

MAR 14 2022

Approved

REQUEST FOR AGENDA PLACEMENT FORM

Submission Deadline - Tuesday, 12:00 PM before Court Dates

SUBMITTED BY: Rexann Knowles

TODAY'S DATE: 2/25/2022

DEPARTMENT:

COUNTY JUDGE

SIGNATURE OF DEPARTMENT HEAD:

X _____

REQUESTED AGENDA DATE:

March 14, 2022

SPECIFIC AGENDA WORDING: Consideration of Texas CDBG Contract Number 7218250, Office of Rural Affairs Texas Community Development Block Grant Program Self-Monitoring Review Certification and Authorization for the County Judge to Sign

PERSON(S) TO PRESENT ITEM: Rexann Knowles

SUPPORT MATERIAL: (Must enclose supporting documentation)

TIME: 2 minutes

ACTION ITEM: X

WORKSHOP: _____

(Anticipated number of minutes needed to discuss item) **CONSENT:** _____

EXECUTIVE: _____

STAFF NOTICE:

COUNTY ATTORNEY: XX

IT DEPARTMENT: _____

AUDITOR: XX

PURCHASING DEPARTMENT: _____

PERSONNEL: _____

PUBLIC WORKS: _____

BUDGET COORDINATOR: _____

OTHER: _____

*****This Section to be Completed by County Judge's Office*****

ASSIGNED AGENDA DATE: _____

REQUEST RECEIVED BY COUNTY JUDGE'S OFFICE _____

COURT MEMBER APPROVAL _____ Date _____


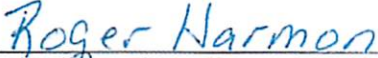



A1302

COMMISSIONER SID MILLER

Office of Rural Affairs
Texas Community Development Block Grant Program

SELF-MONITORING REVIEW CERTIFICATION

Grant Recipient: Johnson County	TxCDBG No. 7218250
By signing this Self-Monitoring Review Certification, I certify to the best of my knowledge and belief that the attached monitoring review checklists are true, complete, and accurate and that they were completed by a person possessing a current certificate for successful completion of TxCDBG Program Project Implementation training. I also certify that any findings of non-compliance have been accurately self-reported. A copy of this Self-Monitoring Review will be retained in local files with all project records in accordance with TxCDBG program project implementation policy.	
 Chief Elected Official Signature	Title: County Judge
 Printed Name: Roger Harmon	
Date: 3-14-22	

Based on my examination of pertinent project records for the referenced TxCDBG contract, I hereby certify that I have truthfully and accurately completed the attached Self-Monitoring Review checklist.	
Signature of Reviewer: 	Reviewer Title or Name of Firm: Project Manager, GrantWorks, Inc.
Printed Name: Mac Bruce	
Date: 2/23/22	

<i>TDA Use Only</i>	
Acceptance of Self-Monitoring Review	
TxCDBG Program Monitor Signature:	Date:
Printed Name:	

TxCDBG SELF-MONITORING CHECKLIST

Grant Recipient: Johnson County _____ Contract No. 7218250 _____

Chief Elected official: Roger Harmon, County Judge

Grant Administrator: Mac Bruce, GrantWorks, Inc.

Engineer: Eddy Daniel, DBI _____

Contract Start Date: 11/1/2018_ Ending Date: 10/31/2020 Extension: 4/30/2022

Contract Amount: \$275,000 Amount Drawn: \$190,951.67 % Match: 5%

Project Description/Comments:

Waterline improvements on CR 1121 (4,100 LF) and FM 4 (3,975 LF). Still in construction.

SELF-MONITORING REVIEW DATE: 2/24/22

Standard Checklist Sections:

- Procurement of Professional Services Review/Administration Services
- Financial Management Review
- Environmental Review
- Construction Contract Review
- Special Conditions Review
- Labor Standards Review
- Civil Rights Review
- Acquisition

Special Sections:

- n/a Force Account
- n/a Housing Rehabilitation
- n/a Demolition/Clearance
- n/a Relocation
- n/a Other: _____

PROCUREMENT OF PROFESSIONAL SERVICES/ADMINISTRATION SERVICES

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

Administration Services and Professional Services

NOTE: As of 2/1/2018, Grant Administration Services with an anticipated contract cost ≤ \$50,000 must be procured according to the prequalification procurement method. All administration and professional services related to TxCDBG projects must be procured competitively, regardless of the source of funds that will pay for the service contracts.

PROCUREMENT OF ADMINISTRATION SERVICES/OTHER PROFESSIONAL SERVICES					
	(Self-Monitoring Review Questions: (A-D))	Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
A.	Did the Grant Recipient receive approval for Non-competitive negotiation before contracting for professional services/administration services? (Applies to Disaster Relief/Urgent Need)		x		Date of Waiver: _____
B.	Did the Grant Recipient designate a nonprofit public agency to administer TxCDBG contract activities?		x		<input type="checkbox"/> Council of Government (COG) <input type="checkbox"/> Water District, River Authority <input type="checkbox"/> Other: _____
C.	Did the Grant Recipient self-administer the project with their own local government staff?		x		Name/title of the community's grant administrator:
D.	Did the Grant Recipient award the contracts for administration and engineering to the same firm?		x		
Self-Monitoring Review Questions:					
If you answered YES to either question A or B, then skip to question NO. 6 - 10.					
PREQUALIFICATION PROCUREMENT METHOD					
Note: Mandatory method for grant administration contracts \$50,000 or less procured on or after 2/1/2018.					
1.	Did the Grant Recipient form an Evaluation Team which contained at least one local official?			x	List Members and Titles:
2.	Did the Evaluation Team select at least three firms from the pre-qualified list for further consideration?			x	List Firm(s):
	Was at least one firm self-identified as a MBE, WBE, SBE, or a Section 3 firm?			x	List Firm(s):
3.	Did the Grant Recipient email the <i>Request for Project-Specific Proposal</i> (Form A506) to firms selected by the Evaluation Team?			x	
4.	Did the A506 contain include the following:			x	
	1) A description of the project			x	
	2) Anticipated scope of work			x	
	3) Evaluation criteria			x	
	4) Cost			x	

PROCUREMENT OF PROFESSIONAL SERVICES/ADMINISTRATION SERVICES					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
5.	Did the Grant Recipient receive proposals from firms who were sent RFPs? (Either a <i>Response from Service Provider</i> (Form A507) or a proposal in the firm's own format.)			x	List firms that responded:
6.	Is there evidence that the Grant Recipient evaluated each proposal according to evaluation criteria in the RFP?			x	
7.	Did the Evaluation Team recommend award to most responsive and responsible firm?			x	Name of successful respondent: _____
8.	DEBARMENT: Was SAM eligibility verified before contract award?			x	Date of verification: _____
9.	Is there evidence that the governing body (Commissioner's Court/Council) awarded the contract to the recommended firm?			x	Date of meeting: _____
TRADITIONAL PROCUREMENT METHOD					
Note: Mandatory method for contracts greater than \$50,000 paid in whole or in part with TxCDBG funds.					
1.	Did the Grant Recipient establish and use written selection criteria that included, <i>at a minimum</i> , a clear and accurate description of the technical requirements of the services to be procured?	x			Information Sheet included scope of work, project description, and qualifications
2.	Does the RFP provided offer detailed instructions and identify the criteria to be used in evaluating proposals?	x			Information Sheet included instructions, sample contract, and evaluation criteria
3.	Did the Grant Recipient advertise the RFP in a locally distributed newspaper, and submit the RFP to at least 5 individuals/firms?	x			Adv.: 10/16/16 Cleburne Times-Review Letters: <u>0</u> Email: <u>5</u> Fax: <u>0</u> No. of respondents: <u>2</u> Name of successful respondent: <u>GrantWorks, Inc.</u>
4.	Were any firms certified with the Texas Comptroller as a SBE/MBE/WBE included in the solicitation for proposals?	x			List SBE/MBE/WBE firms: Amazing Grants
5.	Is the deadline for receipt of proposals no earlier than 10 days after the date of public advertisement and/or mailing dates of the RFPs?	x			Date(s) of solicitation: <u>10/17/16</u> Deadline: <u>10/27/16</u>

PROCUREMENT OF PROFESSIONAL SERVICES/ADMINISTRATION SERVICES					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
6.	Did the Grant Recipient successfully negotiate a contract with the most highly qualified service provider/firm?	Y			
	If No, did the Grant Recipient formally end negotiations with that person/firm?			x	
7.	DEBARMENT: Was SAM eligibility verified before contract award?	Y			Date of verification: 10/3/16
8.	Is there evidence that the governing body (Commissioner's Court/Council) authorized the approval to proceed with contract execution?				Date of meeting: 11/14/2016
PRE-AGREEMENT AND REQUIRED CONTRACT PROVISIONS					
9.	Was there a pre-agreement request?	Y			Pre-Agreement Start Date:2/9/17
10.	Does the contract document include all of the following provisions?	Y			
	Names of both parties	Y			
	What is the effective date to begin performing services?	Y			Contract start date: 11/13/18 Time of Performance start date if different:
	Scope of services	Y			
	Firm fixed-price compensation	Y			
	Procedure for amending contract	Y			
	Termination for convenience and for cause clause(s) (For contracts >\$10,000)	Y			
	Procedures for determining the party responsible for any disallowed costs as a result of non-compliance	Y			
	Conflict of Interest	Y			
	Local Program Liaison	Y			
	Equal Opportunity Clause (For contracts >\$10,000)	Y			
	Section 3 of the HUD Act of 1968 (For contracts >\$100,000)	Y			
	Access to Records (2 CFR 200.336)	Y			
	Retention of records for three years from closeout of the grant to the State	Y			

Engineering/Architectural Services Paid with TxCDBG Funds

All professional services related to TxCDBG projects must be procured competitively, regardless of the source of funds that will pay for the service contracts.

PROCUREMENT OF PROFESSIONAL SERVICES/ADMINISTRATION SERVICES (Engineering/Architectural Services Paid with TxCDBG Funds)					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
A.	Did the Grant Recipient receive approval for non-competitive negotiation before contracting for professional services/administration services? (Applies to Disaster Relief/Urgent Need)		X		Date of Waiver: _____
B.	Did the Grant Recipient designate a nonprofit public agency to administer TxCDBG contract activities?		X		<input type="checkbox"/> Council of Government (COG) <input type="checkbox"/> Regional Planning Commission <input type="checkbox"/> Public Housing Authority <input type="checkbox"/> Other: _____
<i>If you answered Yes to either question A or B, then skip to questions 9 - 13.</i>					
1.	Did the Grant Recipient establish and use written selection criteria that included, at a <i>minimum</i> , a clear and accurate description of the technical requirements of the services to be procured?	Y			Information Sheet included scope of work, project descriptions, and qualifications.
2.	Does the written selection procedure contain only non-price criteria?	Y			Selection criteria excludes proposed cost.
3.	Did the Grant Recipient advertise the RFP in a locally distributed newspaper and submit the RFP to at least 5 individuals or firms?		N		Adv.: 10/16/16 Letters: _____ Email:4 Fax: _____ # of respondents: 4 _____ Name of successful respondent: <u>Daniel and Brown Engineering</u>
4.	Were any SBE/MBE/WBE included in the solicitation for proposals?	Y			List SBE/MBE/WBE firms:enprotec / Hibbs & Todd (small business);
5.	Is the deadline for receipt of proposals no earlier than 10 days after the date of public advertisement and/or mailing dates of the RFPs?	Y			Date(s) of solicitation: <u>10/16/16</u> Deadline: <u>10/27/16</u>
6.	Does the RFP provide offers detailed instructions and identify the criteria to be used in evaluating proposals?	Y			
7.	Did the Grant Recipient successfully negotiate a contract with the most highly qualified service provider/firm?	Y			<i>If No</i> , question 8 is applicable.

ENVIRONMENTAL REVIEW

There are three (3) levels to this checklist. When completing the review, ensure the correct section is used for the appropriate level.

1. Full EA - beginning on Page #10
2. Categorically Excluded Subject to §58.5 – beginning on Page #12
3. Categorically Excluded Not Subject to §58.5 / Converting to Exempt / Exempt – beginning on Page #15

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

ENVIRONMENTAL REVIEW

		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
1.	Level of Review				Full Environmental Assessment
2.	Did the Grant Recipient commit HUD funds or non-HUD funds or undertake a choice-limiting action prior to the State's environmental clearance?		N		CDBG Contract Start date: 11/1/2018_____ ENV Clearance date: 12/2/19_____ Execution Date for: Construction Contract: 5/24/21_____ Property purchase/conveyance: <u>7/1/2020</u> Adverse impact or choice-limiting action: _____ none _____
3.	Did the Grant Recipient authorize a Certifying Officer by resolution of the local governing body?	Y			Name and title of Certifying Officer: <u>Roger Harmon, County Judge</u>
4.	Did the Grant Recipient submit the appropriate HUD Environmental Checklist for the level of review?	Y			Date Checklist Signed: 10/15/19_____ Date RROF Signed: 11/5/19_____
5.	Was the RROF signed after the checklist signature?	Y			
6.	Does the project description include the following?				
	Project name, funding source and location;	Y			
	Use of project	Y			
	Size of project (sq. ft., No. of units, etc.)	Y			
	Type of Construction	Y			
7.	Is the project description similar in quantities and locations to the most current Performance Statement (Exhibit A) in the contract?	Y			
8.	Is the project description in the environmental review record (ERR) the same project that was constructed?	Y			The project is still under construction
9.	Does the ERR include a complete A302 Checklist with maps and verifiable source documentation?	Y			
10.	Does the ERR include Request for Release of Funds and Certification form (HUD Form 7015.16)?	Y			
11.	Did the Grant Recipient contact the Texas Historical Commission (THC) or cleared through the Programmatic Agreement with TDA?	Y			Date of THC Notification letter: 12/6/18_____ Date of THC Response letter: 9/18/19_____ Date Cleared through PA: _____

ENVIRONMENTAL REVIEW

		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
12.	Were Native American Interests Reviewed? (If cleared through the PA then this is N/A) to satisfy Section 106 of the National Historic Preservation Act? (Note: for Alabama-Coushatta Tribe of Texas the Grant Recipient must consult with the THPO).	Y			Date of Consult Letter(s): Date: 12/6/18 Tribe: Apache Tribe of Oklahoma Date: 12/6/18 Tribe: Comanche Nation, Oklahoma Date: 12/6/18 Tribe: Coushatta Tribe of Louisiana Date: 12/6/18 Tribe: Delaware Nation, Oklahoma Date: 12/6/18 Tribe: Wichita and Affiliate Tribes, Oklahoma Date: 12/6/18 Tribe: Tonkawa Tribe of Indians of Oklahoma
13.	Did the Grant Recipient have a flood plain map with the location of the project indicated on the map (if available)?	Y			
14.	If NO map , were flow studies completed, or did the reviewer rely on other sources to determine if project area is prone to flooding?			x	
14.	Did the Grant Recipient have a Wetlands Inventory Map with the location of the project indicated on the map?	Y			
16.	Did the Grant Recipient comply with Executive Order 11988 (Floodplains), Executive Order 11990 (Wetlands), and 24CFR§55.20 and complete the 8-Step Process?	Y			Early Public Notice: 11/29/18 _____ Public Comment Deadline: 12/14/18 _____ Notice of Explanation: 1/3/19 _____ Public Comment Deadline: 1/10/2019 _____
17.	Does the ERR contain a copy of the posted/ published Finding of No Significant Impact and Notice of Intent to Request a Release of Funds and posting/publisher's affidavit?	Y			<u>Combined Notice Published (15 days)</u> Newspaper: _____ Date Published: _____ Local Comment Period: _____ <u>Combined Notice Posting (18 days)</u> Posting Date Period: 10/17/19 – 11/4/2019 Location of Postings: <u>Johnson Co. Courthouse and County Website</u> Local Comment Period: 10/17/19 – 11/4/2019
18.	Was the local comment period 15-days beginning the following date of the publication (18-days if posted).	Y			

ENVIRONMENTAL REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
19.	Was the RROF signed after the end of the local comment period?	Y			
20.	Was the FONSI Notice sent to local news media, interest groups, local, State agencies, regional office of the EPA, and TDA? Note: The FONSI must at minimum be sent to the regional office of the EPA.				<u>EPA</u> Date: <u>10/15/19</u> <u>Other Interest Groups (if applicable)</u> Name: <u>TCEQ</u> Name: _____
21.	Were any public comments received?		N		
22.	<i>If YES, did the Grant Recipient address and resolve these comments before proceeding with completion of the RROF Certification form?</i>			X	
23.	Does the ERR contain an Authority to Use Grant Funds (AUGF) issued by TDA?	Y			Date AUGF issued: <u>12/2/19</u> Effective date of AUGF if different: _____
24.	Did the magnitude or extent of the project remain substantially unchanged (i.e., changes in target area, project activities)?	Y			<i>If NO, questions A, B, C, D are applicable.</i>
A.	Did the Grant Recipient submit a TxCDBG Contract Amendment/Modification Request (Form A1101)?				
B.	Did the Grant Recipient re-evaluate the original environmental findings?				
C.	Were the original environmental findings still valid?				
D.	If the original findings were no longer valid did the Grant Recipient prepare an environmental assessment addressing changes to the project?				
25.	Did TDA issue an updated Authority to Use Grant Funds for the modified project?		N		Date AUGF issued: _____ Effective date of AUGF if different: _____
ENVIRONMENTAL REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
1.	Level of Review				Categorically Excluded Subject to §58.5

ENVIRONMENTAL REVIEW

		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
2.	Did the Grant Recipient commit HUD funds or non-HUD funds or undertake a choice-limiting action prior to the State's environmental clearance?			X	CDBG Contract Start date: _____ ENV Clearance date: _____ Execution Date for: Construction Contract: _____ Property purchase/conveyance: _____ Adverse impact or choice-limiting action: _____
3.	Did the Grant Recipient authorize a Certifying Officer by resolution of the local governing body?			X	Name and title of Certifying Officer: _____
4.	Did the Grant Recipient submit the appropriate HUD Environmental Checklist for the level of review?			X	Date Checklist Signed: _____ Date RROF Signed: _____
5.	Was RROF signed after the checklist signature?			X	
6.	Does the project description include the following?				
	Project name, funding source and location			X	
	Use of project			X	
	Size of project (sq. ft., No. of units, etc.)			X	
	Type of Construction			X	
7.	Is the project description similar in quantities and locations to the most current Performance Statement Listed as Exhibit A in the contract)?			X	
8.	Is the project description in the environmental review record (ERR) the same project that was constructed?			X	
9.	Does the ERR include a complete A302 Checklist with maps and verifiable source documentation?			X	
10.	Does the ERR include Request for Release of Funds and Certification form (HUD Form 7015.16)?			X	
11.	Did the Grant Recipient contact the Texas Historical Commission or cleared through the Programmatic Agreement (PA) with TDA?			X	Date of THC Notification letter: _____ Date of THC Response letter: _____ Date Cleared through PA: _____
12.	Were Native American Interests Reviewed? (If cleared through the PA then this is N/A) to satisfy Section 106 of the Nat. Historic Preservation Act? (Note: for Alabama-Coushatta Tribe of Texas the Grant Recipient must consult with the THPO).			X	Date of Consult Letter(s): Date: _____ Tribe: _____ Date: _____ Tribe: _____ Date: _____ Tribe: _____ Date: _____ Tribe: _____ Date: _____ Tribe: _____

ENVIRONMENTAL REVIEW

		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
13.	Did the Grant Recipient have a floodplain map with the location of the project indicated on the map (if available)?			X	
14.	If NO map, were flow studies completed, or did the reviewer rely on other sources to determine if the project area is prone to flooding?			X	
15.	Did the Grant Recipient have a Wetlands Inventory Map with the location of the project indicated on the map?			X	
16.	Did the Grant Recipient comply with E.O. 11988 (Floodplains), E.O. 11990 (Wetlands), and 24 CFR55.20 and complete the 8-step process?			X	Early Public Notice: _____ Public Comment Deadline: _____ Notice of Explanation: _____ Public Comment Deadline: _____
17.	Does the ERR contain a copy of the published <i>Notice of Intent to Request a Release of Funds</i> and publisher's affidavit?			X	<u>NOI-RROF Published (7 days)</u> Newspaper: _____ Date Published: _____ Local Comment Period: _____ <u>NOI-RROF Posting (10 days)</u> Posting Date Period: _____ Location of Postings: _____ Local Comment Period: _____
18.	Was the local comment period 7-days beginning the following date of publication (10-days if posted)?			X	
19.	Was the RROF signed after the end of the local comment period?			X	
20.	Were any public comments received?			X	
21.	If Yes , did the Grant Recipient address and resolve these comments before proceeding with the RROF Certification form.			X	
22.	Does the ERR contain an Authority to Use Grant Funds (AUGF) issued by TDA?			X	Date AUGF issued: _____ Effective date of AUGF if different: _____
23.	Did the magnitude or extent of the project remain substantially unchanged (i.e. changes in target area, project activities)?			X	<i>If No, questions A, B, C, D are applicable.</i>

ENVIRONMENTAL REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
A.	Did the Grant Recipient submit a TxCDBG Contract Amendment/Modification Request (Form A1101)?			X	
B.	Did the Grant Recipient re-evaluate the original environmental findings?			X	
C.	Were the original environmental findings still valid?			X	
D.	If the original findings were no longer valid did the Grant Recipient prepare an environmental assessment addressing changes to the project?			X	
24.	Did TDA issue an updated Authority to Use Grant Funds for the modified project?			X	Date AUGF issued: _____ Effective date of AUGF if different: _____

ENVIRONMENTAL REVIEW					
		Y	N	N/A	
1.	Level of Review				Categorically Excluded Not Subject to §58. 5 / Converting to Exempt / Exempt
2.	Is the Environmental Review Record available for public review?			X	Name of Certifying Officer: _____
3.	Did the Grant Recipient submit the appropriate HUD Environmental Checklist for the level of review?			X	
4.	Does the project description include the following:				
	Project name, funding source and location;			X	
	Use of project			X	
	Size of project (sq. ft., No. of units, etc.)			X	
	Type of Construction			X	
5.	Is the project description similar in quantities and locations to the Performance Statement Listed as Exhibit A in the contract?			X	
6.	Is the project description in the Environmental Review the same project that was constructed?			X	
7.	Does the ERR contain the Exemption Determination for Activities Listed at 24 CFR §58.34 Checklist, including written documentation of its determination that each activity or project is Exempt and meets the conditions specified for such exemption?			X	

ENVIRONMENTAL REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS AND CORRECTIVE ACTION TAKEN
8.	Did the project convert to Exempt from Categorical Exclusion Subject to 58.5 under 24 CFR §58.34(a)(12)?			X	
9.	Is the original Environmental Clearance Letter from the Department for Exempt on file?			X	

**CONSTRUCTION / MATERIALS / EQUIPMENT
PROCUREMENT REVIEW**

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

CONSTRUCTION / MATERIALS / EQUIPMENT PROCUREMENT REVIEW					
Contractor Name: Patterson Professional Services, LLC		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
SEALED BIDDING PROCUREMENT					
1.	Were the advertisements for construction bids published in a newspaper in the municipality (city), or of general circulation if (county) for two consecutive weeks (at least seven days apart)?	Y			<input type="checkbox"/> NO local newspaper <input type="checkbox"/> City x County Advertising Dates: 1/19/21& 1/26/21
2.	Was the advertising date at least 14 days before the bid opening date?	Y			
3.	Is there evidence that proper competitive bidding procedures were used? (e.g., bid opening minutes, bid tabulation, etc.)	Y			Number of bids received: <u>6</u>
4.	Are all bids received maintained in the Grant Recipient's files?	Y			
5.	Were there any bid addendums?		N		
	<i>If YES, is there evidence that all bidders received the addendums?</i>				
6.	Is the contract award date (not execution date) within 90 days of the bid opening?	Y			Bid opening: 2/4/21 Award date: 3/22/21 Execution date: 5/24/21
7.	Was the contract amount the same as the base + alternates bid?	Y			
8.	Was the contract awarded to the lowest responsible bidder?	Y			
9.	SECTION 23. <u>DEBARMENT</u> : Was verification of the prime construction contractor received before contract award?	Y			Date of verification: <u>2/9/21</u>
10.	SECTION 23. <u>DEBARMENT</u> : Did the Grant Recipient request/receive verification for all sub-contractors?			x	Number of subs: _____
11.	Does the project described in the bid/contract substantially agree with the TxCDBG Performance Statement/PCR?		N		Differences: Amendments 1 & 2 were extension requests. Mod 1: acquisition of utility easements Mod 2: decrease LF of FM 4 waterline Mod 3: street name correction
	<i>If NO, was a performance statement modification requested?</i>	Y			Date: Amend 1: 9/16/20 Amend 2: 9/27/21 Mod 1: 3/25/19 Mod 2: 1/13/20 Mod 3: 7/1/20
12.	Were the plans/specifications prepared by a registered engineer/architect and carry the affixed seal?	Y			Name of Engineer/Architect: <u>Eddy W. Daniel</u> Seal #: 72181

CONSTRUCTION / MATERIALS / EQUIPMENT PROCUREMENT REVIEW					
Contractor Name: _____		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
SMALL PURCHASE PROCUREMENT					
1.	Did the Grant Recipient utilize the small purchase procurement?			x	
	<i>If Yes, Did the Grant Recipient obtain price quotations from an adequate number (3 minimum) of qualified sources?</i>			x	
2.	Did total purchases remain below the \$50,000 aggregate limit?			x	Estimated Small Purchases: \$ _____
3.	Is there any appearance of separate, sequential, or component purchases to avoid competitive bidding requirements?			x	
4.	SAM Clearance: Was verification of the prime construction contractor received before contract award?			x	Date of verification: _____

CONSTRUCTION		
Description of Construction Activity	Estimated Cost	Number of Quotes
MATERIALS / EQUIPMENT		
Description of Materials or Equipment	Estimated Cost	Number of Quotes

CONSTRUCTION / MATERIALS / EQUIPMENT PROCUREMENT REVIEW					
Contractor Name: _____		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
PROCUREMENT THROUGH A PURCHASING COOPERATIVE					
1.	Did the purchasing cooperative publish an invitation for bids in a newspaper during two consecutive weeks (at least seven days apart)?			X	Name of newspaper: _____ Advertising Dates: _____
2.	Was the advertising date at least 14 days before the bid opening date?			X	
3.	Is there evidence that proper competitive bidding procedures were used? (e.g., bid tabulation)			X	Number of bids received: _____
4.	Were there any bid addendums?			X	
	If Yes , is there evidence that all bidders received the addendums?			X	
5.	Is there documentation demonstrating that the cooperative took affirmative steps to include MBEs and WBEs in contracting opportunities?			X	
6.	Was the vendor cleared on the System for Award Management for non-debarment status?			X	Date of verification: _____
7.	Was the vendor contract awarded to the lowest responsible bidder?			X	Bid opening: _____ Award date: _____ Execution date: _____
8.	Is there an executed interlocal agreement between the Grant Recipient and the third party purchasing cooperative?			X	Cooperative: _____ Execution Date: _____
9.	Was the purchase agreement/purchase order amount the same as the base bid + any selected options included in the vendor's bid?			X	
10.	Were any options not included in the vendors bid added to the final cost of the item purchased?			X	
	If Yes , did the options increase the base cost of the item purchased by 25% or more? Note: Considered tantamount to a change order.			X	Base Price: _____ Cost of non-bid items added: _____ % Increase: _____

CONSTRUCTION / MATERIALS / EQUIPMENT PROCUREMENT REVIEW					
Contractor Name: Patterson Professional Services, LLC.		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
CONSTRUCTION COMPLETION					
1.	Is construction complete?		N		In process: in construction _____
2.	Does the Grant Recipient have "as-built" plans on the premises?		N		Was evidence available for the desk review? Yes ___ No <u>x</u>
3.	Have all payment requests from prime and/or sub-contractor(s) been resolved? (Affidavit of All Bills Paid or COCC certifying no unpaid claims)		N		Pending pay estimate, affidavit of all bills paid and COCC
4.	Has a Certificate of Construction Completion been completed?		N		
SPECIAL ASSESSMENTS (FIRST-TIME UTILITIES)					
5.	Special Assessments: Were any special assessments levied on property owners and LMI occupants (e.g., service connections, tap-on fees/charges, monitoring fees, deposits, capital recovery fees), as a result of this project?			x	
	<i>If Yes, questions 20 and 21 are applicable.</i>			x	
6.	Did the Grant Recipient pay for all assessments for low-income households?			x	
7.	Did the Grant Recipient certify that it does/did not have sufficient TxCDBG funds to pay the assessment on behalf of the moderate-income occupants?			x	
CHANGE ORDERS (PER CONTRACT)					
8.	Were all cumulative change orders that increased the contract price within 25% of the original contract price?	Y			% Cumulative Increase _____ 1.838% _____
9.	<i>(County Only exception) If No, were the change orders required to comply with federal or state law or regulation?</i>			x	
10.	Did the contractor consent to all cumulative change orders that decreased the contract price within 25% of the original contract price if a municipality or by 18% if a county? Loc. Gov. Code §§ 252.048(d) & 262.031(b)			x	% Cumulative Decrease _____
11.	Did TxCDBG approve all change orders (except final quantity changes)?	Y			No. of change orders: 1 _____ No. approved: <u>1</u> _____
12.	Is an executed contract PS amendment or modification on file for significant changes in the scope of work resulting from change orders or alternates?		N		

CONSTRUCTION / MATERIALS / EQUIPMENT PROCUREMENT REVIEW				
Contractor Name: Patterson Professional Services	Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
CONTRACT PROVISIONS				
Did the contract contain the following provisions and documents as required in the TxCDBG PIM?	Y			
Contract Period	Y			
A provision for a at least 5% retainage	Y			
Bid Bonds	Y			
Payment Bonds	Y			
Performance Bonds	Y			
Grant Recipient's adopted Section 3 Plan	Y			
Equal Opportunity Guidelines for Construction Contractors (Form A1001)	Y			
Construction Contractor Section 3 Plan	Y			
Statement of Bidder's Qualifications	Y			
Certificate of Owner's Attorney	Y			Reviewed by Bill Moore, County Attorney, Johnson County
Certificate of Insurance	Y			
Compliance with Air and Water Acts (>\$150,000)	Y			
Equal Opportunity (>\$10,000)	Y			
Section 3 Clause (contracts >\$100,000)	Y			
Remedies for Breach of Contract (>\$50,000)	Y			
Byrd Anti-Lobbying Certification (≥\$100,000)	Y			
Technical Specification/Drawings	Y			
HUD 4010 Form	Y			
Wage Decision(s)	Y			GWD No.: TX20210026Mod: _____ GWD No.: _____ Mod: _____
Termination Clause(s) for Cause and Convenience (all contracts >\$10,000)	Y			
Access to Records by grantee, sub-grantee, Federal grantor agency, the Comptroller General of the U.S.	Y			
Retention of Records (For three years from closeout of the grant to the State)	Y			

SPECIAL CONDITIONS

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

SPECIAL CONDITIONS					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
1.	<p>Did the Grant Recipient submit the permits and approval certification Form A401?</p> <p>Types of Permits/Approvals:</p> <ul style="list-style-type: none"> • TCEQ • TDLR • THC • TxDOT • Other approvals required 	Y			<p>3 TxDOT Permits: FTW20201026152920 FTW20201026155436 FTW20201026160524</p>
2.	<p>If the project is exempt from the Texas Engineering Practice Act requirement that public works projects must be designed, supervised, inspected, and accepted by a registered professional engineer, did the Grant Recipient document the exception through a letter certified by the chief local official?</p>			x	
3.	<p>Did the Grant Recipient submit a letter from TCEQ that the constructed water well is approved for interim use and may be temporarily placed into service pursuant to Title 30, TAC, Chapter 290-Rules and Regulations for Public Water Systems prior to the submission of the PCR?</p>			x	
4.	<p>Did the Grant Recipient provide documentation that final plans, specifications and installation of its sewer systems improvements have been reviewed and approved by the City or County Health Department through authority granted by TCEQ.</p>			x	
5.	<p>Did the Grant Recipient provide documentation of decommissioned abandoned septic tank, cesspool, seepage pit, etc.</p>			x	
6.	<p>Did the Grant Recipient provide documentation from TDLR concerning compliance with the Elimination of Architectural Barriers Act? (Applies to construction of a building or public facility with an estimated cost ≥ \$50,000).</p>			x	
7.	<p>Did the Grant Recipient erect/place legible temporary project signage in a prominent visible public area at the construction project site or along a major thoroughfare within the community?</p>	Y			<p><input checked="" type="checkbox"/> Temporary Signage Photo <input type="checkbox"/> Permanent Signage Photo</p>

LABOR STANDARDS REVIEW

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

List Contractors Prime/Subs	NO. Payrolls Available	Interviews Conducted YES / NO
<input type="checkbox"/> Prime <input type="checkbox"/> Sub Patterson Professional Services	22	YES
<input type="checkbox"/> Prime <input type="checkbox"/> Sub		
<input type="checkbox"/> Prime <input type="checkbox"/> Sub		
<input type="checkbox"/> Prime <input type="checkbox"/> Sub		
<input type="checkbox"/> Prime <input type="checkbox"/> Sub		

This checklist is completed for cities/counties with TxCDBG funded construction contracts over \$2,000 that include labor (except for rehabilitation of residential property where fewer than 8 units were rehabilitated under one construction contract or fewer than 8 are in one complex, or demolition/clearance that is not preparatory to construction). If the prime construction contract is over \$2,000, all labor standards procedures, including Davis-Bacon prevailing wage requirements, apply and payrolls must be obtained for the subcontracted workers regardless of the amount of the subcontract.

LABOR STANDARDS REVIEW					
		YES	NO	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
1.	Was the Appointment of a Labor Standards Officer (LSO) (Form A701) submitted via email to the Department's Labor Standards Specialist (LSS) Labors@TexasAgriculture.gov prior to the first construction drawdown request?	Y			Name of appointed LSO: <u>Mac Bruce and Jill Hooks, 10-22-21</u>
2.	Was the labor activity DBRA exempt?		x		Applicable DBRA exemption for the contract, if any, disclosed on A503: <ul style="list-style-type: none"> <input type="checkbox"/> Construction contract of \$2,000 or less <input type="checkbox"/> Single-family residential property < 8 contiguous units <input type="checkbox"/> Demolition and/or clearance activities only (i.e. debris removal) <input type="checkbox"/> Prime contract where labor charges are < 13% of the total price <input type="checkbox"/> Construction by a public utility extending its own system <input type="checkbox"/> No federal funds were used to pay for the contract
3.	Did the LSO obtain a General Wage Decision (GWD) from https://beta.sam.gov prior to the advertising or soliciting of bids?	Y			
4.	Did the LSO complete the Wage Rate Issuance Notice (form A702) and retain a copy in the labor standards project records?	Y			
5.	Did the LSO submit a Ten Day Confirmation Form (Form A703) to TDA's Labor Standards Specialist for approval at least ten days, but not less than five days, prior to the bid opening?	Y			10-day Call _____ (Date TDA Confirmed) Bid Opening _____ GWD_TX20210026 Mod _____
	10-day Call _____ (Date TDA Confirmed) Bid Opening _____ GWD_____ Mod _____			x	10-day Call _____ (Date TDA Confirmed) Bid Opening _____ GWD_____ Mod _____
6.	Is a copy of the current GWD retained in the GR contract files with other labor standards documentation?	Y			
7.	Were wage rates modified between the Ten Day Confirmation date and bid opening date?		N		
A.	<i>If YES to #7, did the LSO provide support for not having time to contact all bidders prior to bid opening?</i>			x	

LABOR STANDARDS REVIEW

		YES	NO	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
B.	<i>If NO to A, does the contract file show evidence the TxCDBG Labor Standards Specialist was contacted for resolution?</i>			x	
8.	Did the Grant Recipient award the construction contract(s) within 90 days of the bid opening?	Y			Award date: <u> 2-4-21 </u> Award date: <u> 3-22-21 </u>
	<i>If NO, did the Grant Recipient obtain an extension or an update of the GWD?</i>				
9.	Was the current GWD included in the bid package(s)?	Y			
10.	Is the current GWD included in the awarded/executed construction contract documents and specifications package?	Y			
11.	Did the Grant Recipient hold a pre-construction conference(s) for each prime construction contract in excess of \$2,000?	Y			Date: <u> 5/7/21 </u> Date: _____
12.	Did the Grant Recipient submit labor standards data on a Financial Interest Report (Form A503) for each prime construction contract > \$2,000 to CDBGReporting@TexasAgriculture.gov?	Y			
13.	Were all classifications reported on the certified weekly payrolls listed on the GWD?	Y			
14.	Were classifications not listed on GWD issuance letter requested as additional classifications used on the project?			x	
15.	Did the Grant Recipient appoint a designated inspector to conduct on-site project employee interviews in the case the LSO is not available?	Y			Name of Designated Inspector: <u> Cloy Richards </u>
16.	Did the LSO or designated inspector conduct on-site project employee interviews?	Y			
17.	Was the employee interview information recorded on the Record of Employee Interview (Form A707) or HUD-Form 11 or facsimile?	Y			
18.	If employees were not available for interview by the LSO or designated inspector, did the LSO document			x	EIs obtained 1/27/2022
	A. The date of the on-site visit?			x	
	B. The reason employees were not available?			x	
	C. The attempt to obtain the required information through other means, e.g., mailed questionnaires?			x	

LABOR STANDARDS REVIEW					
		YES	NO	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
19.	Are certified weekly payroll reports for prime and subcontractors signed (including the payroll Statement of Compliance) and maintained in the Grant Recipient contract files, beginning with the first week in which project construction begins and for every week until the work is completed?	Y			
20.	Are "NO WORK" weekly payroll report(s) or a note that states "NO WORK" that indicates a break in project work included in the certified weekly payroll report(s)?	Y			
21.	Do the "NO WORK" weekly payroll report(s) state an approximate date when the construction contractor will return to the project site?	Y			
22.	Is there evidence that certified weekly payroll report(s) were compared against employee interviews and the GWD to verify that correct wages were paid?	Y			
23.	Were all project workers paid, at least, the specified Davis-Bacon wage rates (including fringe benefits) that applied to this project?	Y			
	<i>If NO, the following questions apply:</i>				
	Did the Grant Recipient notify the prime contractor(s) of the violation(s) of the underpayments in writing?			X	
	Did the prime contractor correct the underpayments in 30 days?			X	
	Has wage restitution been paid by the prime contractor to the affected employee(s)?			X	
	Has the Grant Recipient obtained corrected certified weekly payrolls, including signed Statement(s) of Compliance, and copies of both sides of the canceled check(s) as proof of payments from the prime contractor(s)?			X	
<i>As of October 10, 1995, construction contracts of \$100,000 or less are exempt from CWHSSA overtime, health, and safety provisions. However, even where CWHSSA overtime pay is not required, Fair Labor Standards Act (FLSA) overtime pay is probably still applicable.</i>					
24.	Were all non-exempt workers paid at a rate of one and one-half times the hourly rate for all hours in excess of 40 hours in a work week?	Y			
25.	Did the Grant Recipient notify the prime contractor(s) in writing on its official letterhead and signed by an authorized elected official of the amount of liability for liquidated damages? (\$10 per day per violation)			x	Notice of the Determination to Assess Liquidated Damages: Date: _____

LABOR STANDARDS REVIEW					
		YES	NO	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
26.	Did the construction contractor submit a request for a waiver with support documentation to the Department within 60 days of notification?			x	Date: _____
27.	Have the liquidated damages been paid or waived by HUD/DOL?			x	Date: _____
28.	Were any workers complaints received by the Department, HUD, or DOL?		N		
29.	Were cases referred to the appropriate agency?			x	

CIVIL RIGHTS REVIEW

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

CIVIL RIGHTS REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
1.	Has the Grant Recipient appointed a Civil Rights Officer? (CRO serves as Section 504 Coordinator and Fair Housing Officer)	Y			Name and/or Title of CRO: Roger Harmon _____
2.	Has the Grant Recipient's local governing body passed a resolution adopting/affirming required civil rights, equal opportunity, and citizen participation policies and procedures?	Y			Date Resolution Passed: 12/10/2018 _____
3.	Was the resolution adopted or reaffirmed no more than two years prior to the contract start date?	Y			
SECTION 3 POLICY COMPLIANCE					
4.	Did the Grant Recipient prepare and make available the written Section 3 Policy to the public?	Y			
5.	Did the Grant Recipient implement the Section 3 Policy?	Y			
MBE COMPLIANCE					
6.	Is there evidence that the Grant Recipient affirmatively publicized to small, minority and women-owned businesses whenever possible? Check affirmative action(s) taken below:	x			
	Emailed a copy of the request for proposal/qualifications or invitations for bids to MWBE@texasagriculture.gov	x			
	Placed qualified small, MBE, and WBE firms in solicitation lists and solicited whenever they were potential sources	x			
	When economically feasible, divided project requirements into smaller tasks or quantities to allow participation by small businesses, MBEs, and WBEs.		x		
	Established delivery schedules to encourage participation by small businesses, MBEs, and WBEs	x			
	Utilized the Small Business Administration, Minority Business Development Agency of the Department of Commerce, minority chambers of commerce, or other resources.		x		
	Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed above.		x		

CIVIL RIGHTS REVIEW					
SECTION 504 COMPLIANCE					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
7.	Did the Grant Recipient implement procedures that allow individuals with disabilities to obtain information concerning the existence and location of accessible services, activities, and facilities?	Y			Signed on 12/10/2018
9.	Has the Section 504 Self-Evaluation Review Form (A1006) been completed?	Y			Signed on 11/13/18
10.	Does the Grant Recipient employ fifteen or more persons?	Y			<i>If YES, questions 11, 12, and 13 are applicable.</i>
11.	Did the Grant Recipient designate Section 504 coordinator? (Same as Civil Rights Officer)	Y			Name: <u>Roger Harmon, County Judge</u>
12.	Did the Grant Recipient publish a notice in that identifies its Section 504 compliance coordinator, and states, where appropriate, that it does not discriminate in admission or access to, or treatment or employment in, its federally assisted programs?	Y			Newspaper Publication: <u>Cleburne Times-Review</u> <u>11/21/2018</u> Posted in Public Building and target area or website: _____
13.	Did the Grant Recipient adopt grievance procedures that incorporate due process standards and allow for prompt resolution of complaints alleging any action prohibited by 24 CFR Part 8?	Y			Signed on: 12/10/18
CITIZEN PARTICIPATION REQUIREMENTS					
14.	Has the Grant Recipient adopted a Citizen Participation Plan?	Y			Signed on:11/26/18
15.	Does the Grant Recipient maintain written citizen complaint procedures?	Y			
16.	Do the procedures provide a timely written response to complaints and grievances?	Y			Number of Days: <u>10</u>
17.	Has the Grant Recipient notified its citizens of the location and hours at which they may obtain a copy of the written procedures and the address and telephone number for submitting complaints?	Y			Newspaper Publication: <u>11/21/18 Cleburne Times-Review</u> Posted in Public Building and target area or website: _____
18.	Were there any written complaints about the current TxCDBG project(s)?		N		
19.	Did the Grant Recipient address the complaint(s)?			x	

CIVIL RIGHTS REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
EXCESSIVE FORCE POLICY					
20.	TxCDBG CONTRACT: CERTIFICATION: Has the Grant Recipient adopted and enforced a policy prohibiting the use of excessive force by law enforcement agencies within its jurisdiction against any individual engaged in nonviolent civil rights demonstrations; and a policy of enforcing applicable state and local laws against physically barring entrance to or exit from a facility or location which is the subject of such nonviolent civil rights demonstration within its jurisdiction?	Y			Date adopted: 12/10/2018
FAIR HOUSING REVIEW					
<i>TxCDBG CONTRACT CERTIFICATION (2): This TxCDBG Program will be conducted and administered in conformity with the Civil Rights Act of 1964 (42 U.S.C. SEC. 2000a et seq.) and the Fair Housing Act (42 U.S.C. Sec. 3901 et. seq.), and that it will affirmatively further fair housing.</i>					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
21.	Did the Grant Recipient conduct acceptable activities to affirmatively further fair housing during the contract period?	Y			Proclamation of Fair Housing and Newspaper Notice
22.	Proclamation/Declaration/Resolution	Y			Date Performed: 12/10/18
23.	Has the Grant Recipient adopted a Fair Housing Ordinance (municipalities only)			x	Date adopted/amended: _____
	Does the ordinance/policy include all 7 federally protected classes? (race, color, religion, sex, handicap, familial status, and national origin)			x	
	Does the ordinance contain a penalty clause?			x	
24.	Fair Housing Statement		x		Date:
25.	Policies	x			Date:12/10/18
26.	Other: _____			x	Date:
27.	Message included on/with utility bill		x		Date:

CIVIL RIGHTS REVIEW					
LIMITED ENGLISH PROFICIENCY (LEP)					
		Y	N	N/A	DOCUMENT SOURCE AND COMMENTS
28.	Does the Grant Recipient have any Limited English Proficiency (LEP) speaking populations within its community? (LEP group is >5% or >1,000 individuals according to U.S. Census Bureau Data)	Y			5% spanish
29.	If the Grant Recipient identified an LEP group(s) did they prepare an LEP plan?	Y			
30.	Does the LEP Plan call for acceptable procedures for meeting LEP group needs (e.g. translated vital documents, translated public notices, translation services, or adequate number of bilingual staff)? (See also safe harbor written language assistance recommendations.)	Y			

ACQUISITION OF REAL PROPERTY

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

ACQUISITION REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
1.	Has the Grant Recipient submitted its TxCDBG <i>Initial Acquisition Report</i> (Form A600)?	Y			
2.	Did the Grant Recipient report on the <i>Initial Acquisition Report</i> that acquisition of real property is required for the project?	Y			<input type="checkbox"/> Voluntary Acquisition <input type="checkbox"/> Involuntary Acquisition
3.	If Involuntary Acquisition, did the Grant Recipient receive TDA approval to proceed?	Y			Date TDA Approved: <u>2/4/2020</u>
	<i>If YES, is acquisition included in the TxCDBG contract Performance Statement scope of activities?</i>	Y			Acquisition was added to the TxCDBG Performance Statement via Mod 1 approved on 8/19/19
4.	If Involuntary Acquisition, did the Grant Recipient report that the estimated value of the property to be acquired is \$10,000 or less and request for TDA to approve waiver valuation of the property?	Y			Date TDA Approved: <u>2/4/2020</u>
4.	Did the Grant Recipient request TDA approval to waive appraisal requirements if the property was estimated to be greater than \$10,000 but less than \$25,000 in value.			x	Date TDA Approved: _____ Date TDA Denied: _____
5.	Is there evidence that any relocation or displacement resulted from the acquisition activities?		x		<i>If YES, complete the relocation checklist.</i>
6.	Did the Grant Recipient submit the TxCDBG <i>Acquisition Report</i> (Form A601) that included all parcels acquired for the project?	x			Number of Parcels Acquired: Voluntary _____ Voluntary Donation _____ Involuntary 2 _____ Involuntary Donation _____
7.	Is an updated TxCDBG <i>Acquisition Report</i> required?		x		
8.	If acquiring entity <u>has eminent domain authority</u> , was the acquisition properly established to be voluntary?			x	<input type="checkbox"/> Not site specific <input type="checkbox"/> Not part of planned area <input type="checkbox"/> Owner informed of market value <input type="checkbox"/> Owner informed eminent domain will not be used to acquire property.

ACQUISITION REVIEW

Voluntary Acquisition

		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
9.	If the acquiring entity <u>lacks eminent domain authority</u> , was the acquisition properly established to be voluntary?			x	<input type="checkbox"/> Sub-recipient (other than a municipality or county) lacks eminent domain authority. <input type="checkbox"/> Property acquired is owned by federal, state, local government, or a political subdivision such as a school district. <input type="checkbox"/> Acquisition of property is for economic development purposes (unless project is for elimination of slum or blighted areas).
10.	Was each owner notified in writing that eminent domain authority will not be used to acquire his/her property if an amicable agreement is not reached?			x	
11.	Was each owner informed in writing of the estimated market value of his/her property?			x	
12.	Did the owner accept the offer for market value of the property?			x	
13.	Did the parties agree to a negotiated settlement for purchase of the property?			x	
14.	Did the owner agree in writing to donate the property?			x	
15.	Is there evidence that deeds for utility easements or tracts acquired were recorded with the County?			x	

Involuntary Acquisition

16.	Did the Grant Recipient notify the landowner, in writing, of interest acquiring his/her property?	Y			
17.	Was the estimated value of the property to be acquired less than \$10,000 and was waiver valuation used to determine the market value of the land?	Y			
18.	Did the landowner agree in writing to donate his/her property and waive the right to receive just compensation?		N		
19.	Is there evidence that the landowner received required landowner rights brochures (e.g. certified mail delivery, signature receipt acknowledgement)?	Y			x 1) HUD's <i>When a Public Agency Acquires Your Property</i> booklet and x 2) <i>Landowner's Bill of Rights</i> ?
20.	If an appraisal was required, was the landowner invited in writing to accompany the appraiser?			x	
21.	Was a review appraisal conducted?			x	

ACQUISITION REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
22.	Did the Grant Recipient provide the owner with a written offer for the amount determined to be just compensation? Did the offer include a summary statement?	Y			
23.	Did the owner accept the offer of just compensation for the property?	Y			
24.	Did the parties agree to a negotiated settlement for purchase of the property?		N		
	If a negotiated settlement was reached (for more or less than the just compensation amount) and federal funds were used for purchase of the property, did the Grant Recipient prepare an Administrative Settlement document?			x	Note: For negotiated sales using federal funds, the Administrative Settlement document must be filed with the <i>Acquisition Report</i> (Form A601).
25.	Was the owner reimbursed for any expenses incidental to transfer of title to the Grant Recipient, including recording fees, transfer taxes, documentary stamps, evidence of title, boundary surveys, legal descriptions of the real property, and similar expenses incidental to conveying the real property?		N		
26.	Did the owner agree in writing to donate the property and to waive his/her right to just compensation?		N		
27.	Is there evidence that deeds for utility easements or tracts acquired were recorded with the County?	Y			
Environmental Review					
28.	Was a deed, agreement for donation of property or a long-term lease executed prior to TDA environmental clearance and authorization to use grant funds?		N		TDA Environmental Clearance Date: 12/2/19 Date of Executed Deed/Agreement: 11/4/20 and 7/1/20
Condemnation					
29.	If negotiations for involuntary acquisition of property failed, did the Grant Recipient seek TDA approval to proceed with condemnation of private property through use of eminent domain authority?			x	TDA Determination for Use of Condemnation: Denied: _____ Approved: _____

FORCE ACCOUNT REVIEW
NO FORCE ACCOUNT ON THIS PROJECT

No. Findings: 0

Summary of Findings:

(List any findings and corrective action taken here. Attach to this checklist supporting evidence of a finding, evidence of a remediated finding, or a Corrective Action Plan (CAP), if applicable.)

Summary of Concerns:

FORCE ACCOUNT REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
1.	Did the Grant Recipient notify the Department in writing that force account labor would be used?			X	
2.	Are all employees whose time is being charged to the TxCDBG contract treated as employees in accordance with the Grant Recipient's personnel policies?			X	
3.	Were any employees classified as temporary employees?			X	
	If YES, do the personnel policies include provisions for temporary employees?			X	
4.	Is the time charged to the project supported by time and attendance or equivalent records for all employees?			X	
5.	Are salaries and wages of employees that were chargeable to more than one cost objective supported by appropriate time distribution records?			X	
6.	Do the amounts charged to the contract reconcile with the hours on time and attendance sheets X hourly rates?			X	
7.	Were fringe benefits charged in accordance with the personnel policies?			X	
8.	Were the non-exempt employees charged to the TxCDBG project paid 1.5 times straight time for all hours worked in excess of 40 hours/week?			X	
EQUIPMENT AND MATERIALS					
Method Used for Charging Equipment Costs					
___FEMA ___ Depreciation ___ Lease/Rental ___ Lease/Purchase ___ Use Allowance					
9.	Did TDA require additional justification if rental costs were significantly higher than the FEMA rate?			X	
10.	Were time records maintained for equipment used on this project?			X	
11.	Were fuel, repairs and lubricant costs also charged to this project?			X	
Lease/Rental					
12.	Did the Grant Recipient follow proper procedures in procuring the lease/rental of the equipment?			X	
13.	Was equipment used solely for the TxCDBG project?			X	

FORCE ACCOUNT REVIEW					
		Y	N	N/A	DOCUMENT SOURCE, COMMENTS, AND CORRECTIVE ACTION TAKEN
14.	<i>If NO, was an hourly rate calculated and only hours used on the project reimbursed?</i>			X	
15.	Does the lease/rental agreement include interest payments?			X	<i>If YES, question 16 is applicable.</i>
16.	Was the amount of interest deducted from the amount reimbursed by the TxCDBG fund?			X	Amount of Interest: _____