

River Valleys CoC (MN-502)

2017 GENERAL THRESHOLD & NOFA REQUIREMENTS CHECKLIST

To help ensure compliance with regulatory guidelines and local competition requirements, all organizations applying for funds under the HUD CoC Competition must complete the General Threshold Checklist and provide attachments as requested.

New Applicants (organizations without existing HUD CoC grant awards):

For 2017, ALL project applicants must complete and submit the *GENERAL THRESHOLD REQUIREMENTS CHECKLIST with attachments as shown on the following pages*. These documents must be shared via Dropbox. Contact the CoC Coordinator if you need assistance to set up a Dropbox folder.

All organizations should ensure that a copy of this document and the required attachments are also maintained in agency files.

GENERAL THRESHOLD & NOFA REQUIREMENTS CHECKLIST

Please answer the following questions. Refer to the [2017 HUD NOFA Policy Requirements and General Section](#) for additional information as needed. An authorized representative of the organization must sign and date the Checklist. The completed and signed checklist must be delivered to the CoC Coordinator by email or via Dropbox by **August 21, 2017**.

| Yes | No | N/A | GENERAL THRESHOLD REQUIREMENTS CHECKLIST |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Does the Applicant have an active registration in SAMs? Please <u>attach</u> a copy of the SAMs tracking or information page. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Do the DUNS, Tax ID, and applicant name/address on the E-snaps application match what is in SAM? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Is the applicant an eligible applicant? Eligible applicants are nonprofit organizations, States, local governments, and instrumentalities of State and local governments. Public housing agencies, as such term is defined in 24 CFR5.100, are eligible without limitation or exclusion. All non-profit applicants must <u>attach</u> evidence of organizational eligibility (501(c)(3) verification letter) for the applicant agency and all subrecipients. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Does the Applicant have any unresolved civil rights matters as defined in the NOFA Policy Requirements and General Section "Resolution of Outstanding Civil Rights Matters?" If <u>any</u> of these stated conditions can be answered "yes," please <u>attach</u> a detailed description in the General Threshold Requirements Attachments section. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Has the Applicant been debarred or suspended from doing business with the Federal Government, or is the Applicant proposed to be disbarred from doing business with the Federal Government? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Does the applicant have a financial management system that meets the federal standards as described at 2 CFR 200.302? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Does the Applicant have any unresolved delinquent Federal debt? If yes, please <u>attach</u> a detailed description in the General Threshold Requirements Attachments section. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Has an Independent Audit been completed for the applicant agency during the last 18 months? If yes, please submit a copy of the audit or reviewed financial statement. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Does the applicant agree to submit performance and financial reports in accordance with federal OMB guidance and instructions for the program? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Does the applicant agree to participate as requested in HUD-funded research or evaluation? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Do the Applicant <u>and all sub-recipients</u> agree to comply with all Fair Housing and Civil Rights Laws? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Does the Applicant agree to affirmatively further fair housing, as defined by HUD in the NOFA Policy Requirements and General Section? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Does the Applicant agree to ensure meaningful access to its programs and activities for persons with Limited English Proficiency? |

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|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Does the applicant agree to comply with Section 3 (Economic Opportunities for Low- and Very Low-Income Persons), if applicable? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Does the Applicant /Project agree to comply with Section 508 of the Rehabilitation Act to make technology accessible to disabled clients you may |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Does the Applicant agree to comply with the Equal Access to Housing regardless of sexual orientation, gender identity, or marital status requirement? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. If the Applicant is a state agency or agency of a political subdivision of a state, or contracting with such an agency for work performed under a HUD-assisted contract, do they agree to comply with Section 6002 of the Solid Waste Disposal Act? Indicate "N/A" if your agency is NOT a state agency, NOT an agency of a political subdivision of a state, and NOT contracting with such an agency for work performed under a HUD-assisted contract. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. If the Proposed Project involves rehabilitation or new construction, does the Applicant agree to comply with Section 3 of the HUD Act of 1968, 12 USC 1701u and 24 CFR Part135? If not applicable, indicate "N/A" in the box to the left. The 2015 HUD CoC NOFA local process will not approve requests for HUD CoC funds for acquisition, rehabilitation, or new construction. Projects with alternate resources for these costs may submit a request for other CoC eligible activities as described in the NOFA. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. If the Proposed Project involves the acquisition of real property and displacements results from the acquisition, rehabilitation, or demolition of real property, does the Applicant agree to comply with the Uniform Relocation Assistance (URA)? If not applicable, indicate "N/A" in the box to the left. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. If the Proposed Project involves the acquisition of real property, does the applicant agree to comply with the restrictions on use of the power of eminent domain as described in Section 407 of the Consolidated and Further Continuing |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. If the Proposed Project includes physical development activities such as: property acquisition, rehabilitation, conversion, demolition, leasing, repair, or construction, does the Applicant agree to comply with all applicable environmental review requirements? If not applicable, indicate "N/A" in the box |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Does the Applicant agree to comply with the HUD requirement for a Drug Free Workplace as defined in the NOFA Policy Requirements and General Section? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Does the Applicant agree to comply with the HUD requirement for safeguarding of resident / client files as defined in the NOFA Policy |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Is the Applicant aware of and willing to comply with the rules and requirements of the Federal Funding Accountability and Transparency Act, as |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Does the applicant agree to comply with physical accessibility requirements of section 504 of the Rehabilitation Act of 1973 for all HUD-funded activities? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Has the Applicant provided evidence of a current Code of Conduct already recognized by HUD or included a current Code of Conduct with their application that will be submitted to HUD? Provide a copy of either a) HUD's webpage that shows your agency on the approved list, OR (b) your current Code of Conduct that will be submitted via E- |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 27. Has the Applicant included a completed and signed copy of the SF-LLL if applicable? Include a copy of the completed and signed SF-LLL with the e- |

| | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 28. Does the Applicant commit to participation in the local HMIS system? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 29. Does the Applicant commit to participating in the Coordinated Entry system for the CoC region? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 30. Does the Applicant agree to comply with the Prevention of Family Separation provisions as described by HUD? (if applicable) |

NOFA THRESHOLD REQUIREMENTS – ATTACHMENTS LIST

Check "Yes" if the attachment has been included. Check "N/A" if the item is not applicable.

Yes N/A

- 1. **Copy of successful System for Award Management (SAM) registration** or tracking page, including name of Authorized Representative and date of expiration.
- 2. **Verification of Data Unique Numbering System number** issued by Dun and Bradstreet. (This may be included on the SAM tracking page).
- 3. **Explanation regarding any unresolved civil rights matters** as defined in the NOFA Policy Requirements and General Section "Resolution of Outstanding Civil Rights Matters," section. If any of these stated conditions can be answered "yes," please attach a detailed explanation. If not applicable, indicate "N/A" in the box to the left.
- 4. **Explanation regarding any unresolved delinquent Federal debt.** If the Applicant has any unresolved delinquent Federal debt, please attach a detailed explanation. If not applicable, indicate "N/A" in the box to the left.
- 5. **Evidence of Applicant Code of Conduct.** Applicant must provide one of the following:
 - a. A copy of HUD's webpage that shows your agency on the approved list, or
 - b. A copy of your current Code of Conduct that will be submitted via E-Snaps.
- 6. **Organizational and Subrecipient Eligibility Verification: 501(c) 3**
- 7. **Signed statement (below)** indicating that the responses and documents provided in the e- Snaps and in this document are factual and subject to penalties for perjury as described in HUD Regulations.

As an authorized representative of the organization listed below, I have verified and attest to the content of General Threshold Requirements Checklist as submitted.

Agency Name: _____

Name and Position of Representative: _____

Signature: _____ **Date:** _____