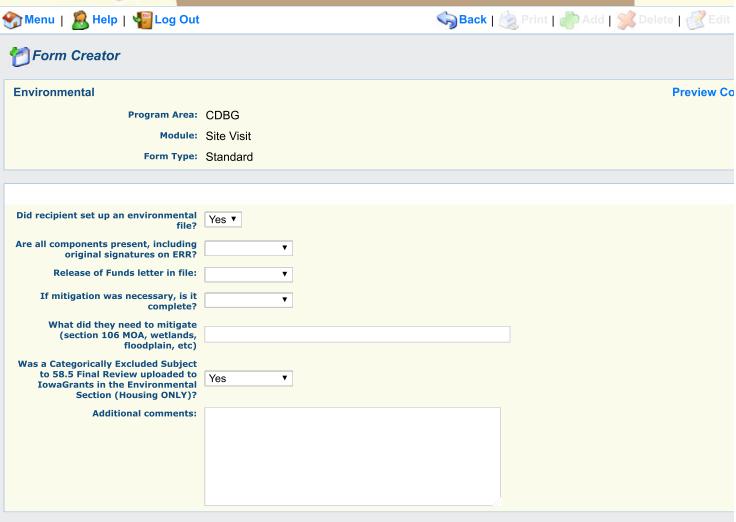


	Plans to minimize displacement of persons and businesses resulting from funded activities? Plans to assist persons actually	Y	
	displaced? Were the nature of and status of the proposed activities discussed?	•	
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Iowa.gov – The Official Website of the State of Iowa.

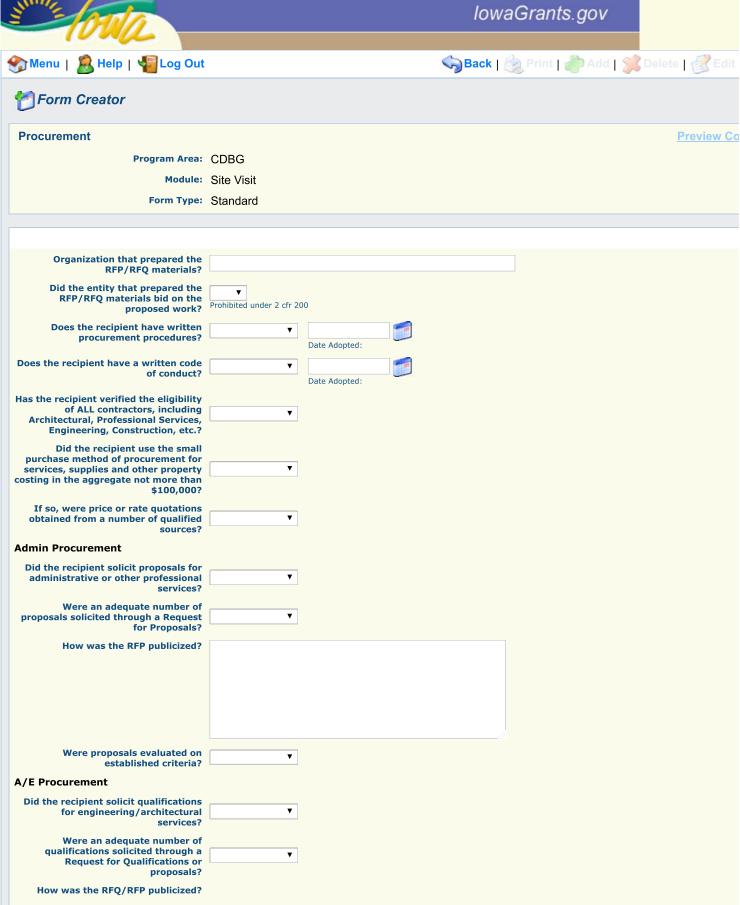


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Form Creator			
Financial Management			Preview Co
Program Area:	CDBG		
Module:	Site Visit		
Form Type:	Standard		
Document responses by spot-checking finance When answering questions below regarding of Does the recipient maintain an adequate financial management system? Is the system in compliance with all requirements outlined in the CDBG Management Guide? Are local effort funds incorporated into budget and accounting records? Are expenditures made according to the CDBG/local effort ratio shown in the contract? Does the recipient disburse funds within 10 working days of receipt? Does the recipient provide for adequate internal control and segregation of duties? Who is responsible for receiving funds?			
Who prepares checks and warrants?			
Who is responsible for approving bills?			
Who is authorized to sign checks?			

Who is the bookkeeper?

Who reconciles the bank statements?		
Was program income received?	▼	
What was the source of program income?		
Was it recorded as a receipt in program records?	▼	
Was it spent on current program activities before additional CDBG funds were requested?	▼	
If land was part of the local effort,		
how was the value of the land determined?		
Is force account labor being used?	▼	
If yes, do time sheets document time allocated to the CDBG program?	▼	
Are all CDBG records being maintained in compliance with 2CFR part 200.333?	▼	
Is the recipient maintaining original signatures on claim forms?	▼	
Does the recipient have original signatures on Alternate Signatory forms?	•	
Additional comments:		
Misc. Financial Documents		
To attach documents, please save the form, cli	ck Add, Save the form again, then click the "+".	
Download the Draw Review form.		
To upload a scanned document, provide a des	cription for the document, save the form, then click the "+" link.	
Description*		
File	Choose File No file chosen	
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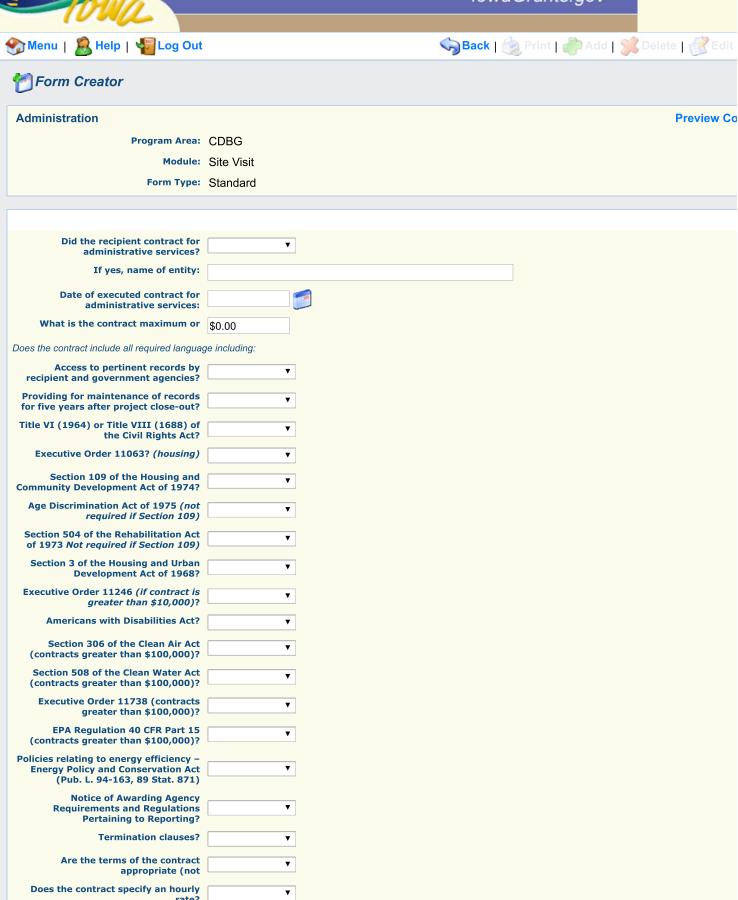


Were qualifications evaluated on established criteria?	y	
Did the recipient negotiate fair and reasonable compensation with		
selected engineer/architect if using the RFQ process?	•	
Construction Procurement		
Did the recipient used competitive sealed bids?	y	
Name of the paper where the bid was publicized:		
Were contracts awarded to the lowest responsible bidders?	y	
Are there bid tabulation sheets?	y	
Sole Source Procurement		
Did recipient receive approval for any		
sole source procurement under 24 CFR 85.36(d)(4)?	v	
If yes, which one of the following criteria was	used:	
	•	
	▼	
	V	
	•	
If IEDA approved a sole source procurement, was a cost analysis performed?	V	
If IEDA approved a sole source		
for the sole source transaction was \$25,000 or more, did the recipient	v	
receive a formal approval letter from the IEDA?		
Did the recipient send bid notification to the clearinghouses for minority-	•	
and women-owned businesses? If no, what other actions did the		
recipient take to solicit participation:		
Was a cost or price analysis performed to det	ermine cost reasonableness?	
a. Independent estimate prior to receipt of bids or proposals?	V	
b. Cost analysis performed for professional, consulting, or	*	
architectural engineering services contract?		
c. Adequate price competition lacking?	•	
d. Contract modifications/change orders?	v	
If yes to any of the above, provide specific information related to the		
transaction:		

	Additional comments:			
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Does the contract provide for optional services at additional costs (hourly,



	lump sum or actual)?	
	Additional comments:	
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Form Creator				
Hsg Administration				Preview Co
Program Area:	CDBG			
Module:	Site Visit			
Form Type:	Standard			
Person(s) Interviewed				
Date Administrative plan received		1		
Progress Summary (as of this monit	toring visit)			
Number of individual housing rehab				
projects completed:				
Number of individual housing rehabilitation projects currently under construction:				
Number of applications for assistance				
pending:				
Total dollar amt expended:	\$0.00 Federal	\$0.00 Local	\$0.00 Other	
Total dollar amt Obligated:	\$0.00	\$0.00	\$0.00	
	Federal	Local	Other	
1. Has the grantee established and adop	ted written Prograr	n Guidelines for its	housing rehab activi	ity?
	▼			
2. Has the grantee established, in writin	g, the geographical	area(s) for the on	eration of its housing	activity and/or has a current map which depicts the
area(s) been incorporated into the guide		u. cu(s)		, accord, and, or had a carron map annot approve
	▼			
3. Has the grantee established, in writin Are they current?	g, the income limits	for housing rehab	oilitation which are in	tended to primarily benefit low and moderate incom
	▼			
4. Has the grantee advertised the availa	hility of its housing	rehabilitation activ	vitv?	
, , , , , , , , , , , , , , , , , , ,	▼		,	
How?				
				_4
5. Has the grantee marketed its housing	rehabilitation activ	rity adequately?		
5. This the grantee marketed its housing	▼	ity ducquatery:		
6. Difficulty in obtaining qualified				
applicants?				
If yes, please describe:				
7. Does the grantee have adequate admi		to carry out the ho	ousing rehabilitation a	activity?
	▼			

How many staff involved?					
8. Is the grantee providing adequate supervision of its housing rehabilitation program staff (including third party) to assure early detection and correct potential deficiencies or problems?					
		•			
9. Are there adequate checks and balance	es in the gr	antees	administrative system to p	prevent any potential fra	ud, waste, or mismanagement?
·		•			
10 Tunining Oppositualities available?					
10. Training Opportunities available?		•	1		
11. Are the program records maintained	by the staff		nt, complete and accurate?		
		▼			
12. What is the average processing time	for an appl	ication	(including the income veri	fication process)?	
13. Is the length of time to process an a	pplication re	easonal	ble?		
		•			
14. Is the housing rehabilitation activity (IDED will not allow Housing Fund recip				ve a project site located	in a floodplain.)
		•			
15. Is the grantee performing the housing	ng rehabilita	ation ac	ctivity on any historic prope	erties and/or within a de	esignated historic preservation district?
		•			
If so, is the grantee following any his	toric preser	vation	rehabilitation guidelines?		
		•			
16. Is the request for SHPO comment in	cluded on pi	roject?			
·		▼			
17. Are energy conservation standards i	ncluded as a	nart o	of the grantee's rehabilitation	on standards or housing	rehabilitation program guidelines?
17. Are energy conservation standards i	Teluded d3 t	→	The grantee's renabilitation	on standards or nodsing	renabilitation program galacinies:
18. Please explain other community dev	elopment ac	ctivities	being carried out in the de	esignated housing rehab	ilitation area(s)?
19. Does the grantee maintain demogra households, etc.) of the applicants and o				pes of owners (racial, ge	ender, age, handicapped, female head of
		•			
20. Demographic/beneficiary status of t	he housing	robabil	itation activity as of the da	to(s) of this monitoring	vicit
Program Year	ne nousing		itation activity as of the da	te(s) of this monitoring	VISIC
Household		J			
NOTE: More than one category may apply.					
a. Elderly (62 yrs. or older)					
h Compile Committee (A committee of the	Apps in Progre	ess	Rehab Cases in-progress	Rehab Cases Completed	
b. Small Family (4 person or less)	Apps in Progre	ess	Rehab Cases in-progress	Rehab Cases Completed	
c. Large Family (5 or more persons)					
	Apps in Progre	ess	Rehab Cases in-progress	Rehab Cases Completed	

Apps in Progress Rehab Cases In-progress Rehab Cases Complete Apps in Progress Rehab Cases in-progress Rehab Cases Complete Rehab Cases In-progress Rehab Cases Complete Rehab Cases Complete Rehab Cases Complete Rehab Cases In-progress Rehab Cases Complete Rehab Cases Complete Rehab Cases Complete Rehab Cases In-progress Rehab Cases Complete Rehab Cases In-progress Rehab Cases Complete Rehab Cases Complete Rehab Cases In-progress Rehab Ca
Apps in Progress f. Minority Apps in Progress Rehab Cases in-progress Rehab Cases Complete Rehab Cases Co
Apps in Progress Rehab Cases in-progress Rehab Cases Complete Rehab Cases Complete Rehab Cases Complete Rehab Cases the work write-ups/project specifications? 22. Are standard specifications and/or a performance manual(s) used in preparing the work write-ups/p 23. Who prepares the cost estimate? 24. Are cost estimates reviewed by someone else prior to contractor procurement 25. Does the grantee require itemized (per item) bids on all projects? 26. Are there an adequate number of contractors participating in the grantee's housing rehab program?
Apps in Progress Rehab Cases in-progress Rehab Cases Complete. Who prepares the work write-ups/project specifications? Are standard specifications and/or a performance manual(s) used in preparing the work write-ups/p Who prepares the cost estimate? Are cost estimates reviewed by someone else prior to contractor procurement V Does the grantee require itemized (per item) bids on all projects? V Are there an adequate number of contractors participating in the grantee's housing rehab program?
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there an adequate number of contractors participating in the grantee's housing rehab program?
Are there an adequate number of contractors participating in the grantee's housing rehab program?
Are there an adequate number of contractors participating in the grantee's housing rehab program?
V
If not, please explain:
How are contractors procured/selected?
How many (on average) contractors bid?
Are rehabilitation contracts let by unit? (Choose No if let by groups)
Y
Has the grantee used any minority-owned or women-owned contractor under its housing rehabilitation
▼
so, list names, addresses, number of
contracts, and respective dollar amounts.
Does the grantee have an effective method for resolving contract and/or work quality disputes?
Y
If yes, how is this handled?
Does the grantee have effective methods for approving and controlling change orders?

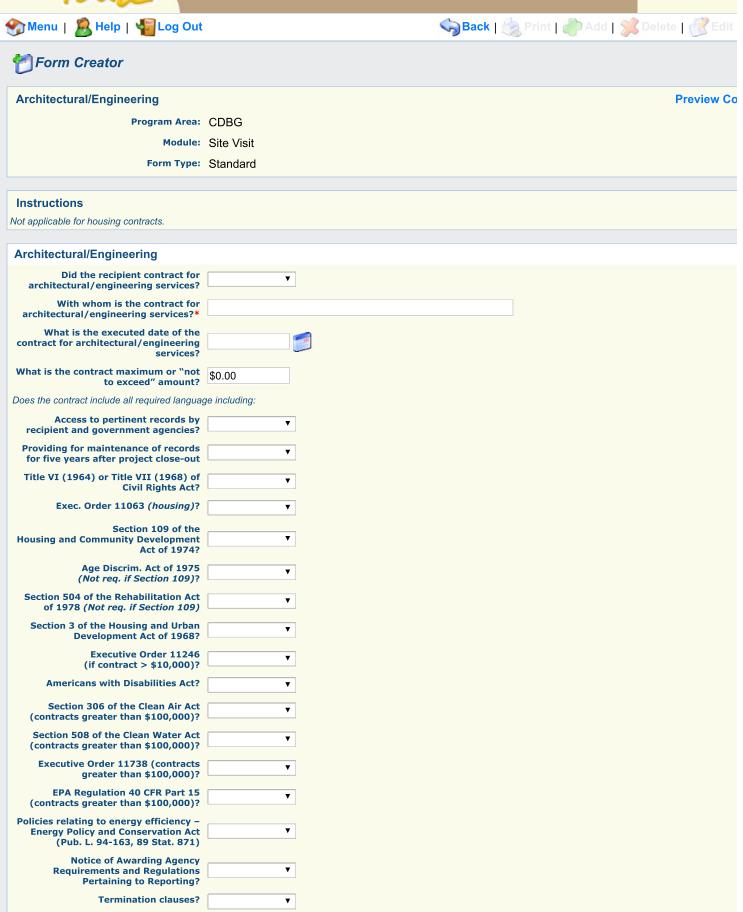
	▼		
If yes, who approves change orders?			
-			
33. Does the grantee require that all par	ticipating rehabilita	ation contractors be insured and/or bonded	?
	▼		
If so, specifics:			
34. Does the grantee have within its pro-	gram guidelines a r	mechanism to prevent any potential collusion	n or kickbacks from occurring?
	▼		
Are certification forms used for this	▼		
purpose?	·		
35. Are contractors paid:			
a lump sum following			
completion/acceptance of the work performed?	▼		
by progress payments based on	▼		
percentage of construction completed?			
Other? Explain:			
36. What is the percentage of the total b	illing(s) submitted	by housing rehabilitation contractors the g	rantee retains until final completion/acceptan —
37. How often are work-in-progress insp	ections conducted	? Please explain:	
Day thou ottain and many in programs in p			
38. Who conducts the inspections?			
39. Are inspections adequately documen	ted?		
	▼		
Please explain:			
40. Does the grantee require all contract	ors to guarantee/v	varranty their work?	
-		•	

	▼	
If so, for how long?		
44 Ave lieu weiwere abbeire of fallewine		
41. Are lien waivers obtained following C	ompletion of each individual housing rehabilitation unit?	
42. Under the grantee's housing rehabilit (Rehabilitation Standards)	ation program, what model housing code or standards of building construction have	been adopted for use?
43. What have been the most work items	to date (this program year)?	
45. What have been the most work items	to date (this program year).	
44. Had the grantee fulfilled the commun	ity development objectives stated in the application for CDBG funds?	
44. Had the grantee runned the commun	▼	
Are the performance targets specified in	the grantee's contract with IEDA being met?	
	V	
45. What types(s) of housing rehabilitati	on assistance is available to eligible applicants?	
a.) Grants	v	
b.) Deferred payment loans	▼	
c.) Forgivable loans	T	
d.) Direct loans	▼	
e.) Other		
46. Please explain the maximum dollar a	mount limitations on available assistance.	
47. If direct loans are involved, how are	the loans serviced?	

	is involved, has the grantee signed an agreement or contract with this entity? Does the agreemetn or contract charged, and the liabilities for failure to perform?
	y
49. Is there a method and composition t	o loan paybacks/defaults?
	y
Please explain:	
Is the grantee using escrow accounts (o	r line of credit)?
	y
 a.) Are escrow accounts or Line of Credit established on an individual account basis? 	•
b.) Are the escrow accounts or line of Credit interest bearing?	▼
c.) Is the interest earned being properly handled by the grantee?	v
d.) Does the rehab construction contract provide for payments to the	
contractor through an escrow account or line of credit?	V
e.) Was the contract between the contractor and property owner fully	
executed prior to the deposit of funds into the escrow account or payment	▼
from the line of credit?	
f.) Have funds been disbursed from the escrow account or line of credit within ten (10) days of deposit of funds into the account?	•
g.) Are the escrow account or line of credit funds expended and work accepted within the terms of the construction contract?	•
51. Is the grantee maintaining adequate	records on direct housing rehabilitation administrative costs?
	▼
How is this accomplished?	
52. What is the total dollar amount of di	rect housing rehab administrative costs to date?
	\$0.00
53. Are direct administrative costs withi	n allowable limits?
	y
54. Has a sub-agreement been approved	by IEDA (applicable to third-party administration)?
If so, date approved:	
55. has a financial Re-Use Plan been app	
If so, date:	V
21 30, date.	

56. Where a financial Re-Use Plan is in p	ace for program income receipts:	
a.) Has a separate account been established?	•	
b.) Is the account interest bearing?	▼	
c.) Is the program income used prior to additional draws?	▼	
d.) Has the program income been reported to IEDA?	▼	
57. Text to be included in monitoring lett	er under Administration.	
58. Additional Comments		
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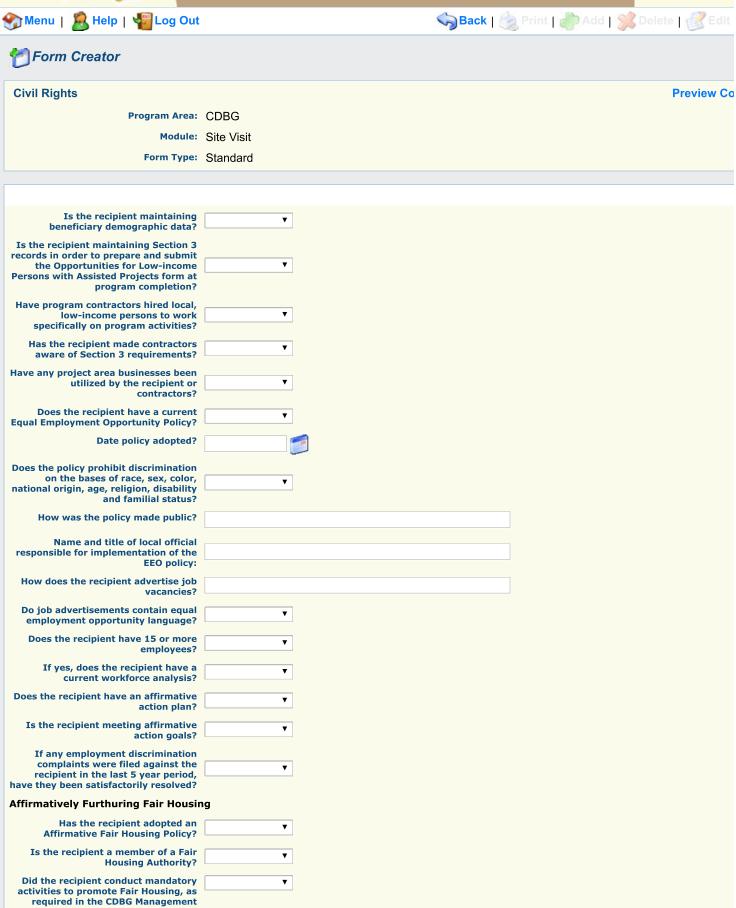
Are the terms of the contract appropriate (not a percentage of cost or cost plus percentage of cost type of contract)?	▼	
Does the contract specify an hourly rate?	Y	
Does the contract provide for optional services at additional costs (hourly, lump sum or actual)?	▼	
Additional comments:		
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Form Creator			
Other Professional Services			Preview Co
Program Area:	CDBG		
Module:	Site Visit		
Form Type:	Standard		
Other Professonal Services			
Did the recipient contract for any other	▼		
professional services?			
With whom is the contract for professional services?*			
What is the executed date of the contract for professional services?			
What is the contract lump sum or price per house maximum or "not to exceed" amount?	\$0.00		
Does the contract include all required language	ge including:		
Access to pertinent records by recipient and government agencies?	▼		
Providing for maintenance of records for five years after project close-out?	•		
Title VI (1964) or Title VII (1968) of Civil Rights Act?	▼		
Executive Order 11063?	•		
Section 109 of the Housing and Community Development Act of 1974?	▼		
Age Discrim Act of 1975 (Not req. if Section 109)?	•		
Section 504 of the Rehabilitation Act of 1978(Not req. if Section 109)?	•		
Section 3 of the Housing and Urban Dev. Act of 1968?	•		
Executive Order 11246 (if contract is > \$10,000)?	•		
Americans with Disabilities Act?	•		
Section 306 of the Clean Air Act (contracts greater than \$100,000)?	▼		
Section 508 of the Clean Water Act (contracts greater than \$100,000)?	•		
Executive Order 11738 (contracts greater than \$100,000)?	•		
EPA Regulation 40 CFR Part 15 (contracts greater than \$100,000)?	•		
Notice of Awarding Agency Requirements and Regulations Pertaining to Reporting?	•		
Termination clauses?	▼		
Are the terms of the contract			
appropriate (not a percentage of cost or cost plus percentage of cost type of	▼		
contract)?			
Does the contract specify an hourly rate?	▼		
Does the contract provide for optional services at additional costs (hourly,	•		

	lump sum or actual)?	
	Additional comments:	
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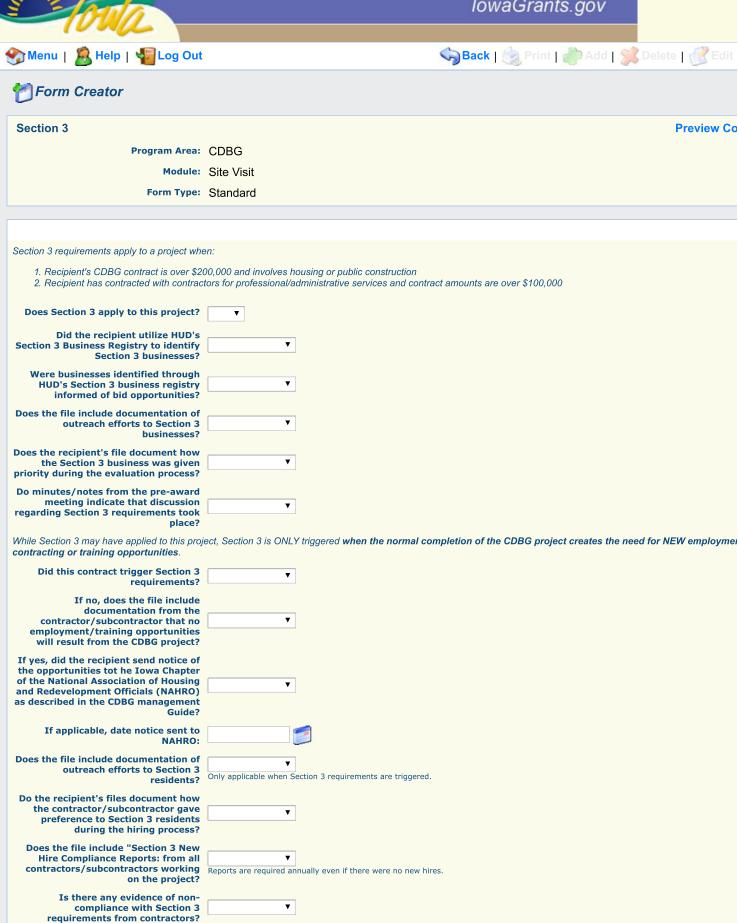




Guide (Applies to 2015 and later projects)		
Did the recipient advertise, publicize,		
and pass an affirmative fair housing	▼	
policy		
poncy		
Date of the policy		
Date of the poney		
Did the recipient identify and publish		
the name and contact information of a		
Discrimination Complaint Officer	▼	
within the agency or jurisdiction?		
weather and the same and the delication		
If the recipient received housing		
discrimination complaints, did they		
refer and assist in filing complaints		
with the Iowa Civil Rights	▼	
Commission, the U.S. Department of		
Housing and urban Development, or a		
local civil rights commission?		
local civil rights commission?		
Did the recipiont conduct one entired		
Did the recipient conduct one optional	▼	
Fair Housing Activity, as required in	·	
the CDBG Management Guide?		
If yes, date of activity?		
A - A St A		
Activity Description		
Other actions recipient has taken to		
further affirmative fair housing:		
	/	
dimenity Business Entermines (Money	Procinces Enterprise (MDE (MDE)	
/linority Business Enterbirse/wome	nBusiness Enterprise (MBE/WBE)	
,		
a.) have any contracts been awarded	▼	
	V	
a.) have any contracts been awarded to MBE and/or WEB firms?	V	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by	V	
a.) have any contracts been awarded to MBE and/or WEB firms?	•	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract	V	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract	•	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	V	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	•	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	•	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	Y	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	V	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	•	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith	V	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith effort to utilize MBE/WBE firms.	V	
a.) have any contracts been awarded to MBE and/or WEB firms? b.) List the specific actions taken by the recipient to advertise for, attract or otherwise demonstrate a good-faith effort to utilize MBE/WBE firms. Does the recipient use Equal		
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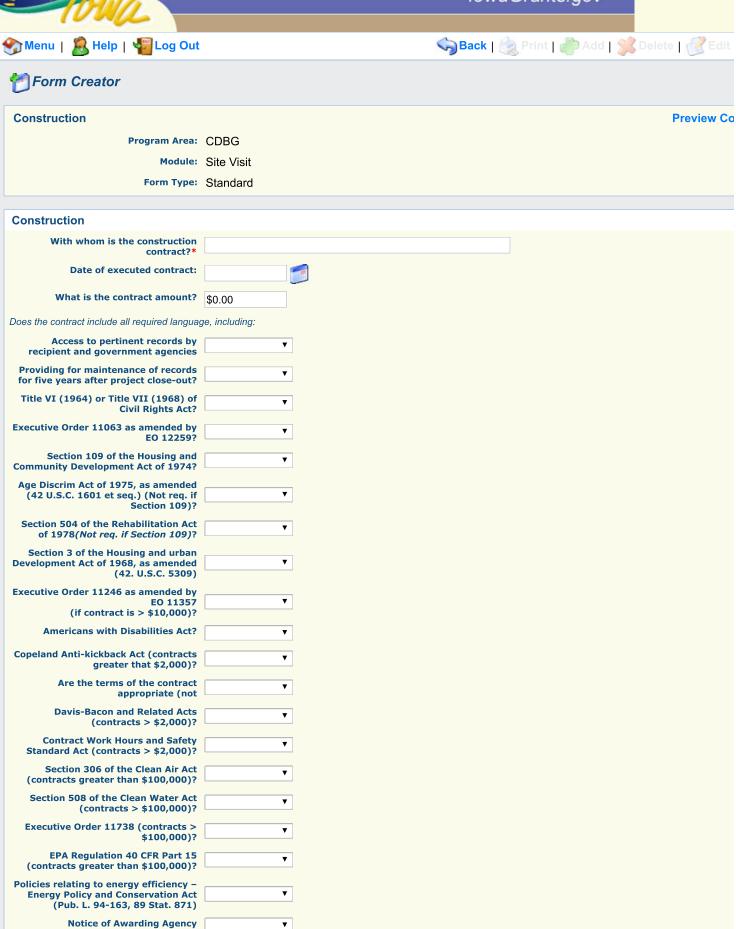


If yes, name of contractor(s):



Additional comments:		
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Requirements and Regulations Pertaining to Reporting?	
Termination clauses?	▼
Does the contract include the appropriate wage rate determination?	•
Has the recipient verified the eligibility of contractors and subcontractors?	*
Also Include State requirements:	
Iowa Civil Right Act of 1965 (EO 34 and Iowa code Chpt 19B.7)	Y
Do recipient construction records include the	following (in compliance with CDBG limits):
Bid guarantees (5%)	▼
Performance Bonds (100%)	▼
Payment Bonds (100%)	▼
Additional comments:	

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Form Creator		
Labor Standards		Preview Co
Program Area:	CDBG	
	Site Visit	
Form Type:		
Instructions		
Not applicable for housing projects.		
Recipient's Labor Standards Compliance Officer:		
Does the recipient have a labor		
standards enforcement file for each	▼	
construction activity?		
Have contractor payrolls been submitted weekly?	▼	
Are payrolls signed by CEO or		
designee?	▼	
If no, is there a letter of authorization provided?	▼	
Were deductions not required by law		
specified correctly or provided with employee's signed voluntary		
willingness for the deductions (i.e.,	▼	
personal contributions to insurance, pension etc.)		
Were there any self-employed subcontracting owners?	▼	
If yes, were their payrolls correctly executed and certified?	▼	
Was a classification provided for each employee in compliance with the labor	▼	
standards and wage determinations?		
Has Compl. Officer reviewed and acceptd payrolls?	▼	
Were employee interviews cross-		
referenced with the applicable weekly payroll?	▼	
Did the recipient conduct interviews		
for a broad cross-section of	▼	
contractors and construction activities?		
Are fringe benefits being paid		
according to the wage rate determination and in compliance with	▼	
labor standards?		
Is overtime computed on the basic		
hourly rate shown on the wage rate determination?	V	
Describe any wage		
discrepancies/violations of labor standards and how they were		
resolved.		
Are any contractors or subcontractors	_	
using apprentices?	in a Demanting of the Demanting	eau of Apprenticeship and Training Certificate for each apprentice?

Additional comments:	Y
Additional comments:	
Payroll Form Review	
Contractor/Subcontractor Name*	
Payroll Number	
Date of Payroll	
Comments	
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Form Creator		
Individual File Review (Housing)		Preview Co
Program Area:	CDBG	
Module:	Site Visit	
Form Type:	Standard	
Homeowner File Review		
Homeowners Address*		
Date of signed application		
Date of application approval		
Is documentation from county		
assessor used to ensure the applicant is owner of record	▼	
If not, what was used?		
Does the application include the		
names of the homeowners(s), family	▼	
size, and other demographic information?		
Does the application include		
information on female head of	▼	
household status?		
Is the application form signed and dated?	▼	
Did the household meet the 80% LMI	▼	
requirement?		
What was the applicant's gross annual income?	\$0.00	
List source documents verifying applicant's income:		
Number of household members?		
Date of LMI Chart used?		
Is personal financial information maintained in a separate file with	▼	
adequate security for the data?		
What is the total amount of forgivable loan to applicant?	\$0.00	
Does the forgivable loan equal hard		
cost (not including lead hazard reduction nor project delivery cost)?	▼	
Date of loan agreement or promissory note signed by owner:		
Date mortgage lien was recorded with amount of forgivable loan?		
Initial Inspection / Bidding		
Is a copy of the signed (initialed in	V	
ink) initial inspection form in the file?	T	
What is the date of initial inspection?		
Are standard specifications and/or		
performance used in preparing the work write-ups/project	▼	
specifications?		

specifications?			
Who prepares cost estimates?			
Are cost estimates reviewed by someone else prior to contractor procurement?	•		
Date of publication for bids?		1 m	
Are bid tabulation sheets in file?	▼		
How many contractors bid on project?			
Was the lowest responsible bidder selected?	▼		
Was bid selected cost reasonable (within 10% of the original cost estimate)?	•		
Were all bids itemized?	▼		
Were permits in file?	•		
Hard Construction	\$0.00	\$0.00	\$0.00
	Total	Total with Change Orders	Owner
LBP Hazard Reduction	\$0.00	\$0.00	\$0.00
	Total	Total with Change Orders	Owner
Temporary Relocation	\$0.00	\$0.00	\$0.00
	Total	Total with Change Orders	Owner
Technical Services	\$0.00	\$0.00	\$0.00
	Total	Total with Change Orders	Owner
Lead Based Paint			
Was this specific rehab project			
evaluated for applicability of the Lead Safe Housing Rule (pre Jan 1, 1978) [24 CFR 35.115]	•		
What is the date the homeowner received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Page 142			
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead			
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess			
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used?			
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards?			
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk	•		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or	V		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification	V		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or Repainting:	V		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or Repainting: Were interim controls used?	V V		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or Repainting: Were interim controls used?	V V		
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received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or Repainting: Were interim controls used? Were abatement controls used? If yes, name of abatement contractor: Registration number from Iowa Dept of Public Health: Was temporary relocation assistance	V V		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or Repainting: Were interim controls used? Were abatement controls used? If yes, name of abatement contractor: Registration number from Iowa Dept of Public Health: Was temporary relocation assistance provided? Date of temporary relocation provided: Name of lab where samples were	V V		
received the EPA pamphlet or IDPH pamphlet-Acknowledgement of Receipt? Was a Visual Risk Assessment of Lead Based Paint Hazards Used? Was a XRF machine used to assess Lead Based Paint Hazards? Was notification that LBP or LBP hazards are presumed to be present and Notification of a visual Risk Assessment provided? Was a notification of LBP inspection and risk assessment provided? Date the State of Iowa Notification Prior to Renovation, Remodeling or Repainting: Were interim controls used? Were abatement controls used? If yes, name of abatement contractor: Registration number from Iowa Dept of Public Health: Was temporary relocation assistance provided? Date of temporary relocation provided:	V V		

Date written notification of LBP Hazard reduction completion and final visual risk assessment and clearance testing results to homeowner:	
Summary of description of work completed and final visual risk assessment:	
Environmental (per property)	
U.S. Environmental Protection Agency has s	et an action level of 4 pCi/L or greater.
Has Radon testing been completed?	V
Was the test result within acceptable range?	V
If Radon test levels were greater than the acceptable range, has Radon abatement been completed?	•
Have site specific reviews been completed for noise?	•
Have site specific reviews been completed for contamination?	•
Property Inspection	
Are all rehab work items eligible under the program?	▼
Does the site inspection confirm that the work was done according to the	
work write-ups and the construction contract specifications (including	Y
change orders)? Does the unit meet property	
standards upon completion (cites with population over 15,000 needs to	
comply with locally adopted and enforced codes, standards and	Y
ordinances; all other must use the Iowa's Minimum Housing Standards)?	
Does the unit meet the decent, safe and sanitary test?	V
Does the site inspection confirm reasonable costs, including change orders?	•
Does the site inspection reveal	
professional quality work, including the change orders?	•
Comments:	
Contractor Information	
Date of executed contract:*	
Contractor's name, Company Name and Address	
Registration number from Iowa Dept. of Public Health:	
Date of pre-construction conference:	
State date of construction:	
Original contract amount	

	\$0.00	
Hard construction cost:	\$0.00	
LPB Hazard Reduction cost:	\$0.00	
Is a copy of the contractor's insurance in the file?	▼	
Was it current during construction?	▼	
Is there documentation of contractor clearance certification?	•	
Is there a record of the dates and amounts of disbursements to the contractor(s) in the file?	•	
Does the grantee have effective methods for approving and controlling change orders?	•	
Were there cost adjustments with the change orders?	•	
Are the change orders numbered and properly executed?	Y	
Are lien waivers, including partial waivers, in the file?	Y	
How often are work-in-progress inspections conducted?		
Who conducts the inspections?		
Are inspection reports available in the file?	▼	
Did the recipient retain a percentage of the contract until final inspection and acceptance?	•	
What percentage is held until final payment?	%	
Date the administrator conducted the final inspection with the homeowner:		
Date the homeowner accepted the work and signed the acceptance of work completed:		
Date of the construction completion and/or acceptance:		
Date of final payment, including retainage, to the contractor:		
Does the contractor offer guarantee/warranty on work?	•	
If no, explain how recipient is guaranteeing work and for how long:		
Review of Construction Contract		
Does the contract include the following requir	ed federal contract provisions?	
Access to all records pertinent to that		
contract by the recipient and/or the appropriate federal and state agencies?	▼	
Providing for maintenance of records for five years after project close-out?	•	
Title VI (1964) or Title VII (1968) of Civil Rights Act?	•	
Executive Order 11063 as amended by EO 12259?	▼	
Section 109 of the Housing and Community Development Act of 1974?	▼	
Section 3 of the Housing and urban Development Act of 1968, as amended	•	
(42. U.S.C. 5309)		

Age Discrim Act of 1975, as amended (42 U.S.C. 1601 et seq.) (Not req. if Section 109)?	•	
Section 504 of the Rehabilitation Act of 1973, as amended (P.L. 93-112, 29 U.S.C. 794) - Not required if section 109	V	
Executive Order 11246 as amended by EO 11357 (if contract is > \$10,000)?	•	
Americans with disabilities Act (P.L. 101-336, 42 U.S.C. 120021-12213).	▼	
Federal Executive Order 11375 (contracts over \$10,000).	•	
Termination Clause.	▼	
Also include the following State Requirements	S.	
Iowa civil Right Act of 1965 (Iowa EO 34 and Iowa code chapter 19B.7)	•	
Title VIII of the Civil Rights Act of 1968 (Fair Housing Act)	▼	
Lead Safe Housing Regulations (24 CFR Part 35).	•	
Certification regarding Government- wide Restriction on Lobbying.	▼	
Comments:		

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Acquisition and Relocation		Preview Co
Program Area:	CDBG	
Module:	Site Visit	
Form Type:		
Tomi Typer	Standard	
Instructions		
Not applicable for Housing or DTR projects.		
Did the recipient acquired any real		
property, including temporary and permanent easements?	▼	
Complete this section only if Voluna	itry Acquisition	
Did the recipient advise property		
owners of their rights under the	▼	
Uniform Act either by certified return receipt mail or hand delivery?		
Did the recipient meet all the qualifying criteria to use a voluntary	▼	
transaction?		
Did the recipient notify seller in		
writing that the property would not be	▼	
taken through condemnation if		
negotiations fail?		
Was notification of fair market value	▼	
provided prior to the signing of a purchase offer?	· ·	
If not, was the seller allowed to withdraw from the purchase	▼	
agreement once notified of the fair market value?	· ·	
Complete this section only if Proper Did the recipient advise property	ty Donated	
owners of their rights under the	▼	
Uniform Act either by certified return	·	
receipt mail or hand delivery?		
Was an appraisal conducted?	▼	
If no, did the recipient get an		
approved waiver of appraisal	▼	
statement from property owners?		
Complete this section only if Involu	natry Acquisition	
Did the recipient advise property		
owners of their rights under the Uniform Act either by certified return	▼	
receipt mail or hand delivery?		
Was the property appraised by a		
qualified appraiser prior to	▼	
negotiations?		
Date the appraisal conducted:	-	
Date the review appraisal conducted:		
What appraisal method was used?		

Were appraisal standards followed?	▼	
If no appraisal, was property valued at		
less than \$10,000 or \$25,000 if the		
recipient obtained an approved waiver	▼	
of appraisal statement from property owners?		
Did the recipient provide the property owner a written Notice of Just		
Compensation (written purchase offer)		
for each acquisition taking into	▼	
account the value of allowable damages or benefits to any remaining		
property?		
Man the weither offer count to the		
Was the written offer equal to the appraised fair market value?	▼	
•		
Was a summary statement issued with the written offer?	▼	
Was the written offer greater than the appraised fair market value?	▼	
Was there documentation of an administrative settlement (proof that		
offer does not exceed the cost of	▼	
taking property by eminent domain) in		
the recipient's file?		
Was the offer negotiated after the	▼	
offer to purchase was made?		
Did the recipient exercise its power of		
eminent domain to acquire the	▼	
property?		
Was the purchase payment made prior	▼	
to the property owner transferring the property to the agency?		
	anylog the medicine	mburgod proporty come of the
Is there a final closing cost summary sheet sh	nowing the recipient rei	mbursea property owner for:
recording fees, transfer taxes, title	▼	
opinions, etc.?		
prepayment penalty on a mortgage	▼	
the pro rata share of property taxes?	▼	
litigation expenses?	▼	
ganen enpeneer		
Was the acquired property vacant?	▼	
7646		
If the vacant structures acquired were determined occupiable to low- and		
moderate-income persons, did the	▼	
recipient follow its adopted Residential		
Anti-displacement and Relocation Plan?		
Did the recipient inform the occupant of the basic eligibility requirements	▼	
and relocation benefits?		
Was notification hand delivered or		
mailed by certified/return receipt		
mail?		
Did the relocatee receive:		
a fixed payment for moving expenses?	▼	
actual moving expenses?		
actual moving expenses:		
a housing payment (rental assistance		
payment of up to \$5,250 for 90-day		
tenants or owner-occupants or replacement housing payment of up to	▼	
\$22,500 for 180-day owner-		
occupants)?		
a payment equal to or less than		
property relocation costs for direct		
losses of personal property as a result	▼	
of moving or discontinuing a business or farm operation, equal to the		
average annual earnings not less than		
\$1,000 and not more than \$20,000?		
a payment for actual reasonable		
expenses in searching for a	▼	
replacement business or farm?		

expenses of re-establishing the business not to exceed \$10,000?		
Did the recipient determine that the displacee was eligible for alternative assistance (under Section 104(d) of the Uniform Act)?	•	
What was the type of assistance provided ?		
What was the level of assistance?		
If the recipient provides Relocation Assistance Advisory Services are they adequate (Describe)?		
If the recipient provided	Y	
If relocation was carried out under a third-party contract, how was it done?		
Additional comments:		

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Form Creator		
Career Link - Participant Trainee S	Status	Preview Co
Program Area:	CDBG	
Module:	Site Visit	
Form Type:	Standard	
Number of participant applications approved		
Number of participants currently enrolled in approved classes/training		
Number of participants who have completed listed vocational classes/training		
Number of participants who have taken a job as listed in the Career Link application		
Number of participants who have been offered and accepted other full time employment not listed in application		
Number of participants who have chosen to continue their education towards a degree		
Number of participants in the following applica	able county median income:	
0 - 30%		
31 - 50%		
51 - 60%		
61 - 80%		
Number of participants who have dropped out of program prior to completion		
To date, what is the total cost per person who	has completed training:	
CDBG	\$0.00	
Other:	\$0.00	
What is the anticipated completion date for all training?		
Individual Trainee File Review		
Name of Individual		

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Form Creator		
Administration & Project Adminis	stration	Preview Co
Program Area:	CDBG	
Module:	Site Visit	
Form Type:	Standard	
Administration & Project Adminis	tration	
Administration		
Did the recipient contract for administrative services?		
If yes, name of entity:		
Date of executed contract for administrative services:		
What is the contract maximum or	\$0.00	
Does the contract include all required langua	age including:	
Access to pertinent records by recipient and government agencies?		
Providing for maintenance of records for five years after project close-out?		
Title VI (1964) or Title VIII (1688) of the Civil Rights Act?		
Executive Order 11063? (housing)	•	
Section 109 of the Housing and Community Development Act of 1974?		
Age Discrimination Act of 1975 (not required if Section 109)		
Section 504 of the Rehabilitation Act of 1978 Not required if Section 109)		
Section 3 of the Housing and Urban Development Act of 1968?		
Executive Order 11246 (if contract is greater than \$10,000)?		
Americans with Disabilities Act?		
Notice of awarding agency		
requirements and regulations pertaining to reporting?		
Termination clauses?	▼	
Are the terms of the contract appropriate (not		
Does the contract specify an hourly rate?		
Does the contract provide for optional services at additional costs (hourly,		
lump sum or actual)?		
Additional comments:		

Project Administration			
Number of individual housing rehab projects completed:			
Number of individual housing			
rehabilitation project currently under construction:			
Construction			
Number of applications for assistance			
pending:			
How has the grantee advertised the available	lability of its housi	ng rehabilitation activity?	
Advertised Activity	_	1	
Advertised Activity	▼		
Describe			
2001.00			
Difficulty in obtaining qualified	▼	1	
applicants?			
T6 ulasas dassuibas			
If yes, please describe:			
	pervision of its hou	sing rehabilitation program staff (including	third party) to assure early detection and correc
potential deficiencies or problems?			
Adequate Supervision?	_	1	
Adequate Supervision:	▼		
9. Is there adequate documentation that			
(IEDA will not allow Housing Fund recipi	ents for owner occ	cupied Rehabilitation to have	
a project site located in a floodplain.)	▼		
a project site recated in a modupidini,	·		
14. Is the grantee using escrow account	S		
(or line of credit)?	▼		
(or and or or or our,	·		
a.) Are escrow accounts or Line of			
Credit established on an individual	▼		
account basis?		1	
b.) Are the escrow accounts or line of		1	
Credit interest bearing?	▼		
c.) Is the interest earned being	▼		
properly handled by the grantee?		J	
d.) Does the rehab construction			
contract provide for payments to the	▼		
contractor through an escrow account			
or line of credit?			
e.) Was the contract between the			
contractor and property owner fully			
executed prior to the deposit of funds	▼		
into the escrow account or payment			
from the line of credit?			
f.) Have funds been disbursed from			
the escrow account or line of credit	▼		
within ten (10) days of deposit of			
funds into the account?			
g.) Are the escrow account or line of			
credit funds expended and work	▼		
accepted within the terms of the			
construction contract?			



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Form Creator		
Property Management		Preview Co
Program Area:	CDBG	
Module:	Site Visit	
Form Type:	Standard	
Instructions		
Not applicable for housing projects.		
The second secon		
If the recipient acquired any		
equipment (non-expendable personal property) with an aggregate purchase	▼	
price of \$5,000 or more, did it first receive authorization from IEDA?		
Does the recipient maintain records on		
equipment purchased with federal funds?	▼	
Did the recipient dispose of any		
equipment acquired with CDBG funds?	▼	
If the fair market value was greater		
than \$5,000 at the time of disposition (or at the time when recipient		
transferred use of equipment to	▼	
activities not currently or previously supported by a federal agency), was		
IEDA reimbursed an appropriate		
share?		
Did the recipient dispose of any real property acquired with CDBG funds?	▼	
If so, did the recipient request and		
follow disposition instructions from	▼	
IEDA?		
Additional comments:		
		<u></u> /

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