CDBG INFRASTRUCTURE CHECKLISTS

Application ..................................................................................................... 2
Grant Agreement ........................................................................................... 3
Monitoring ...................................................................................................... 4
Progress Reports ........................................................................................... 5
Financial Management .................................................................................. 6
Procurement ................................................................................................... 7
Professional Services ..................................................................................... 8
Environmental ............................................................................................... 9
   Exempt ........................................................................................................ 9
   Categorically Excluded Subject to 24 CFR 58.5 ....................................... 10
   Full Assessment .......................................................................................... 11
Federal Requirements .................................................................................... 12
Construction ................................................................................................ 13
Labor Standards ........................................................................................... 14
Closeout Documents ...................................................................................... 15

INFRASTRUCTURE OVERVIEW

These checklists itemize the documentation that will substantiate compliance with applicable CDBG requirements. Grantees must maintain the applicable files for each CDBG project. You may, of course, include additional documentation in your files to show compliance with local requirements or to supplement the items below. This checklist should provide step by step guidance in chronological order of tasks necessary to complete the project.

Revised 4-19
APPLICATION

“CERTIFICATIONS AND ASSURANCES”

Yes __ No __ - HUD applicant disclosure report (Exhibit 1-F)

“PUBLIC PARTICIPATION”

Yes __ No __ - Public meeting notice (Exhibit 1-Q) English & Spanish

Indicate: [ ] Published, Date(s): ___________________

[ ] Posted, Date(s): ___________________

Yes __ No __ - Public meeting

Number of Pre-Selection meetings: ___________________
Number of Post-Selection meetings: ___________________

Indicate: [ ] Notice published/posted at least 10 days prior to the date of the meeting

[ ] Pre-Selection public meeting agenda with required elements (Exhibit 1-Q-1)

[ ] Post-Selection public meeting agenda with required elements (Exhibit 1-Q-2)

[ ] Sign-in sheet(s)

[ ] Meeting minutes (if applicable)

“SURVEY/ACS”

Yes __ No __ - Copy of survey or census data used to meet low/moderate income requirements

Yes __ No __ NA __ - Correspondence/back up data pertinent to the application (if applicable)

“SITE CONTROL”

Yes __ No __ - CDBG Site Certificate

Yes __ No __ NA __ - Deed of trust or other legal document providing ownership, access and/or right of way

Yes __ No __ NA __ - Map(s)

“CASH MATCH/LEVERAGING”

Yes __ No __ NA __ - Supporting documentation for proof of cash match

Yes __ No __ NA __ - Supporting documentation for proof of leveraging

Yes __ No __ NA __ - Supporting documentation for proof of in-kind payment

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited:

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
GRANT AGREEMENT

“PRE-EXECUTION”

Yes ___ No ___ NA ___ - Grant award letter from LGD
Yes ___ No ___ NA ___ - Grantee’s registration in System for Award Management (Exhibit 1-X)
✓ Year #1 registration date ___________; expiration date ____________

“POST-EXECUTION”

Yes ___ No ___ NA ___ - Grant Agreement
Yes ___ No ___ NA ___ - Grantee’s registration in System for Award Management (Exhibit 1-X)
[ ] Year #2 registration date ___________; expiration date ____________
[ ] Year #3 registration date ___________; expiration date ____________

“GRANT AMENDMENTS” (if applicable)

Yes ___ No ___ NA ___ - Letter(s) requesting amendments, with justification(s)
Yes ___ No ___ NA ___ - Grant Agreement amendments #______ thru #_______
Yes ___ No ___ NA ___ - Records or correspondence concerning other grant conditions
Yes ___ No ___ NA ___ - Supporting documentation for increase of leveraging / in-kind payment
(Budget Amendments if applicable)

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s)
cited:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
MONITORING

[ ] Grant execution date: ______________

Yes __ No __ - Project files (centrally located and properly maintained)

Yes __ No __ - EEO posters at grantee office (Exhibits 4-J, 4-J-1)

Yes __ No __ - Fair Housing posters at grantee's office.

“1ST ANNUAL MONITORING”

Yes __ No __ - Monitoring notification from DFA/LGD (letter or email)

Yes __ No __ - Monitoring completion date: ______________

Yes __ No __ - Monitoring review letter and date sent: ______________

Yes __ No __ NA __ - Findings: #__________ (if applicable)

Yes __ No __ NA __ - Concerns: #__________ (if applicable)

Yes __ No __ NA __ - Corrective action deadline: ________________ (if applicable)

Yes __ No __ NA __ - Corrective action date: ________________ (if applicable)

Yes __ No __ NA __ - State's response to clearance of findings and/or concerns (if applicable)

“2nd ANNUAL MONITORING” (if grant expiration date amended)

Yes __ No __ NA __ - Monitoring notification from DFA/LGD (letter or email)

Yes __ No __ NA __ - Monitoring completion date: ______________

Yes __ No __ NA __ - Monitoring review letter and date sent: ______________

Yes __ No __ NA __ - Findings: #__________ (if applicable)

Yes __ No __ NA __ - Concerns: #__________ (if applicable)

Yes __ No __ NA __ - Corrective action deadline: ________________ (if applicable)

Yes __ No __ NA __ - Corrective action date: ________________ (if applicable)

Yes __ No __ NA __ - State's response to clearance of findings and/or concerns (if applicable)

Documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
PROGRESS REPORTS

Reporting Deadlines:

<table>
<thead>
<tr>
<th>Period</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>January – March</td>
<td>April 20th</td>
</tr>
<tr>
<td>April – June</td>
<td>July 20th</td>
</tr>
<tr>
<td>July – September</td>
<td>October 20th</td>
</tr>
<tr>
<td>October – December</td>
<td>January 20th</td>
</tr>
</tbody>
</table>

1st Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

2nd Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

3rd Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

4th Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

5th Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

6th Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

7th Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

8th Report
Yes __ No __ NA __ - Progress report (Exhibit 1-D)
Number of days submitted after deadline: __________
Quality of report: High    Medium    Low

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited: ____________________________________________
FINANCIAL MANAGEMENT

CDBG ACCOUNTING

Yes ___ No ___ - Depository/authorized signatories designation form (Exhibit 1-G)
Yes ___ No ___ NA ___ - Witness certification, if applicable (Exhibit 1-H)
Yes ___ No ___ NA ___ - Substitute w-9 (Exhibit 1-I)
[ ] CDBG-specific checking account
[ ] Voided check or bank letter

Yes ___ No ___ - Insurance for Public Officials Liability (Fidelity Bond)
- Counties: New Mexico County Insurance Authority (or equivalent)
  [ ] Year 1 coverage; expires _______________
  [ ] Year 2 coverage; expires _______________
- Municipalities: New Mexico Self-Insurers Fund (NMSIF) or equivalent
  [ ] Year 1 coverage; expires _______________
  [ ] Year 2 coverage; expires _______________

PAY REQUESTS

Yes ___ No ___ Requests for Payment (Exhibit 1-M) - # _______ thru # _______
✓ Invoices for professional services
✓ Payment applications (ex. AIA) for construction services
✓ Updated payrolls (for construction only)
✓ Proof of payment (cancelled checks)

3 DAY RULE (IF APPLICABLE)

Yes ___ No ___ NA ___ - Grantee Received DFA/LGD Approval of 3 Day Rule
Yes ___ No ___ - Fiscal proof of receipts & disbursements
Yes ___ No ___ - Bank statements, deposit slips, cancelled checks, etc.

CASH MATCH/LEVERAGING

Yes ___ No___ Cash Match/Leveraging (Exhibit 1-J)
✓ Invoices for professional services
✓ Invoices for grant administration
✓ Invoices for construction
✓ Invoices for other

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited: __________________________________________________________
_______________________________________________________________________
________________________________________________________________________

Monitoring and Closeout
As a CDBG grant recipient, the Grantee must adopt by resolution a procurement code on annually to be compliant with the terms and conditions of the grant agreement. The Grantee can adopt the State of New Mexico’s Procurement Code or may adopt the local Procurement Code, so long as it is equal to or more stringent than the State Procurement Code. It is the Grantee’s responsibility to ensure the local Procurement Code meets this criteria. Non-compliance may result in a finding and/or reversion of funds.

Yes __ No __ Does Grantee utilize the State of New Mexico’s procurement code regulations?
[ ] Copy of State of New Mexico Procurement Code
[ ] Meeting minutes and resolution to adopt Code
[ ] Year 1 (Exhibit 1-Y) resolution date ___________; expiration date ___________
[ ] Meeting minutes and resolution to adopt Code
[ ] Year 2 (Exhibit 1-Y) resolution date ___________; expiration date ___________

OR

Yes __ No __ NA __ Does Grantee utilize a local procurement code?
[ ] Copy of local procurement code
[ ] Meeting minutes and resolution to adopt Code
[ ] Year 1 (Exhibit 1-Y) resolution date ___________; expiration date ___________
[ ] Meeting minutes and resolution to adopt Code
[ ] Year 2 (Exhibit 1-Y) resolution date ___________; expiration date ___________

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective actions(s) cited:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
PROFESSIONAL SERVICES

PROCUREMENT PHASE

Yes __ No __ NA __ - DFA acceptance of RFP for administrative services
Yes __ No __ NA __ - DFA acceptance of RFP for design services
Yes __ No __ NA __ - Request for Proposal (RFP) for administrative services *(Exhibit 3-A)*
Yes __ No __ - Request for Proposal (RFP) for design professional services *(Exhibit 3-C)*
Yes __ No __ NA __ - Affidavits of publication for RFP or tear sheet (minimum 14 days allowed for response)
Yes __ No __ NA __ - Copy of minutes for the pre-proposal conference(s) (if applicable)
Yes __ No __ NA __ - Copy of minutes for the opening of proposals
Yes __ No __ NA __ - Certified copy of the RFP evaluation sheet(s)
Yes __ No __ NA __ - Minutes of the Council or Commissioner meeting when the award is made

CONTRACT EXECUTION PHASE

Yes __ No __ NA __ - Contractor/subcontractor clearance form *(Exhibit 1-X)*
  [ ] Contractor Name ______________________________
  [ ] Sub-Consultant Name ______________________________ (if applicable)
  [ ] Sub-Consultant Name ______________________________ (if applicable)
Yes __ No __ NA __ - Copy of the Notice of Award (Use Grantee Letterhead)
Yes __ No __ NA __ - Executed Administrative Services contract *(Exhibit 3-B)* and any related addenda
Yes __ No __ - Executed Engineer/Architect contract *(Exhibit 3-D & 3-E)* and any related addenda
Yes __ No __ NA __ - Campaign contribution form(s) (Chapter 3, page 3-C-14).
Yes __ No __ NA __ - Contractor/subcontractor activity report *(Exhibit 1-E)*
Yes __ No __ NA __ - Letter of Denial to unsuccessful proposers for Administrative services
Yes __ No __ NA __ - Letter of Denial to unsuccessful proposers for Engineer & Architect services
Yes __ No __ - Grantee’s Economic Opportunity for Low and Very Low Income Persons in connection with assisted projects HUD 60002 *(Exhibit 1-U)*

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective actions(s) cited:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
ENVIRONMENTAL REVIEW

Only one Environmental Review checklist should be completed depending on the level of review required. In order for a determination to be made, the Grantee must submit Exhibit 2-A and Exhibit 2-A-1 to DFA/LGD. Once the Agency has made a determination, DFA/LGD will notify the Grantee.

EXEMPT:

Yes ___ No ___ NA ___ - Environmental assessment determination (Exhibit 2-A)
Yes ___ No ___ NA ___ - Certifying Official designation (Exhibit 2-A-1)
Yes ___ No ___ NA ___ - “Transmittal Letter for Finding of Exempt Projects” (Exhibit 2-B) mailed to LGD
Yes ___ No ___ NA ___ - Certification of exemption for CDBG funded projects (Exhibit 2-B-1)
Yes ___ No ___ NA ___ - Compliance document checklist (Exhibit 2-B-2)
Yes ___ No ___ NA ___ - SHPO Notice, if applicable- (Exhibit 2-J)
Yes ___ No ___ NA ___ - Request for release of funds - (Exhibit 2-L)
Yes ___ No ___ NA ___ - Authority to use grant funds- (Exhibit 2-Q), issued by LGD

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited (use additional pages if necessary):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
ENVIRONMENTAL CATEGORICALLY EXCLUDED SUBJECT TO 24 CFR 58.35

Yes __ No __ NA __ - Environmental assessment determination (Exhibit 2-A)
Yes __ No __ NA __ - Certifying Official designation (Exhibit 2-A-1)
Yes __ No __ NA __ - Agency consultation notices (Exhibit 2-I) sent to Agency contact distribution list (Exhibit 2-E) and applicable Native American contact distribution (https://egis.hud.gov/tdat/Query.aspx?state=New Mexico). If the Agency/Native American entity was responsive, submit the response letter. If non-responsive, submit documented proof that at least 2 attempts were made to request consultation. ALL consultation notices must be on Grantee letterhead.
Yes __ No __ NA __ - State Historic Preservation Office (SHPO) Notice (Exhibit 2-J) requesting clearance re: 36 CFR Part 800 regulations; must include pictures and map (flood plain maps, if applicable) sent to SHPO
Yes __ No __ NA __ - Letter from SHPO granting clearance
Yes __ No __ NA __ - Cultural resource survey, if required by SHPO
Yes __ No __ NA __ - Letters from any other interested agencies, groups, etc. (not included in Exhibits 2-E and Native American Tribes) regarding environmental impact of the project, if applicable
Yes __ No __ NA __ - Agency response letter certification (Exhibit 2-I-1) for all non-responsive Agency/Native American contacts
Yes __ No __ NA __ - Letter for floodplain determination (Exhibit 2-F)

If determined to be in a floodplain:

Yes __ No __ NA __ - Floodplain and wetlands early public review notice (Exhibit 2-G) 15 day comment period required prior to publishing notice of explanation; must have copy of actual notice and affidavit of publication/tear sheet. Agency Consultation list (Exhibit 2-E) and applicable Native American Consultation (https://egis.hud.gov/tdat/Query.aspx?state=New Mexico) must be notified with proof of distribution.
Yes __ No __ NA __ - Floodplain and Wetlands Notice of Explanation (Exhibit 2-H); 7 day comment period required prior to proceeding with or publishing any other notice such as Notice of Intent to Request Release of Funds; must have copy of actual notice and affidavit of publication/tear sheet. Agency Consultation List (Exhibit 2-E) and applicable Native American Consultation (https://egis.hud.gov/tdat/Query.aspx?state=New Mexico) must be notified with proof of distribution.
Yes __ No __ NA __ - Insurance Coverage (Exhibit 2-F-1)

Yes __ No __ NA __ - Laws and Authorities Checklist for all Projects (Exhibit 2-N). Indicate each determination made and provide source notes based on the consultation received. See page 3 of Exhibit 2-N for additional guidance.
Yes __ No __ NA __ - Compliance Documentation Checklist (Exhibit 2-B-2)
Yes __ No __ NA __ - Finding of Categorical Exclusion (Exhibit 2-C)
Yes __ No __ NA __ - Certification of Categorical Exclusion Subject to 24 CFR Part 58.5 (Exhibit 2-C-1)
Yes __ No __ NA __ - Transmittal Letter for Categorical Exclusion (Exhibit 2-D)
Yes __ No __ NA __ - Notice of Intent to Request Release of Funds (Exhibit 2-K); 7 day comment period required; must have copy of actual notice and affidavit of publication/tear sheet
Yes __ No __ NA __ - Evidence of Posting Notices, if not published (Exhibit 2-M)
Yes __ No __ NA __ - Request for Release of Funds - (Exhibit 2-L)
Yes __ No __ NA __ - Authority to Use Grant Funds- (Exhibit 2-Q), issued by LGD after State’s public comment period (15 days)
**FULL ENVIRONMENTAL ASSESSMENT (EA)**

Yes ___ No ___ NA ___ - Transmittal Letter for Environmental Assessment (*Exhibit 2-R*)
Yes ___ No ___ NA ___ - Environmental Assessment Determination (*Exhibit 2-A*)
Yes ___ No ___ NA ___ - Certifying Official Designation (*Exhibit 2-A-1*)
Yes ___ No ___ NA ___ - Agency Consultation Notices (*Exhibit 2-I*) sent to Agency Contact Distribution List and applicable Native American Contact Distribution List ([https://egis.hud.gov/tdat/Query.aspx?state=New Mexico](https://egis.hud.gov/tdat/Query.aspx?state=New Mexico)). If the Agency/Native American entity was responsive, submit the response letter. If non-responsive, submit documented proof that at least 2 attempts were made to request consultation. ALL consultation notices **must be on Grantee letterhead**.
Yes ___ No ___ NA ___ - State Historic Preservation Office (SHPO) Notice (*Exhibit 2-J*) requesting clearance re: 36 CFR Part 800 regulations; must include pictures and map (flood plain maps, if applicable) sent to SHPO
Yes ___ No ___ NA ___ - Letter from SHPO granting clearance
Yes ___ No ___ NA ___ - Cultural resource survey, if required by SHPO
Yes ___ No ___ NA ___ - Letters from any other interested agencies, groups, etc. (not included in Exhibits 2-E and applicable Native American Tribes) regarding environmental impact of the project, if applicable
Yes ___ No ___ NA ___ - Agency Response Letter Certification (*Exhibit 2-I-1*) for all Non-Responsive Agency/Native American Contacts
Yes ___ No ___ NA ___ - Letter for Floodplain Determination (*Exhibit 2-F*)

**If determined to be in a Flood Plain:**

Yes ___ No ___ NA ___ - Floodplain and Wetlands Notice of Explanation (*Exhibit 2-H*): 7 day comment period required prior to proceeding with or publishing any other notice such as Notice of Intent to Request Release of Funds; must have copy of actual notice and affidavit of publication/tear sheet. Agency Consultation List (*Exhibit 2-E*) and applicable Native American Consultation List ([https://egis.hud.gov/tdat/Query.aspx?state=New Mexico](https://egis.hud.gov/tdat/Query.aspx?state=New Mexico)) must be notified with proof of distribution.
Yes ___ No ___ NA ___ - Insurance Coverage (*Exhibit 2-F-1*)

Yes ___ No ___ NA ___ - Laws and Authorities Checklist for all Projects (*Exhibit 2-N*). Indicate each determination made and provide source notes based on the consultation received. See page 3 of Exhibit 2-N for additional guidance.
Yes ___ No ___ NA ___ - Environmental Assessment Impact Checklist (*Exhibit 2-O*). Indicate each determination made and provide source notes based on the consultation received. See page 5 of Exhibit 2-O for additional guidance.
Yes ___ No ___ NA ___ - Compliance Documentation Checklist (*Exhibit 2-B-2*)
Yes ___ No ___ NA ___ - Notice of Finding of No Significant Impact & Notice of Intent to Request Release of Funds (*Exhibit 2-P*)
Yes ___ No ___ NA ___ - Evidence of Posting Notices, if not published (*Exhibit 2-M*)
Yes ___ No ___ NA ___ - Request for Release of Funds - (Exhibit 2-L)
Yes ___ No ___ NA ___ - Authority to Use Grant Funds- (Exhibit 2-Q), issued by LGD after State’s public comment period (15 days)
FEDERAL REQUIREMENTS

Plan must be adopted by resolution throughout the life of the grant. The adopted resolution will expire after 1 year and need to be readopted (ex. if the plan was adopted by resolution on 7/1/2098, it needs to be readopted by 7/1/2099 to remain in compliance). The Federal Requirements Plan (Exhibit 1-Z) must be completed and adopted by resolution using the Annual CDBG Resolutions (Exhibit 1-Y). At the anniversary, the Grantee may readopt the same Plan using Exhibit 1-Y.

ANNUAL REQUIREMENTS

Year 1

Yes __ No __ NA __ - Federal Requirements Plan: (Exhibit 1-Z) Date: ______________
✓ Citizen Participation, Fair Housing, Residential Anti-Displacement & Relocation and Section 3

Yes __ No __ NA __ - Resolution to adopt federal requirements plan (Exhibit 1-Y)
- Year 1 resolution date ___________; expiration date _____________

Yes __ No __ NA __ - Grantee Section 3 Plan Chart (Exhibit 1-Y)

Yes __ No __ NA __ - Meeting minutes

Year 2

Yes __ No __ NA __ - Resolution to adopt federal requirements plan (Exhibit 1-Y)
- Year 2 resolution date ___________; expiration date _____________

Yes __ No __ NA __ - Updated Grantee Section 3 Plan Chart (Exhibit 1-Y)

Yes __ No __ NA __ - Meeting minutes

ADDITIONAL REQUIREMENTS

Yes __ No __ NA __ - Fair Housing Self-Assessment (Exhibit 1-O-2)

Yes __ No __ NA __ - Evidence of activity to further fair housing, one per project.

Yes __ No __ NA __ - Grantee Work Force Analysis or EEO-4 form (Exhibit 1-S)
[ ] Year 1 submission date ___________; expiration date _____________
[ ] Year 2 submission date ___________; expiration date _____________

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
CONSTRUCTION

PROCUREMENT PHASE

Yes __ No __ - Approval of Plans/specs & Bid Documents by authoritative agencies
Yes __ No __ - Approval by DFA/LGD of Plans/specs & Bid Documents
Yes __ No __ - Affidavit of publication and/or tear sheet of the invitation/notice for bids
Yes __ No __ NA __ - Solicitation list and copy of the transmittal letters of those contractors whom
may be solicited for bids
Yes __ No __ - NMDWS Wage Rate Decision #________________
Yes __ No __ - Initial Request Federal Wage Rates (Exhibit 4-C); Decision #________
Yes __ No __ - Minutes of pre-bid conference
Yes __ No __ - 10 (ten) day call Federal Wage Rates (Exhibit 4-C); Decision #________
Yes __ No __ - Copy of the bid opening minutes. (Exhibit 4-E)
Yes __ No __ - Certified copy of the bid tabulation sheet(s)
Yes __ No __ - Copy of the letter of recommendation from the engineer/architect of record
Yes __ No __ - Contractor/Subcontractor Clearance Form (Exhibit 1-X)

NOTE: Contractor/Subcontractor Clearance Form must be completed for
each individual contractor working on the job
[ ] Contractor Name ______________________________
[ ] Sub-Contractor Name ______________________________ (if applicable)
[ ] Sub-Contractor Name ______________________________ (if applicable)
[ ] Sub-Contractor Name ______________________________ (if applicable)
[ ] Sub-Contractor Name ______________________________ (if applicable)

(MUST HAVE DFA/LGD APPROVAL OF PROCUREMENT PRIOR TO PRE-CON)
Yes __ No __ - DFA/LGD verifies that bid amount consistent with construction budget line item
Yes __ No __ - DFA/LGD written approval of procurement procedure (email or letter)

PRE-CONSTRUCTION CONFERENCE

Yes __ No __ - Copy of the minutes of the Council meeting when the award is made
Yes __ No __ - Copy of the notice of award/preconstruction conference. (Exhibit 4-G)
Yes __ No __ - Contract execution between "Owner" and "Contractor" to include: contract/bid
documents with required bonds (Labor and Material Payment Bond with associated
power of attorney and Performance Bond with associated power of attorney),
certifications, any related addenda, change orders, etc. (Exhibit 4-A)
Yes __ No __ - Grantee’s Economic Opportunity for Low and Very Low Income Persons in
connection with assisted projects HUD 60002 (Exhibit 1-U)
Yes __ No __ NA __ - Section 3 contractor certification form (Exhibit 1-V), if applicable
Yes __ No __ - Contractor and Subcontractor Activity Report (Exhibit 1-E)
Yes __ No __ NA __ - Copies of the written notification to all other unsuccessful bidders, if any

DFA/LGD CONCURRENCE

Yes __ No __ - Funding Agency (DFA/ LGD) concurrence of construction contract to include:
contract/bid documents with required bonds (Labor and Material Payment Bond with
associated power of attorney and Performance Bond with associated power of
attorney), certifications, any related addenda, change orders, etc. (Exhibit 4-A)
Yes __ No __ NA __ - Copy of the notice to proceed (Exhibit 4-M)
Yes __ No __ NA __ - Minutes of the pre-construction conference (Exhibit 4-L)
Yes __ No __ NA __ - Designation of a Labor Standards Compliance Officer (Exhibit 4-N)
Yes __ No __ NA __ - Approval of Plans/specs & Bid Documents by CID (public facility projects
only)
LABOR STANDARDS

DO NOT BREAK GROUND WITHOUT DFA/LGD CONCURRENCE OF CONSTRUCTION CONTRACT, FAILURE TO DO SO WILL RESULT IN A FINDING AND COULD RESULT IN A REVERSION OF FUNDS

CONSTRUCTION-SITE SIGNAGE REQUIREMENTS

Yes __ No __ NA __ - New Mexico CDBG sign with Community Development Council Members
Yes __ No __ NA __ - Copy of state wage decision(s)
Yes __ No __ NA __ - Copy of federal wage decision(s)
Yes __ No __ NA __ - Notice to all employees (Exhibit 4-H)
Yes __ No __ NA __ - Employee Rights notice (Exhibit 4-H-1)
Yes __ No __ NA __ - Right to a Healthful Workplace (Exhibit 4-I)
Yes __ No __ NA __ - Right to a Healthful Workplace Spanish (Exhibit 4-I-1)
Yes __ No __ NA __ - Equal Opportunity is the Law (Exhibit 4-J)
Yes __ No __ NA __ - Equal Opportunity is the Law (Exhibit 4-J) Spanish
Yes __ No __ NA __ - Questions concerning EEO (Exhibit 4-K)

PAYROLL

Yes __ No __ NA __ - Weekly payrolls and statement of compliance (Exhibits 4-P)
Yes __ No __ NA __ - Weekly payroll review worksheet (Exhibit 4-U)
  Federal Wage Decision ____________, which was in effect
  State Wage Decision ____________, which was in effect
  Total # of weekly payrolls ____________ thru ____________

INTERVIEWS

Yes __ No __ NA __ - Monthly employee interviews (Exhibit 4-O)
  Yes __ No __ - Employee interviews occurred each month during construction
  Month construction started ____________ thru completion ____________
Yes __ No __ NA __ - Employee interviews were conducted for approximately 10% of each job
  classification on site
Yes __ No __ NA __ - Evidence that contractor is complying with Apprenticeship & Training Act, if
  applicable
Yes __ No __ NA __ - Section 3 new hire certification form (Exhibit 1-W), if applicable

WAGE / OVERTIME VIOLATIONS

Yes __ No __ NA __ - Overtime Violation Report (Exhibit 4-Q)
Yes __ No __ NA __ - Final Wage Compliance Report (Exhibit 4-R)
Yes __ No __ NA __ - Employee Restitution Receipt (Exhibit 4-R-1)
Yes __ No __ NA __ - Federal and State Wage Violation Tracking Sheet (Exhibit 4-R-2)
Yes __ No __ NA __ - Correspondence pertaining to any violations and wage restitutions

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s)
cited:
__________________________________________________________________________
__________________________________________________________________________
## CLOSEOUT DOCUMENTS

### CLOSEOUT PUBLIC MEETING

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>NA</th>
<th>-</th>
<th>Closeout Public meeting notice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Public meeting notice published/posted at least 10 days prior to the date of the meeting</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Date(s) notice was published and/or posted: __________________________</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Closeout Public meeting minutes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Date(s) public meeting was held:</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Public meeting agenda with required elements (<a href="#">Exhibit 1-Q-1</a>)</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Sign-in sheet(s)</td>
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</table>

### FINAL CLOSEOUT

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>NA</th>
<th>-</th>
<th>Architect or Engineer's letter of final acceptance or certificate of substantial completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>A copy of record (as-builts) drawings</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Architect &amp; Engineer Certification Compliance (ADA) (<a href="#">Exhibit 4-D</a>)</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
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<td>Construction Contractor Checklist (<a href="#">Exhibit 4-T</a>)</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Final inspection report</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Final HUD Recipient Disclosure Report (<a href="#">Exhibit 1-F</a>) must be updated</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Grantee's statement of acceptance (signed by Chief Elected Official)</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Contractors affidavit of compliance and all lien releases</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Contractor's letter stating no subcontractors were employed, if applicable</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
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<td>Written Consent of Surety, if any, to final payment</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
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<td>Permanent Certificate of Occupancy issued by Construction Industries Division, if applicable</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Design Professional and Contractor final billings, final drawdown request to make final payment to design professional and contractor</td>
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<tr>
<td>Yes</td>
<td>No</td>
<td>NA</td>
<td>-</td>
<td>Final change order with tabulation of over runs and under runs</td>
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<td>Yes</td>
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<td>NA</td>
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<td>Final Progress Report (<a href="#">Exhibit 1-D-1</a>)</td>
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<td>Yes</td>
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<td>NA</td>
<td>-</td>
<td>Final Request for Payment/Financial Status Report (<a href="#">Exhibit 1-M</a>)</td>
</tr>
</tbody>
</table>

Other documents, comments and/or concern(s)/recommendation(s), finding(s)/corrective action(s) cited:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

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Monitoring and Closeout Page 15