	ime:				Division Nam	le:				
f. Name and con	ntact information of p	erson to be	contacted on ma	atters involving th	his application	:				
Prefix: Mr.	* First Name: Terry			Middle Name:				* <b>Last</b> I Coltra		
Suffix:	Title: LIHEAP Coordinate	r		Organizational Affiliation:						
* Telephone Number: 707445-8451	<b>Fax Number</b> 707 445-8479			* Email: tcoltra@ncidc.	org					
* 8a. TYPE OF K: Indian/Native	APPLICANT: e American Tribally De	signated Or	ganization							
b. Additional	Description:									
* 9. Name of Fe	ederal Agency:									
				og of Federal Dom ssistance Number:					CFDA Title:	
10. CFDA Numb	ers and Titles		93568	Low-Income Home Energy		Assistance				
California Trib	Title of Applicant's P es LIHEAP Assistance									
12. Areas Affec California Trib	ted by Funding: es									
	SIONAL DISTRICTS	OF:			1					
* a. Applicant 01					<b>b. Program/Project:</b> California					

Attach an additional list of Program/Project Congressional Districts if needed.

14. FUNDING PERIOD:		15 ESTIMA	TED FUNDING:	
a. Start Date:	15. ESTIMA	* a. Federal (\$):	b. Match (\$):	
10/01/2016	<b>b. End Date:</b> 09/30/2017		\$0	\$0
* 16. IS SUBMISSION SUBJECT TO R	EVIEW BY STATE UNDER EXECUTIV	E 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 revie	ew.		
c. Program is not covered by E.O. 12.	372.			
* 17. Is The Applicant Delinquent On A O YES O NO	ny Federal Debt?			
Explanation:				
accurate to the best of my knowledge. I a	(1) to the statements contained in the list of also provide the required assurances** an tents or claims may subject me to crimina	d agree to con	nply with any resulting term	ns if I accept an award. I am aware that
** The list of certifications and assurance	es, or an internet site where you may obta	ain this list, is	contained in the announcen	nent or agency specific instructions.
18a. Typed or Printed Name and Title o	f Authorized Certifying Official		18c. Telephone (area code	, number and extension)
Terry Coltra			18d. Email Address tcoltra@ncidc.org	
18b. Signature of Authorized Certifying	Official		<b>18e. Date Report Submitte</b> 11/10/2016	ed (Month, Day, Year)
Attach supporting docum	nents as specified in agenc	v instruc	tions.	

	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES							
	LOW INCOME HOME ENERGY ASSISTANCE PR MODEL PLAN SF - 424 - MANDATORY	OGRAM(LIHEAP)						
Adr Offi Was Aug OM Exp THI	artment of Health and Human Services ninistration for Children and Families ce of Community Services shington, DC 20447 just 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01 B Approval No. 0970-0075 iration Date: 02/28/2005 E PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)Use of this model plan is optional. How							
rep mai	ive a Low Income Home Energy Assistance Program (LIHEAP) grant in years in which the grantee is orting burden for this collection of information is estimated to average 1 hour per response, including to ntaining the data needed, and reviewing the collection of information. An agency may not conduct or s ection of information unless it displays a currently valid OMB control number.	he time for reviewing instrue	tions, gathering and					
Dec	Section 1 Program Components							
	gram Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C) Check which components you will operate under the LIHEAP program.	Dates	of Operation					
	te: You must provide information for each component designated here as requested elsewhere in this p	lan.)	-					
		Start Date	End Date					
>	Heating assistance	10/01/2016	09/30/2017					
<b>&gt;</b>	Cooling assistance	10/01/2016	09/30/2017					
>	Crisis assistance	10/01/2016	09/30/2017					
	Weatherization assistance							
Pro	June 2017 June 2	Į	R					
Feti	mated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16							
1.2 F	stimate what amount of available LIHEAP funds will be used for each component that you will operate: The tota	of all percentages must add up	to Percentage (%)					
100% H	eating assistance		60.61%					
	ooling assistance		20.81%					
	risis assistance		18.58%					
W	/eatherization assistance		0.00%					
C	arryover to the following federal fiscal year		0.00%					
Α	dministrative and planning costs		0.00%					
S	ervices to reduce home energy needs including needs assessment (Assurance 16)		0.00%					
	sed to develop and implement leveraging activities		0.00%					
тот	AL		100.00%					

Section 1 - Program Components

Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C)

1.2.5	e 1	10 · · · · · · · · ·							
1.3 The	ſ	rved for winter crisis assistance that have Heating assistance	e not been expended by	March 1	5 will be reprogram	-	d to: bling assistance		
		Weatherization assistance			Other (specify:)				
						U	(speeny.)		
Categor	rical Eligib	ility, 2605(b)(2)(A) - Assurance 2, 2605(c)	(1)(A), 2605(b)(8A) - As	ssurance	8				
1.4 Do y Yes	v <b>ou conside</b> No	er households categorically eligible if one l	household member rece	eives one	of the following ca	atego	ries of benefits in th	ie left	column below? 💽
If you a	nswered ''	Yes'' to question 1.4, you must complete the	he table below and answ	ver ques	tions 1.5 and 1.6.				
			Heating		Cooling	_	Crisis		Weatherization
TANF			• Yes O No		es 🖸 No		Yes ONo	<u> </u>	Yes 💿 No
SSI			• Yes O No		es O No		Yes O No		Yes 💿 No
SNAP			• Yes O No		es O No		Yes ONo		Yes 💿 No
Means-te	ested Vetera	ns Programs	O Yes 💿 No	OY	es 💽 No	O	Yes 💽 No	O	Yes 💿 No
		Program Name	Heating		Cooling		Crisis		Weatherization
Other(Sp			CYes CNo		Oyes ONo		O Yes O No		Oyes ONo
1.5 Do y	ou automa	atically enroll households without a direct	annual application?	Yes 🤄	No				
If Yes, e N/A	explain:								
	v do vou en	sure there is no difference in the treatmen	nt of categorically elioib	le house	holds from those r	not re	ceiving other public	c assi	stance when
determi	ning eligib	ility and benefit amounts?							
		ssistance must complete an application for a l income level.	ssistance to determine th	eır eligib	unty. Eligibility is tl	nen d	etermined through as	sessn	nent of the applicant's
	Iominal Pay				~				
		te LIHEAP funds toward a nominal payn							
		Yes'' to question 1.7a, you must provide a	response to questions 1	l.7b, 1.7c	, and 1.7d.				
		ominal Assistance: \$0.00							
	equency of Once Per Y	Assistance							
	Jnce Per Y	ear							
	Once every	five years							
	Other - Des	scribe:							
1.7d Ho	w do you c	confirm that the household receiving a nor	minal payment has an e	nergy co	st or need?				
N/A									
Determi	nation of E	ligibility - Countable Income							
1.8. In d	leterminin	g a household's income eligibility for LIH	EAP, do you use gross i	income o	r net income ?				
	Fross Incor	me							
	let Income								
1.9. Sele	ect all the a	pplicable forms of countable income used	l to determine a househ	old's inc	ome eligibility for	LIHI	EAP		
<b>v</b>	Vages								
S S	Self - Empl	oyment Income							
<b>v</b>	Contract In	icome							
Г Р	ayments f	rom mortgage or Sales Contracts							

<b>&gt;</b>	Unemployment insurance						
	Strike Pay						
<b>&gt;</b>	Social Security Administration (SSA ) benefits						
	Including MediCare deduction Excluding MediCare deduction						
<b>~</b>	Supplemental Security Income (SSI)						
<b>&gt;</b>	Retirement / pension benefits						
>	General Assistance benefits						
>	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						
<b>~</b>	Income from employment through Workforce Investment Act (WIA)						
<b>&gt;</b>	Income from work study programs						
<b>&gt;</b>	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
by 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.

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

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

## Section 2 - Heating Assistance

Eligibility, 2605(b)(2) - Assurance 2

2.1 Designate the income eligibility threshold used for the heating componenet:

Add Household size Eligibility Guideline Eligibility Threshold							
Add 1	I Housenoid size		Eligibility Guideline         Eligibility Thresh           HHS Poverty Guidelines				
<b>2.2 Do you have additional eligibility requirements for</b> HEATING ASSITANCE?			• No				
2.3 Check the app	ropriate boxes below and describe the policies	s for each.					
Do you require an Assets test ?							
Do you have addit	tional/differing eligibility policies for:	-11.					
Renters?							
Renters Livi	ing in subsidized housing ?	CYes © No					
Renters with	h utilities included in the rent ?	O Yes O No					
Do you give priori	ity in eligibility to:						
Elderly?		• Yes	D No				
Disabled?		• Yes	D <sub>No</sub>				
Young children?			© Yes ONo				
Households with high energy burdens ?			CYes ONo				
Other?		O Yes 6	No				

Explanations of policies for each "yes" checked above:

Households with Elders, disabled and young children are given priority because the Tribes' have proritized these groups for LIHEAP assistance. Elders and the disabled are less able to cover the cost of energy for their homes due to low fixed incomes. The Tribes have determined that homes with children, many times, have a single parent/single income and have lower incomes and the need for assistance with energy costs. After the Tribe has completed the required paperwork, NCIDC reviews for eligibility and gives the final approval of the participant. Just because a household meets one of the priority groups it does not guarantee that they will get assistance. The household must meet the LIHEAP eligibility requirements and be in one of the three priority groups.

Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

2.4 Describe how you prioritize the provision of heating assistance tovulnerable populations, e.g., benefit amounts, early application periods, etc.

Prior to NCIDC considering a household for LIHEAP services, the Tribe is responsible for completing the intake process and providing a completed application packet and that has been vetted by the intake person and signed off on as eligible. NCIDC then assesses each applicant individually to assure they meet the required criteria and assuring that the highest benefits go to households with the lowest income and the highest energy costs or needs. This system takes into account the level of household income, energy costs or needs, and priority services given to Elders, Disabled and Young Children. (see attachment 3)

Income

Family (household) size

Home energy cost or need:

Fuel type

Climate/region								
Individual bill								
Dwelling type								
Energy burden (% of income spent on home e	energy)							
Energy need								
Other - Describe:								
NCIDC will assess each applicant individually to assure that the highest benefits go to holseholds with the lowest income and the highest energy costs or needs. This system will take into account the level of household income, energy costs, type of fuel and priority services to the elderly, diabled and young children. The minimum and maximum benefit (below) cover all applicants but the amount received is based on the above mentioned categories. The benefit amount is outlined below and is based on the above mentioned criteria. The \$600 threshold is the maximum that a household can receive, it does not mean that every household gets that amount. If a household can show need and meet the criteria they can receive as much as \$600.00.								
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)								
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B) 2.6 Describe estimated benefit levels for FY 2017:								
	\$150	Maximum Benefit	\$600					
2.6 Describe estimated benefit levels for FY 2017:			\$600					
2.6 Describe estimated benefit levels for FY 2017: Minimum Benefit			\$600					
<ul> <li>2.6 Describe estimated benefit levels for FY 2017:</li> <li>Minimum Benefit</li> <li>2.7 Do you provide in-kind (e.g., blankets, space heaters) a</li> </ul>			\$600					

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

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

	Se	ction 3 -	Cooling Assistance				
Eligibility, 2605	(c)(1)(A), 2605 (b)(2) - Assurance 2						
3.1 Designate T	he income eligibility threshold used for the Co	oling compone	enet:				
Add	Household size		Eligibility Guideline	Eligibility Threshold			
1	All Household Sizes		HHS Poverty Guidelines	150.00%			
<b>3.2 Do you have</b> COOLING ASS	e additional eligibility requirements for ITANCE?	O Yes (	• No				
3.3 Check the a	ppropriate boxes below and describe the polici	es for each.					
Do you require	an Assets test ?	O Yes (	No				
Do you have ad	ditional/differing eligibility policies for:						
Renters?		O Yes (	No				
Renters L	iving in subsidized housing ?	O Yes (	• No				
Renters w	vith utilities included in the rent ?	O <sub>Yes</sub> (	• No				
Do you give pri	ority in eligibility to:						
Elderly?		• Yes (	O No				
Disabled?		• Yes (	O No				
Young ch	ildren?	• Yes (	No				
Househol	ds with high energy burdens ?	O Yes (	• No				
Other?		O Yes	O Yes O No				
Explanations of	policies for each "yes" checked above:	N					
	cost of energy for their homes and are much less		e Tribes' priortizing these for LIHEAP assistance. I firewood. Homes with children, many times, are fro				
3.4 Describe ho	w you prioritize the provision of cooling assista	nce tovulnera	ble populations,e.g., benefit amounts, early appl	ication periods, etc.			
			go to households with the lowest income and the h priority services given to Elders, Disabled and You				
Determination of	f Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(E	3)					
3.5 Check the v	ariables you use to determine your benefit leve	ls. (Check all	that apply):				
Income							
Family (he	ousehold) size						
✓ Home ene	rgy cost or need:						
🗹 Fu	el type						
	el type mate/region						

Individual bill					
Dwelling type					
Energy burden (% of income spent on home en	nergy)				
Energy need					
Other - Describe:					
	NCIDC will assess each applicant individually to assure that the highest benefits go to households with the lowest income and the highest energy costs or needs. This system will take into account the level of household income, energy costs and needs and priority services to the elderly, disabled and young children.				
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)					
3.6 Describe estimated benefit levels for FY 2017:					
Minimum Benefit	Minimum Benefit \$150 Maximum Benefit \$600				
3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? O Yes O No					
If yes, describe.					
N/A					
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 4 -	CRISIS	ASSISTA	NCE
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	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES				
	LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY				
	Section 4: CR	ISIS 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	IHEAP program's definition for determining a crisis.				
the electric and/or n further delivery of c	acks the appropriate amount of wood, oil, propane or other del atural gas grid when they have received an interruption of serv sooking or heating fuel.				
4.3 What constitute	es a <u>life-threatening crisis?</u>				
When someone in the potentially endanged	ne household has a life threatening illness that requires electricit r life safety.	ity for medical equipment or other necessities impac	ted by the lack of power that could		
	4. 2004(->				
Crisis Requirement, 2604(c)					
4.4 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households? 48Hours					
4.5 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households in life-threatening situations? 12Hours					
Crisis Eligibility, 26	505(c)(1)(A)				
4.6 Do you have additional eligibility requirements for CRISIS ASSISTANCE?					
4.7 Check the appr	opriate boxes below and describe the policies for each				
Do you require an Assets test ? O Yes O No					
Do you give priorit					
Elderly?	· · · · · ·	• Yes O No			
Disabled?					
Young Child	ren?	• Yes C No			
Households v	with high energy burdens?	C Yes • No			
Other?					
In Order to receive crisis assistance:					
Must the household have received a shut-off notice or have a near empty tank?					
Must the hou	sehold have been shut off or have an empty tank?	O Yes 💿 No			
Must the household have exhausted their regular heating benefit?		O Yes 💿 No			
Must renters eviction notice ?	Must renters with heating costs included in their rent have received an				
Must heating	Must heating/cooling be medically necessary?				
Must the hou	sehold have non-working heating or cooling equipment?	C Yes 💿 No			
Other?		O yes O No			

Do you have additional / diffe	ering eligibility policies for:			
Renters?	BBoomel Koneres for t	O Yes O No		
Renters living in subsidized housing?				
Renters with utilities included in the rent?     O Yes O No				
Explanations of policies for e		0105 010		
4.7 - Applicants receive LIHEAP assistance in the priority order as follows: Elderly, Disabled and young children. Households must provide a verification of interruption of services, a shut off notice from the vendor requiring a prepayment before delivery of cooking or heating fuel.				
Determination of Benefits 4.8 How do you handle crisis	situations?			
4.8 How do you nandle crisis	Separate component			
	Fast Track			
	Other - Describe:			
4.9 If you have a separate cor	nponent, how do you determine crisis assistance be	nefits?		
	Amount to resolve the crisis.			
	Other - Describe:			
Crisis Requirements, 2604(c)				
	ns for energy crisis assistance at sites that are geog	raphically accessible to all households in the area to be served?		
• Yes • No Explain. Each of the Tribes recieving LIHEAP services under teh NCIDC program have central social service assistance centers accessible to all member households.				
	4.11 Do you provide individuals who are physically disabled the means to:			
Submit applications for crisis benefits without leaving their homes?				
• Yes O No If No, explain.				
Travel to the sites at which applications for crisis assistance are accepted?				
• Yes O No If No, explain. If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?				
Benefit Levels, 2605(c)(1)(B)				
	enefit for each type of crisis assistance offered.			
Winter Crisis     \$0.00 maximum benefit				
Year-round Crisis \$600.00 maximum benefit				
4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?				
C Yes 💿 No If yes, Describe				
N/A				
4.14 Do you provide for equipment repair or replacement using crisis funds?				
O Yes ⊙ No				
If you answered "Yes" to que	estion 4.14, you must complete question 4.15.			
4.15 Check appropriate boxe	s below to indicate type(s) of assistance provided.			
	Winter     Summer     Year-round Crisis			

	Crisis	Crisis			
Heating system repair					
Heating system replacement					
Cooling system repair					
Cooling system replacement					
Wood stove purchase					
Pellet 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 moratoriun	n on shut offs	?		
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.					

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		Y ASSISTANCE PROGRAM(LIH		
		DEL PLAN	ICAF)	
	-	- MANDATORY		
Se	ection 5: WEATHE	ERIZATION ASSISTANCE		
Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assurance	2			
5.1 Designate the income eligibility threshold us	ed for the Weatherization co	mponent		
Add Househ	old Size	Eligibility Guideline	Eligibility Threshold	
			0.00%	
5.2 Do you enter into an interagency agreement	to have another government	agency administer a WEATHERIZATION com	ponent? O Yes O No	
5.3 If yes, name the agency.				
5.4 Is there a separate monitoring protocol for w	veatherization? O Yes O N	ło		
WEATHERIZATION - Types of Rules				
5.5 Under what rules do you administer LIHEA	P weatherization? (Check on	ily one.)		
Entirely under LIHEAP (not DOE) rules		-		
Entirely under DOE WAP (not LIHEAP)	rules			
Mostly under LIHEAP rules with the follo	owing DOE WAP rule(s) whe	ere LIHEAP and WAP rules differ (Check all tha	t apply):	
Income Threshold				
Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days				
Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities).				
Other - Describe:				
Mostly under DOE WAP rules, with the fo	ollowing LIHEAP rule(s) wh	ere LIHEAP and WAP rules differ (Check all th	at apply.)	
Income Threshold				
Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.				
Weatherization not subject to DOE start inaxinum statewide average cost per dweining unit. Weatherization measures are not subject to DOE Savings to Investment Ration (SIR ) standards.				
Other - Describe:				
Eligibility, 2605(b)(5) - Assurance 5				
5.6 Do you require an assets test?	O Yes O No			
5.7 Do you have additional/differing eligibility p Renters	O Yes O No			
	O Yes O No			
Renters living in subsidized housing? 5.8 Do you give priority in eligibility to:	Yes No			
Elderly?	O Yes O No			
Disabled?	O Yes O No			
Young Children?	O Yes O No			
House holds with high energy burdens?	O Yes O No			
mouse notus with high energy bur dells:	NO YES NO NO			

# Section 5 - WEATHERIZATION ASSISTANCE

Other?			
If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you mus	t 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 h	ousehold? O Yes O No		
5.10 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 catego	ories 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:		

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES				
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY				
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):				
Notice of LIHEAP assistance availability is tranmitted by each Tribe to their respective membership.				
The Tribes are sent a flier, to be displayed at the Tribal office, that explains the LIHEAP program.				

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	LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY				
	Section 7: Coordination, 2605(b)(4) -	Assurance 4			
7.1 Desc	ribe how you will ensure that the LIHEAP program is coordinated with other programs ava	ilable 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:				
NCIDC will coordinate the LIHEAP service delivery project with the Statewide Community Services Block Grant (CSBG) program administered by NCIDC, similar and related programs operated by the Tribes, CSBG and LIHEAP projects operated by Community Action Agencies operating in those same areas where Tribes receiving assistance under this project are located. NCIDC works with all Community Action Agencies in the State of California, as a member of the California/Nevada Community Action Partnership and as a contractor with the Department of Community Services and Development.					
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.					

	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES				
	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: Tribal Administration				
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?					
N/A					
8.3 How	do you provide alternate outreach and intake for	COOLING ASSISTANCE	?		
N/A	N/A				
8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?					
N/A					
8.5 LIH	EAP Component Administration.	Heating	Cooling	Crisis	Weatherization
8.5a Wh	o determines client eligibility?	Tribal Government	Tribal Government	Tribal Government	Tribal Government
8.5b Wh vendors	o processes benefit payments to gas and electric ?	Tribal Government	Tribal Government	Tribal Government	
	8.5c who processes benefit payments to bulk fuel Tribal Government Tribal Government Tribal Government Tribal Government				
	8.5d Who performs installation of weatherization measures? Non-Applicable				
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 Wha	8.6 What is your process for selecting local administering agencies?			
Not appl	icable. NCIDC is the administering agency. Tribal Administration - not State.			
8.7 How	many local administering agencies do you use? N/A			
8.8 Have Yes	8.8 Have you changed any local administering agencies in the last year? Yes No			
8.9 If so	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			
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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LOW INCOME HOME ENERGY ASSISTANCE				
MODEL PLAN				
Section 9: Energy Suppliers, 2605(b)(7)	- Assurance 7			
9.1 Do you make payments directly to home energy suppliers?				
Heating O Yes O No				
Cooling I Yes O No				
Crisis 🖸 Yes 🖸 No				
Are there exceptions? O Yes O No				
If yes, Describe.				
All payments for LIHEAP assistance are paid directly to the energy supplier. The payments are made on be	chalf of and on the account of the participant household.			
Each participant and vendor, at the time of wood or pellet delivery, signs a receipt acknowledging the delivery. Payment to the vendor is not made without the participant verification (the signed receipt). Gas and electric payments are pledged to the corporate payment center and NCIDC pays them directly. Participants are asked to notify NCIDC if payment is not credited to their account in the next billing cycle.				
9.2 How do you notify the client of the amount of assistance paid?				
When a pledge is made in the name of the client to a home energy supplier, NCIDC notifies the Tribal LIHEAP liaison and the client, by letter, regarding the pledge amount.				
9.3 How do you assure that the home energy supplier will charge the eligible household, in the norma home energy and the amount of the payment?	al billing process, the difference between the actual cost of the			
Through follow up contact with the Tribal liaison and the client. (See attachments 11 and 12)				
9.4 How do you assure that no household receiving assistance under this title will be treated adversely	y because of their receipt of LIHEAP assistance?			
Each energy vendor signs and agreement regarding LIHEAP services to Tribal members which includes a non-discrimination clause.				
9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households?				
If so, describe the measures unregulated vendors may take.				
If any of the above questions require further explanation or clarification t attach a document with said explanation here.	hat could not be made in the fields provided,			

Section 10 - Program, Fiscal Monitoring, and Audit, 2605(b)(10) - Assurance 10								
	TMENT OF HEALTH ATION FOR CHILDRE	AND HUMAN SERVICES N AND FAMILIES	August 1987, revi	sed 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							
	Sect	on 10: Program, Fiscal Mo	nitoring, and Audit, 2605(b	)(10)				
10.1. How do ye	ou ensure good fiscal acco	ounting and tracking of LIHEAP funds?						
payment request Director. When	s. Once a request is receiv approval is given, a check	ystem in compliance with generally accepted ed the fiscal department develops a check re is cut to the appropriate vendor and two auth acceive monthly updates of the financial trans	quest with all the pertinent information that horized check signatories are required to fin	them must be approved by the Executive alize the check payment. The				
		e no policy to cover this situation. We work ors about what is pledged (large power provi						
Audit Process								
10.2. Is your LI		annually under the Single Audit Act and	OMB Circular A - 133?					
		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 🗹								
No Findings 🔽	]							
Finding	Туре	Brief Summary	Resolved?	Action Taken				
Finding 1 10.4. Audits of	Type							
Finding 1 10.4. Audits of What types of a Select all that a	Type Local Administering Age annual audit requirement pply.	ncies s do you have in place for local adminster	ing agencies/district offices?	Action Taken				
Finding 1 10.4. Audits of a What types of a Select all that a Local	Type Local Administering Age annual audit requirement pply. agencies/district offices a	ncies s do you have in place for local adminster re required to have an annual audit in co	ing agencies/district offices? mpliance with Single Audit Act and OMI	Action Taken				
Finding 1 1 10.4. Audits of What types of a Select all that a Local Local	Type Local Administering Age unnual audit requirement pply. agencies/district offices a agencies/district offices a	ncies s do you have in place for local adminster	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133)	Action Taken 3 Circular A-133				
Finding 1 10.4. Audits of a Select all that a Local Local Local	Type Local Administering Age annual audit requirement pply. agencies/district offices a agencies/district offices a	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance	Action Taken 3 Circular A-133				
Finding 1 10.4. Audits of 2 What types of a Select all that a Local Local Grant	Type Local Administering Age unnual audit requirement pply. agencies/district offices a agencies/district offices a agencies/district offices' aee conducts fiscal and pr	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance	Action Taken 3 Circular A-133				
Finding 1 10.4. Audits of 3 What types of a Select all that a Local Local Local Grant Compliance Me	Type Local Administering Age unnual audit requirement pply. agencies/district offices a agencies/district offices ' agencies/district offices' tee conducts fiscal and pr	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re ogram monitoring of local agencies/distri	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of 3 What types of a Select all that a Local Local Local Grant Compliance Me	Type Local Administering Age unnual audit requirement pply. agencies/district offices a agencies/district offices ' agencies/district offices' tee conducts fiscal and pr	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of 3 What types of a Select all that a Local Local Local Grant Compliance Me	Type Local Administering Age annual audit requirement pply. agencies/district offices a agencies/district offices ' agencies/district offices' tee conducts fiscal and pr onitoring he Grantee's strategies fo	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re ogram monitoring of local agencies/distri	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of What types of a Select all that a Local Local Local Grantee employ Grantee employ Interr	Type Local Administering Age unnual audit requirement pply. agencies/district offices a agencies/district offices a agencies/district offices ' tee conducts fiscal and pr mitoring he Grantee's strategies for yees: al program review	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re ogram monitoring of local agencies/distri	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of 2 What types of a Select all that a Local Local Local Grant Compliance Me 10.5. Describe t Grantee employ Interr Depart	Type Local Administering Age unnual audit requirement pply. agencies/district offices a agencies/district offices ' agencies/district offices' tee conducts fiscal and pr onitoring he Grantee's strategies fo yees: hal program review tmental oversight	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re- ogram monitoring of local agencies/distri or monitoring compliance with the Grante	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of What types of a Select all that a Local Local Local Grante Grantee employ Grantee employ Interr Depar	Type Local Administering Age annual audit requirement pply. agencies/district offices a agencies/district offices a agencies/district offices' tee conducts fiscal and pr onitoring he Grantee's strategies for yees: hal program review etmental oversight dary review of invoices a	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re ogram monitoring of local agencies/distri or monitoring compliance with the Granto nd payments	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of What types of a Select all that a Local Local Local Grante Grantee employ Grantee employ Interr Depar	Type Local Administering Age annual audit requirement pply. agencies/district offices a agencies/district offices a agencies/district offices' tee conducts fiscal and pr onitoring he Grantee's strategies for yees: hal program review etmental oversight dary review of invoices a	ncies s do you have in place for local adminster re required to have an annual audit in co re required to have an annual audit (othe A-133 or other independent audits are re- ogram monitoring of local agencies/distri or monitoring compliance with the Grante	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				
Finding 1 10.4. Audits of What types of a Select all that a Local Local Local Grante Grantee employ Interr Depar Secon Other	Type Local Administering Age annual audit requirement pply. agencies/district offices a agencies/district offices a agencies/district offices' tee conducts fiscal and pr onitoring he Grantee's strategies for yees: hal program review etmental oversight dary review of invoices a	ncies s do you have in place for local adminster re required to have an annual audit in co are required to have an annual audit (othe A-133 or other independent audits are re- ogram monitoring of local agencies/distri or monitoring compliance with the Grante nor monitoring compliance with the Grante isms are in place. Describe:	ring agencies/district offices? mpliance with Single Audit Act and OMI er than A-133) viewed by Grantee as part of compliance ct offices	Action Taken  3 Circular A-133 process.				

On - site evaluation
Annual program review
Monitoring through central database
Desk reviews
Client File Testing / Sampling
Other program review mechanisms are in place. Describe:
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
Administrative personnel monitor program activities. Eligiblity determination is performed by NCIDC intake personnel and in some instances Tribal personnel. All paperwork used for eligibility determinations are reviewed by NCIDC staff to assure accuracy, completeness and program eligibility. Following this review administravive personnel must review and sign (authorize) the eligibility and benefit documents. Using this methodology there is a three-tiered review of the eligibility and benefits determination process.
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 ?
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? Not Applicable
10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? Not Applicable
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 ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES						
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY						
Section 11: Timely and Mean	ingful Public Participation, 2605	(b)(12), 2605(C)(2)				
11.1 How did you obtain input from the public in the developmen Select all that apply.	t of your LIHEAP plan?					
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 com	nent					
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:						
The Tribes gather input from their community in regard to the LIHEA NCIDC provides the Tribes (48 total) with the materials needed to ad to energy companies for eligible households. The Tribes determine w programs as needed.	minister the LIHEAP program, gives final approval	on submitted applications and dispenses payment				
11.2 What changes did you make to your LIHEAP plan as a resu	It of this participation?					
No recent changes in the plan have been made.						
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 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	5)?					
11.5 Summarize the comments you received 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 or clarification that could not be made in the fields provided, attach a document with said explanation here.						

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LOW INCOME HOME ENERGY ASSISTANCE	E PROGRAM(LIHEAP)
MODEL PLAN	
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? None	
12.2 How many of those fair hearings resulted in the initial decision being reversed? $\rm N/A$	
12.3 Describe any policy and/or procedural changes made in the last Federal fiscal year as a result o	f fair hearings?
N/A	
12.4 Describe your fair hearing procedures for households whose applications are denied.	
NCIDC has established a fair hearing procedure for applicants denied LIHEAP services, and for applicatio have been denied services for an unjustified reason, or their application has not been acted on in a timely r informal procedures. Should the applicant not wish to pursue informal resolution or has not received a sati process, they may file a formal complaint with NCIDC. Applicants are informed of the fair hearing proced	nanner, is directed to attempt to resolve the matter through sfactory conslusion to their complaint through the informal
12.5 When and how are applicants informed of these rights?	
Applicants are informed of the fair hearing procedures at intake for LIHEAP assistance. The fair hearing p assessment of eligibility.	procedures are provided to each applicant during the intake and
12.6 Describe your fair hearing procedures for households whose applications are not acted on in a time	ely manner.
The same procedures for a fair hearing also apply to those applicants who believe their application has not	been acted on in a timely manner.
12.7 When and how are applicants informed of these rights?	
Applicants are informed of the fair hearing procedures upon application for LIHEAP assistance.	
If any of the above questions require further explanation or clarification attach a document with said explanation here.	that could not be made in the fields provided,

Section 13 - Reduction of home energy needs,2605(b	<b>b</b> )(16) - Assurance 16
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LOW INCOME HOME ENERGY ASSISTANC MODEL PLAN SF - 424 - MANDATOF	
Section 13: Reduction of home energy needs, 2	605(b)(16) - Assurance 16
13.1 Describe how you use LIHEAP funds to provide services that encourage and enable househol energy assistance?	lds to reduce their home energy needs and thereby the need for
N/A	
13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activit	ies?
N/A	
13.3 Describe the impact of such activities on the number of households served in the previous Fe	deral fiscal year.
N/A	
13.4 Describe the level of direct benefitsprovided to those households in the previous Federal fiscal	l year.
N/A	
13.5 How many households applied for these services? N/A	
13.6 How many households received these services? N/A	
If any of the above questions require further explanation or clarification attach a document with said explanation here.	n that could not be made in the fields provided,

	IMENT OF HEALTH A	ND HUMAN SERVICES N 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					
	LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY							
	Section 14:Leveraging Incentive Program, 2607(A)							
14.1 Do you plan	n to submit an application	n for the leveraging incentive pro	gram?					
<b>14.2 Describe in</b> N/A	14.2 Describe instructions to any third parties and/or local agencies for submitting LIHEAP leveraging resource information and retaining records.							
14.3 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 following:								
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.								

# Section 14 - Leveraging Incentive Program ,2607A

Section	15 -	Training
Dection	10	

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

>	Policies communicated through vendor agreements					
	Policies are outlined in a vendor manual					
	Other - Describe:					
15.2 Do Yes	15.2 Does your training program address fraud reporting and prevention? Yes No					

### Section 16 - Performance Goals and Measures, 2605(b)

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

#### 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.

Not Applicable

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN AND FAMILIES							
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY							
Section 17: Program Integrity, 2605(b)(10)							
17.1 Fraud Reporting Mechanisms							
a. Describe all mechanisms available to	the j	public for reporting cases of suspecte	d wa	ste, fraud, and abus	se. Select all that a	pply	
Online Fraud Reporting							
Dedicated Fraud Reporting							
	-	istrict office or Grantee office					
Report to State Inspector G		al or Attorney General	onde	urs to report froud	wasta and ahusa		
Other - Describe:			chuc	n's to report il aud,	waste, and abuse		
b. Describe strategies in place for adver	rtisin	g the above-referenced resources. Set	lect a	ll that apply			
Printed outreach materials							
Addressed on LIHEAP app	licati	on					
Vebsite							
Other - Describe:							
17.2. Identification Documentation Rec a. Indicate which of the following form			ed to	be collected from L	IHEAP applicant	s or i	their household members.
0		<u> </u>		Collected from			
Type of Identification Collected							
		Applicant Only Required		All Adults in Household Required		All Household Members Required	
Social Security Card is photocopied and retained							
		Requested	<b>&gt;</b>	Requested		<b>&gt;</b>	Requested
Social Security Number (Without actual Card)		Required		Required			Required
		Requested		Requested		<b>&gt;</b>	Requested
Government-issued identification		Required		Required			Required
(i.e.: driver's license, state ID, Tribal ID, passport, etc.)		Requested	>	Requested		<b>&gt;</b>	Requested
				All Adults in	All Adults in		All Household All Household

	Other	Applicant Only Required	Applicant Only Requested	Household Required	Household Requested	Members Required	Members Requested		
1									
b. De	b. Describe any exceptions to the above policies.								
17.3	Identification Verification								
_	cribe what methods are used to verify t	the authenticity of ide	ntification documen	ts provided by client	ts or household memb	pers. Select all that a	pply		
	Verify SSNs with Social Security Ac	dministration							
	Match SSNs with death records from	m Social Security Adı	ministration or state	e agency					
	initiaten borto with state englositty/ea	se management system	m (e.g., SNAP, TAN	<b>F</b> )					
<ul> <li></li> </ul>	Match with state Department of La	bor system							
	Match with state and/or federal cor	rections system							
	Match with state child support syste	em							
	Verification using private software	(e.g., The Work Num	ber)						
	In-person certification by staff (for	tribal grantees only)							
	Match SSN/Tribal ID number with	tribal database or en	rollment records (fo	r tribal grantees onl	y)				
<b>~</b>	Other - Describe:								
the T house are el provi	because the majority of the Tribes in NC ribal LIHEAP coordinators knowledge or eholds in which one or more individuals a ligible for LIHEAP services. Documentat ide adequate identification, however in cc al membership the identity of the applicar	of the community. Addi are receiving assistance tion for those programs ombination with proof of	tional verification is of e under TANF, Supples further verifies the a	collected in the proces emental Security incomplicant or the applic	ss of certifying the clie ome, food stamps (SNA ant's household eligibi	ent for services. For ex AP) or Veterans or Su lity. Alone these docu	xample, rvivor pensions uments do not		
17.4	. Citizenship/Legal Residency Verificat	tion							
Wha	at are your procedures for ensuring tha			r aliens who are qual	lified to receive LIHE	AP benefits? Select	all that apply.		
┝┝	Clients sign an attestation of citize		-						
┝╞	Client's submission of Social Secur	· ·	. 0	idency					
┝╞	Noncitizens must provide documer	5							
	Citizens must provide a copy of the	,	aturalization papers	s, or passport					
	Noncitizens are verified through the	•							
		ıgh Tribal enrollment	records/Tribal ID c	ard					
	Other - Describe:								
17.5	. Income Verification								
Wha	at methods does your agency utilize to	verify household inco	me? Select all that a	pply.					
×	Require documentation of income f	or all adult household	l members						
	Pay stubs								
	Social Security award letters	\$							
	Bank statements								
	Tax statements								
	Zero-income statements								
	<b>Unemployment Insurance le</b>	tters							
	Other - Describe:								

The majority of employment on reservations is within the Tribal government and its subsidiaries and Tribes are not required to report employment data to the state. Therefore, the state databases are inadequate for new hires on reservation.

In an effort to insure that all household members' income is accounted for, we will require the "verification of unemployment/no income" statement (see attachment 7) beginning in FY 2011. It is required for all adults living in the household. The form assists in verifying that the household income and number of people living in the home

accurate on the application form. This form requires that all household members, 18 years or older complete and sign a statement that verifies they are unemployed or ave no income. Additionally, the Tribal LIHEAP coordinator must also sign each form, as verification of household members and employment/income status.
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:
CIDC does not have access to most computer matching systems.
7.6. 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:
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:
7.7. Verifying the Authenticity
What policies are in place for verifying vendor authenticity? Select all that apply.
What policies are in place for verifying vendor authenticity? Select all that apply.         Image: All vendors must register with the State/Tribe.
<ul> <li>What policies are in place for verifying vendor authenticity? Select all that apply.</li> <li>All vendors must register with the State/Tribe.</li> <li>All vendors must supply a valid SSN or TIN/W-9 form</li> </ul>
What policies are in place for verifying vendor authenticity? Select all that apply.         Image: All vendors must register with the State/Tribe.         Image: All vendors must supply a valid SSN or TIN/W-9 form         Image: Vendors are verified through energy bills provided by the household
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<ul> <li>Vhat policies are in place for verifying vendor authenticity? Select all that apply.</li> <li>All vendors must register with the State/Tribe.</li> <li>All vendors must supply a valid SSN or TIN/W-9 form</li> <li>Vendors are verified through energy bills provided by the household</li> <li>Grantee and/or local agencies/district offices perform physical monitoring of vendors</li> <li>Other - Describe and note any exceptions to policies above:</li> <li>7.8. Benefits Policy - Gas and Electric Utilities</li> </ul>
Vhat policies are in place for verifying vendor authenticity? Select all that apply.         Image: All vendors must register with the State/Tribe.         Image: All vendors must supply a valid SSN or TIN/W-9 form         Image: Vendors are verified through energy bills provided by the household         Image: Grantee and/or local agencies/district offices perform physical monitoring of vendors         Image: Other - Describe and note any exceptions to policies above:         7.8. Benefits Policy - Gas and Electric Utilities         Vhat 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.         Image: Applicants required to submit proof of physical residency
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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
Direct payment to households are made in limited cases only
Procedures are in place to require prompt refunds from utilities in cases of account closure
Vendor agreements specify requirements selected above, and provide enforcement mechanism
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 fuel vendors? Select all that apply.
Vendors 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
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? One Year
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
Vendors found to have committed fraud may no longer participate in LIHEAP
Other - Describe:
If any of the above questions require further explanation or clarification that could not be made in the fields provided,

prov 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 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)

241 F Street <u>* Address Line 1</u>		
Address Line 2		
Address Line 3		
Eureka <u>* City</u>	CA <u>* State</u>	95501 <u>* Zip Code</u>
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

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

(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).