

CDBG Entitlement Program

Guide for Review of National Objective of Low- and Moderate-Income Limited Clientele			
Name of Program Participant:			
Staff Consulted:			
Activity Name, Number and Brief Description:			
Name(s) of Reviewer(s)		Date	

Instructions: Use this Exhibit for activities that are classified by the program participant as meeting the national objective of benefiting a low- and moderate-income limited clientele. One Exhibit is to be completed for each activity reviewed.

Questions:

1.

Under what limited clientele category has the program participant classified this activity (presumed benefit, family size and income, low- and moderate-income eligibility restrictions, or nature and location)?
Describe Basis for Conclusion:

2.

a. If the activity is classified as presumed benefit, do the program participant's files have documentation showing that the activity is limited to one or a combination of the 8 population segments presumed to be low- and moderate-income by HUD: <ul style="list-style-type: none"> • abused children? • battered spouses? • elderly persons? • adults meeting the Bureau of the Census' Population Report's definition of "severely disabled" (current for the time period of this review)? • homeless persons? • illiterate adults? • persons living with AIDS? • migrant farm workers? [24 CFR 570.208(a)(2)(i)(A) and 24 CFR 570.506(b)(3)(i)]	<table style="width: 100%; border: none;"> <tr> <td style="border: none;"><input type="checkbox"/></td> <td style="border: none;"><input type="checkbox"/></td> <td style="border: none;"><input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Yes</td> <td style="border: none;">No</td> <td style="border: none;">N/A</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Yes	No	N/A					
Describe Basis for Conclusion:							
b. If "yes", what segment(s) of the population is/are served by the activity?							

Describe Basis for Conclusion:

3.

<p>a. If the activity is classified under family size and income, does the program participant’s files have documentation showing that at least 51% of the beneficiaries are members of a low- and moderate-income family? [24 CFR 570.208(a)(2)(i)(B) and 24 CFR 570.506(b)(3)(iii)]</p>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Yes</td> <td>No</td> <td>N/A</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Yes	No	N/A					

Describe Basis for Conclusion:

<p>b. If the activity is classified based on income eligibility requirements that restrict it exclusively to low- and moderate-income persons, do the program participant’s files have documentation to support that all persons benefiting are low- and moderate-income? [24 CFR 570.208(a)(2)(i)(C) and 24 CFR 570.506(b)(3)(iii)]</p>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Yes</td> <td>No</td> <td>N/A</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Yes	No	N/A					

Describe Basis for Conclusion:

<p>c. If the activity was classified based on income, were the appropriate Section 8 income limits used by the program participant when checking the income of the persons served (the correct year and the correct family size)? [24 CFR 570.3; 24 CFR 570.208(a)(2)(i)(B) or (C); and 24 CFR 570.506(b)(3)(iii)]</p>	<table border="0"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Yes</td> <td>No</td> <td>N/A</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No	N/A
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Yes	No	N/A					

Describe Basis for Conclusion:

<p>d. How is information on the income status of participants being requested, updated or properly assessed?</p>
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Describe Basis for Conclusion:

4.

If the activity is classified based on the nature and location of the activity, does the program participant's files have documentation to support that the beneficiaries are predominately low- and moderate-income? [24 CFR 570.208(a)(2)(i)(D) and 24 CFR 570.506(b)(3)(ii)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Describe Basis for Conclusion:			

5.

Did your inspection of the records validate the information contained in the Integrated Disbursement and Information System (IDIS) and/or the program participant's most recently-completed Consolidated Annual Performance and Evaluation Report for the activity? [24 CFR 91.525(a)(3)] – Verify in COM IDIS portal	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Describe Basis for Conclusion:			

6.

If you inspected the facility/service, is there evidence to indicate that this activity predominately or exclusively benefits low- and moderate-income persons, based upon the category of presumed benefit selected by the program participant? [24 CFR 570.208(a)(2)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Describe Basis for Conclusion:			

7.

Is the activity properly classified as limited clientele? [24 CFR 570.208(a)(2)]	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Describe Basis for Conclusion:			