

PUBLIC FACILITIES AND HOUSING REVIEW

NORTH DAKOTA DEPARTMENT OF COMMERCE

DIVISION OF COMMUNITY SERVICES

SFN 60155 (10/21)

Project Name	Yes	No	N/A
1. Is the applicant an eligible applicant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does the applicant have a Citizen Participation Plan and Code of Conduct?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the applicant completed/updated a 504, if needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Are the following items found and signed in the application?			
a. Front Cover Sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Resolution of Sponsorship (2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Applicant Assurance Certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Fair Housing Certification (4) _____ (from application)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Residential Anti-Displacement and Relocation Assistance Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Needs Assessment (5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. HUD Disclosure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Release of Information – if needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the project consistent with the needs assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the project a high on the Priority Nonhousing Community Development Needs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. What is the eligible activity? (PDS Section II)			
8. Is a Recommendation for Funding included with the application?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Is CDBG funding engineer/architect? Are Brooks Act documents included?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Are the administrative dollars correct? If yes, what is the percentage? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are there commitment letters for other funding sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. National Objective (Documentation must be provided per 24 CFR 570.483)			
a. Activities Benefiting LMI			
1) Area Benefit Activity - is there evidence of LMI statistics? C <input type="checkbox"/> S <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Limited Clientele - are the correct numbers used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Housing Activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Planning Only Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Special Assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Elimination of Slums or Blight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Urgent Need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Required Documentation to Support Benefit Numbers, if Needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Housing Projects (if applicable)			
a. Do the Housing Program Application/Data Collection Forms justify the application?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Are HQS inspections included, if needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Has the region followed their method of distribution (i.e., scoring, funding levels match)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. What is the application score? _____ (Scoring and Ranking documentation must be included)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Was a public hearing held? If yes, when? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Board Minutes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Is there an engineering/architectural report?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DCS USE ONLY	Yes	No	N/A
19. Duns # _____ Can it be verified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Is the Applicant Debarred? Attach documentation from sam.gov.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Requested audit review information from Michelle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Is the overall project eligible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Are there any concerns? If yes, explain below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments