DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance
Grantee Name: California
Report Name: DETAILED MODEL PLAN (LIHEAP)
Report Period: 10/01/2019 to 09/30/2020
Report Status: Submission Accepted by CO

Report Sections

- 1. Mandatory Grant Application SF-424
- 2. Section 1 Program Components
- 3. Section 2 HEATING ASSISTANCE
- 4. Section 3 COOLING ASSISTANCE
- 5. Section 4 CRISIS ASSISTANCE
- 6. Section 5 WEATHERIZATION ASSISTANCE
- 7. Section 6 Outreach, 2605(b)(3) Assurance 3, 2605(c)(3)(A)
- 8. Section 7 Coordination, 2605(b)(4) Assurance 4
- 9. Section 8 Agency Designation,, 2605(b)(6) Assurance 6
- 10. Section 9 Energy Suppliers,, 2605(b)(7) Assurance 7
- 11. Section 10 Program, Fiscal Monitoring, and Audit, 2605(b)(10) Assurance 10
- 12. Section 11 Timely and Meaningful Public Participation, , 2605(b)(12) Assurance 12, 2605(c)(2)
- 13. Section 12 Fair Hearings, 2605(b)(13) Assurance 13
- 14. Section 13 Reduction of home energy needs, 2605(b)(16) Assurance 16
- 15. Section 14 Leveraging Incentive Program, 2607A
- 16. Section 15 Training
- 17. Section 16 Performance Goals and Measures, 2605(b)
- 18. Section 17 Program Integrity, 2605(b)(10)
- 19. Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters
- 20. Section 19: Certification Regarding Drug-Free Workplace Requirements
- 21. Section 20: Certification Regarding Lobbying
- 22. Assurances
- 23. Plan Attachments

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	TH AND HUMAN S DREN AND FAMIL	August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 09/30/2020						
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY								
		* 1.b. Frequency: Annual			* 1.c. Consolidated Application/Pl an/Funding Request? Explanation:		 * 1.d. Version: Initial Resubmission Revision Update 	
					2. Date Received	1:		State Use Only:
					3. Applicant Ide	entifie	r:	
					4a. Federal Enti	ity Ide	entifier:	5. Date Received By State:
					4b. Federal Awa	ard Id	entifier:	6. State Application Identifier:
7. APPLICAN	T INFO	ORMATION			M			
* a. Legal Na	ne: Sta	te of California						
* b. Employe 71	:/Taxpa	yer Identificat	ion Number (EIN/TIN	N): 68-02834	* c. Organization	nal D	UNS: 929	578268
* d. Address:					10			
* Street 1:			WAY OAKS DR., STE	. 100	Street 2:			
* City:		SACRAMEN	OTV		County:			
* State:		CA			Province:			
* Country:		United States			* Zip / Postal de:	Zip / Postal Co 95833 -		
e. Organizatio		t:			Distant Name			
Department N Department of		unity Services	and Development		Division Name: Energy and Env	vironm	ental Servic	es
f. Name and c	ontact i	nformation of	person to be contacted	d on matters in	volving this applic	cation	1:	
Prefix:	* First Kathy	Name:		Middle Name	Middle Name: * Last Name: Andry			
Suffix:	Title: LIHE	AP Director		Organization N/A	al Affiliation:			
* Telephone Number: 916-576-71 54	Fax Nu 916-2	umber 63-1406		* Email: kathy.andry@	@csd.ca.gov			
* 8a. TYPE O A: State Gover		LICANT:						
b. Addition	al Desci	ription:						
* 9. Name of Federal Agency:								
Catalog of Federal Assistance Nu				og of Federal Don ssistance Number	C EDA LITTE			CFDA Title:
10. CFDA Num	10. CFDA Numbers and Titles 93568				Low-Income Home End		Energy Assistance	
-		of Applicant's last ance to eligit	-	olds to manage	and meet their imn	nediat	e home heat	ing and/or cooling needs.
12. Areas Affected by Funding: State of California								

13. CONGRESSIONAL DISTRICTS OF:							
* a. Applicant 5	b. Program/Project: CA						
Attach an additional list of Program/Project Congressional Districts if needed.							
14. FUNDING PERIOD: 15. ESTIMATED FUNDING:							
a. Start Date: b. End Date: 10/01/2019 09/30/2020	* a. Federal (\$): \$0 \$0						
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER	EXECUTIVE ORDER 12372 PROCESS?						
a. This submission was made available to the State under the Exec	utive Order 12372						
Process for Review on :							
b. Program is subject to E.O. 12372 but has not been selected by S	tate for review.						
c. Program is not covered by E.O. 12372.							
 * 17. Is The Applicant Delinquent On Any Federal Debt? YES NO 							
Explanation:							
omplete and accurate to the best of my knowledge. I also provide the	d in the list of certifications** and (2) that the statements herein are true, c required assurances** and agree to comply with any resulting terms if I acc ments or claims may subject me to criminal, civil, or administrative penalti						
** The list of certifications and assurances, or an internet site where y c instructions.	you may obtain this list, is contained in the announcement or agency specifi						
18a. Typed or Printed Name and Title of Authorized Certifying Office Linne K. Stout	ial 18c. Telephone (area code, number and extension) (916) 576-7119						
	18d. Email Address Linne.stout@csd.ca.gov						
18b. Signature of Authorized Certifying Official 18e. Date Report Submitted (Month, Day, Year) 09/03/2019 09/03/2019							
Attach supporting documents as specified i	n agency instructions.						

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							
Department of Health and Human Services Administration for Children and Families Office of Community Services Washington, DC 20201 August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01							
OMB Approval No. 0970-0075 Expiration Date: 09/30/2020 THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)Use of this model plan is optional. uired in order to receive a Low Income Home Energy Assistance Program (LIHEAP) grant in years i an abbreviated plan. Public reporting burden for this collection of information is estimated to average r reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of i sponsor, and a person is not required to respond to, a collection of information unless it displays a cur	n which the grantee is e 1 hour per response, nformation. An agency	not permitted to file including the time fo y may not conduct or					
Section 1 Program Components							
Program Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C) Dates of Operation 1.1 Check which components you will operate under the LIHEAP program. Dates of Operation (Note: You must provide information for each component designated here as requested elsewhere in this plan.) Dates of Operation							
	Start Date	End Date					
Image: Weaking assistance 10/01/2019 09/30/2							
Cooling assistance	09/30/2020						
Crisis assistance	10/01/2019	09/30/2020					
Weatherization assistance 10/01/2019 09/30/2020							
Provide further explanation for the dates of operation, if necessary							
The 2020 Contract Term runs from 10/01/2019 through 06/30/2021. The intent of the contract term is to ensure continuation of services in the event that federal funds are not released by 10/01/2019. Local Service Providers are expected to expend funds by November 2020.							
Estimated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16							
.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: The total of all percentages nust add up to 100%.							
Heating assistance 20.0							
Cooling assistance	Cooling assistance 6.0						
Crisis assistance							
Weatherization assistance		15.00%					
Carryover to the following federal fiscal year		10.00%					
Administrative and planning costs Services to reduce home energy needs including needs assessment (Assurance 16)		10.00% 5.00%					
Used to develop and implement leveraging activities		0.00%					
OTAL 100.0							

Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C)									
1.3 T	he funds reserve	d for winter crisis a	ssistance t	hat have not been expe	ended by March 15 w	ill be reprog	grammed to	:	
>	Heating assi			Cooling assistance					
>	Weatherizat	tion assistance		Other (specify:) CS	D provides crisis assi	stance throug	ghout the pro	ogram y	year.
1.4 D mn b	Categorical Eligibility, 2605(b)(2)(A) - Assurance 2, 2605(c)(1)(A), 2605(b)(8A) - Assurance 8 1.4 Do you consider households categorically eligible if one household member receives one of the following categories of benefits in the left colu mn below? O Yes O No								
If you	ı answered "Yes	" to question 1.4, y	ou must co	mplete the table below	and answer question	is 1.5 and 1.	6.	<u>.</u>	
				Heating	Cooling		Crisis	_	Weatherization
TANF	7			O Yes O No	O Yes O No	C Yes			Yes ONo
SSI				O Yes O No	O Yes O No	O Yes			Yes ONo
SNAP	•			O Yes O No	O _{Yes} O _{No}	C Yes			Yes O _{No}
Mean	s-tested Veterans I	Programs		O Yes O No	O Yes O No	C Yes	C No	0	Yes ONo
		Program	Name	Heating	Cooling		Crisis		Weatherization
Other	(Specify) 1			O Yes O No	O Yes ON	• O	Yes 🖸 No		O Yes O No
1.5 D	o vou automatica	ally enroll househol	ds without	a direct annual applic	ation? O Yes 💽 No)			
1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households? O Yes No If you answered "Yes" to question 1.7a, you must provide a response to questions 1.7b, 1.7c, and 1.7d. 1.7b Amount of Nominal Assistance: \$0.00 1.7c Frequency of Assistance Once Per Year Once every five years									
1.7d]	How do you conf	ïrm that the housel	old receiv	ing a nominal payment	t has an energy cost o	or need?			
Deter	mination of Elig	ibility - Countable	Income						
1.8. I	n determining a	household's income	eligibility	for LIHEAP, do you u	se gross income or n	et income ?			
<	Gross Income							_	
Net Income									
1.9. S	l elect all the appl	icable forms of cou	ntable inco	ome used to determine	a household's income	e eligibility f	for LIHEAP	,	
~	Wages								
~	Self - Employm	ent Income							
	Contract Incom	ie							
	Payments from	mortgage or Sales	Contracts						

>	Unemployment insurance
×	Strike Pay
>	Social Security Administration (SSA) benefits
	Including MediCare deduc Image: Second s
>	Supplemental Security Income (SSI)
>	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
	Income from employment through Workforce Investment Act (WIA)
	Income from work study programs
>	Alimony
>	Child support
>	Interest, dividends, or royalties
>	Commissions
	Legal settlements
>	Insurance payments made directly to the insured
	Insurance payments made specifically for the repayment of a bill, debt, or estimate
~	Veterans Administration (VA) benefits
	Earned income of a child under the age of 18

Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.						
Income tax refunds						
Stipends from senior companion programs, such as VISTA						
Funds received by household for the care of a foster child						
Ameri-Corp Program payments for living allowances, earnings, and in-kind aid						
Reimbursements (for mileage, gas, lodging, meals, etc.)						
Other						
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.						

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY									
Section 2 - Heating Assistance									
Eligibility, 2605(1	b)(2) - Assurance 2								
U I ,	income eligibility threshold used for the	heating co	omponent:						
Add	Household size		Eligibility Guideline	Eligibility Threshold					
1	All Household Sizes		State Median Income	60.00%					
2.2 Do you have a EATING ASSITA	additional eligibility requirements for H ANCE?	C Yes	© No						
2.3 Check the ap	propriate boxes below and describe the p	olicies for	each.						
Do you require a	n Assets test ?	C Yes	💽 No						
Do you have addi	itional/differing eligibility policies for:								
Renters?		C Yes	💽 No						
Renters Liv	ving in subsidized housing ?	O Yes O No							
Renters wit	th utilities included in the rent ?	C Yes	• No						
Do you give prior	rity in eligibility to:								
Elderly?		• Yes	ONo						
Disabled?			ONo						
Young chile	dren?	💽 Yes	O No						
Households	s with high energy burdens ?	• Yes C No							
Other?		O Yes O No							
Explanations of policies for each "yes" checked above: Based on an assessment of each client, Local Service Providers assign points and priority may be given to households with life-threatening emergencies.									
	f Benefits 2605(b)(5) - Assurance 5, 2605(avulnerable papulations e.g. benefit amounts	early application periods etc.					
2.4 Describe how you prioritize the provision of heating assistance tovulnerable populations, e.g., benefit amounts, early application periods, etc. Based on an assessment of each client, Local Service Providers assign points and priority may be given to households with life-threatening emergencies.									
2.5 Check the variables you use to determine your benefit levels. (Check all that apply):									
Income									
Family (household) size									
✓ Home energy cost or need:									
Fuel type									
	nate/region								
🗾 Indiv	Individual bill								

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES

Dwelling type

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

OMB Clearance No.: 0970-0075

Expiration Date: 09/30/2020

Energy burden (% of income	Energy burden (% of income spent on home energy)								
Energy need									
Other - Describe:	Vother - Describe:								
CSD conducts an "Individual Utility Company Rate Survey" each year. In the survey, utility companies report their residential rates, by c ounty, for gas and electricity. CSD uses this information to establish average utility costs for each county. These costs are factored into the heati ng and cooling benefit formula to determine LIHEAP benefit levels.									
Benefit Levels, 2605(b)(5) - Assurance 5, 2	Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)								
2.6 Describe estimated benefit levels for F	¥ 2020:								
Minimum Benefit	\$152	Maximum Benefit	\$1,000						
2.7 Do you provide in-kind (e.g., blankets,	space heaters) and/or other for	rms of benefits? O Yes O No							
If yes, 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.									

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY								
Section 3 - Cooling Assistance								
Eligibility, 2605	5(c)(1)(A), 2605 (b)(2) - Assurance 2							
3.1 Designate T	he income eligibility threshold used for the	e Cooling	component:					
Add	Household size		Eligibility Guideline	Eligibility Threshold				
1	All Household Sizes		State Median Income	60.00%				
3.2 Do you have OOLING ASSI	e additional eligibility requirements for C TANCE?	C Yes	© No					
3.3 Check the a	ppropriate boxes below and describe the p	olicies for	each.					
Do you require	an Assets test ?	C Yes	• No					
Do you have ad	ditional/differing eligibility policies for:							
Renters?		C Yes	⊙ No					
Renters L	iving in subsidized housing ?	O Yes O No						
Renters w	vith utilities included in the rent ?	C Yes 💿 No						
Do vou give prie	ority in eligibility to:							
Elderly?		• Yes	O No					
Disabled?	2	• Yes						
Young ch		• Yes ONo						
	ds with high energy burdens ?	© Yes ONO						
	us with ligh chergy buruchs.							
Other?		U Yes	€ No					
Explanations of	f policies for each "yes" checked above:							
3.4 Describe ho	w you prioritize the provision of cooling as	ssistance to	ovulnerable populations,e.g., benefit amoun	ts, early application periods, etc.				
Based on an assessment of each client, Local Service Providers assign points and priority may be given to households with life-threatening emergencies.								
Determination of	of Benefits 2605(b)(5) - Assurance 5, 2605((c)(1)(B)						
3.5 Check the v	ariables you use to determine your benefit	levels. (C	heck all that apply):					
Income								
Family (ho	ousehold) size							
Image: Paining (nousehold) size Image: Paining (nousehold) size Image: Paining (nousehold) size Image: Paining (nousehold) size								
	el type							
	mate/region							
Ind	lividual bill							
Dwelling type								

Energy burden (% of income spent on home energy)								
Energy need								
Other - Describe:								
CSD conducts an "Individual Utility Company Rate Survey" each year. In the survey, utility companies report their residential rates, by c ounty, for gas and electricity. CSD uses this information to establish average utility costs for each county. These costs are factored into the heati ng and cooling benefit formula to determine LIHEAP benefit levels.								
Benefit Levels, 2605(b)(5) - Assurance 5, 26	Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)							
3.6 Describe estimated benefit levels for FY	2020:							
Minimum Benefit	Minimum Benefit \$152 Maximum Benefit \$1,000							
3.7 Do you provide in-kind (e.g., fans, air co	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.								
· ·	If yes, 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.							

7

	HEALTH AND HUMAN SERVER CHILDREN AND FAMILIES	August 1987, revis	August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 09/30/2020				
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY							
	Section 4: (CRISIS ASSISTANCE					
Eligibility - 2604(c), 2605(c)(1)(A)						
4.1 Designate the income elig	gibility threshold used for the crisis	component					
Add	Household size	Eligibility Guideline	Eligibility Threshold				
1 All Househ	old Sizes	State Median Income	60.00%				
4.2 Provide your LIHEAP p	rogram's definition for determining	a crisis.					
 6 Enrollment in public benefit programs, or 7 Unemployment and layoffs, or 8. An official emergency declaration by the Secretary of Health and Human Services, In those situations where there is not an official federal, state, or local declaration of emergency, an emergency may be deemed to exist by CSD where there is imminent danger, requiring immediate action to prevent or mitigate the loss or impairment of life, health, property, or essentia l public services. 4.3 What constitutes a life-threatening crisis? Life-Threatening: Applicant is without heating, cooling or utility service during extreme weather conditions, as determined by the local ad ministrative agency. This may include energy-related situations that pose a threat to the heath and safety of one or more members of the househol d. 							
Crisis Requirement, 2604(c)							
	• •	t will resolve the energy crisis for eligible h					
4.5 Within how many hours? 18Hours	uo you provide an intervention that	t will resolve the energy crisis for eligible h	ousenoius in me-inreatening situations				
Crisis Eligibility, 2605(c)(1)(A)	iii					
4.6 Do you have additional eligibility requirements for CRISIS ASSIST O Yes O No ANCE?							
4.7 Check the appropriate boxes below and describe the policies for each							
Do you require an Assets tes	t ?	O Yes O No					
Do you give priority in eligib	bility to :						
Elderly?		⊙ Yes O No					
Disabled?		• Yes O No					
Young Children?		• Yes O No					
Households with high	energy burdens?	• Yes O No					
Other? See explanation	n below	• Yes O No					
*							

In Order to receive crisis assistance:						
Must the household have received a shut-off notice or have a near empty tank?	⊙ _{Yes} O _{No}					
Must the household have been shut off or have an empty tank?	C Yes O No					
Must the household have exhausted their regular heating benefit?	C Yes O No					
Must renters with heating costs included in their rent have receiv ed an eviction notice ?	CYes ⊙No					
Must heating/cooling be medically necessary?	C Yes 💿 No					
Must the household have non-working heating or cooling equipm ent?	C Yes ⊙ No					
Other? Proof of utility shutoff notice, Proof of energy termination, I nsufficient funds to establish a new energy account, Insufficient funds to pay a delinquent utility bill, Insufficient funds to pay for essential firewood, oi l or propane, Insufficient funds to pay the cost of repairing or replacing an e ligible heating or cooling appliance or for a new heating or cooling appliance e, and/or Applicant has a medical condition that requires temperature or cli mate control and the heating/cooling appliance is considered hazardous, no nexistent, or inoperable	[™] Yes [™] No					
Do you have additional / differing eligibility policies for:	" Do you have additional / differing eligibility policies for:					
Renters?	C Yes ^O No					
Renters living in subsidized housing?	C Yes O No					
Renters with utilities included in the rent?	C Yes O No					
Explanations of policies for each "yes" checked above:						

Each Local Service Provider is required to submit a priority plan as an attachment to their contract. The priority plans are in narrative form at and identify multiple categories used to prioritize services, such as: Poverty Level, Energy Burden, Vulnerable Population. Based on an assessm ent of each applicant, Local Service Providers prioritize by assigning points for each of these categories though priority may be given to househol ds with life-threatening emergencies.

Determination of B	enefits
4.8 How do you har	ndle crisis situations?
	Separate component
 Image: A set of the set of the	Fast Track
 Image: A start of the start of	Other - Describe:
	The Crisis Program is limited to four activities:
	 Fast Track (electric and gas) utility payments Energy Crisis Intervention Program Wood, propane and oil (ECIP WPO) payments Heating and cooling services (HCS) Severe Weather Energy Assistance and Transportation Services (SWEATS)
	<i>Fast Track</i> benefits are determined by the Local Service Providers, but payments to the utility companies are proce ssed, centrally, by CSD, where ECIP WPO assistance, HCS and SWEATS benefits are provided locally. Local Service Pr oviders have the ability to increase the Fast Track base amount by adding a supplemental benefit. The total benefit amount t cannot exceed the total amount of the entire utility bills (to include energy charges, reconnection fees, and other assessed utility fees/surcharges to alleviate the crisis situation) or \$1,000, whichever is less.
	<i>ECIP WPO</i> benefits are determined at the local level based on clients inability to pay for essential firewood, oil or propane. The amount of the benefit is based on the cost to resolve the crisis.
	<i>HCS</i> services provide payment for energy-related repairs or replacement of non-functioning heating, cooling appli ances and water-heating appliances. The benefit amount is based on the cost of the repair or replacement, up to the maxi mum amount as determined annually.
	SWEATS services provide payment to address energy-related emergency needs of low-income households affected by a natural disaster. Typical services include additional utility assistance, temporary housing services, transportation ser vices and temporary heating/cooling devices. The amount of the benefit may vary depending on the benefit offered.
4.9 If you have a se	parate component, how do you determine crisis assistance benefits?
	Amount to resolve the crisis.
	Other - Describe: Fast Track benefits are determined by the Local Service Providers, but payments to the utility companies are proce

oviders have the abili t cannot exceed the to	ssed, centrally, by CSD, where ECIP WPO assistance, HCS and SWEATS benefits are provided locally. Local Service Pr oviders have the ability to increase the Fast Track base amount by adding a supplemental benefit. The total benefit amoun t cannot exceed the total amount of the entire utility bills (to include energy charges, reconnection fees, and other assessed utility fees/surcharges to alleviate the crisis situation) or \$1,000, whichever is less.			
Crisis Requirements, 2604(c)				
4.10 Do you accept applications for energy crisis a	ssistance at s	sites that are	e geographically accessible to all households in the area to be served?	
🖸 Yes 🗘 No Explain.				
Large service territories typically have	e satellite offi	ces or other	non-profit agencies which accept applications.	
4.11 Do you provide individuals who are physical	-			
Submit applications for crisis benefits without le • Yes O No If No, explain.	eaving their	homes?		
Travel to the sites at which applications for cris	ia aggistanga	ana acconto		
• Yes O No If No, explain.	is assistance	are accepted	u: 	
	4.11		native means of intake to those who are homebound or physically disa	
bled?	4.11, piease (explain alter	nauve means of intake to those who are nomedound or physically disa	
Benefit Levels, 2605(c)(1)(B)				
4.12 Indicate the maximum benefit for each type of	of crisis assis	tance offere	d.	
Winter Crisis \$0.00 maximum benefit				
Summer Crisis \$0.00 maximum benefit				
Year-round Crisis \$1,000.00 maximum ben	nefit			
4.13 Do you provide in-kind (e.g. blankets, space h	eaters, fans)	and/or othe	er forms of benefits?	
• Yes O No If yes, Describe				
Space heaters are allowable under the ransportation Program (SWEATS).	Emergency H	Heating and C	Cooling Program (EHCS) and the Severe Weather Energy Assistance and T	
4.14 Do you provide for equipment repair or repla	acement usin	g crisis fund	ls?	
• Yes C No				
If you answered "Yes" to question 4.14, you must	complete qu	estion 4.15.		
4.15 Check appropriate boxes below to indicate ty	pe(s) of assis	tance provi	ded.	
	Winter C	Summer	Year-round Crisis	
Heating system repair	risis	Crisis		
Treating 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): Water Heater				

4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?

O Yes O No

If you responded "Yes" to question 4.16, you must respond to question 4.17.

4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES			S OMB	/92,02/95,03/96,12/98,11/01 Clearance No.: 0970-0075 xpiration Date: 09/30/2020	
	LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN				
		SF - 424	- MANDATORY		
	Sectio	on 5: WEATHE	RIZATION ASSISTANCE		
Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assu	rance 2			
5.1 Designate the	e income eligibility thresho	ld used for the Weatheri	zation component		
Add	Househ	old Size	Eligibility Guideline	Eligibility Threshold	
1	All Household Sizes		State Median Income	60.00%	
5.2 Do you enter No	into an interagency agree	ment to have another gov	vernment agency administer a WEATHERIZ	ATION component? O Yes 💿	
5.3 If yes, name	the agency.				
5.4 Is there a sep	arate monitoring protocol	for weatherization? 💽	Yes O _{No}		
WEATHERIZA	TION - Types of Rules				
5.5 Under what i	rules do you administer LI	HEAP weatherization? (Check only one.)		
Entirely under LIHEAP (not DOE) rules					
	nder DOE WAP (not LIHI				
· ·		,	ıle(s) where LIHEAP and WAP rules differ (0	Check all that apply):	
		e tonowing DOE WAT IT	me(s) where Efficial and war fues unter (Jucck an that appry).	
	me Threshold				
	therization of entire multi- ecome eligible within 180 d		e is permitted if at least 66% of units (50% in	2- & 4-unit buildings) are eligib	
Wea Wea are facilities).	therize shelters temporaril	y housing primarily low	income persons (excluding nursing homes, pr	isons, and similar institutional c	
Othe	er - Describe:				
Mostly und	der DOE WAP rules, with	the following LIHEAP r	ule(s) where LIHEAP and WAP rules differ (Check all that apply.)	
Inco	me Threshold				
Wea	therization not subject to I	DOE WAP maximum sta	tewide average cost per dwelling unit.		
Wea	therization measures are n	ot subject to DOE Savin	gs to Investment Ration (SIR) standards.		
Othe	Weatherization measures are not subject to DOE Savings to Investment Ration (SIR) standards. Other - Describe:				
Eligibility, 2605(b)(5) - Assurance 5				
а с ,	re an assets test?	O Yes O No			
5.7 Do vou have	additional/differing eligibi				
Renters		O Yes • No			
Renters liv ?	ing in subsidized housing	O Yes O No			
5.8 Do you give j	priority in eligibility to:	J <u>H</u>			
Elderly?		• Yes O No			
Disabled?		• Yes O No			

Young Children?	• Yes O No				
House holds with high energy burde ns?	• Yes O No				
Other? See explanation below	• Yes O No				
If you selected "Yes" for any of the options ow.	If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you must provide further explanation of these policies in the text field bel ow.				
CSD will implement the new F (elderly, disabled, and families with ye		tizes applicants based on income, energy burden, and vulnerable population			
Benefit Levels					
5.9 Do you have a maximum LIHEAP weat	herization benefit/expenditur	e per household? S Yes O No			
5.10 If yes, what is the maximum? \$7,212					
Types of Assistance, 2605(c)(1), (B) & (D)					
5.11 What LIHEAP weatherization measur	5.11 What LIHEAP weatherization measures do you provide ? (Check all categories that apply.)				
Weatherization needs assessments/audits Energy related roof repair					
Caulking and insulation		Major appliance Repairs			
Storm windows		Major appliance replacement			
Furnace/heating system modificatio	ns/ repairs	Windows/sliding glass doors			
Furnace replacement		Doors			
Cooling system modifications/ repai	rs	Water Heater			
Water conservation measures		Cooling system replacement			
Compact florescent light bulbs		Other - Describe: Please see attachment			
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	August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 09/30/2020
LOW INCOME HOME ENERGY ASSIS	STANCE PROGRAM(LIHEAP)
MODEL PL	
SF - 424 - MAN	
51 - 424 - MANL	DATORT
Section 6: Outreach, 2605(b)(3) - A	Assurance 3, 2605(c)(3)(A)
6.1 Select all outreach activities that you conduct that are designed to assure th vailable:	hat eligible households are made aware of all LIHEAP assistance a
Place posters/flyers in local and county social service offices, offices of ag	ing, 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 available	ilability 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 a e programs.	assistance at application intake for other low-incom
Execute interagency agreements with other low-income program offices	to perform outreach to target groups.
Other (specify):	
 Partnerships with utility companies Outreach to: legislative offices, community organizations, and attendance Referrals to CSD's programs from child care centers 	at community events
PamphletsToll-free phone lineCSD's website	
Contractors' websitesSpecial events	
Canvass neighborhoods and go door to door	
Distributes flyers at schools	
If any of the above questions require further some	ion on elevification that could not be made in
If any of the above questions require further explanat	ion of clarification that could not be made m

Page 18 of 54

the fields provided, attach 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: 09/30/2020

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

Section 7: Coordination, 2605(b)(4) - Assurance 4

	7.1 Describe how you will ensure that the LIHEAP program is coordinated with other programs available to low-income households (TANF, SSI WAP, etc.).		
	Joint application for multiple programs		
N	Intake referrals to/from other programs		
N	One - stop intake centers		
V	Other - Describe:		

CSD and Local Service Providers coordinate activities with similar and related programs administered by the federal, state, and the public and private sector, particularly low-income, energy conservation programs. CSD is working with the California Public Utilities Commission (CP UC) and the state's investor owned utility companies to develop strategies to better leverage and coordinate our mutual resources to benefit low-in come households in the state.

Local Service Providers refer potentially eligible applicants, including heating and cooling, and crisis applicants, to the weatherization pro gram, California Alternate Rate for Energy (CARE), Reduced Rate Programs (RRP), and/or to other energy or conservation programs. This referr al is accomplished through interagency agreements, communications with pertinent agencies, one-stop centers, utility companies, and public/priva te partnerships. Local Service Providers provide assistance in coordinating the payment of client's energy/utility bill with the appropriate energy vendor or utility company.

CSD administers a state funded Low-Income Weatherization (LIWP) program that offers weatherization and renewable energy services to low-income households that resides in disadvantage communities as defined in CalEnviroScreen 3.0. CSD is working on policies to prevent duplic ation.

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, he (surance 6 (Req a of Puerto Ricc		grantees and t	
8.1 How would you categorize the primary respons	ibility of your State age	ncy?			
Administration Agency					
Commerce Agency					
Community Services Agency					
Energy / Environment Agency					
Housing Agency					
Welfare Agency					
Other - Describe:					
Alternate Outreach and Intake, 2605(b)(15) - Assurance 15					
If you selected "Welfare Agency" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable.					
8.2 How do you provide alternate outreach and intake for HEATING ASSISTANCE?					
N/A	N/A				
8.3 How do you provide alternate outreach and intake for COOLING ASSISTANCE?					
N/A					
8.4 How do you provide alternate outreach and int	8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?				
N/A					
8.5 LIHEAP Component Administration.	Heating	Cooling	Crisis	Weatherization	
8.5a Who determines client eligibility?	Community Action Ag encies	Community Action Ag encies	Community Action Ag encies	Community Action Ag encies	
8.5b Who processes benefit payments to gas and e lectric vendors?	State Administration A gency	State Administration A gency	State Administration A gency		

Page 20 of 54

8.5c wl vendor	o processes benefit payments to bulk fuel s?	Community Action Ag encies	Community Action Ag encies	Community Action Ag encies			
8.5d Who performs installation of weatherization measures?					Community Action Ag encies		
	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 Wh	at is your process for selecting local adminis	stering agencies?					
	LIHEAP Local Service Providers were d of 41 Local Service Providers (LSPs), which their local communities and have many years of service territory.	include private, non-pro	fit and local government s	service providers. These	LSPs have strong ties to		
8.7 Ho	w many local administering agencies do you	use? 41					
8.8 Ha O Yes O No		ncies in the last year?					
8.9 If s	8.9 If so, why?						
	Agency was in noncompliance with grantee	requirements for LIHF	EAP -				
	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.						

	EPARTMENT OF HEALTH AND HUMAN SERVICES August 1987, revised 05/92,02/95,03/96,12/98,11/01 IISTRATION FOR CHILDREN AND FAMILIES OMB Clearance No.: 0970-0075 Expiration Date: 09/30/2020 Expiration Date: 09/30/2020
	LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY
	Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7
9.1 Do yo	ou make payments directly to home energy suppliers?
Heatin	g O Yes O No
Cooling	
Crisis	• Yes O No
Are the	ere exceptions? • Yes O No
If yes, l	Describe.
nt	In most cases, direct payments are issued to energy vendors. Occasionally, dual party warrants are issued and are made payable to the clie and the energy vendor. On those few occasions when utilities are included in the rent or sub-metered, warrants are issued directly to the client.
no	For those heating and cooling and crisis clients whose energy source is WPO, Local Service Providers make payment directly to energy ve lors.
9.2 How	do you notify the client of the amount of assistance paid?
pa	1. When a payment is made directly to an energy vendor, the Local Service Provider sends the client a letter, advising them of the LIHEAP symmetra amount and approximate date the benefit will be credited to the account.
	2. When a crisis, and/or heating and cooling payment is made to an applicant with utilities included in rent, submetered utilities or with no participating utility companies, the Local Service Provider provides the client letter indicating the amount of the benfit and the utility company t be paid, if applicable.
	3. When a crisis, and/or heating and cooling payment is made directly to an energy vendor, the vendor shows the amount of credit on the c tomer's bill, indicating that the payment was made by LIHEAP. The Local Service Provider provides the client with a letter indicating the amou of the benefit and the utility company to be paid.
	do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the st of the home energy and the amount of the payment?
	When a crisis, and or heating and cooling payment is made directly to an energy vendor, the vendor shows the amount of the credit on the stomer's bill, indicating that the payment was made by LIHEAP. The Local Service Provider provides the client with a letter indicating the amo at of the benefit and the utility comapny to be paid.
	CSD evaluates the notification process of LIHEAP payments during program evaluation.
ne	A different process is in place for Crisis payments, depending on whether the home energy supplier is a regulated utility or non-regulated o
	Regulated Utilities are audited by the California Public Utilites Comission (CPUC) to ensure that proper billing procedures are in place an the amount of the payments or credits are accurate. No modification of energy rates can occur without a public regulatory process, which is adm istered by the CPUC.
	For Non-Regulated energy vendors:
сі	1. Local Service Providers use a "Confirmation of Payment" form whereby the non-regulated energy vendors records the date and amount edited for each account.
	2. Local Service Providers are required to have each home energy supplier sign an assurance agreeing to the requirements of this section. L cal Service Providers keep this information on file and clients are advised of their right to fair and equal treatment at the time of service. CSD sta ensures compliance with this provision during program evaluation.
re	3. Local Service Providers verify, before suppliers for all types of delivered fuels, that the charges for the services and goods provided are asonable and within fair-market value. The amount of these charges are reviewed during program evaluation.

9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assista nce?

Local Service Providers require each home energy supplier to sign an agreement to adhere to the requirements of this assurance. Local Service Providers keep this information on file and clients are advised of their right to fair and equal treatment at the time of service. CSD staff ensure es compliance with this provision during program evaluation.

9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible household s?

O Yes 💿 No

If so, describe the measures unregulated vendors may take.

		TH AND HUMAN SERVICES DREN AND FAMILIES	_	05/92,02/95,03/96,12/98,11/01 MB Clearance No.: 0970-0075 Expiration Date: 09/30/2020		
		ME HOME ENERGY AS MODEL SF - 424 - M/	PLAN	ſ(LIHEAP)		
	Section 10: Program, Fiscal Monitoring, and Audit, 2605(b)(10)					
agemen	CSD maintains fiscal co t system maintains finar	accounting and tracking of LIHEAP ontrols and accounting practices in acco- ncial data and accounting records suppor to state and federal procedures. See be	rdance with the California Uniform Adorted by source documentation for all f			
Audit Process						
10.2. Is your L • Yes ON		ted annually under the Single Audit .	Act and OMB Circular A - 133?			
	•	ng to the level of material weakness (, or other government agency review	-			
No Findings 🚺						
Finding	Туре	Brief Summary	Resolved?	Action Taken		
Finding 1		Brief Summary	Resolved?	Action Taken		
1			Resolved?	Action Taken		
1 10.4. Audits of	Type ? Local Administering . annual audit requiren					
1 10.4. Audits of What types of Select all that	Type f Local Administering . annual audit requiren apply.	Agencies	dministering agencies/district offices	?		
1 10.4. Audits of What types of Select all that	Type f Local Administering annual audit requiren apply. l agencies/district offic	Agencies nents do you have in place for local a	dministering agencies/district offices Idit in compliance with Single Audit	?		
1 10.4. Audits of What types of Select all that Loca	Type f Local Administering annual audit requiren apply. l agencies/district offic	Agencies nents do you have in place for local ac ces are required to have an annual au	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133)	? Act and OMB Circular A-133		
1 10.4. Audits of What types of Select all that Loca Loca Loca Loca	Type f Local Administering / annual audit requiren apply. ll agencies/district offic ll agencies/district offic	Agencies nents do you have in place for local ac res are required to have an annual au res are required to have an annual au	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o	? Act and OMB Circular A-133		
1 10.4. Audits of What types of Select all that Loca Loca Loca Loca	Type f Local Administering . annual audit requiren apply. ll agencies/district offic ll agencies/district offic ntee conducts fiscal and	Agencies nents do you have in place for local ac ces are required to have an annual au ces are required to have an annual au ces' A-133 or other independent audi	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o	? Act and OMB Circular A-133		
1 10.4. Audits of What types of Select all that Loca Loca Compliance M	Type ⁷ Local Administering <i>J</i> annual audit requiren apply. agencies/district offic agencies/district offic agencies/district offic ntee conducts fiscal and Ionitoring	Agencies nents do you have in place for local ac ces are required to have an annual au ces are required to have an annual au ces' A-133 or other independent audi	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance process.		
1 10.4. Audits of What types of Select all that Loca Loca Compliance M 10.5. Describe	Type ¹ Local Administering <i>A</i> annual audit requiren apply. al agencies/district offic agencies/district offic agencies/district offic agencies/district offic agencies/district offic the Grantee's strategic	Agencies nents do you have in place for local ac ces are required to have an annual au ces are required to have an annual au ces' A-133 or other independent audi d program monitoring of local agenci	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance process.		
1 10.4. Audits of What types of Select all that Loca Loca Compliance M 10.5. Describe at apply Grantee emplo	Type ¹ Local Administering <i>A</i> annual audit requiren apply. al agencies/district offic agencies/district offic agencies/district offic agencies/district offic agencies/district offic the Grantee's strategic	Agencies nents do you have in place for local ac ces are required to have an annual au ces are required to have an annual au ces' A-133 or other independent audi d program monitoring of local agenci	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance process.		
1 10.4. Audits of What types of Select all that Loca Loca Compliance M 10.5. Describe at apply Grantee emplo	Type Type Local Administering , annual audit requiren apply. agencies/district offic agencies/district offic agencies/district offic agencies/district offic agencies/district offic the Grantee's strategic byees:	Agencies nents do you have in place for local ac ces are required to have an annual au ces are required to have an annual au ces' A-133 or other independent audi d program monitoring of local agenci	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance process.		
1 10.4. Audits of Select all that Vhat types of Select all that Loca Loca Compliance M 10.5. Describe at apply Grantee emple Inter Depa	Type Type Local Administering , annual audit requiren apply. agencies/district offic agencies/district offic agencies/district offic agencies/district offic the conducts fiscal and fonitoring the Grantee's strategic oyees: mal program review	Agencies nents do you have in place for local ac res are required to have an annual au res are required to have an annual au res' A-133 or other independent audit d program monitoring of local agenci es for monitoring compliance with th	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance process.		
1 10.4. Audits of What types of Select all that ✓ Loca ✓ Grant Grantee emplo Inter ✓ Depa ✓ Seco	Type Type Local Administering , annual audit requiren apply. agencies/district offic agencies/district offic agenc	Agencies nents do you have in place for local ac res are required to have an annual au res are required to have an annual au res' A-133 or other independent audit d program monitoring of local agenci es for monitoring compliance with th	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance process.		
1 10.4. Audits of What types of Select all that ✓ Loca ✓ Grant Grantee emplo Inter ✓ Depa ✓ Seco	Type Type Local Administering , annual audit requiren apply. agencies/district offic agencies/district offic agenc	Agencies nents do you have in place for local ac res are required to have an annual au res are required to have an annual au res' A-133 or other independent audit d program monitoring of local agenci es for monitoring compliance with th es and payments	dministering agencies/district offices Idit in compliance with Single Audit Idit (other than A-133) Its are reviewed by Grantee as part o ies/district offices	? Act and OMB Circular A-133 f compliance 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.

CSD Field Operations Unit will conduct a combination of in-house and on-site compliance monitoring. In general, CSD's monitoring sche dule runs from March 1 - October 31.

Please refer to the CSD's Monitoring Scope for details on the monitoring protocols that will be implemented in the Federal Fiscal Year 202

10.7. Describe how you select local agencies for monitoring reviews.

Site Visits:

0.

All LIHEAP agencies have on-site monitoring reviews at least every three years. After conducting an annual risk assessment, the agencies are selected for onsite visits based on the areas of concern identified during the annual risk review, or through whistle blower complaints. Agencie s are monitored first with a subsequent follow up monitoring focusing on the issues identified to ensure full resolution.

Desk Reviews:

CSD will conduct an in-house compliance monitoring of all agencies that do not receive an on-site monitoring visit.

10.8. How often is each local agency monitored ?

At least every 3 years.

10.9. What is the combined error rate for eligibility determinations? OPTIONAL

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

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

10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 6

J.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 Meaningful Publi	c Participation, 2	2605(b)(12), 2605(C)(2)		
11.1 How did you obtain input from the public in the development of your Select all that apply.	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 comment				
Comments from applicants are recorded				
Request for comments on draft Plan is advertised				
Stakeholder consultation meeting(s)				
Comments are solicited during outreach activities				
Other - Describe:				
11.2 What changes did you make to your LIHEAP plan as a result of this participation?				
Please see the attached Comment Matrix.				
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 pro-	oposed use and distribution	of your LIHEAP funds?		
	Date	Event Description		
1 07/30/2019		Public Hearing at Secretary of State Office Building 1500 11th St., Sacramento, CA 958 14		
11.4. How many parties commented on your plan at the hearing(s)? 2				
11.5 Summarize the comments you received at the hearing(s).				
Please see the attached Comment Matrix.				
11.6 What changes did you make to your LIHEAP plan as a result of the c	omments received at the pu	ublic hearing(s)?		
Please see the attached Comment Matrix.				
If any of the above questions require further expla the fields provided, attach a document with said ex		tion that could not be made in		

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: 09/30/2020

LOW INCOME HOME ENERGY ASSISTANCE 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? 0

12.2 How many of those fair hearings resulted in the initial decision being reversed? 0

12.3 Describe any policy and/or procedural changes made in the last Federal fiscal year as a result of fair hearings?

There were no changes

12.4 Describe your fair hearing procedures for households whose applications are denied.

Pursuant to Title 22 of the California Code of Regulations, Section 100805, Local Service Providers are required to establish a written app eals process to enable applicants who are denied benefits or services, or who receive untimely response or unsatisfactory performance, the right to appeal the decision or performance to the Contractor. The process must include, at a minimum, all of the requirements of Section 100805 subdivi sion (b), plus:

- 1. Provisions that ensure that each applicant is notified in writing of the right to appeal a denial of or untimely response to an application, or to app eal unsatisfactory performance, and the process to request such an appeal, at the time that each applicant submits an application. Such notificati on shall include information about the right to appeal to both the Contractor and to CSD.
- 2. Provisions that ensure that Local Service Providers will make a good faith effort to resolve each appeal.
- 3. Provisions that ensure that Local Service Providers notify the applicant in writing of the Local Service Provider's final decision within 15 worki ng days after the appeal is requested. If the appeal is denied, the written notification must include instructions on how to appeal the decision to CSD. Whenever Local Service Providers notify an applicant of a denial of an appeal, Local Service Providers simultaneously provide a copy of the final decision CSD.
- 4. Provisions to enable Local Service Providers to collect information on denials and appeals in its regular program reporting.

12.5 When and how are applicants informed of these rights?

Applicants are informed, in writing, regarding the appeal process which is located on the CSD43 Energy Intake Form. Applicants sign and date acknowledgement that they have read and understand their rights to appeal. Additionally, applicants will be able to view their rights to appeal on CSD's public website.

12.6 Describe your fair hearing procedures for households whose applications are not acted on in a timely manner.

During intake, Local Service Providers inform applicants of their right to appeal all claims for assistance that are denied or are no t acted upon with reasonable promptness.

- 1. Local Service Providers review all claims from applicants who are determined ineligible for benefits or who have submitted written not ice that there has been an unreasonable delay in processing their application or receiving their benefits.
- 2. Local Service Providers conduct a fair, and impartial appeals and are required to make a good faith effort to resolve the applicant's co mplaint(s) at the local level. The Local Service Provider, as a contractor, makes a written finding which sets forth the case of both parti es and the decision of the Local Service Provider.
- 3. If the appeal is not resolved at the local level, Local Service Provider informs the applicant that an appeal to the State agency (CSD) may be requested as part of the Fair Hearing process and shall provide the applicant with the appropriate form.
- 4. If the applicant decides to appeal to CSD, the applicant submits a written appeal request to be received by CSD within 10 days from the date of the contracted Local Service Provider's final decision. Upon request from CSD, Local Service Providers provide all supportive documentation to be received by the State via email or postmarked within 5 working days.
- 5. Within 10 working days of receipt of the requested documentation from the contracted Local Service Provider, the CSD Fair Hearing Officer reviews the appeal and supportive documentation, confers with the appellant and the contracted Local Service Provider if neces sary, and notifies parties of the hearing. Within 30 days from the date of the hearing, the parties are notified of the Fair Hearing Office

12.7 When and how are applicants informed of these rights?

Applicants are informed, in writing, regarding the appeals process which is located on the CSD43 Energy Intake Form. Applicants sign an d date acknowledgement that they've read and understand their rights to appeal. Additionally, applicants will be able to view their rights to appeal on CSD's public website. The "Filing Appeal" button can be found by clicking on the "Services" tab, then "Help paying your bills".

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES ADMINISTRATION FOR CHILDREN OF AND FAMILIES ADMINISTRATION FOR CHILDREN OF AND FAMILIES
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY
Section 13: Reduction of home energy needs, 2605(b)(16) - Assurance 16
13.1 Describe how you use LIHEAP funds to provide services that encourage and enable households to reduce their home energy needs and ther eby the need for energy assistance?
Local Service Providers address the energy needs of low-income households by conducting a thorough energy needs assessment of each cl ient, providing budget counseling, energy conservation education, and coordination with utility companies. Whenever possible, weatherization se rvices are also provided to offer a preventive, holistic and long-term solution to energy needs.
Local Service Providers maintain a source document that substantiates that the client was provided these services. The document is kept on file by the contractor and is reviewed during routine program evaluation.
13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities?
Up to 5% of the total block grant is allocated specifically for Assurance 16 activities and distributed by formula to the contractor network. CSD provides a budget form for contractors to account for Assurance 16 activities.
Local Service Providers are contractually required to submit monthly expenditure and activity reports to CSD. These reports are monitore d cumulatively to ensure that no more than 5% is spent on Assurance 16 activities. The data is entered into an automated database management sy stem, which calculates and verifies compliance. Status reports are printed regularly for use by CSD staff. Issues needing clarification and areas of concern are more readily identified with the automated system that, in turn, allows for a more timely resolution with contractors.
Local Service Providers are made aware of the 5% cap, and through the local planning process, have the flexibility to submit proposed fun ding levels up to the 5% cap, for activities specifically targeted for Assurance 16.
13.3 Describe the impact of such activities on the number of households served in the previous Federal fiscal year.
The impacts of the budget and energy education are that clients are more aware of their energy and household costs, which may result in o verall household savings.
13.4 Describe the level of direct benefitsprovided to those households in the previous Federal fiscal year.
N/A
13.5 How many households applied for these services? N/A. CSD does not track the number of applications submitted for LIHEAP assistance.
13.6 How many households received these services? 210,626
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.

	-	TH AND HUMAN SERVIC DREN AND FAMILIES	ES August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 09/30/2020				
	LOW INCC	MC	BY ASSISTANCE PROGRAM(LIHEAP) DDEL PLAN 4 - MANDATORY				
	Se	ction 14:Leveragin	ng Incentive Program, 2607(A)				
14.1 Do you j • Yes O t		cation for the leveraging ince	ntive program?				
ds. d to re	Local Agencies participation all support document	pating in the Leveraging Incent ntation for period of three (3) ye					
14.3 For each describe the	following:	-	he upcoming year that will meet the requirements of 45 C.F.R. § 96.87(d)(2)(iii),				
Resource	What is the type of res ource or benefit ?	What is the source(s) of the res ource ?	How will the resource be integrated and coordinated with LIHEAP?				
1	Discount/waiver	Utility Companies	Local agencies and CSD coordinate the services provided under LIHEAP with exis ting reduced rate programs at Californias larger investor-owned utilities, as well as, many smaller municipal utilities. The coordination of these programs enables the a gencies to expand services to families who otherwise would not receive assistance due to lack of information about the programs. This coordination occurs through pr earranged agreements between the local CSD/LIHEAP contractors and the utility c ompanies. The LIHEAP contractors work in direct conjunction with the utility com panies by maintaining ongoing communication to screen and refer potential clients and coordinate benefits. In order to maximize the impact and effectiveness of both programs, applicants are screened to determine if the applicant from either source h as already received any benefits. The applicant is provided assistance in completing an application for the reduced rate programs at the time the applicant is being assist ed for HEAP.				
2	Cash	Non-profits	This resource was integrated and coordinated with LIHEAP in two ways: a. Due to funds from both sources (LIHEAP and utility companies/third-party co-payments) being used in the same household, the low-income household benefited by receivin g LIHEAP assistance in addition to assistance from either the utility company prog ram or third-party co-payment once the LIHEAP programs maximum level of assis tance was reached. b. To ensure that low-income household have year-around acces s to energy assistance and that the greatest number of low-income household receiv e assistance, local agencies have coordinated the services provided under LIHEAP with local private and public energy assistance programs. The coordination of these programs enables the agencies to expand emergency services to families who other wise would not receive assistance providers. The LIHEAP due to insufficient funds. The c oordination occurs through prearranged agreements between the local LIHEAP con tractors and the utility assistance providers by maintaining ongoing communic ation to screen potential clients and coordinate benefits. In order to maximize the i mpact and effectiveness of both programs, applicants are screened to determine if a ny benefits have already been received by the applicant from either source.				
3	Cash	Utility companies	Utility companies provide funds to provider agencies, allowing agencies to install a dditional weatherization measures in qualifying low-income homes.				
4	Cash	Utility companies	This resource was integrated and coordinated with LIHEAP due to funds from both sources (LIHEAP and utility companies) being used in the same household. The lo w-income household, therefore, was further weatherized to prevent the loss of heat ed and/or cooled air from the dwelling. As a result of the coordination of the weath erization contracts, additional LIHEAP-eligible households received weatherization measures, as appropriate an as allowable within LIHEAP contract. The client files are documented and maintained at each respective agency.				

Page 30 of 54

5	Cash	Utility companies	This resource is coordinated with LIHEAP because LIHEAP eligible and other low -income households are identified as needing repair or replacement of appliances d uring the time the dwelling is being assessed for weatherization services. Additiona lly, the utility companies utilize a bid process to identify administering agencies. C SD-funded agencies are successful in the bid process in large part due to their expe rience in providing weatherization services under LIHEAP and because they are kn own entity in the low-income community.
6	In-Kind Contribution	Landlords	Coordination with landlords to provide additional LIHEAP eligible households wea therization and appliances as appropriate and allowable within the LIHEAP contrac t.
7	Discount/waiver	Local Suppliers	Direct negotiations with local suppliers of weatherization materials for the LIHEA P Program resulted in lower than market costs for materials purchased in bulk quan tities. As a result of the resources generated from the discount received from these bulk purchases, additional LIHEAP eligible homes received weatherization measur es as appropriate and allowable within the LIHEAP contract.
8	-	-	-

August 1987, revised 05/92,02/95,03/96,12/98,11/01 U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES OMB Clearance No.: 0970-0075 ADMINISTRATION FOR CHILDREN AND FAMILIES Expiration Date: 09/30/2020 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 4 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 Does your training program address fraud reporting and prevention? Yes No						

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: 09/30/2020

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 measure s. Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

CSD has implemented changes to its intake form to meet the required LIHEAP performance measures reporting.

CSD and its Local Service Providers modified its internal/external reporting system to enable CSD's local service providers to transfer dat a collected from the intake form into CSD's reporting system.

Over the next federal fiscal year, CSD will continue its partnership with Investor Owned Utilities to continue obtaining utility cost and loc al energy consumption data. CSD will also work with local government utilities and municipal utility companies to obtain data exchange agreeme nt to obtain utility cost and energy consumption data.

U.S. DEPARTMENT OF HEA ADMINISTRATION FOR CHI	LTH AND HUMAN SERVICES LDREN AND FAMILIES	August 1987, revised 05/92,02/95,03/96,12/98 OMB Clearance No.: 097 Expiration Date: 09/3					
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY							
	Section 17: Program	Integrity, 2605(b)(10)					
17.1 Fraud Reporting Mechanisms	S						
a. Describe all mechanisms availat	ble to the public for reporting cases of	suspected waste, fraud, and abuse. S	elect all that apply.				
Online Fraud Reportin	ıg						
Dedicated Fraud Report	rting Hotline						
Report directly to local	l agency/district office or Grantee offic	ce					
Report to State Inspect	tor General or Attorney General						
Forms and procedures	in place for local agencies/district offi	ices and vendors to report fraud, was	te, and abuse				
Other - Describe:							
blower hotline that is availab cated throughout the departm orrespondence, telephone con es its legal office and an inve		regarding possible fraud. The informat cies and vendors report fraud through va ail to grantee staff. Upon notification o	ion is advertised via posters that are lo arious methods to the department via c				
b. Describe strategies in place for a	advertising the above-referenced reso	urces. Select all that apply					
Printed outreach mater	rials						
Addressed on LIHEAP	' application						
Website							
blower hotline that is availab cated throughout the departm	ree line that can be used by the public to ble to grantee staff to report information nent's office. Local administering agenc mmunication with grantee staff, and ema estigation commences.	regarding possible fraud. The informat cies and vendors report fraud through va	ion is advertised via posters that are lo arious methods to the department via c				
17.2. Identification Documentation	ı Requirements						
a. Indicate which of the following f embers.	forms of identification are required or	r requested to be collected from LIHI	EAP applicants or their household m				
Collected from Whom?							
Type of Identification Collected	Applicant Only	All Adults in Household	All Household Members				
Social Security Card is photocopi ed and retained	Required	Required	Required				
	Requested	Requested	Requested				

Required

Required

Required

Social Security Number (Without actual Card)											
	om u,		Requested			Requested			Requested		
		~	1			1					
			Descriptor			Description			Deminal		
	nt-issued identification		Required			Required			Required		
card (i.e.: driver	's license, state ID, Tri										
bal ID, pas	sport, etc.)		Requested			Requested			Requested		
	Other		Applicant Only Applicant On Required Requested		· .	All Adults in Hou All Adults in Ho sehold hold		use	mbers Members		
1						Required	Requested		Required	Requested	
b. Describe	b. Describe any exceptions to the above policies.										
17.3 Identi	fication Verification										
Describe w apply	hat methods are used t	o ve	rify the authenticity	of identificat	ion d	locuments provid	led by clients or	hou	sehold members.	. Select all that	
	ify SSNs with Social Se	curi	ty Administration								
	tch SSNs with death re-			ity Administr	atior	n or state agency					
	tch SSNs with state elig			-							
	tch with state Departm										
	tch with state and/or fe		-	n							
			-								
	Verification using private software (e.g., The Work Number)										
	person certification by										
					nt re	cords (for tribal g	grantees only)				
Oth	Match SSN/Tribal ID number with tribal database or enrollment records (for tribal grantees only) Other - Describe:										
17.4. Citize	enship/Legal Residency	Ver	ification								
-	What are your procedures for ensuring that household members are U.S. citizens or aliens who are qualified to receive LIHEAP benefits? Select all that apply.										
CI	ients sign an attestatior	n of c	ritizenship or legal	residency							
CI	ient's submission of So	cial S	Security cards is ac	cepted as proc	of of	legal residency					
	oncitizens must provide	doc	umentation of imm	igration statu	5						
Ci	tizens must provide a c	ору	of their birth certif	icate, naturali	zatio	on papers, or pass	port				
	oncitizens are verified t	hrou	igh the SAVE system	m							
Tribal members are verified through Tribal enrollment records/Tribal ID card											
Other - Describe:											
County Local Service Providers are required to verify citizenship and legal residency.											
17.5. Income Verification											
What methods does your agency utilize to verify household income? Select all that apply.											
Require documentation of income for all adult household members											
v	Pay stubs										
•	Social Security award letters										

Bank statements				
✓ Tax statements				
Zero-income statements				
Unemployment Insurance letters				
Other - Describe:				
Computer data matches:				
Income information matched against state computer system (e.g., SNAP, TANF)				
Proof of unemployment benefits verified with state Department of Labor				
Social Security income verified with SSA				
Utilize state directory of new hires				
Other - Describe:				
17.6. Protection of Privacy and Confidentiality				
Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.				
Policy in place prohibiting release of information without written consent				
Grantee LIHEAP database includes privacy/confidentiality safeguards				
Employee training on confidentiality for:				
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:				
Statewide Information Management Manual (SIMM) SIMM 5340-C: Requirements to respond to incidents involving breach or personal in formation				
State Administrative Manual (SAM) SAM 5305: Information asset management and all subsections				
SAM 5310: Privacy and all subsections and all subsections				
SAM 5320: Training and awareness for information security and privacy and all subsections				
STAT 5526. Training and awareness for information seeming and privacy and an subsections				
SAM 5350: Operational Security and all subsections				
SAM 5350: Operational Security and all subsections				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply.				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe.				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe. All vendors must supply a valid SSN or TIN/W-9 form				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe. All vendors must supply a valid SSN or TIN/W-9 form Vendors are verified through energy bills provided by the household				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe. All vendors must supply a valid SSN or TIN/W-9 form Vendors are verified through energy bills provided by the household Grantee and/or local agencies/district offices perform physical monitoring of vendors				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe. All vendors must supply a valid SSN or TIN/W-9 form Vendors are verified through energy bills provided by the household Grantee and/or local agencies/district offices perform physical monitoring of vendors Other - Describe and note any exceptions to policies above: CSD Documents authenticity of regulated energy vendors by collecting the Federal Employer ID number for Gas and Electric Vendors. Ve				
SAM 5350: Operational Security and all subsections 17.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe. All vendors must supply a valid SSN or TIN/W-9 form Vendors are verified through energy bills provided by the household Grantee and/or local agencies/district offices perform physical monitoring of vendors Other - Describe and note any exceptions to policies above: CSD Documents authenticity of regulated energy vendors by collecting the Federal Employer ID number for Gas and Electric Vendors. Ve ndors are required to submit a Standard 204 Payee Record Data or Government Agency Tax Identification (GATI) form.				
SAM 5350: Operational Security and all subsections I.7.7. Verifying the Authenticity What policies are in place for verifying vendor authenticity? Select all that apply. All vendors must register with the State/Tribe. All vendors must supply a valid SSN or TIN/W-9 form Vendors are verified through energy bills provided by the household Grantee and/or local agencies/district offices perform physical monitoring of vendors Other - Describe and note any exceptions to policies above: CSD Documents authenticity of regulated energy vendors by collecting the Federal Employer ID number for Gas and Electric Vendors. Ve ndors are required to submit a Standard 204 Payee Record Data or Government Agency Tax Identification (GATI) form. I.8. Benefits Policy - Gas and Electric Utilities What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that				

Data exchange with utilities that verifies:				
Account ownership				
Consumption				
Balances				
Payment history				
Account is properly credited with benefit				
Other - Describe:				
Centralized computer system/database tracks payments to all utilities				
Centralized computer system automatically generates benefit level				
Separation of duties between intake and payment approval				
Payments coordinated among other energy assistance programs to avoid duplication of payments				
Payments to utilities and invoices from utilities are reviewed for accuracy				
Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities				
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:				
Payments to utilities and direct pay letters are reviewed for accuracy.				
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, a nd 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:				
Please see attachments.				
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?				
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned?				

1	Vendors found to have committed fraud may no longer participate in LIHEAP
	venuors round to have committed in aud may no longer participate in LITILAT

Other - Describe:

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

Section 18: Certification Regarding Debarment, Suspension, and Other Responsi bility Matters

Certification Regarding Debarment, Suspension, and Other Responsibility Matter s--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 n ecessarily result in denial of participation in this covered transaction. The prospecti ve 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. Ho wever, 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 whic h reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowin gly rendered an erroneous certification, in addition to other remedies available to th e 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 t o the department or agency to which this proposal is submitted if at any time the pr ospective primary participant learns that its certification was erroneous when subm itted or has become erroneous by reason of changed circumstances.

5. The terms covered transaction, debarred, suspended, ineligible, lower tier co vered transaction, participant, person, primary covered transaction, principal, prop osal, 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 1 2549. You may contact the department or agency to which this proposal is being su bmitted 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 ent er into any lower tier covered transaction with a person who is proposed for debar ment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authoriz ed by the department or agency entering into this transaction.

7. The prospective primary participant further agrees by submitting this propos al that it will include the clause titled ``Certification Regarding Debarment, Suspens ion, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provide d by the department or agency entering into this covered transaction, without modi fication, in all lower tier covered transactions and in all solicitations for lower tier c overed transactions.

8. A participant in a covered transaction may rely upon a certification of a pros pective participant in a lower tier covered transaction that it is not proposed for deb arment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or volunt arily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determi nes the eligibility of its principals. Each participant may, but is not required to, chec k the List of Parties Excluded from Federal Procurement and Nonprocurement Prog rams.

9. Nothing contained in the foregoing shall be construed to require establishm ent 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 ex ceed 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 t ransaction with a person who is proposed for debarment under 48 CFR part 9, subp art 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation i n this transaction, in addition to other remedies available to the Federal Governmen t, the department or agency may terminate this transaction for cause or default.

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

(1) The prospective primary participant certifies to the best of its knowledge an d belief, that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared i neligible, 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 crimi nal offense in connection with obtaining, attempting to obtain, or performing a publ ic (Federal, State or local) transaction or contract under a public transaction; violati on of Federal or State antitrust statutes or commission of embezzlement, theft, forg ery, bribery, falsification or destruction of records, making false statements, or rece iving 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 offense s 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 def ault.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explan ation to this proposal.

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

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participa nt is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon whic h reliance was placed when this transaction was entered into. If it is later determine d that the prospective lower tier participant knowingly rendered an erroneous certif ication, in addition to other remedies available to the Federal Government the depar tment or agency with which this transaction originated may pursue available remed ies, 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 low er 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 co vered transaction, participant, person, primary covered transaction, principal, prop osal, and voluntarily excluded, as used in this clause, have the meaning set out in t he Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in o btaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal tha t, [[Page 33043]] should the proposed covered transaction be entered into, it shall n ot knowingly enter into any lower tier covered transaction with a person who is pro posed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declar ed ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originat ed.

6. The prospective lower tier participant further agrees by submitting this prop osal that it will include this clause titled ``Certification Regarding Debarment, Susp ension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," with out modification, in all lower tier covered transactions and in all solicitations for lo wer tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a pros pective participant in a lower tier covered transaction that it is not proposed for deb arment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or volunt arily excluded from covered transactions, unless it knows that the certification is er roneous. A participant may decide the method and frequency by which it determine s the eligibility of its principals. Each participant may, but is not required to, check t he List of Parties Excluded from Federal Procurement and Nonprocurement Progra ms.

8. Nothing contained in the foregoing shall be construed to require establishm ent 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 ex ceed 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, i f a participant in a covered transaction knowingly enters into a lower tier covered tr ansaction with a person who is proposed for debarment under 48 CFR part 9, subp art 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation i n this transaction, in addition to other remedies available to the Federal Governmen t, the department or agency with which this transaction originated may pursue avail able remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclus ion--Lower Tier Covered Transactions

(1) The prospective lower tier participant certifies, by submission of this propo sal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this tra nsaction 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 explan ation to this proposal.

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

Section 19: Certification Regarding Drug-Free Workplace Requirements

This certification is required by the regulations implementing the Drug-Free Wor kplace 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 receip t point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notific ation of criminal drug convictions. For the Department of Health and Human Serv ices, 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 Cer tification)

1. By signing and/or submitting this application or grant agreement, the grantee i s providing the certification set out below.

2. The certification set out below is a material representation of fact upon which r eliance is placed when the agency awards the grant. If it is later determined that t he grantee knowingly rendered a false certification, or otherwise violates the req uirements of the Drug-Free Workplace Act, the agency, in addition to any other r emedies available to the Federal Government, may take action authorized under t he 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 ide ntified on the certification. If known, they may be identified in the grant applicatio n. If the grantee does not identify the workplaces at the time of application, or up on 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 inspe ction. Failure to identify all known workplaces constitutes a violation of the grant ee's drug-free workplace requirements.

6. Workplace identifications must include the actual address of buildings (or part s 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 hi ghway department while in operation, State employees in each local unemploym ent office, performers in concert halls or radio studios).

7. If the workplace identified to the agency changes during the performance of th e grant, the grantee shall inform the agency of the change(s), if it previously iden

tified the workplaces in question (see paragraph five).

8. Definitions of terms in the Nonprocurement Suspension and Debarment comm on rule and Drug-Free Workplace common rule apply to this certification. Grante es' 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 regulatio n (21 CFR 1308.11 through 1308.15);

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

Criminal drug statute means a Federal or non-Federal criminal statute involving t he manufacture, distribution, dispensing, use, or possession of any controlled s ubstance;

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 c harge employees unless their impact or involvement is insignificant to the perfor mance of the grant; and, (iii) Temporary personnel and consultants who are direc tly engaged in the performance of work under the grant and who are on the grant ee's payroll. This definition does not include workers not on the payroll of the gr antee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subreci pients 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, distr ibution, dispensing, possession, or use of a controlled substance is prohibited in t he grantee's workplace and specifying the actions that will be taken against employ ees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees abo ut --

(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 program s; and

(4) The penalties that may be imposed upon employees for drug abuse violations o ccurring 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 con dition 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 crimina I 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 u nder paragraph (d)(2) from an employee or otherwise receiving actual notice of suc h conviction. Employers of convicted employees must provide notice, including po sition title, to every grant officer or other designee on whose grant activity the conv icted employee was working, unless the Federal agency has designated a central p oint 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 u nder 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 termin ation, consistent with the requirements of the Rehabilitation Act of 1973, as amend ed; 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 h ealth, 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 performa nce of work done in connection with the specific grant:

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

2389 Gateway Oaks Drive #100					
<u>* Address Line 1</u>					
Address Line 2					
Address Line 3					
Sacramento	СА	95833			
<u>* City</u>	<u>* State</u>	<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 i n the unlawful manufacture, distribution, dispensing, possession, or use of a contr olled substance in conducting any activity with the grant;

(b) If convicted of a criminal drug offense resulting from a violation occurring durin g the conduct of any grant activity, he or she will report the conviction, in writing, w ithin 10 calendar days of the conviction, to every grant officer or other designee, un less 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 numb er(s) of each affected grant.

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

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

Section 20: Certification Regarding Lobbying

The submitter of this application certifies, to the best of his or her knowledge an d 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 of ficer 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 awar ding 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 p aid to any person for influencing or attempting to influence an officer or employe e of any agency, a Member of Congress, an officer or employee of Congress, or a n employee of a Member of Congress in connection with this Federal contract, gr ant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, ``Disclosure Form to Report Lobbying," in accordance with i ts instructions

(3) The undersigned shall require that the language of this certification be includ ed 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 transac tion was made or entered into. Submission of this certification is a prerequisite f or 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 f ailure.

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 attem pting 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 gu arantee a loan, the undersigned shall complete and submit Standard Form-LLL,` `Disclosure Form to Report Lobbying," in accordance with its instructions. Subm ission of this statement is a prerequisite for making or entering into this transact ion 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 ce rtification set out above.

Assurances			
(1) use the funds available under this title to			
(A) conduct outreach activities and provide assistance to low income househ ds in meeting their home energy costs, particularly those with the lowest incomes hat pay a high proportion of household income for home energy, consistent with p ragraph (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 I everaging 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 th e 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 Improve ment Act of 1978; or			
(B) households with incomes which do not exceed the greater of -			
(i) an amount equal to 150 percent of the poverty level for such State; or			
(ii) an amount equal to 60 percent of the State median income;			
except that a State may not exclude a household from eligibility in a fiscal year plely on the basis of household income if such income is less than 110 percent the poverty level for such State, but the State may give priority to those housel plds with the highest home energy costs or needs in relation to household inco ne.			
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 this title, and any similar energy-related assistance available under the solution of the community services block grant program) or under			

er any other provision of law which carries out programs which were administere d 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 adm inistered by the Federal Government and such State, particularly low-income ene rgy-related programs under subtitle B of title VI (relating to community services block grant program), under the supplemental security income program, under p art 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 E nergy Conservation and Production Act, or under any other provision of law whi ch carries out programs which were administered under the Economic Opportun ity 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 furnish ed to those households which have the lowest incomes and the highest energy c osts or needs in relation to income, taking into account family size, except that t he State may not differentiate in implementing this section between the househol ds described in clauses 2(A) and 2(B) of this subsection;

(6) to the extent it is necessary to designate local administrative agencies in orde r to carry out the purposes of this title, to give special consideration, in the desig nation of such agencies, to any local public or private nonprofit agency which w as receiving Federal funds under any low-income energy assistance program or weatherization program under the Economic Opportunity Act of 1964 or any othe r 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; a nd

(B) if there is no such agency because of any change in the assistance furnish ed to programs for economically disadvantaged persons, then the State shall give s pecial consideration in the designation of local administrative agencies to any succ essor agency which is operated in substantially the same manner as the predecess or agency which did receive funds for the fiscal year preceding the fiscal year for w hich the determination is made;

(7) if the State chooses to pay home energy suppliers directly, establish procedu res 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 ener gy 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 agre ement entered into with a home energy supplier under this paragraph will contain p rovisions to assure that no household receiving assistance under this title will be tr eated adversely because of such assistance under applicable provisions of State Ia w 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 ven dors taking appropriate measures to alleviate the energy burdens of eligible house holds, including providing for agreements between suppliers and individuals eligible for benefits under this Act that seek to reduce home energy costs, minimize the ri sks of home energy crisis, and encourage regular payments by individuals receivin g financial assistance for home energy costs;

(8) provide assurances that,

(A) the State will not exclude households described in clause (2)(B) of this sub section from receiving home energy assistance benefits under clause (2), and

(B) the State will treat owners and renters equitably under the program assiste d under this title;

(9) provide that--

(A) the State may use for planning and administering the use of funds under thi s 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 plannin g and administering the program assisted under this title and will not use Federal f unds for such remaining cost (except for the costs of the activities described in par agraph (16));

(10) provide that such fiscal control and fund accounting procedures will be esta blished as may be necessary to assure the proper disbursal of and accounting fo r Federal funds paid to the State under this title, including procedures for monito ring the assistance provided under this title, and provide that the State will comp ly with the provisions of chapter 75 of title 31, United States Code (commonly kn own 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 ar e not acted upon with reasonable promptness; and

(14) cooperate with the Secretary with respect to data collecting and reporting un der 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 an d intake functions for crisis situations and heating and cooling assistance that is administered by additional State and local governmental entities or community-b ased 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 i n awarding grants or contracts for intake services shall be provided to those age ncies that administer the low-income weatherization or energy crisis intervention programs.

* This assurance is applicable only to States, and to territories whose annual reg ular LIHEAP allotments exceed \$200,000. Neither territories with annual allotmen ts of \$200,000 or less nor Indian tribes/tribal organizations are subject to Assura nce 15.

(16) use up to 5 percent of such funds, at its option, to provide services that enc ourage and enable households to reduce their home energy needs and thereby t he need for energy assistance, including needs assessments, counseling, and a ssistance with energy vendors, and report to the Secretary concerning the impac t of such activities on the number of households served, the level of direct benefi ts provided to those households, and the number of households that remain uns erved.

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).