

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Program Announcement; Request for Applications Under the Office of Community Services' Fiscal Year 2000 Community Food and Nutrition Program

[Program Announcement No. OCS-2000-03]

**AGENCY:** Office of Community Services, Administration for Children and Families, Department of Health and Human Services.

**ACTION:** Request for applications under the Office of Community Services' Community Food and Nutrition Program (CFNP).

**SUMMARY:** The Administration for Children and Families (ACF), Office of Community Services (OCS), announces that competing applications will be accepted for new grants pursuant to the Secretary's discretionary authority under Section 681 of the Community Services Block Grant Act, as amended. This Program Announcement contains forms and instructions for submitting an application. The awarding of grants under this Program Announcement is subject to the availability of funds for support of these activities.

**CLOSING DATE:** The closing date for submission of applications is December 6, 1999. Mailed applications postmarked after the closing date will be classified as late.

**FOR FURTHER INFORMATION CONTACT:** Administration for Children and Families, Office of Community Services, Division of Community Discretionary Programs, 370 L'Enfant Promenade S.W., Washington DC 20447, Fax (202) 401-4687. Contact: Catherine Rivers, (202) 401-5252, Deloris Horton, (202) 401-9363.

This Program Announcement is accessible on the OCS Website for reading or downloading at: [www.acf.dhhs.gov/programs/ocs/kits1.htm](http://www.acf.dhhs.gov/programs/ocs/kits1.htm).

#### Application Submission

**Mailing Address:** CFNP Applications should be mailed to the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Grants Management/OCSE, 4th Floor West, Aerospace Center, 370 L'Enfant Promenade, SW, Washington, D.C. 20447; Attention: Application for Community Food and Nutrition Program.

**Number of Copies Required:** One signed original application and four copies should be submitted at the time of initial submission. (OMB-0970-0062, expiration date 10/31/2001).

**Submission Instructions:** Mailed applications shall be considered as meeting an announced deadline if they are either received on or before the deadline date or sent on or before the deadline date and received by ACF in time for the independent review.

Applications mailed must bear a legibly dated U.S. Postal Service postmark or a legibly dated, machine produced postmark of a commercial mail service affixed to the envelope/package containing the application(s). To be acceptable as proof of timely mailing, a postmark from a commercial mail service must include the logo/emblem of the commercial mail service company and must reflect the date the package was received by the commercial mail service company from the applicant. Private Metered postmarks shall not be acceptable as proof of timely mailing. (Applicants are cautioned that express/overnight mail services do not always deliver as agreed.)

Applications handcarried by applicants, applicants couriers, or by other representatives of the applicant shall be considered as meeting an announced deadline if they are received on or before the deadline date, between the hours of 8:00 a.m. and 4:30 p.m., EST, at the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Grants Management/OCSE, ACF Mailroom, 2nd Floor Loading Dock, Aerospace Center, 901 D Street, SW, Washington, D.C. 20024, between Monday and Friday (excluding Federal holidays). The address must appear on the envelope/package containing the application with the note: Attention: Application for Community Food and Nutrition Program. (Applicants are again cautioned that express/overnight mail services do not always deliver as agreed.)

ACF cannot accommodate transmission of applications by fax or through other electronic media. Therefore, applications transmitted to ACF electronically will not be accepted regardless of date or time of submission and time of receipt.

Once submitted, applications are considered final and no additional materials will be accepted.

**Late Applications:** Applications which do not meet the criteria above are considered late applications. ACF shall notify each late applicant that its

application will not be considered in the current competition.

**Extension of Deadlines:** ACF may extend application deadlines when circumstances such as acts of God (floods, hurricanes, etc.) occur, or when there are widespread disruptions of the mail service. Determinations to extend or waive deadline requirements rest with ACF's Chief Grants Management Officer.

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##### Part A—Preamble

###### 1. Legislative Authority

The Community Services Block Grant Act, as amended, authorizes the Secretary of Health and Human Services to make funds available under several programs to support program activities which will result in direct benefits targeted to low-income people. This Program Announcement covers the grant authority found at Sections 681(a) and (b), Community Food and Nutrition, which authorizes the Secretary to make funds available for grants to be awarded

on a competitive basis to eligible entities for community based, local and statewide programs: (1) To coordinate private and public food assistance resources, wherever the grant recipient involved determines such coordination to be inadequate, to better serve low-income populations; (2) to assist low-income communities to identify potential sponsors of child nutrition programs and to initiate such programs in underserved or unserved areas; and (3) to develop innovative approaches at the State and local level to meet the nutrition needs of low-income individuals.

## 2. Definitions of Terms

For purposes of this Program Announcement the following definitions apply:

**Budget period:** The term "budget period" refers to the interval of time into which a grant period of assistance (project period) is divided for budgetary and funding purposes.

**Displaced worker:** An individual who is in the labor market but has been unemployed for six months or longer.

**Eligible entity:** States, public agencies, and public and private non-profit agencies/organizations including Community Action Agencies. (See Part B-1)

**Indian tribe:** A tribe, band, or other organized group of Native American Indians recognized in the State or States in which it resides or considered by the Secretary of the Interior to be an Indian tribe or an Indian organization for any purpose.

**Innovative project:** One that departs from or significantly modifies past program practices and tests a new approach.

**Migrant farmworker:** An individual who works in agricultural employment of a seasonal or other temporary nature who is required to be absent from his/her place of permanent residence in order to secure such employment.

**Program income:** Gross income earned by the grant recipient that is directly generated by an activity supported with grant funds.

**Project period:** The term "project period" refers to the total time for which a project is approved for support, including any approved extensions.

**Seasonal farmworker:** Any individual employed in agricultural work of a seasonal or other temporary nature who is able to remain at his/her place of permanent residence while employed.

**Self-sufficiency:** A condition where an individual or family does not need and is not eligible for public assistance.

**Underserved area** (as it pertains to child nutrition programs): A locality in

which less than one-half of the low-income children eligible for assistance participate in any child nutrition program.

## 3. Purpose of Community Food and Nutrition Program

The Department of Health and Human Services (DHHS) is committed to improving the overall health and nutritional well-being of individuals through improved preventive health care and promotion of personal responsibility. The DHHS encourages the approach to health promotion and nutritional responsibility with personal messages aimed at families and communities, in various settings and environments in which individuals and groups can most effectively be reached.

The DHHS is specifically interested in improving the health and nutrition status of low-income persons through improved access to healthy nutritious foods or by other means. The DHHS encourages community efforts to improve the coordination and integration of health and social services for all low-income families, and to identify opportunities for collaborating with other programs and services for this population. Such collaboration can increase a community's capacity to leverage resources and promote an integrated approach to health and nutrition through existing programs and services.

## 4. Project Requirements

Projects funded under this program should:

(a) Be designed and intended to provide nutrition benefits, including those which incorporate the benefits of disease prevention, to a targeted low-income group of people;

(b) Provide outreach and public education to inform eligible low-income individuals and families of other nutritional services available to them under the various Federally-assisted programs;

(c) Carry out targeted communications/social marketing to improve dietary behavior and increase program participation among eligible low-income populations. Populations to be targeted can include displaced workers, elderly people, children, and the working poor.

(d) Consult with and/or inform local offices that administer other food programs such as W.I.C. and Food Stamps, where applicable, to ensure effective coordination which can jointly target services to increase their effectiveness. Such consultation may include involving these offices in the planning of grant applications.

(e) Focus on one or more legislatively-mandated program activities: (1) Coordination of private and public food assistance resources, wherever the grant recipient involved determines such coordination to be inadequate, to better serve low-income populations; (2) Assistance to low-income communities in identifying potential sponsors of child nutrition programs and initiating such programs in unserved or underserved areas; and (3) Development of innovative approaches at the state and local level to meet the nutrition needs of low-income individuals.

The OCS views this program as a capacity building program, rather than as a service delivery program.

## Part B—Application Requirements

### 1. Eligible Applicants

Eligible applicants are States, public agencies, and public and private non-profit agencies/organizations with a demonstrated ability to successfully develop and implement programs and activities similar to those enumerated above. The OCS encourages Historically Black Colleges and Universities and minority institutions to submit applications. Eligible applicants with programs benefitting Native Americans and Migrant Farmworkers are also encouraged to submit applications.

Any non-profit organization submitting an application must submit proof of its non-profit status in its application at the time of submission. The non-profit agency can accomplish this by providing a copy of the applicant's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in Section 501(c)(3) of the IRS tax code or by providing a copy of the currently valid IRS tax exemption certificate, or by providing a copy of the applicant's Articles of Incorporation bearing the seal of the State in which the corporation or association is domiciled.

### 2. Availability of Funds and Grant Amounts

#### a. Fiscal Year 2000 Funding

All grant awards are subject to the availability of appropriated funds. The Office of Community Services expects to award approximately \$2,000,000 for grant awards under the CFNP in Fiscal Year 2000 for General Projects.

#### b. Grant Amounts

No individual grant application will be considered for an amount which is in excess of \$50,000.

### c. Mobilization of Resources

The OCS would like to mobilize as many resources as possible to enhance projects funded under this program. The OCS supports and encourages applications submitted by applicants whose programs will leverage other resources, either cash or third party in-kind.

#### 3. Project Periods and Budget Periods

For most projects, OCS will grant funds for one year. However, in rare instances, depending on the characteristics of any individual project and on the justification presented by the applicant in its application, a grant may be made for a period of up to 17 months.

#### 4. Administrative Costs/Indirect Costs

There is no administrative cost limitation for projects funded under this program. Indirect costs consistent with approved indirect cost rate agreements are allowable. Applicants should enclose a copy of the current approved rate agreement. However, it should be understood that indirect costs are part of, and not in addition to, the amount of funds awarded in the subject grant.

#### 5. Program Beneficiaries

Projects proposed for funding under this Announcement must result in direct benefits targeted toward low-income people as defined in the most recent annual update of the Poverty Income Guidelines published by DHHS. Attachment A to this Announcement is an excerpt from the most recently published guidelines. Annual revisions of these guidelines are normally published in the **Federal Register** in February or early March of each year and are applicable to projects being implemented at the time of publication. Grantees will be required to apply the most recent guidelines throughout the project period. The **Federal Register** may be obtained from public libraries, Congressional offices, or by writing the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. The **Federal Register** is also available on the Internet through GPO Access at the following web address: [http://www.access.gpo.gov/su\\_docs/aces/aces140.html](http://www.access.gpo.gov/su_docs/aces/aces140.html)

No other government agency or privately defined poverty guidelines are applicable to the determination of low-income eligibility for this OCS program.

#### 6. Number of Projects in Application

An application may contain only one project and this project must address the basic criteria found in Parts C and D. Applications which are not in

compliance with these requirements will be ineligible for funding.

#### 7. Multiple Submittals

There is no limit to the number of applications that can be submitted as long as each application is for a different project. However, no applicant can receive more than one grant.

#### 8. Sub-Contracting or Delegating Projects

The OCS will not fund any project where the role of the eligible applicant is primarily to serve as a conduit for funds to other organizations.

### Part C—Program Area

#### General Projects

The application should include a description of the target area and population to be served as well as a discussion of the nature and extent of the problem to be solved. The application must contain a detailed and specific work program that is both sound and feasible. Projects funded under this Announcement must produce permanent and measurable results that fulfill the purposes of this program as described above. The OCS grant funds, in combination with private and/or other public resources, must be targeted to low-income individuals and communities.

Applicants will certify in their submission that projects will only serve the low-income population as stipulated in the DHHS Poverty Income Guidelines (Attachment A). Failure to comply with the income guidelines may result in the application being ineligible for consideration for funding.

If an applicant is proposing a project which will affect a property listed in or eligible for inclusion in the National Register of Historic Places, it must identify this property in the narrative and explain how it has complied with the provisions of Section 106 of the National Historic Preservation Act of 1966 as amended. If there is any question as to whether the property is listed in or eligible for inclusion in the National Register of Historic Places, applicant should consult with the State Historic Preservation Officer. The applicant should contact OCS early in the development of its application for instructions regarding compliance with the Act and data required to be submitted to DHHS.

In the case of projects proposed for funding which mobilize or improve the coordination of existing public and private food assistance resources, the guidelines governing those resources apply. However, in the case of projects

providing direct assistance to beneficiaries through grants funded under this program, beneficiaries must fall within the official DHHS Poverty Income Guidelines as set forth in Attachment A.

Applications that propose the use of grant funds for the development of any printed or visual materials must contain convincing evidence that these materials are not available from other sources. The OCS will not provide funding for such items if justification is not sufficient. Approval of any films or visual presentations proposed by applicants approved for funding will be made part of the grant award. In cases where material outlays for equipment (audio and visual) are requested, specific evidence must be presented that there is a definite programmatic connection between the equipment (audio and visual) usage and the outreach requirements described in Part A-3 of this Announcement.

The OCS is also interested in projects that address the needs of homeless families and welcomes applications that seek to develop innovative approaches to promote health and nutritional awareness among low-income populations.

### Part D—Review Criteria

Applications that pass the initial screening and pre-rating review (see Part F, section 4) will be assessed and scored by reviewers. Each reviewer will give a numerical score for each application reviewed. These numerical scores will be supported by explanatory statements on a formal rating form describing major strengths and weaknesses under each applicable criterion published in the Announcement.

The in-depth evaluation and review process will use the following criteria coupled with the specific requirements as described in Part F.

When writing their Project Narrative, applicants should respond to the review criteria using the same sequential order.

**Note:** The following review criteria reiterate the information requirements contained in Part B of this Announcement.

#### Criteria for Review and Evaluation of Applications Submitted Under This Program Announcement

##### a. Criterion I: Analysis of Needs/Priorities (Maximum: 10 Points)

(1) Target area and population to be served are adequately described. (0-4 Points)

In addressing the above criterion, the applicant should include a description of the target area and population to be

served including specific details on any minority population(s) to be served.

(2) Nature and extent of problem(s) and/or need(s) to be addressed are adequately described and documented. (0–6 Points)

In addressing the above criterion, the applicant should include a discussion of the nature and extent of the problem(s) and/or need(s), including specific information on minority populations(s).

b. Criterion II: Adequacy of Work Program (Maximum: 25 Points)

(1) Realistic quarterly time targets are set forth by which the various work tasks will be completed. (0–10 Points)

(2) Activities are adequately described and appear reasonably likely to achieve results which will have a desired impact on the identified problems and/or needs. (0–15 Points)

In addressing the above criterion, the applicant should address the basic criteria and other mandated activities found in Part A–4 and should include:

a. Project priorities and rationale for selecting them which relate to the specific nutritional problem(s) and/or need(s) of the target population which were identified under Criterion I;

b. Goals and objectives that speak to the(se) problem(s) and/or need(s); and

c. Project activities that, if successfully carried out, can be reasonably expected to result in the achievement of these goals and objectives.

c. Criterion III: Significant and Beneficial Impact (Maximum: 30 Points)

(1) Applicant proposes to significantly improve or increase nutrition services to low-income people and such improvements or increases are quantified. (0–15 Points)

(2) Project incorporates promotional health and social services activities for low-income people, along with nutritional services. (0–5 Points)

(3) Project will significantly leverage or mobilize other community resources and such resources are detailed and quantified. (0–5 Points)

(4) Project addresses problem(s) that can be resolved by one-time OCS funding or demonstrates that non-Federal funding is available to continue the project without Federal support. (0–5 Points)

In addressing the above criterion, the applicant must include quantitative data for items (1), (2), and (3), and discuss how the beneficial impact relates to the relevant legislatively-mandated program activities identified in Part A–1 and the problems and/or needs described under Criterion I.

d. Criterion IV: Coordination/Services Integration (Maximum: 15 Points)

(1) Project shows evidence of coordinated community-based planning in its development, including strategies in the work program to carry on activities in collaboration with other locally-funded Federal programs (such as DHHS health and social services and USDA Food and Consumer Service programs) in ways that will eliminate duplication and will, for example, (1) unite funding streams at the local level to increase program outreach and effectiveness, (2) facilitate access to other needed social services by coordinating and simplifying intake and eligibility certification processes for clients, or (3) bring project participants into direct interaction with holistic family development resources in the community where needed. (0–10 Points)

(2) Community Empowerment Consideration—Special consideration will be given to applicants who are located in areas which are characterized by poverty and other indicators of socio-economic distress such as a poverty rate of at least 20 percent, designation as an Empowerment Zone or Enterprise Community, high levels of unemployment, and high levels of incidences of violence, gang activity, crime, or drug use. Applicants should document that they were involved in the preparation and planned implementation of a comprehensive community-based strategic plan to achieve both economic and human development in an integrated manner. (0–5 Points)

If the applicant is receiving funds from the State for community food and nutrition activities, the applicant should address how the funds are being utilized, and how they will be coordinated with the proposed project to maximize the effectiveness of both. If State funds are being used in the project for which OCS funds are being requested, their usage should be specifically described.

e. Criterion V: Organizational Experience in Program Area and Staff Responsibilities (Maximum: 15 Points)

(1) Organizational Experience in Program Area (0–5 Points)

Documentation provided indicates that projects previously undertaken have been relevant and effective and have provided permanent benefits to the low-income population. Organizations that propose providing training and technical assistance have detailed competence in the program area and as a deliverer with expertise in the fields of training and technical assistance. If

applicable, information provided by these applicants also addresses related achievements and competence of each cooperating or sponsoring organization.

(2) Management History (0–5 Points)

Applicants must demonstrate their ability to implement sound and effective management practices and if they have been recipients of other Federal or other governmental grants, they must also document that they have consistently complied with financial and program progress reporting and audit requirements. Such documentation may be in the form of references to any available audit or progress reports and should be accompanied by a statement by a Certified or Licensed Public Accountant as to the sufficiency of the applicant's financial management system to protect adequately any Federal funds awarded under the application submitted.

(3) Staffing Skills, Resources and Responsibilities (0–5 Points)

The application adequately describes the experience and skills of the proposed project director showing that the individual is not only well qualified, but that his/her professional capabilities are relevant to the successful implementation of the project. If the key staff person has not yet been identified, the application contains a comprehensive position description which indicates that the responsibilities to be assigned to the project director are relevant to the successful implementation of the project. The application must indicate that the applicant has adequate facilities and resources (*i.e.* space and equipment) to successfully carry out the work plan.

In addressing the above criterion, the applicant must clearly show that sufficient time of the Project Director and other senior staff will be budgeted to assure timely implementation and oversight of the project and that the assigned responsibilities of the staff are appropriate to the tasks identified for the project.

f. Criterion VI: Adequacy of Budget (Maximum: 5 Points)

The budget is adequate and administrative costs are appropriate in relation to the services proposed. (0–5 Points)

#### **Part E—Instructions for Completing Application Package**

The standard forms attached to this Announcement shall be used when submitting applications for all funds under this Announcement. It is recommended that you reproduce

single-sided copies of the SF-424, SF-424A and SF-424B, and type your application on the copies.

Please prepare your application in accordance with the instructions provided with the forms, as well as with the OCS specific instructions set forth below:

1. SF-424—Application for Federal Assistance (Attachment B-1)

Item 1. *Type of Submission*—For the purposes of this Announcement, all projects are considered Applications; there are no Pre-Applications.

Item 2. *Date Submitted and Applicant Identifier*—Enter the date the application is submitted to ACF and the applicant's internal control number, if applicable.

Item 3. *Date Received by State*—N/A.

Item 4. *Date Received by Federal Agency*—Leave blank.

Items 5. and 6. *Applicant Information and Employer Identification Number*—The legal name of the applicant must match that listed as corresponding to the Employer Identification Number. Where the applicant is a previous DHHS grantee, enter the Central Registry System/Employee Identification Number (CRS/EIN) and the Payment Identifying Number (PIN), if one has been assigned, in the Block entitled Federal Identifier located at the top right hand corner of the form.

Item 7. *Type of Applicant*—If the applicant is a non-profit corporation, enter the letter "N" in the box and specify non-profit corporation in the space marked "Other". Proof of non-profit status, such as IRS certification, Articles of Incorporation, or By-laws must be included as an appendix to the project narrative.

Item 8. *Type of Application*—Check "New".

Item 9. *Name of Federal Agency*—Enter "DHHS-ACF/OCS."

Item 10. *The Catalog of Federal Domestic Assistance (CFDA) Number*—The CFDA number for the OCS program covered under this Announcement is 93.571. The title is "Community Services Block Grant Discretionary Awards—Community Food and Nutrition Program".

Item 11. *Descriptive Title of Project*—Enter a brief descriptive title of the project.

Item 12. *Areas Affected by Project*—List only the largest unit or units affected, such as State, county or city.

Item 13. *Proposed Project Dates*—Show 12-month project period. (See Part B-3) In addition, the project period start date must be on or before September 30, 2000.

Item 14. *Congressional District of Applicant/Project*—Enter the number(s) of the Congressional District where the applicant's principal office is located and the number(s) of the Congressional District(s) where the project will be located.

Item 15. *Estimated Funding*—15a. Show the total amount requested for the entire project period; 15b. thru 15e. For each line item, show both cash and third-party in-kind contributions for the total project period; 15f. Show the estimated amount of program income for the total project period; 15g. Enter the sum of all the lines.

2. SF-424A—Budget Information—Non-Construction Programs (Attachment B-2)

See the instructions accompanying the Attachment as well as the instructions set forth below.

In completing these sections, the Federal funds budget entries will relate to the requested OCS Community Food and Nutrition Program funds only, and Non-Federal will include mobilized funds from all other sources—applicants, State, and other. Federal funds other than those requested from the Community Food and Nutrition Program should be included in Non-Federal entries.

Sections A and D of SF-424A must contain entries for both Federal (OCS) and non-Federal (mobilized) funds.

Section A—Budget Summary

Lines 1-4

—Column (a) Line 1—Enter OCS CFNP.  
—Column (b) Line 1—Enter 93.571.  
—Columns (c) and (d)—Not Applicable.  
—Columns (e), (f) and (g)—For lines 1 through 4, enter in appropriate amounts needed to support the project for the entire project period.

Line 5

Enter the figures from Line 1 for all columns completed, (e), (f), and (g).

Section B—Budget Categories

This section should contain entries for OCS funds only. For all projects, the first budget period of 12 months will be entered in Column (1).

Allocability of costs is governed by applicable cost principles set forth in the Code of Federal Regulations (CFR), Title 45, Parts 74 and 92.

Budget estimates for administrative costs must be supported by adequate detail for the grants officer to perform a cost analysis and review. Adequately detailed calculations for each budget object class are those which reflect estimation methods, quantities, unit costs, salaries, and other similar

quantitative detail sufficient for the calculation to be duplicated. For any additional object class categories included under the object class other, identify the additional object class(es) and provide supporting calculations.

Supporting narratives and justifications are required for each budget category, with emphasis on unique/special initiatives; large dollar amounts; local, regional, or other travel; new positions; major equipment purchases; and training programs.

A detailed itemized budget with a separate budget justification for each major item should be included as indicated below:

Line 6a

*Personnel*—Enter the total costs of salaries and wages.

*Justification*—Identify the project director and staff. Specify by title or name the percentage of time allocated to the project, the individual annual salaries and the cost to the project (both Federal and non-Federal) of the organization's staff who will be working on the project.

Line 6b

*Fringe Benefits*—Enter the total costs of fringe benefits unless treated as part of an approved indirect cost rate which is entered on Line 6j.

*Justification*—Enter the total costs of fringe benefits, unless treated as part of an approved indirect cost rate. Provide a breakdown of amounts and percentages that comprise fringe benefit costs.

Line 6c

*Travel*—Enter total cost of all travel by employees of the project. Do not enter costs for Consultant's travel.

*Justification*—Include the name(s) of traveler(s), total number of trips, destinations, length of stay, mileage rate, transportation costs and subsistence allowances. Traveler must be a person listed under the personnel line or employee being paid under non-federal share.

**Note:** Local transportation and Consultant travel costs are entered on Line 6h.

Line 6d

*Equipment*—Enter the total costs of all equipment to be acquired by the project. Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals or exceeds the lesser of (a) the capitalization level established by the organization for financial statement purposes, or (b) \$5,000.

**Note:** If an applicant's current rate agreement was based on another definition for equipment, such as "tangible personal property \$500 or more", the applicant shall use the definition used by the cognizant agency in determining the rate(s). However, consistent with the applicant's equipment policy, lower limits may be set.

**Justification**—Equipment to be purchased with Federal funds must be required to conduct the project, and the applicant organization or its subgrantees must not already have the equipment or a reasonable facsimile available to the project.

Line 6e

**Supplies**—Enter the total costs of all tangible personal property other than that included on line 6d.

**Justification**—Provide a general description of what is being purchased such as type of supplies: office, classroom, medical, etc. Include equipment costing less than \$5,000 per item.

Line 6f

**Contractual**—Enter the total costs of all contracts, including: (1) Procurement contracts (except those which belong on other lines such as equipment, supplies, etc.) and (2) contracts with secondary recipient organizations including delegate agencies and specific project(s) or businesses to be financed by the applicant.

**Justification**—Attach a list of contractors, indicating the names of the organizations, the purposes of the contracts, the estimated dollar amounts, and selection process of the awards as part of the budget justification. Also provide back-up documentation identifying the name of contractor, purpose of contract, and major cost elements.

**Note 1:** Whenever the applicant/grantee intends to delegate part of the program to another agency, the applicant/grantee must submit Sections A and B of this Form (SF-424A), completed for each delegate agency by agency title, along with the required supporting information referenced in the applicable instructions. The total costs of all such agencies will be part of the amount shown on Line 6f. Provide draft Request for Proposal in accordance with 45 CFR Part 74, Appendix A. All procurement transactions shall be conducted in a manner to provide, to the maximum extent practical, open and free competition.

**Note 2:** Contractual cannot be a person—must be an organization, firm, etc. Enter Consultant cost on Line 6h.

Line 6g

**Construction**—Not applicable.

Line 6h

**Other**—Enter the total of all other costs. Such costs, where applicable, may include, but are not limited to, insurance, food, medical and dental costs (non-contractual); fees and travel paid directly to individual consultants; local transportation (all travel which does not require per diem is considered local travel); space and equipment rentals; printing and publication; computer use training costs including tuition and stipends; training service costs including wage payments to individuals and supportive service payments; and staff development costs.

Line 6j

**Indirect Charges**—Enter the total amount of indirect costs. This line should be used only when the applicant currently has an indirect cost rate approved by DHHS or other Federal agencies.

If the applicant organization is in the process of initially developing or renegotiating a rate, it should, immediately upon notification that an award will be made, develop a tentative indirect cost rate proposal based on its most recently completed fiscal year in accordance with the principles set forth in the pertinent DHHS Guide for Establishing Indirect Cost Rates and submit it to the appropriate DHHS Regional Office. It should be noted that when an indirect cost rate is requested, those costs included in the indirect cost pool cannot be also budgeted or charged as direct costs to the grant. Indirect costs consistent with approved indirect cost rate agreements are allowable.

Line 6k

**Totals**—Enter the total amount of Lines 6i and 6j.

Line 7

**Program Income**—Enter the estimated amount of income, if any, expected to be generated from this project. Separately show expected program income generated from OCS support and income generated from other mobilized funds. Do not add or subtract this amount from the budget total. Show the nature and source of income in the program narrative statement.

**Justification**—Describe the nature, source and anticipated use of program income in the Program Narrative Statement.

Section C—Non-Federal Resources

This section is to record the amounts of Non-Federal resources that will be used to support the project. Non-Federal resources mean other than OCS funds for which the applicant has received a

commitment. Provide a brief explanation, on a separate sheet, showing the type of contribution, broken out by Object Class Category, (see SF-424A, Section B.6) and whether it is cash or third party in-kind. The firm commitment of these required funds must be documented and submitted with the application in order to be given credit in the criterion.

Except in unusual situations, this documentation must be in the form of letters of commitment or letters of intent from the organization(s)/individuals from which funds will be received.

Line 8

—Column (a)—Enter the project title.

—Column (b)—Enter the amount of cash or donations to be made by the applicant.

—Column (c)—Enter the State contribution.

—Column (d)—Enter the amount of cash and third party in-kind contributions to be made from all other sources.

—Column (e)—Enter the total of columns (b), (c), and (d).

Lines 9, 10 and 11

Leave Blank.

Line 12

Carry the total of each column of Line 8, (b) through (e). The amount in Column (e) should be equal to the amount on Section A, Line 5, Column (f).

**Justification**—Describe third party in-kind contributions, if included.

Section D—Forecasted Cash Needs

Line 13

**Federal**—Enter the amount of Federal (OCS) cash needed for this grant, by quarter, during the 12-month budget period.

Line 14

**Non-Federal**—Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15

**Totals**—Enter the total of Lines 13 and 14.

Section F—Other Budget Information

Line 21

**Direct Charges**—Include narrative justification required under Section B for each object class category for the total project period.

Line 22

**Indirect Charges**—Enter the type of DHHS or other Federal agency approved indirect cost rate (provisional,

predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied and the total indirect expense. Also, enter the date the rate was approved, where applicable. Attach a copy of the approved rate agreement.

#### Line 23

Provide any other explanations and continuation sheets required or deemed necessary to justify or explain the budget information.

#### 3. SF-424B—Assurances Non-Construction Programs (Attachment B-3)

All applicants must sign and return the "Assurances" with the application.

#### 4. Project Narrative

Each narrative should include the following major sections:

- a. Analysis of Need.
- b. Project Design (Work Program).
- c. Organizational Experience in the Program Area.
- d. Management History.
- e. Staffing and Resources.
- f. Staff Responsibilities.

The project narrative must address the specific purposes mentioned in Part A of this Program Announcement. The narrative should provide information on how the application meets the evaluation criteria in Part D of this Program Announcement.

### Part F—Application Procedures

#### 1. Availability of Forms

Applications for awards under this OCS program must be submitted on Standard Forms (SF) 424, 424A, and 424B. Part E and the Attachments to this Program Announcement contain all the instructions and forms required for submittal of applications. The forms may be reproduced for use in submitting applications.

A copy of this Program Announcement is available on the Internet through the OCS Website at the following web address: [www.acf.dhhs.gov/programs/ocs/kits1.htm](http://www.acf.dhhs.gov/programs/ocs/kits1.htm).

This Program Announcement also may be obtained by telephoning the office listed in the section entitled **FOR FURTHER INFORMATION CONTACT** at the beginning of this Announcement.

The information requested under this Program Announcement is covered under the following OMB information collection clearances: SF-424 (No. 0348-0043), SF-424A (No. 0348-0044), SF-424B (No. 0348-0040), and other requirements for OCS applications (No.

0970-0062, expiration date October 31, 2001).

#### 2. Intergovernmental Review

This program is covered under Executive Order 12372, "Intergovernmental Review of Federal Programs," and 45 CFR Part 100, "Intergovernmental Review of Department of Health and Human Services Program and Activities." Under the Order, States may design their own processes for reviewing and commenting on proposed Federal assistance under covered programs.

As of March, 1999, the following jurisdictions have elected NOT to participate in the Executive Order process. Applicants from these jurisdictions or for projects administered by Federally-recognized Indian Tribes need take no action in regard to E.O. 12372:

Alabama, Alaska, Colorado, Connecticut, Hawaii, Idaho, Kansas, Louisiana, Massachusetts, Minnesota, Montana, Nebraska, New Jersey, Ohio, Oklahoma, Oregon, Pennsylvania, South Dakota, Tennessee, Vermont, Virginia, Washington, American Samoa and Palau.

All remaining jurisdictions participate in the Executive Order process and have established Single Points of Contact (SPOCs). Applicants from participating jurisdictions should contact their SPOCs as soon as possible to alert them of the prospective applications and receive instructions. Applicants must submit any required material to the SPOCs as soon as possible so that the program office can obtain and review SPOC comments as part of the award process. The applicant must submit all required materials, if any, to the SPOC and indicate the date of this submittal (or the date of contact if no submittal is required) on the Standard Form 424, item 16a.

Under 45 CFR 100.8(a)(2), a SPOC has 60 days from the application deadline to comment on the proposed new award.

The SPOCs are encouraged to eliminate the submission of routine endorsements as official recommendations.

Additionally, SPOCs are requested to clearly differentiate between mere advisory comments and those official State process recommendations which may trigger the "accommodate or explain" rule.

When comments are submitted directly to ACF, they should be addressed to: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Grants Management/OCSE, 4th Floor West, Aerospace Center, 370 L'Enfant

Promenade, SW, Washington, D.C. 20447.

A list of the Single Points of Contact for each State and Territory is included as Attachment G of this Announcement.

#### 3. Application Consideration

Applications that meet the screening requirements in Section 5 below will be reviewed competitively. Such applications will be referred to reviewers for a numerical score and explanatory comments based solely on responsiveness to program guidelines and evaluation criteria published in this Announcement. Applications will be reviewed by persons outside of the OCS unit which would be directly responsible for programmatic management of the grant. The results of these reviews will assist the Director and OCS program staff in considering competing applications. Reviewers' scores will weigh heavily in funding decisions but will not be the only factors considered. Applications will generally be considered in order of the average scores assigned by reviewers. However, highly ranked applications are not guaranteed funding since the Director may also consider other factors deemed relevant including, but not limited to, the timely and proper completion of projects funded with OCS funds granted in the last five (5) years; comments of reviewers and government officials; staff evaluation and input; geographic distribution; previous program performance of applicant; compliance with grant terms under previous DHHS grants; audit reports; investigative reports; and applicant's progress in resolving any final audit disallowances on OCS or other Federal agency grants. The OCS reserves the right to discuss applications with other Federal or non-Federal funding sources to ascertain the applicant's performance record.

#### 4. Criteria for Screening Applications

##### a. Initial Screening

All applications that meet the application deadline will be screened to determine completeness and conformity to the requirements of this Announcement. Only those applications meeting the below listed requirements will be reviewed and evaluated competitively. Others will be returned to the applicants with a notation that they were unacceptable.

(1) The application must contain a completed and signed Standard Form SF-424.

(2) The SF-424 must be signed by an official of the organization applying for

the grant who has authority to obligate the organization legally.

#### b. Pre-Rating Review

Applications which pass the initial screening will be forwarded to reviewers for analytical comment and scoring based on the criteria detailed in the section below and the specific requirements contained in Part A of this Announcement. Prior to the programmatic review, these reviewers and/or OCS staff will verify that the applications comply with this Program Announcement in the following areas:

(1) *Eligibility*—Applicant meets the eligibility requirements found in Part B.

(2) *Number of Projects*—The application contains only one project.

(3) *Target Populations*—The application clearly targets the specific outcomes and benefits of the project to low-income participants and beneficiaries as defined in the DHHS Poverty Income Guidelines (Attachment A).

(4) *Grant Amount*—The amount of funds requested does not exceed \$50,000.

(5) *Program Focus*—The application addresses the purposes described in Part A of this Announcement.

#### c. Evaluation Criteria

Applications that pass the initial screening and pre-rating review will be assessed and scored by reviewers. Each reviewer will give a numerical score for each application reviewed. These numerical scores will be supported by explanatory statements on a formal rating form describing major strengths and major weaknesses under each applicable criterion published in this Announcement.

### Part G—Contents of Application Package and Receipt Process

#### 1. Contents of Application

Each application submission must include a signed original and four additional copies of the application. Each copy of the application MUST contain, in the order listed, each of the following:

a. Table of Contents with page numbers noted for each major section and subsection of the application, including the appendices. Each page in the application, including those in all appendices, must be numbered consecutively.

b. A Project Abstract which is a succinct description of the project in 200 words or less.

c. The SF-424 (Application for Federal Assistance) (Attachment B-1) should be completed in accordance with

instructions provided with the form, as well as OCS specific instructions set forth in Part E of this Announcement. The SF-424 must contain an original signature of the certifying representative of the applicant organization.

Applicants must also be aware that the applicant's legal name (Item 5) MUST match the Employer Identification Number (Item 6).

d. SF-424A (Budget Information) (Attachment B-2) must be completed.

e. SF-424B (Assurances—Non-Construction Programs) (Attachment B-3) must be filed by applicants requesting financial assistance for a non-construction project. Applicants must sign and return the SF-424B with their applications.

f. Certification Regarding Lobbying (Attachment F-1) Applicants must provide a certification concerning lobbying. Prior to receiving an award in excess of \$100,000, applicants shall furnish an executed copy of the lobbying certification. Applicants must sign and return the certification with their applications.

g. Disclosure of Lobbying Activities (SF-LLL). Applicants must fill-in, sign and date form found at Attachment F-2. (This form is required only if lobbying has actually taken place or is expected to take place in trying to obtain the grant for which the applicant is applying.)

h. Project Narrative (See Part E, section 4).

i. Certification Regarding Drug-Free Workplace Requirements (Attachment C). Applicants must make the appropriate certification of their compliance with the Drug-Free Workplace Act of 1988. By signing and submitting the applications, applicants are providing the certification and need not mail back the certification with the applications.

j. Certification Regarding Debarment, Suspension, and Other Responsibility Matters (Attachment D). Applicants must make the appropriate certification that they are not presently debarred, suspended or otherwise ineligible for award. By signing and submitting the applications, applicants are providing the certification and need not mail back the certification with the applications.

k. Certification Regarding Environmental Tobacco Smoke (Attachment E). Applicants must make the appropriate certification of their compliance with the Pro-Children Act of 1944. By signing and submitting the applications, applicants are providing the certification and need not mail back the certification with the applications.

The total number of pages for the narrative portion of the application

package must not exceed 30 pages in its entirety. Applications must be uniform in composition since OCS may find it necessary to duplicate them for review purposes. Therefore, applications must be submitted on 8½ × 11-inch paper only. They must not include colored, oversized or folded materials, organizational brochures, or other promotional materials, slides, films, clips, etc. Such materials will be discarded if included.

Applications should be two-holed punched at the top center and fastened separately with a compressor slide paper fastener or a binder clip.

While applications must be comprehensive, OCS encourages conciseness and brevity in the presentation of materials and cautions the applicant to avoid unnecessary duplication of information.

#### 2. Acknowledgment of Receipt

An acknowledgment will be mailed to all applicants with an identification number which will be noted on the acknowledgment. This number must be referred to in all subsequent communications with OCS concerning the application. If an acknowledgment is not received within three weeks after the application deadline, applicants must notify ACF by telephone (202) 401-5103. Applicant should also submit a mailing label for the acknowledgment.

**Note:** To facilitate receipt of this acknowledgment from ACF, applicant should include a cover letter with the application containing an E-mail address and facsimile (FAX) number if these items are available to applicant.

### Part H—Post Award Information and Reporting Requirements

Following approval of the applications selected for funding, notice of project approval and authority to draw down project funds will be made in writing. The official award document is the Financial Assistance Award which provides the amount of Federal funds approved for use in the project, the budget period for which support is provided, and the terms and conditions of the award.

In addition to the General Conditions and Special Conditions (where the latter are warranted) that will be applicable to grants, grantees will be subject to the provisions of 45 CFR Parts 74 (non-governmental) and 92 (governmental) along with Circulars 122 (non-governmental) and 87 (governmental).

Grantees will be required to submit semi-annual progress and financial reports (SF-269) as well as a final progress and financial report.



Grantees are subject to the audit requirements in 45 CFR Parts 74 and 92.

Section 319 of Public Law 101-121, signed into law on October 23, 1989, imposes new prohibitions and requirements for disclosure and certification related to lobbying when applicant has engaged in lobbying activities or is expected to lobby in trying to obtain the grant. It provides limited exemptions for Indian tribes and tribal organizations. Current and prospective recipients (and their subtier contractors and/or grantees) are prohibited from using appropriated funds for lobbying Congress or any Federal agency in connection with the award of a contract, grant, cooperative agreement or loan. In addition, for each award action in excess of \$100,000 (or \$150,000 for loans) the law requires recipients and their subtier contractors and/or subgrantees: (1) To certify that they have neither used nor will use any appropriated funds for payment to lobbyists, (2) to submit a declaration setting forth whether payments to lobbyists have been or will be made out of non-appropriated funds and, if so, the name, address, payment details, and purpose of any agreements with such lobbyists whom recipients or their subtier contractors or subgrantees will pay with the nonappropriated funds and (3) to file quarterly updates about the use of lobbyists if any event occurs that materially affects the accuracy of the information submitted by way of declaration and certification. The law establishes civil penalties for noncompliance and is effective with respect to contracts, grants, cooperative agreements and loans entered into or made on or after December 23, 1989. See Attachments F-1 and F-2 for certification and disclosure forms to be submitted with the applications for this program.

Attachment H indicates the regulations that apply to all applicants/grantees under the FY 2000 Community Food and Nutrition Program.

Dated: September 22, 1999.

**Donald Sykes,**

*Director, Office of Community Services.*

**Attachments**

- A—1999 Poverty Income Guidelines for the 48 Contiguous States and the District of Columbia, Alaska, and Hawaii
- B-1—Application for Federal Assistance
- B-2—Budget Information—Non-Construction Programs
- B-3—Assurances—Non-Construction Programs
- C—Certification Regarding Drug-Free Workplace Requirements
- D—Certification Regarding Debarment, Suspension, and other Responsibility Matters (Primary and Lower Tier Covered Transactions)
- E—Certification Regarding Environmental Tobacco Smoke
- F-1—Certification Regarding Lobbying
- F-2—Disclosure of Lobbying Activities
- G—State Single Point of Contact Listing Maintained by OMB
- H—DHHS Regulations applying to all Applicants/Grantees under the Community Food and Nutrition Program
- I—Applicant's Checklist

**Attachment A**

**1999 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA**

Size of family unit	Poverty guideline
1 .....	\$8,240
2 .....	11,060
3 .....	13,880
4 .....	16,700
5 .....	19,520
6 .....	22,340
7 .....	25,160
8 .....	27,980

For family units with more than 8 members, add \$2,820 for each additional member.

(The same increment applies to smaller family sizes also, as can be seen in the figures above).

**1999 POVERTY GUIDELINES FOR ALASKA**

Size of family unit	Poverty guideline
1 .....	\$10,320
2 .....	13,840
3 .....	17,360
4 .....	20,880
5 .....	24,400
6 .....	27,920
7 .....	31,440
8 .....	34,960

For family units with more than 8 members, add \$3,520 for each additional member.

(The same increment applies to smaller family sizes also, as can be seen in the figures above).

**1999 POVERTY GUIDELINES FOR HAWAII**

Size of family unit	Poverty guidelines
1 .....	\$9,490
2 .....	12,730
3 .....	15,970
4 .....	19,210
5 .....	22,450
6 .....	25,690
7 .....	28,930
8 .....	32,170

For family units with more than 8 members, add \$3,240 for each additional member.

(The same increment applies to smaller family sizes also, as can be seen in the figures above).

**BILLING CODE 4184-01-P**

Attachment B-1

OMB Approval No. 0348-004

**APPLICATION FOR  
FEDERAL ASSISTANCE**

<b>1. TYPE OF SUBMISSION:</b> Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction Preapplication <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction		<b>2. DATE SUBMITTED</b>	Applicant Identifier
		<b>3. DATE RECEIVED BY STATE</b>	State Application Identifier
		<b>4. DATE RECEIVED BY FEDERAL AGENCY</b>	Federal Identifier
<b>5. APPLICANT INFORMATION</b>			
Legal Name:		Organizational Unit:	
Address (give city, county, State, and zip code):		Name and telephone number of person to be contacted on matters involving this application (give area code)	
<b>6. EMPLOYER IDENTIFICATION NUMBER (EIN):</b> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<b>7. TYPE OF APPLICANT: (enter appropriate letter in box)</b>	
<b>8. TYPE OF APPLICATION:</b> <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award    B. Decrease Award    C. Increase Duration D. Decrease Duration    Other(specify): _____		A. State B. County C. Municipal D. Township E. Interstate F. Intermunicipal G. Special District H. Independent School Dist. I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify) _____	
		<b>9. NAME OF FEDERAL AGENCY:</b>	
<b>10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:</b> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<b>11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:</b>	
<b>12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.):</b>			
<b>13. PROPOSED PROJECT</b>		<b>14. CONGRESSIONAL DISTRICTS OF:</b>	
Start Date	Ending Date	a. Applicant	b. Project
<b>15. ESTIMATED FUNDING:</b>		<b>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b>	
a. Federal	\$ .00	a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON:  DATE _____  b. No. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ .00		
c. State	\$ .00		
d. Local	\$ .00		
e. Other	\$ .00		
f. Program Income	\$ .00		
g. TOTAL	\$ .00	<b>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b> <input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No	
<b>18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.</b>			
a. Type Name of Authorized Representative		b. Title	c. Telephone Number
d. Signature of Authorized Representative		e. Date Signed	

**Instructions for the SF-424**

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

Please do not return your completed form to the Office of Management and Budget. Send it to the address provided by the sponsoring agency.

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

**Item and Entry**

1. Self-explanatory.
2. Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable).
3. State use only (if applicable).
4. If this application is to continue or revise an existing award, enter present

Federal identifier number. If for a new project, leave blank.

5. Legal name of applicant, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application.

6. Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.

7. Enter the appropriate letter in the space provided.

8. Check appropriate box and enter appropriate letter(s) in the space(s) provided:

- “New” means a new assistance award.
- “Continuation” means an extension for additional funding/budget period for a project with a projected completion date.
- “Revision” means any change in the Federal Government's financial obligation or contingent liability from an existing obligation.

9. Name of Federal agency from which assistance is being requested with this application.

10. Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.

11. Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (*i.e.*, construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.

12. List only the largest political entities affected (*e.g.*, State, counties, cities).

13. Self-explanatory.

14. List the applicant's Congressional District and any District(s) affected by the program or project.

15. Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate *only* the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.

16. Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.

17. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.

18. To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)

**BILLING CODE 4184-01-M**

Attachment B-2

OMB Approval No. 0348-0044

**BUDGET INFORMATION - Non-Construction Programs**

**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1.		\$	\$	\$	\$	\$
2.						
3.						
4.						
5. Totals		\$	\$	\$	\$	\$

**SECTION B - BUDGET CATEGORIES**

Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
a. Personnel	\$	\$	\$	\$	\$
b. Fringe Benefits					
c. Travel					
d. Equipment					
e. Supplies					
f. Contractual					
g. Construction					
h. Other					
i. Total Direct Charges (sum of 6a-6h)					
j. Indirect Charges					
k. TOTALS (sum of 6i and 6j)	\$	\$	\$	\$	\$
7. Program Income	\$	\$	\$	\$	\$

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Standard Form 424A (Rev. 7-97)  
Prescribed by OMB Circular A-10

Previous Edition Usable

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8.	\$	\$	\$	\$	\$
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)	\$	\$	\$	\$	\$
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year				4th Quarter
	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	
13. Federal	\$	\$	\$	\$	\$
14. Non-Federal					
15. TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$
SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16.	\$	\$	\$	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$	\$	\$	\$	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges:	22. Indirect Charges:				
23. Remarks:					

**Instructions for the SF-424A**

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

Please do not return your completed form to the Office of Management and Budget. Send it to the address provided by the Sponsoring Agency.

**General Instructions**

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

**Section A. Budget Summary Lines 1-4 Columns (a) and (b)**

For applications pertaining to a *single* Federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in Column (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs *require* a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

Lines 1-4, Columns (c) through (g):  
*For new applications*, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

*For continuing grant program applications*, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

*For supplemental grants and changes* to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Columns (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

Line 5—Show the totals for all columns used.

**Section B. Budget Categories**

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

Line 6a-i—Show the totals of Lines 6a to 6h in each column.

Line 6j—Show the amount of indirect cost.

Line 6k—Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

Line 7—Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount. Show under the program narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

**Section C. Non-Federal Resources**

Lines 8-11—Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

Column (a)—Enter the program titles identical to Column (a), Section A. A

breakdown by function or activity is not necessary.

Column (b)—Enter the contribution to be made by the applicant.

Column (c)—Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

Column (d)—Enter the amount of cash and in-kind contributions to be made from all other sources.

Column (e)—Enter totals of Columns (b), (c), and (d).

Line 12—Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

**Section D. Forecasted Cash Needs**

Line 13—Enter the amount of cash needed by quarter from the grantor agency during the first year.

Line 14—Enter the amount of cash from all other sources needed by quarter during the first year.

Line 15—Enter the totals of amounts on Lines 13 and 14.

**Section E. Budget Estimates of Federal Funds Needed for Balance of the Project**

Lines 16-19—Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisors (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

Line 20—Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

**Section F. Other Budget Information**

Line 21—Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

Line 22—Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

Line 23—Provide any other explanations or comments deemed necessary.

**Assurances—Non-Construction Programs**

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or

any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

Please do not return your completed form to the Office of Management and Budget. Send it to the address provided by the Sponsoring Agency.

**Note:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (Pub. L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (Pub. L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (Pub. L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g)

523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290dd-3 and 290ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 *et seq.*), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific state(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (Pub. L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7326) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. 276a to 276a-7), the Copeland Act (40 U.S.C. 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for federally-assisted construction subagreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the flood Disaster Protection Act of 1973 (Pub. L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (Pub. L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. 1451 *et seq.*); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 *et seq.*); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (Pub. L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (Pub. L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. 1271 *et seq.*) related to protecting components or potential

components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 *et seq.*).

14. Will comply with Pub. L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 Pub. L. 89-544, as amended, 7 U.S.C. 2131 *et seq.* pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 *et seq.*) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

\_\_\_\_\_  
Signature of Authorized Certifying Official

\_\_\_\_\_  
Applicant Organization

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date Submitted

#### Attachment C

##### *Certificate Regarding Drug-Free Workplace Requirements*

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F, Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false

certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.

3. For grantees other than individuals, Alternate I applies.

4. For grantees who are individuals, Alternate II applies.

5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.

6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).

7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).

8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to his certification. Grantees' attention is called, in particular, to the following definitions from these rules:

*Controlled substance* means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

*Conviction* means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

*Criminal drug statute* means a Federal or non-Federal criminal statute involving the manufacture, distribution, or dispensing, use, or possession of any controlled substance;

*Employee* means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) all indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and (iii) temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

Certification Regarding Drug-Free Workplace Requirements

Alternate I. (Grantees Other Than Individuals)

The grantee certifies that it will or will not continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibitions;

(b) Establishing an ongoing drug-free awareness program to inform employees about:

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted—

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

(B) The grantee may insert in the space provided below the site(s) for the

performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

Check if there are workplaces on file that are not identified here.

Alternate II. (Grantees Who Are Individuals)

(a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

[FR 21690, 21702, May 25, 1990]

#### Attachment D

*Certification Regarding Debarment, Suspension and Other Responsibility Matters*

Certification Regarding Debarment, Suspension, and Other Responsibility Matters—Primary Covered Transactions

Instructions for Certification

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary



covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.

6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transaction," provided by the department or agency entered into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

Certification Regarding Debarment, Suspension, and Other Responsibility Matters—Primary Covered Transactions

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:

(1) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;

(b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transactions  
Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, (Page 33043) should the proposed covered transaction be entered into, it shall not knowingly under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or

voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transactions

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

#### Attachment E

*Certification Regarding Environmental Tobacco Smoke*

Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor

routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity. By signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the Act.

The applicant/grantee further agrees that it will require the language of this certification be included in any subawards which contain provisions for the children's services and that all subgrantees shall certify accordingly.

#### **Attachment F-1**

##### *Certification Regarding Lobbying*

##### **Certification for Contracts, Grants, Loans, and Cooperative Agreements**

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for

influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or

entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

##### **Statement for Loan Guarantees and Loan Insurance**

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$10,000 for each such failure.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Organization

**BILLING CODE 4184-01-P**

**DISCLOSURE OF LOBBYING ACTIVITIES**

**Attachment F-2**

Approved by OMB  
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance		<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award		<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____	
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Congressional District, if known:			<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>   Congressional District, if known:		
<b>6. Federal Department/Agency:</b>			<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____		
<b>8. Federal Action Number, if known:</b>			<b>9. Award Amount, if known:</b> \$		
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):			<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI):		
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____		
<b>Federal Use Only:</b>				Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

**Instruction for Completion of SF-LLL, Disclosure of Lobbying Activities**

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.

2. Identify the status of the covered Federal action.

3. Identify the appropriate classification of this report. If this is a follow up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.

4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier or the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.

5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.

6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.

7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.

8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."

9. For a covered action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.

10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).

11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources's gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

**Attachment G***State Single Point of Contact Listing Maintained by OMB*

In accordance with Executive Order #12372, "Intergovernmental Review of Federal Programs," Section 4, "the Office of Management and Budget (OMB) shall maintain a list of official State entities designated by the States to review and coordinate proposed Federal financial assistance and direct Federal development." This attached list is the OFFICIAL OMB LISTING. This listing is also published in the Catalogue of Federal Domestic Assistance biannually.

August 23, 1999

OMB State Single Point of Contact Listing\*

**Arizona**

Joni Saad, Arizona State Clearinghouse, 3800 N. Central Avenue, Fourteenth Floor, Phoenix, Arizona 85012, Telephone: (602) 280-1315, FAX: (602) 280-8144

**Arkansas**

Mr. Tracy L. Copeland, Manager, State Clearinghouse, Office of Intergovernmental Services, Department of Finance and Administration, 515 W. 7th St., Room 412, Little Rock, Arkansas 72203, Telephone: (501) 682-1074, FAX: (501) 682-5206

**California**

Grants Coordination, State Clearinghouse, Office of Planning & Research, 1400 Tenth Street, Room 121, Sacramento, California 95814, Telephone: (916) 445-0613, FAX: (916) 323-3018

**Delaware**

Francine Booth, State Single Point of Contact, Executive Department, Office of the

Budget, 540 S. Dupont Highway, Suite 5, Dover, Delaware 19901, Telephone: (301) 739-3326, FAX: (302) 739-5661

**District of Columbia**

Charles Nichols, State Single Point of Contact, Office of Grants Mgmt. & Dev., 717 14th Street, N.W., Suite 1200, Washington, D.C. 20005, Telephone: (202) 727-1700 (direct), (202) 727-6537 (secretary), FAX: (202) 727-1617

**Florida**

Florida State Clearinghouse, Department of Community Affairs, 2555 Shumard Oak Blvd., Tallahassee, Florida 32399-2100, Telephone: (850) 922-5438, FAX: (850) 414-0479, Contact: Cherie Trainor, (850) 414-5495

**Georgia**

Deborah Stephens, Coordinator, Georgia State Clearinghouse, 270 Washington Street, S.W.—8th Floor, Atlanta, Georgia 30334, Telephone: (404) 656-3855, FAX: (404) 656-7901

**Illinois**

Virginia Bova, State Single Point of Contact, Illinois Department of Commerce and Community Affairs, James R. Thompson Center, 100 West Randolph, Suite 3-400, Chicago, Illinois 60601, Telephone: (312) 814-6028, FAX: (312) 814-1800

**Indiana**

Renee Miller, State Budget Agency, 212 State House, Indianapolis, Indiana 46204-2796, Telephone: (317) 232-2971 (directline), FAX: (317) 233-3323

**Iowa**

Steven R. McCann, Division for Community Assistance, Iowa Department of Economic Development, 200 East Grand Avenue, Des Moines, Iowa 50309, Telephone: (515) 242-4719, FAX: (515) 242-4809

**Kentucky**

Kevin J. Goldsmith, Director, Sandra Brewer, Executive Secretary, Intergovernmental Affairs, Office of the Governor, 700 Capitol Avenue, Frankfort, Kentucky 40601, Telephone: (502) 564-2611, FAX: (502) 564-0437

**Maine**

Joyce Benson, State Planning Office, 184 State Street, 38 State House Station, Augusta, Maine 04333, Telephone: (207) 287-3261, FAX: (207) 287-6489

**Maryland**

Linda Janey, Manager, Plan & Project Review, Maryland Office of Planning, 301 W. Preston Street—Room 1104, Baltimore, Maryland 21201-2365, Staff Contact: Linda Janey, Telephone: (410) 767-4490, FAX: (410) 767-4480

**Michigan**

Richard Pfaff, Southeast Michigan Council of Governments, 660 Plaza Drive—Suite 1900, Detroit, Michigan 48226, Telephone: (313) 961-4266, FAX: (313) 961-4869

**Mississippi**

Cathy Mallette, Clearinghouse Officer,  
Department of Finance and  
Administration, 550 High Street, 303  
Walters Sillers Building, Jackson,  
Mississippi 39201-3087, Telephone: (601)  
359-6762, FAX: (601) 359-6758

**Missouri**

Lois Pohl, Federal Assistance Clearinghouse,  
Office of Administration, P.O. Box 809,  
Jefferson Building, 9th Floor, Jefferson  
Building, 9th Floor, Jefferson City,  
Missouri 65102, Telephone: (314) 751-  
4834, FAX: (314) 751-7819

**Nevada**

Department of Administration, State  
Clearinghouse, 209 E. Musser Street, Room  
220, Carson City, Nevada 89710,  
Telephone: (702) 687-3983, Contact:  
Heather Elliot, (702) 687-6367

**New Hampshire**

Jeffrey H. Taylor, Director, New Hampshire  
Office of State Planning, Attn:  
Intergovernmental Review Process, Mike  
Blake, 2½ Beacon Street, Concord, New  
Hampshire 03301, Telephone: (603) 271-  
2155, FAX: (603) 271-1728

**New Mexico**

Nick Mandell, Local Government Division,  
Room 201 Bataan Memorial Building,  
Santa Fe, New Mexico 87503, Telephone:  
(505) 827-3640, Fax: (505) 827-4984

**New York**

New York State Clearinghouse, Division of  
the Budget, State Capitol, Albany, New  
York 12224, Telephone: (518) 474-1605,  
FAX: (518) 486-5617

**North Carolina**

Jeanette Furney, North Carolina Department  
of Administration, 116 West Jones Street—  
Suite 5106, Raleigh, North Carolina 27603-  
8003, Telephone: (919) 733-7232, FAX:  
(919) 733-9571

**North Dakota**

North Dakota Single Point of Contact, Office  
of Intergovernmental Assistance, 600 East  
Boulevard Avenue, Bismarck, North  
Dakota 58505-0170, Telephone: (701) 224-  
2094, FAX: (701) 224-2308

**Rhode Island**

Kevin Nelson, Review Coordinator,  
Department of Administration, Division of  
Planning, One Capitol Hill, 4th Floor,  
Providence, Rhode Island 02908-5870,  
Telephone: (401) 277-2656, FAX: (401)  
277-2983

**South Carolina**

Omeagia Burgess, State Single Point of  
Contact, Budget and Control Board, Office  
of State Budget, 1122 Ladies Street—12th  
Floor, Columbia, South Carolina 29201,  
Telephone: (803) 734-0494, FAX: (803)  
734-0645

**Texas**

Tom Adams, Governors Office, Director,  
Intergovernmental Coordination, P.O. Box  
12428, Austin, Texas 78711, Telephone:  
(512) 463-1771, FAX: (512) 936-2681

**Utah**

Carolyn Wright, Utah State Clearinghouse,  
Office of Planning and Budget, Room 116  
State Capitol, Salt Lake City, Utah 84114,  
Telephone: (801) 538-1027, FAX: (801)  
538-1547

**West Virginia**

Fred Cutlip, Director, Community  
Development Division, W. Virginia  
Development Office, Building #6, Room  
553, Charleston, West Virginia 25305,  
Telephone: (304) 558-4010, FAX: (304)  
558-3248

**Wisconsin**

Jeff Smith, Section Chief, Federal/State  
Relations, Wisconsin Department of  
Administration, 101 East Wilson Street—  
6th Floor, P.O. Box 7868, Madison,  
Wisconsin 53707, Telephone: (608) 266-  
0267, FAX: (608) 267-6931

**Wyoming**

Sandy Ross, State Single Point of Contact,  
Department of Administration and  
Information, 2001 Capitol Avenue, Room  
214, Cheyenne, WY 82002, Telephone:  
(307) 777-5492, FAX: (307) 777-3696

**Territories****Guam**

Joseph Rivera, Acting Director, Bureau of  
Budget and Management Research, Office  
of the Governor, P.O. Box 2950, Agana,  
Guam 96932, Telephone: (671) 475-9411  
or 9412, FAX: (671) 472-2825

**Puerto Rico**

Jose Caballero-Mercado, Chairman, Puerto  
Rico Planning Board, Federal Proposals  
Review Office, Minillas Government  
Center, P.O. Box 41119, San Juan, Puerto  
Rico 00940-1119, Telephone: (787) 727-  
4444, (787) 723-6190, FAX: (787) 724-  
3270

**North Mariana Islands**

Mr. Alvaro A. Santos, Executive Officer,  
Office of Management and Budget, Office  
of the Governor, Saipan, MP 96950,  
Telephone: (670) 664-2256, FAX: (670)  
664-2272, Contact person: Ms. Jacoba T.  
Seman, Federal Programs Coordinator,  
Telephone: (670) 664-2289, FAX: (670)  
664-2272

**Virgin Islands**

Nellon Bowry, Director, Office of  
Management and Budget, #41 Norregade  
Emancipation Garden, Station, Second  
Floor, Saint Thomas, Virgin Islands 00802

Please direct all questions and  
correspondence about intergovernmental  
review to: Linda Clarke, Telephone: (809)  
774-0750, FAX: (809) 776-0069.

If you would like a copy of this faxed to  
your office, please call our publications office  
at: (202) 395-9068.

\* In accordance with Executive Order  
#12372, "Intergovernmental Review of  
Federal Programs," this listing represents the  
designated State Single Points of Contact.  
The jurisdictions not listed no longer  
participate in the process BUT GRANT  
APPLICANTS ARE STILL ELIGIBLE TO

APPLY FOR THE GRANT EVEN IF YOUR  
STATE, TERRITORY, COMMONWEALTH,  
ETC., DOES NOT HAVE A "STATE SINGLE  
POINT OF CONTACT." STATES WITHOUT  
"STATE SINGLE POINTS OF CONTACT"  
INCLUDE: Alabama, Alaska; American  
Samoa; Colorado; Connecticut; Hawaii;  
Idaho; Kansas; Louisiana; Massachusetts,  
Minnesota; Montana; Nebraska; New Jersey;  
Ohio; Oklahoma; Oregon; Palau;  
Pennsylvania; South Dakota; Tennessee;  
Vermont, Virginia; and Washington. This list  
is based on the most current information  
provided by the States. Information on any  
changes or apparent errors should be  
provided to the Office of Management and  
Budget and the State in question. Changes to  
the list will only be made upon formal  
notification by the State. Also, this listing is  
published biannually in the Catalogue of  
Federal Domestic Assistance.

**Attachment H****Department of Health and Human Services (DHHS), Regulations Applying to All Applicants/Grantees Under the Community Food and Nutrition Program***Title 45 of the Code of Federal Regulations*

Part 16—DHHS Grant Appeals Process

Part 74—Administration of Grants (non-  
governmental)

Part 74—Administration of Grants (state and  
local governments and Indian Tribal  
affiliates):

## Sections:

74.26—Non-Federal Audits

74.27—Allowable cost for hospitals and  
non-profit organizations among other  
things

74.32 Real Property

74.34 Equipment

74.35 Supplies

74.24 Program Income

Part 75—Informal Grant Appeal Procedures

Part 76—Debarment and Suspension from  
Eligibility For Financial Assistance

Subpart F—Drug Free Workplace  
Requirements

Part 80—Non-discrimination Under Programs  
Receiving Federal Assistance through  
DHHS Effectuation of Title VI of the  
Civil Rights Act of 1964

Part 81—Practice and Procedures for  
Hearings Under Part 80 of this Title

Part 83—Regulation for the Administration  
and Enforcement of Sections 799A and  
845 of the Public Health Service Act

Part 84—Non-discrimination on the Basis of  
Handicap in Programs and Activities  
Receiving Federal Financial Assistance

Part 85—Enforcement of Non-discrimination  
on the Basis of Handicap in Programs or  
Activities Conducted by DHHS

Part 86—Non-discrimination on the Basis of  
Sex in Education Programs and  
Activities Receiving or Benefitting from  
Federal Financial Assistance

Part 91—Non-discrimination on the Basis of  
Age in Health and Human Services  
Programs or Activities Receiving Federal  
Financial Assistance

Part 92—Uniform Administrative  
Requirements for Grants and Cooperative  
Agreements to States and Local  
Governments (**Federal Register**, March  
11, 1988)

Part 93—New Restrictions on Lobbying

Part 100—Intergovernmental Review of  
DHHS Programs and Activities

BILLING CODE 4184-01-M

Attachment I

**APPLICANT'S CHECKLIST**

This checklist will assist you with preparing and assembling your application. Completing the checklist can help ensure that you do not omit key information. Because this checklist is used by many ACF programs, some of the information might not apply to your application. This checklist DOES NOT have to be completed and returned with your application.

	Yes	Included	N/A
Authorizing official read and understood Certification Regarding Debarment, Suspension, and Other Responsibility Matters?			
Authorizing official read and understood Certification Regarding Drug-Free Workplace Requirements--Grantees Other Than Individuals?			
Authorizing official read and understood Certification Regarding Environmental Tobacco Smoke?			
Application for Federal Assistance (SF 424) was completed? Proper Signature and Date for Line 18?			
Budget Information--Non-Construction Programs (SF 424A) or Budget Information--Construction Programs (SF 424C) was completed?			
Assurances-- Non-Construction Programs (SF 424B) or Assurances--Construction Programs (SF 424D) was completed? (Proper Signature and Date?)			
Certification Regarding Lobbying was completed? (Proper Signature and Date?)			
Disclosure of Lobbying Activities was completed? (Proper Signature and Date?)			
Other special certifications, assurances, and/or disclosures required under the program were completed (e.g., maintenance of effort certification)?			
Proof of nonprofit status was provided?			
Has additional information such as biographical sketch(es) with job description(s) and other additional information been attached, when required?			
For a Supplemental application, does the detailed budget only address the additional funds requested?			
Checked all budget computations for accuracy?			



FOLLOW-UP QUESTIONS

On the Application for Federal Assistance (SF 424),

YES N/A

- ⇒ did you enter the application number issued by the sponsoring ACF office in the "Federal Identifier" block?
- ⇒ did you type the 12 digit Payee EIN or PIN previously assigned to your organization by DHHS in the "Federal Identifier" block?
- ⇒ is the EIN in Item #6 assigned to the organization and organizational unit named in Item #5?
- ⇒ did you include city, county, state and zip code of the applicant did organization in Item #5?
- ⇒ has the appropriate box been checked in Item #16?
- ⇒ has the entire proposed project period been identified in Item #13?

On the Budget Information form (SF 424A or SF 424C),

- ⇒ do the totals in Section B match the totals provided in the budget and budget narrative?

**SUGGESTED ORDERING OF APPLICATION MATERIALS**

