

PROPOSED ACTIVITY WORKSHEET
CITY OF MOUNT VERNON
DRAFT

ACTIVITY NAME: _____

DESCRIPTION:

Describe what the activity will do – in support of the Consolidated Plan, how and when it will be accomplished as well as what the estimated cost is.

STEP # 1 ELIGIBILITY

A. Eligible Activity List

Determine if the activity falls within one or more of the categories listed among the basic eligible activities. (See HUD Guide.) If so, name the category. Otherwise, stop. Go no further in qualifying the activity.

B. Examples of Allowable Cost

Determine if the use of CDBG funds relates to one or more examples contained in the HUD Guide. If so, specify the allowable cost.

C. Additional Considerations

If necessary, note that the activity is subject to additional considerations and describe those circumstances.

STEP # 2 PROHIBITION

A. Ineligible Activity Review

Determine if the activity falls within one or more of the categories of prohibited activities. (See HUD Guide.) If so, name the category. Stop and go no further.

B. Further Considerations

If any doubt exists about the above conclusion, engage in further consultations with local and Federal officials. Record the outcome of the consultations.

STEP # 3 NATIONAL OBJECTIVES

A. Criteria for Objectives

Determine if the activity meets the criteria for one or more of the national objectives. (See HUD Guide.) If so, name both the category of national objective and the criterion that it satisfies. Otherwise, stop and go no further.

B. Records to be Maintained

Describe the records to be maintained that document compliance with the above national objective per one of the criteria. Place those records in the file accompanying this Worksheet.

STEP # 4 OVERALL BENEFIT

A. CDBG Funds

Project the expenditure of CDBG funds for the proposed activity over the three-year period covered by the primary benefit certification. Record the total expenditures that are likely to occur in that time period.

B. Calculation of Overall Expenditure Benefit – If necessary, perform the calculation of overall expenditure benefit with the proposed activity included. Note the results below. If the activity should cause a violation of the certification, stop and go no further.

OTHER FEDERAL REQUIREMENTS

List the other Federal requirements that are applicable to this proposed project and will necessarily be addressed in the future.

PROCEDURES COMPLETED BY:

(Name)

(Title)

(Date)