

DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance

Grantee Name: The Shoshone-Bannock Tribes

Report Name: DETAILED MODEL PLAN (LIHEAP)

Report Period: 10/01/2022 to 09/30/2023


Report Status: Submission Accepted by CO

Report Sections

1. **Mandatory Grant Application SF-424**
2. **Section 1 - Program Components**
3. **Section 2 - HEATING ASSISTANCE**
4. **Section 3 - COOLING ASSISTANCE**
5. **Section 4 - CRISIS ASSISTANCE**
6. **Section 5 - WEATHERIZATION ASSISTANCE**
7. **Section 6 - Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)**
8. **Section 7 - Coordination, 2605(b)(4) - Assurance 4**
9. **Section 8 - Agency Designation,, 2605(b)(6) - Assurance 6**
10. **Section 9 - Energy Suppliers,, 2605(b)(7) - Assurance 7**
11. **Section 10 - Program, Fiscal Monitoring, and Audit, 2605(b)(10) - Assurance 10**
12. **Section 11 - Timely and Meaningful Public Participation, , 2605(b)(12) - Assurance 12, 2605(c)(2)**
13. **Section 12 - Fair Hearings,2605(b)(13) - Assurance 13**
14. **Section 13 - Reduction of home energy needs,2605(b)(16) - Assurance 16**
15. **Section 14 - Leveraging Incentive Program ,2607A**
16. **Section 15 - Training**
17. **Section 16 - Performance Goals and Measures, 2605(b)**
18. **Section 17 - Program Integrity, 2605(b)(10)**
19. **Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters**
20. **Section 19: Certification Regarding Drug-Free Workplace Requirements**
21. **Section 20: Certification Regarding Lobbying**
22. **Assurances**
23. **Plan Attachments**

Mandatory Grant Application SF-424

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES		August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 12/31/2023	
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY			
* 1.a. Type of Submission: <input checked="" type="radio"/> Plan	* 1.b. Frequency: <input checked="" type="radio"/> Annual	* 1.c. Consolidated Application/ Plan/Funding Request? Explanation:	* 1.d. Version: <input checked="" type="radio"/> Initial <input type="radio"/> Resubmission <input type="radio"/> Revision <input type="radio"/> Update
		2. Date Received:	State Use Only:
		3. Applicant Identifier:	
		4a. Federal Entity Identifier:	5. Date Received By State:
		4b. Federal Award Identifier:	6. State Application Identifier:
7. APPLICANT INFORMATION			
* a. Legal Name: Shoshone Bannock Tribes			
* b. Employer/Taxpayer Identification Number (EIN/TIN): 82-01975		* c. Organizational DUNS: 793139684	
* d. Address:			
* Street 1:	P.O. BOX 306	Street 2:	306 Pima Drive
* City:	FORT HALL	County:	Bingham
* State:	ID	Province:	
* Country:	United States	* Zip / Postal Code:	83203-0306
* e. Organizational Unit:			
Department Name: Consumer Services Program		Division Name: 477 Human Services Program	
f. Name and contact information of person to be contacted on matters involving this application:			
Prefix: Mr.	* First Name: Dustin	Middle Name: Na-Zuid	* Last Name: Davis
Suffix:	Title: Consumer Service Manager, Shoshone Bannock Tribes	Organizational Affiliation: Tribe	
* Telephone Number: (208) 478-3709	Fax Number: 208-478-3845	* Email: ddavis@sbtribes.com	
* 8a. TYPE OF APPLICANT: I: Indian/Native American Tribal Government (Federally Recognized)			
* b. Additional Description:			
* 9. Name of Federal Agency:			
		Catalog of Federal Domestic Assistance Number:	CFDA Title:
10. CFDA Numbers and Titles		93.568	Low-Income Home Energy Assistance Program
11. Descriptive Title of Applicant's Project To provide Low Income Energy Assistance, Weatherization, and financial and energy efficient advocacy to the enrolled members of the Shoshone Bannock Tribes and other federally recognized tribal members residing within the service area of the Fort Hall Indian Reservation			
12. Areas Affected by Funding: This will apply to eligible applicants that reside fifty miles of the boundary area of the Ft. Hall Indian Reservation			
13. CONGRESSIONAL DISTRICTS OF:			
* a. Applicant 2		* b. Program/Project: LIHEAP Program	
Attach an additional list of Program/Project Congressional Districts if needed.			

14. FUNDING PERIOD:		15. ESTIMATED FUNDING:	
a. Start Date: 10/01/2022	b. End Date: 09/30/2023	* a. Federal (\$): \$0	b. Match (\$): \$0
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?			
a. This submission was made available to the State under the Executive Order 12372			
Process for Review on :			
b. Program is subject to E.O. 12372 but has not been selected by State for review.			
c. Program is not covered by E.O. 12372.			
* 17. Is The Applicant Delinquent On Any Federal Debt?			
<input type="radio"/> YES <input checked="" type="radio"/> NO			
Explanation:			
18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) **I Agree <input checked="" type="checkbox"/>			
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.			
18a. Typed or Printed Name and Title of Authorized Certifying Official Dustin Davis, Consumer Service Manager, Shoshone Bannock Tribes		18c. Telephone (area code, number and extension) (208) 478-3709	
		18d. Email Address ddavis@sbtribes.com	
18b. Signature of Authorized Certifying Official 		18e. Date Report Submitted (Month, Day, Year) 08/31/2022	
Attach supporting documents as specified in agency instructions.			

Section 1 - Program Components

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Department of Health and Human Services
Administration for Children and Families
Office of Community Services
Washington, DC 20201

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01
OMB Approval No. 0970-0075
Expiration Date: 12/31/2023

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Use of this model plan is optional. However, the information requested is required in order to receive a Low Income Home Energy Assistance Program (LIHEAP) grant in years in which the grantee is not permitted to file an abbreviated plan. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Section 1 Program Components

Program Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C)

1.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)	Dates of Operation	
	Start Date	End Date
<input checked="" type="checkbox"/> Heating assistance	10/01/2022	04/30/2023
<input checked="" type="checkbox"/> Cooling assistance	06/01/2023	09/30/2023
<input checked="" type="checkbox"/> Crisis assistance	10/01/2022	09/30/2023
<input checked="" type="checkbox"/> Weatherization assistance	10/01/2022	09/30/2023

Provide further explanation for the dates of operation, if necessary

Energy Assistance and Weatherization will be starting on 10/1/22. FY22 LIHEAP and Tribal funding will be used to help supplement short comings or any delays to energy assistance if needed. End dates will be as such as long as funding is available and may be subject to change depending on funding levels for that certain period.

Estimated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16

1.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: The total of all percentages must add up to 100%.	Percentage (%)
Heating assistance	30.00%
Cooling assistance	7.50%
Crisis assistance	25.00%
Weatherization assistance	15.00%
Carryover to the following federal fiscal year	10.00%
Administrative and planning costs	10.00%
Services to reduce home energy needs including needs assessment (Assurance 16)	2.50%
Used to develop and implement leveraging activities	0.00%
TOTAL	100.00%

Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C)

1.3 The funds reserved for winter crisis assistance that have not been expended by March 15 will be reprogrammed to:				
<input type="checkbox"/>	Heating assistance	<input checked="" type="checkbox"/>	Cooling assistance	
<input checked="" type="checkbox"/>	Weatherization assistance	<input checked="" type="checkbox"/>	Other (specify:) Crisis funding will be year around assistance until it is exhausted. This is also to supplement wood purchase as well if we have funding left over	
Categorical Eligibility, 2605(b)(2)(A) - Assurance 2, 2605(c)(1)(A), 2605(b)(8A) - Assurance 8				
1.4 Do you consider households categorically eligible if one household member receives one of the following categories of benefits in the left column below? <input checked="" type="radio"/> Yes <input type="radio"/> No				
If you answered "Yes" to question 1.4, you must complete the table below and answer questions 1.5 and 1.6.				
	Heating	Cooling	Crisis	Weatherization
TANF	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
SSI	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
SNAP	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
Means-tested Veterans Programs	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
	Program Name	Heating	Cooling	Crisis
Other(Specify) 1		<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
1.5 Do you automatically enroll households without a direct annual application? <input checked="" type="radio"/> Yes <input type="radio"/> No				
If Yes, explain: Yes. But only to specified vulnerable populations like elders 62 and over and disabled persons with a documented disability. With our elders they will not need to do a new application but re-verification of their information to see if there was any changes to the previous year with household information. They will need to sign off on their letter they were sent and there application is considered complete. However, will need to update there Social Security when it gets updated for the new year. This process makes there application eligible for a period of 3 years. They will be sent a new application for renewal on the next cycle when their year is up. With our Disabled they are also sent out an application but they are not enrolled every 3 years. They will be sent a full application and can be either mailed or handed back to us. Other things that we have changed from previous years is the release of information is changed were the head of household will sign off on every one living in the home and the release of information as well for the the head of household.				
1.6 How do you ensure there is no difference in the treatment of categorically eligible households from those not receiving other public assistance when determining eligibility and benefit amounts? Categorically eligible households will still be treated the same as we treat any Low-Income Households based upon our priority system. We will always serve Elders 62 on up 1st, Disabled 2nd, Household Minors 3rd, then Low Income individuals with none of the first 3 priorities and over-income last. Over-Income who are cat eligible will fall into one of these priorities depending if they have an elder, documented disabled, or a minor living in the home. And also no member of any federal recognized tribe will be discriminated against or denied an application for services based off their race, color, disability, creed, religion, national origin, sex, sexual orientation, political affiliation, or belief.				
SNAP Nominal Payments				
1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households? <input type="radio"/> Yes <input checked="" type="radio"/> No				
If you answered "Yes" to question 1.7a, you must provide a response to questions 1.7b, 1.7c, and 1.7d.				
1.7b Amount of Nominal Assistance: \$0.00				
1.7c Frequency of Assistance				
<input type="checkbox"/>	Once Per Year			
<input type="checkbox"/>	Once every five years			
<input type="checkbox"/>	Other - Describe:			
1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need?				
Determination of Eligibility - Countable Income				
1.8. In determining a household's income eligibility for LIHEAP, do you use gross income or net income ?				
<input checked="" type="checkbox"/>	Gross Income			
<input type="checkbox"/>	Net Income			
1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP				
<input checked="" type="checkbox"/>	Wages			
<input checked="" type="checkbox"/>	Self - Employment Income			

<input type="checkbox"/>	Contract Income
<input type="checkbox"/>	Payments from mortgage or Sales Contracts
<input checked="" type="checkbox"/>	Unemployment insurance
<input type="checkbox"/>	Strike Pay
<input type="checkbox"/>	Social Security Administration (SSA) benefits
<input type="checkbox"/>	<input type="checkbox"/> Including MediCare deduction <input type="checkbox"/> Excluding MediCare deduction
<input type="checkbox"/>	Supplemental Security Income (SSI)
<input type="checkbox"/>	Retirement / pension benefits
<input type="checkbox"/>	General Assistance benefits
<input type="checkbox"/>	Temporary Assistance for Needy Families (TANF) benefits
<input type="checkbox"/>	Supplemental Nutrition Assistance Program (SNAP) benefits
<input type="checkbox"/>	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits
<input type="checkbox"/>	Loans that need to be repaid
<input type="checkbox"/>	Cash gifts
<input type="checkbox"/>	Savings account balance
<input type="checkbox"/>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
<input type="checkbox"/>	Jury duty compensation
<input type="checkbox"/>	Rental income
<input type="checkbox"/>	Income from employment through Workforce Investment Act (WIA)
<input type="checkbox"/>	Income from work study programs
<input type="checkbox"/>	Alimony
<input type="checkbox"/>	Child support
<input type="checkbox"/>	Interest, dividends, or royalties
<input type="checkbox"/>	Commissions
<input type="checkbox"/>	Legal settlements
<input type="checkbox"/>	Insurance payments made directly to the insured
<input type="checkbox"/>	Insurance payments made specifically for the repayment of a bill, debt, or estimate
<input type="checkbox"/>	Veterans Administration (VA) benefits
<input type="checkbox"/>	Earned income of a child under the age of 18
<input type="checkbox"/>	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.

<input type="checkbox"/>	
<input type="checkbox"/>	Income tax refunds
<input type="checkbox"/>	Stipends from senior companion programs, such as VISTA
<input type="checkbox"/>	Funds received by household for the care of a foster child
<input type="checkbox"/>	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
<input type="checkbox"/>	Reimbursements (for mileage, gas, lodging, meals, etc.)
<input type="checkbox"/>	<p>Other</p> <p>Any Per Capita payment that is distributed from the Shoshone Bannock Tribes or any other federally recognized tribal government that another tribal member is a member of. countable income is only counted if the tribal member has per capita that is over \$2000 for that fiscal year as stated in the transmittal IM 2011-02 Treatment of Per Capita payments.</p> <p>Eligibility for LIHEAP can be very different in which per capita is twice a year. But during that times of per capita that happens every December and June may shift a client out of eligibility for LIHEAP. However, any other months then those distribution months they may be eligible for LIHEAP during that time.</p> <p>Lease Payments: These are for the tribal land holders of the Ft. Hall Indian Reservation that receive lease income that is over \$2000.</p> <p>Previous incomes that were included but no longer included will be Retirement and pensions, along with Veterans Benefits because the retirement should not be a barrier because of the job they had in the past and veterans benefits is considered a categorical eligibility which was a misnomer</p>
<p>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</p>	

Section 2 - HEATING ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 2 - Heating Assistance

Eligibility, 2605(b)(2) - Assurance 2

2.1 Designate the income eligibility threshold used for the heating component:

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

2.2 Do you have additional eligibility requirements for HEATING ASSISTANCE? Yes No

2.3 Check the appropriate boxes below and describe the policies for each.

Do you require an Assets test ? Yes No

Do you have additional/differing eligibility policies for:

- Renters?** Yes No
- Renters Living in subsidized housing ?** Yes No
- Renters with utilities included in the rent ?** Yes No

Do you give priority in eligibility to:

- Elderly?** Yes No
- Disabled?** Yes No
- Young children?** Yes No
- Households with high energy burdens ?** Yes No
- Other? Veterans** Yes No

Explanations of policies for each "yes" checked above:

2.2 The power bill must be in the homeowners name or someone that lives in the households name of the primary applicant. They must be living there and the payment directly to the vendor.

2.3 Renter with utilities included in the rent must also provide a renters verification from the landlord along with the landlords power bill. Then they must handle how this benefit will go towards her rent/power bill if all mixed together. This is usually for private renters dealing with smaller private landlords.

2.3 Priority in eligibility: Elderly over 62 years on up, disabled, and minors (young children) are given highest priority and first served for weatherization, the wood program, and heating assistance/crisis for energy along with a target benefit of an additional \$100 per priority population (exempt wood). Wood benefit is 4 cords for priority and 2 cords for non-priority populations. The max is \$300 if they have all three living in the household. Furthermore, applications are processed first for these populations in their respective order as well. September-October for Elders only, November for minors, and December for low income for Low-Income clients with no priority populations in the household. Veterans are given preferential status in the wood or weatherization program as first, but cannot go over their eligibility priority status. Ex: a disabled veteran would be served first among other disabled non-veterans, but cannot be served before a low-income elder.

Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

2.4 Describe how you prioritize the provision of heating assistance to vulnerable populations, e.g., benefit amounts, early application periods, etc.

We have a priority system in place for heating assistance for the vulnerable populations like elders, disabled, and families with minor children. This is the same for the wood and weatherization program. We also have a target benefit for each population of \$100 additional to their heating assistance. We process applications as early as September to start rolling out assistance on October 1st for elders and disabled, and start assisting families with minor children in November. Exemption to this however is if they are Low-Income eligible and they have a confirmed shutoff in the home.

2.5 Check the variables you use to determine your benefit levels. (Check all that apply):

- Income
- Family (household) size
- Home energy cost or need:

<input checked="" type="checkbox"/> Fuel type	
<input checked="" type="checkbox"/> Climate/region	
<input type="checkbox"/> Individual bill	
<input type="checkbox"/> Dwelling type	
<input checked="" type="checkbox"/> Energy burden (% of income spent on home energy)	
<input type="checkbox"/> Energy need	
<input checked="" type="checkbox"/> Other - Describe:	
<p>One that we have been doing in the past several years is a Target Benefit of \$100 for each priority population living in the household of \$100. And the max is \$300.</p> <p>Also, a new benefit we will be doing is a "Help me, help you" benefit is when a client is paying something on their bill during the moratorium months (Nov.-Feb) and this will be match funded up to \$300 and can be used with only heating assistance.</p>	
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)	
2.6 Describe estimated benefit levels for the fiscal year for which this plan applies	
Minimum Benefit	\$180
Maximum Benefit	\$1,095
2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits? <input checked="" type="radio"/> Yes <input type="radio"/> No	
If yes, describe.	
<p>The Consumer Services Program offers blankets to low income clients and elderly whenever requested. Space heaters are available to the client in emergency cases and upon request. We also provide weatherization DIY packages to clients who participate in our classes to weatherize their own home. We also provide winter packages like blankets, socks, gloves, and other warming items for elders during our elder christmas distribution.</p>	
<p>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</p>	

Section 3 - COOLING ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 3 - Cooling Assistance

Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2

3.1 Designate The income eligibility threshold used for the Cooling component:

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

3.2 Do you have additional eligibility requirements for COOLING ASSISTANCE? Yes No

3.3 Check the appropriate boxes below and describe the policies for each.

Do you require an Assets test ? Yes No

Do you have additional/differing eligibility policies for:

Renters?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters Living in subsidized housing ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters with utilities included in the rent ?	<input checked="" type="radio"/> Yes <input type="radio"/> No

Do you give priority in eligibility to:

Elderly?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Disabled?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Young children?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Households with high energy burdens ?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other?	<input type="radio"/> Yes <input checked="" type="radio"/> No

Explanations of policies for each "yes" checked above:

3.3 Clients that are renters with utilities included in the rent will also need a renters verification that is filled out by the landlord. When we have that and their landlords power bill the Consumer Services Program will be able to assist with cooling assistance and call the landlord to explain that this benefit is for their power and should be treated as such to reflect off on the clients rent.

Priority status is given to clients who are elders disabled and minor children living in the household as priority status compared to clients that don't have any of these priorities. This is in cases of limited funding when we approach closer to the end of the fiscal year.

3.4 Describe how you prioritize the provision of cooling assistance to vulnerable populations, e.g., benefit amounts, early application periods, etc.

We prioritize vulnerable populations by giving them preferential status if they are elders 62 years and older, disabled, and families with minor children up to 17 years. Further more, we are able to do outreach such as home visits if necessary to help assist home bound clients that are unable to do an application or if there is a concern from a community member that needs our assistance. The program also provides vulnerable populations with air conditioners and fans and we have a crew that can do an installation for them 24 to 48 hours after the request is done. If the funding is low then we will authorize benefits only to vulnerable clients. If funding is exhausted and we have tribal funds then we will utilize those funds as well.

Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

3.5 Check the variables you use to determine your benefit levels. (Check all that apply):

<input checked="" type="checkbox"/>	Income
<input checked="" type="checkbox"/>	Family (household) size
<input checked="" type="checkbox"/>	Home energy cost or need:
<input type="checkbox"/>	Fuel type
<input type="checkbox"/>	Climate/region
<input type="checkbox"/>	Individual bill

<input type="checkbox"/>	Dwelling type		
<input type="checkbox"/>	Energy burden (% of income spent on home energy)		
<input type="checkbox"/>	Energy need		
<input checked="" type="checkbox"/>	Other - Describe:		
<p>Determination of Income and Family household size is already determined when they first request energy assistance in the fiscal year. If the application is submitted in October or July the application is good for that fiscal year. The client reports that they have recently have income coming into the home then our eligibility will be redone to see if they are still eligible for LIHEAP services.</p> <p>The benefit determination is an up to amount of \$250 and will be broken down into \$50 increments. If the bill is \$98 then the benefit will be rounded to \$100. If the bill is \$202 then the benefit will be doing \$250. But if the bill is over \$250 then it will be capped at \$250. However, consideration for the date due of the energy bill and also how much next months energy bill is factored into the determination.</p>			
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)			
3.6 Describe estimated benefit levels for the fiscal year for which this plan applies			
Minimum Benefit	\$50	Maximum Benefit	\$250
3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? <input checked="" type="radio"/> Yes <input type="radio"/> No			
If yes, describe.			
<p>We provide Air Conditioner Units and fans for elders, disabled, and families with minor children. Low-Income clients we will also do the same thing however we provide these to the priority populations before them because of how vulnerable they are. We also do fans as well to help if they have already been provided an A/C unit, or provide 2 smaller A/C units to clients that have windows that are smaller bedroom types and can't fit our A/C units we purchase for medium to large size rooms. We also provide mobile A/C units that can be moved room to room if standard window fitting units are not available.</p>			
<p>If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.</p>			

Section 4 - CRISIS ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 4: CRISIS ASSISTANCE

Eligibility - 2604(c), 2605(c)(1)(A)

4.1 Designate the income eligibility threshold used for the crisis component

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

4.2 Provide your LIHEAP program's definition for determining a crisis.

Applicants who request energy assistance that have a shut off or a termination notice of a shut off is considered a crisis. The application will go through an expedited process with all documentation either turned in or retrieved from their 477 file if they have previously applied in the last 3 years. This process will take no longer than 48 hours to process.

Wood is not considered a Crisis benefit due in part that wood is something that cannot be provided in an expedited manner. There is no vendor that can do this benefit in a expedited manner. We have a waitlist of clients that have applied months in advance for wood and still need delivery and they are either elders or disabled. However, in the month of January we do provide emergency half cords of wood for clients in need every Friday.

4.3 What constitutes a life-threatening crisis?

A Life-Threatening crisis is an emergency situation where this is a crisis but a life and death situation where energy is required for the home to help power medical devices needed to keep the client alive. And failure to have energy to the home to power these devices could turn terminal if energy is not maintained in the home. Timeline for this type of crisis will be taken care of within 18 hours of receiving the request and must be completed.

Crisis Requirement, 2604(c)

4.4 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households? 48Hours

4.5 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households in life-threatening situations? 18Hours

Crisis Eligibility, 2605(c)(1)(A)

4.6 Do you have additional eligibility requirements for CRISIS ASSISTANCE? Yes No

4.7 Check the appropriate boxes below and describe the policies for each

Do you require an Assets test ? Yes No

Do you give priority in eligibility to :

- | | |
|--------------------------------------|---|
| Elderly? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Disabled? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Young Children? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Households with high energy burdens? | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Other? | <input type="radio"/> Yes <input checked="" type="radio"/> No |

In Order to receive crisis assistance:

Must the household have received a shut-off notice or have a near empty tank? Yes No

Must the household have been shut off or have an empty tank? Yes No

Must the household have exhausted their regular heating benefit? Yes No

Must renters with heating costs included in their rent have received an eviction notice ? Yes No

Must heating/cooling be medically necessary? Yes No

Must the household have non-working heating or cooling equipment?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Other?	<input type="radio"/> Yes <input type="radio"/> No
Do you have additional / differing eligibility policies for:	
Renters?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters living in subsidized housing?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters with utilities included in the rent?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Explanations of policies for each "yes" checked above:	
<p>The priority system that we have in place prioritizes assistance for clients that are elders, disabled, or families with minors 17 and under. Their request will be go through an expedited process and can be remedied withing less than 48 hours. However, if funding is low then it is prioritized with only those populations of elders, disabled, and minor children</p> <p>Crisis assistance must have a shut off or threat of a shut off or have a empty or near empty tank when it comes to propane. The heating benefit exhaustion is not considered a crisis indictator because they are usually using their heating benefit in conjunction with a crisis assistance because of the size of the bill. Renters must provide a rent verification if their heating cost is linked to their landlord power bill and if facing an eviction. Crisis is considered when they are needing medical devices like medications, or devices designed to keep them alive and healthy. Crisis is a situation in which the households have failed HVAC systems, or appliances as well and can be used in such cases to help repair or replace if needed.</p> <p>Crisis can also be included situations in which the weather is so cold that failure to heating systems can cause pipes to burst. This would cause more significant damage to the home were there is now no heat or water going to the home so this needs to be prevented. Also this includes life support systems like HVAC, wood and pellet stoves, baseboard heaters, and central air if a system has failed. These systems are related as long as we can keep the home warm during the winter, cool during the summer, cost efficient, and energy efficient.</p>	
Determination of Benefits	
4.8 How do you handle crisis situations?	
<input type="checkbox"/>	Separate component
<input checked="" type="checkbox"/>	Fast Track
<input checked="" type="checkbox"/>	Other - Describe: <p>Expedited applications go through the normal application process. However, they are exempt from the priority system of processing applications of elders, disabled, minor children. If they have a shut off or termination based upon the definition as mention aboved they are applications are expedited. This is only for energy assistance that is a termination or a threat of a shut off. However, they must be complete with all documentation submitted before they are considered a completed application. Delays to the supporting documentation will not be considered a completed application and Crisis assistance cannot be done due in part of incomplete application.</p> <p>The front office intake will get the application and the bill and the supporting documentation and will be sent to the either the Self-Reliance Services Counselor or the Consumer Services Program Manager for processing. 477 Eligibility will be bypassed and will be processed at a later time. If the shut off or termination is either a power bill or a natural gas bill. Determination for the benefit is done and a call to the energy companies done for the client on their behalf pledging an amount that will get the power turned back on. For Propane or energy vendors that do not honor pledges then a company credit card will be used to pay for their clients account so they can get the propane or energy they need re-established.</p> <p>If there is a crisis that involves a major power outage that disrupts power and the weather is very cold or very hot then crisis assistance can be used to temporarily house clients in hotels. But they must be clients of the Consumer Services Program and must meet LIHEAP eligiblity.</p> <p>If the client loses their primary source of heating or cooling like an HVAC, wood/pellet stove it can be used to replace those systems in order to keep their energy sources going. this will also apply to appliances like water heaters, space heaters, fans, A/C units.</p>
4.9 If you have a separate component, how do you determine crisis assistance benefits?	
<input checked="" type="checkbox"/>	Amount to resolve the crisis.
<input checked="" type="checkbox"/>	Other - Describe: <p>Benefit amount will up to \$500 with an additional \$500 to households that an Elder and Disabled only if needed, and only if they have already exhausted Heating assistance and their initial Crisis assistance. Cannot be used concurrently. If less than \$500 then it will be done in increments of \$100 but no more than \$500.</p> <p>Life-Threatening Crisis events is something that is limited to a one time \$1000. This is considered a Crisis Benefit.</p>
Crisis Requirements, 2604(c)	
4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?	
<input checked="" type="radio"/> Yes <input type="radio"/> No Explain.	
<p>All applications can be picked up at our current location located here at 385 Bannock Trail Rd (Old Casino). They can be either turned in person or dropped off at our drop box located outside our offices if necessary.</p>	
4.11 Do you provide individuals who are physically disabled the means to:	

Submit applications for crisis benefits without leaving their homes?

Yes No If No, explain.

Travel to the sites at which applications for crisis assistance are accepted?

Yes No If No, explain.

If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?

We can do home visits to clients that are homebound so we can get their information while there. And applications we do have online and they can be emailed back to us. If they don't have that capability then an application can be delivered to them so they can get their application completed so we can assist them at that time.

Benefit Levels, 2605(c)(1)(B)

4.12 Indicate the maximum benefit for each type of crisis assistance offered.

Winter Crisis	\$0.00 maximum benefit
Summer Crisis	\$0.00 maximum benefit
Year-round Crisis	\$1,000.00 maximum benefit

4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?

Yes No If yes, Describe

We offer blankets, space heaters, fans, air conditioners, emergency housing in a life-threatening crisis, repair/replacement to life support systems.

The HVAC system replacement must be a failed system to their primary system.

The emergency housing must be an elder or disabled client, they must have suffered an energy loss that was not a fault of their own, and not housing this client(s) would cause them detrimental loss of life or limb. Community wide outages were the weather is extreme heat or cold is also factor however the community members must have an application on file and must be LIHEAP eligible and this is a recommendation through our emergency command for the Sho-Ban Tribes.

4.14 Do you provide for equipment repair or replacement using crisis funds?

Yes No

If you answered "Yes" to question 4.14, you must complete question 4.15.

4.15 Check appropriate boxes below to indicate type(s) of assistance provided.

	Winter Crisis	Summer Crisis	Year-round Crisis
Heating system repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating system replacement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling system repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling system replacement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood stove purchase	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pellet stove purchase	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solar panel(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility poles / gas line hook-ups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify): This would also include emergency electrical to the home in the case that the home needs an assessment before power is returned to the home. Or emergency electrical repairs to the home in which the power is cause the clients bill to be either high or not working in sections of the home. Emergency electrical is not considered when a complete rewire is required for the home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?

Yes No

If you responded "Yes" to question 4.16, you must respond to question 4.17.

4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.

Idaho has a Natural Gas Company and Idaho Power that honor moratoriums during the winters months of November-February that will not shut off clients energy. They must have an elder, have a disability, have minor children in the home, or have a medical condition cleared by a doctor.

To help counter high power bills during this time we are piloting a "help me, help you" program in which we will benefit match clients who pay their energy bills during this time up to \$300. Furthermore, we will be hosting weatherization classes before moratorium so clients are prepared with DIY weatherization to their home.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 5 - WEATHERIZATION ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 5: WEATHERIZATION ASSISTANCE

Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assurance 2

5.1 Designate the income eligibility threshold used for the Weatherization component

Add	Household Size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

5.2 Do you enter into an interagency agreement to have another government agency administer a WEATHERIZATION component? Yes No

5.3 If yes, name the agency.

5.4 Is there a separate monitoring protocol for weatherization? Yes No

WEATHERIZATION - Types of Rules

5.5 Under what rules do you administer LIHEAP weatherization? (Check only one.)

- Entirely under LIHEAP (not DOE) rules
- Entirely under DOE WAP (not LIHEAP) rules
- Mostly under LIHEAP rules with the following DOE WAP rule(s) where LIHEAP and WAP rules differ (Check all that apply):
- Income Threshold
 - Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days
 - Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities).
 - Other - Describe:
- Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply.):
- Income Threshold
 - Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.
 - Weatherization measures are not subject to DOE Savings to Investment Ratio (SIR) standards.
 - Other - Describe:

Eligibility, 2605(b)(5) - Assurance 5

5.6 Do you require an assets test? Yes No

5.7 Do you have additional/differing eligibility policies for :

Renters	<input checked="" type="radio"/> Yes <input type="radio"/> No
Renters living in subsidized housing?	<input checked="" type="radio"/> Yes <input type="radio"/> No

5.8 Do you give priority in eligibility to:

Elderly?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Disabled?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Young Children?	<input checked="" type="radio"/> Yes <input type="radio"/> No
House holds with high energy burdens?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Other?	<input type="radio"/> Yes <input checked="" type="radio"/> No

If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you must provide further explanation of these policies in the text field below.

Policies related to renters is that the clietn that is renting the place must provide us a letter from the landlord stating why weatherization is not done to the home via the landlord. On the reservation anyone that is living in a FHHA residence that is subsidized that they must go through the FHHA to get their request done. This would be for cases if the weatherization request is either a high dollar or heavy labor related project. However easier and cost effective weatherization projects like water saving, low cost is allowable.

The Weatherization program is based on a priority system were we serve the most vulnerable of populations. We serve first low income elders over 62, low income disabled with a documented diability, low inoome families with children under 17, and low income individuals that do not have any of these criteria. Veterans that request weatherization will be top priority but they cannot go above a priority that they are eligible for. Ex. an disabled veteran cannot go ahead of an low income elder over 62.

Benefit Levels

5.9 Do you have a maximum LIHEAP weatherization benefit/expense per household? Yes No

5.10 If yes, what is the maximum? \$0

Types of Assistance, 2605(c)(1), (B) & (D)

5.11 What LIHEAP weatherization measures do you provide ? (Check all categories that apply.)

<input checked="" type="checkbox"/> Weatherization needs assessments/audits	<input checked="" type="checkbox"/> Energy related roof repair
<input checked="" type="checkbox"/> Caulking and insulation	<input checked="" type="checkbox"/> Major appliance Repairs
<input checked="" type="checkbox"/> Storm windows	<input checked="" type="checkbox"/> Major appliance replacement
<input checked="" type="checkbox"/> Furnace/heating system modifications/ repairs	<input checked="" type="checkbox"/> Windows/sliding glass doors
<input checked="" type="checkbox"/> Furnace replacement	<input checked="" type="checkbox"/> Doors
<input checked="" type="checkbox"/> Cooling system modifications/ repairs	<input checked="" type="checkbox"/> Water Heater
<input checked="" type="checkbox"/> Water conservation measures	<input checked="" type="checkbox"/> Cooling system replacement
<input checked="" type="checkbox"/> Compact florescent light bulbs	<input checked="" type="checkbox"/> Other - Describe: Plastics for windows, electrical repairs, skirting for homes to help with pipe insulation, HVAC duct repair/replacement, bathroom/kitchen exhaust fans

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 6 - Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 6: Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)

6.1 Select all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance available:

Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.

Publish articles in local newspapers or broadcast media announcements.

Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance.

Mass mailing(s) to prior-year LIHEAP recipients.

Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs.

Execute interagency agreements with other low-income program offices to perform outreach to target groups.

Other (specify):

With outreach we have the 477 program, the local newspaper, our respective FB pages to go ahead and outreach to clients that are in need of energy assistance. We have also reached out to the respective 5 districts around the reservation as well before the program starts in the new fiscal year.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 7 - Coordination, 2605(b)(4) - Assurance 4

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 7: Coordination, 2605(b)(4) - Assurance 4

7.1 Describe how you will ensure that the LIHEAP program is coordinated with other programs available to low-income households (TANF, SSI, WAP, etc.).

<input checked="" type="checkbox"/>	Joint application for multiple programs
<input checked="" type="checkbox"/>	Intake referrals to/from other programs
<input checked="" type="checkbox"/>	One - stop intake centers
<input checked="" type="checkbox"/>	Other - Describe:

The Consumer Services Program is part of the 477 Human Services Program for the Shoshone Bannock Tribes and we collaborate with this program in order that the clients has the services they need to receive the benefits. The 477 Program is a one stop intake for mulitple programs with multiple avenues for assistance. The 477 Human Services has the TANF program and coordinates with state and local programs that have access to low income households.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 8 - Agency Designation,, 2605(b)(6) - Assurance 6

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Required for state grantees and the Commonwealth of Puerto Rico)

8.1 How would you categorize the primary responsibility of your State agency?

<input type="checkbox"/>	Administration Agency
<input type="checkbox"/>	Commerce Agency
<input type="checkbox"/>	Community Services Agency
<input type="checkbox"/>	Energy / Environment Agency
<input type="checkbox"/>	Housing Agency
<input type="checkbox"/>	Welfare Agency
<input type="checkbox"/>	Other - Describe:

Alternate Outreach and Intake, 2605(b)(15) - Assurance 15

If you selected "Welfare Agency" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable.

8.2 How do you provide alternate outreach and intake for HEATING ASSISTANCE?

8.3 How do you provide alternate outreach and intake for COOLING ASSISTANCE?

8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?

8.5 LIHEAP Component Administration.	Heating	Cooling	Crisis	Weatherization
8.5a Who determines client eligibility?	Tribal Government	Tribal Government	Tribal Government	Tribal Government
8.5b Who processes benefit payments to gas and electric vendors?	Tribal Government	Tribal Government	Tribal Government	
8.5c who processes benefit payments to bulk fuel vendors?	Tribal Government	Tribal Government	Tribal Government	
8.5d Who performs installation of weatherization measures?				Tribal Government

If any of your LIHEAP components are not centrally-administered by a state agency, you must complete questions 8.6, 8.7, 8.8, and, if applicable, 8.9.

8.6 What is your process for selecting local administering agencies?

The Shoshone-Bannock Business Council has created the Consumer Services Department to be the administrator of the LIHEAP Grant. The process we must meet the standards and assurances of the grant. They grant the Consumer Services Program Manager as the administrator of the grant via a delegation letter and a Council Resolution. They will be both submitted with grant authorizing the administrator to apply for the LIHEAP Grant.

8.7 How many local administering agencies do you use? One

8.8 Have you changed any local administering agencies in the last year?

- Yes
 No

8.9 If so, why?

Agency was in noncompliance with grantee requirements for LIHEAP -

Agency is under criminal investigation

Added agency

Agency closed

Other - describe

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 9 - Energy Suppliers,, 2605(b)(7) - Assurance 7

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY

Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7

9.1 Do you make payments directly to home energy suppliers?

Heating Yes No

Cooling Yes No

Crisis Yes No

Are there exceptions? Yes No

If yes, Describe.

Only in cases of rent if the energy bill is linked onto their rent. Then the benefit is paid to the landlord as part of their rent not the utility bill because the name on the bill is the landlord and not the tennant. This is only in cases if the landlord provides only an itemized bill, the bill must have the services provided to the client, and provide a renters verification from the landlord.

9.2 How do you notify the client of the amount of assistance paid?

The program will go ahead and call the client to notify them that a benefit was paid on their behalf. However, if they do not have a working number or are unable to leave behind a message a note will be left on their case notes on our data base so if they call back that someone here at the program can notify them of their determination.

9.3 How do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment?

There is no control of how the program will treat the client when it comes to energy assistance. We usually piggyback via the Community Action Partnership Association of Idaho. They usually get the Idaho LIHEAP grant and they work with the Idaho Public Utilities Commission that regulates the cost of energy. Energy vendors that are independent of the IUC will be worked with as much as possible, however if abuse of high prices do persist that we will not do business with them and recommend that the client find another vendor to work with that is more reasonable with their energy cost and help them in all ways possible to get that set up with the new vendor.

9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assistance?

We have privacy rules that insure that the clients privacy is respected. The clients are met one on one with the with the SRS Counselor in their to talk about what their situation is and what we can do to assist that client with their specific need in relation to their energy bills. All clients are treated with respect and dignity. The Consumer Services Program works with the local energy vendors that all LIHEAP eligible clients are treated with respect in advocating for the clients to those vendors.

9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households?

Yes No

If so, describe the measures unregulated vendors may take.

Most energy vendors that we do benefits to are under the Idaho Utilities Commission. The unregulated vendors like the propane vendors or The City of Idaho Falls. Usually our non regulated vendors are a tax compliant company that is found in our accounting database system. Anyone that is not willing to be under this system is denied payment according to our finance policies.

Furthermore, to better assist our clients with energy vendors that do not honor a pledge system to help stop the disruption of energy we have a P-Card that is available that we are able to make the payment immediately so delivery service (like propane) can be done as soon as possible.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 10 - Program, Fiscal Monitoring, and Audit, 2605(b)(10) - Assurance 10

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 10: Program, Fiscal Monitoring, and Audit, 2605(b)(10)

10.1. How do you ensure good fiscal accounting and tracking of LIHEAP funds?

The tribes uses a computerized financial accounting system called springbrook. And detailed accounting about uploads and processes with another system called laserfiche. The system is supervised and maintained by an accounting staff comprised of 9 individuals including 4 accountants. The finance department is responsible for over 100 grants and contracts from various state and federal agencies, including the Bureau of Indian Affairs, Department of Health & Human Services, Department of Labor & Energy. A year end financial report is compiled and produced by independent auditors.

Audit Process

10.2. Is your LIHEAP program audited annually under the Single Audit Act and OMB Circular A - 133?

Yes No

10.3. Describe any audit findings rising to the level of material weakness or reportable condition cited in the A-133 audits, Grantee monitoring assessments, inspector general reviews, or other government agency reviews of the LIHEAP agency from the most recently audited fiscal year.

No Findings

Finding	Type	Brief Summary	Resolved?	Action Taken
1				

10.4. Audits of Local Administering Agencies

What types of annual audit requirements do you have in place for local administering agencies/district offices?
Select all that apply.

- Local agencies/district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133
- Local agencies/district offices are required to have an annual audit (other than A-133)
- Local agencies/district offices' A-133 or other independent audits are reviewed by Grantee as part of compliance process.
- Grantee conducts fiscal and program monitoring of local agencies/district offices

Compliance Monitoring

10.5. Describe the Grantee's strategies for monitoring compliance with the Grantee's and Federal LIHEAP policies and procedures: Select all that apply

Grantee employees:

- Internal program review
- Departmental oversight
- Secondary review of invoices and payments
- Other program review mechanisms are in place. Describe:

Local Administering Agencies / District Offices:

- On - site evaluation
- Annual program review
- Monitoring through central database
- Desk reviews

<input checked="" type="checkbox"/> Client File Testing / Sampling
<input type="checkbox"/> Other program review mechanisms are in place. Describe:
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
Each September our finance department starts the year end review over all the budgets the tribes utilized for the fiscal year. They go ahead and review if there are any discrepancies. If there are any discrepancies that are found we will go ahead and have them corrected.
10.7. Describe how you select local agencies for monitoring reviews.
Site Visits: The Fort Hall Business Council is responsible for selecting any agency to complete a monitor review.
Desk Reviews: Desk Review are completed internally by the Management Information Office, Consumer Services Manager, and the 477 Human Services Director
10.8. How often is each local agency monitored ? This is done yearly. It was done quarterly for awhile but that was when there was a need to keep quarterly reports of over spending in previous years. We have not had any instances of that during this time. Monthly spending reports are sent from finance to the Consumer Services Manager for review and closer inspection of what was spent and that it was spent in the proper budget.
10.9. What is the combined error rate for eligibility determinations? OPTIONAL N/A
10.10. What is the combined error rate for benefit determinations? OPTIONAL N/A
10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? 0
10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 0
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 11 - Timely and Meaningful Public Participation, , 2605(b)(12) - Assurance 12, 2605(c)(2)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES	August 1987, revised 05/92,02/95,03/96,12/98,11/01 OMB Clearance No.: 0970-0075 Expiration Date: 12/31/2023
<p>LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY</p>	

Section 11: Timely and Meaningful Public Participation, 2605(b)(12), 2605(C)(2)

**11.1 How did you obtain input from the public in the development of your LIHEAP plan?
 Select all that apply.**

- Tribal Council meeting(s)
- Public Hearing(s)
- Draft Plan posted to website and available for comment
- Hard copy of plan is available for public view and comment
- Comments from applicants are recorded
- Request for comments on draft Plan is advertised
- Stakeholder consultation meeting(s)
- Comments are solicited during outreach activities
- Other - Describe:

We usually get public comment around the 5 districts around the reservation when they have their monthly meetings. Also we had a public comment when there was a food distribution and we got alot of feed back during this time.

11.2 What changes did you make to your LIHEAP plan as a result of this participation?

Adding an additional benefit like the help us, help you initiative and an additional Crisis benefit for Elders only.

But most of the comments was an increase in benefits and also a faster response from the wood program and weatherization. Heating systems need to be upgraded or repaired. Also doing a good job and that we are providing good services. Also there was non written comment about more outreach to the districts.

In regards to wood. we are working with a vendor to get us wood faster and processed. it is at a higher cost but something we can do.

Public Hearings, 2605(a)(2) - For States and the Commonwealth of Puerto Rico Only

11.3 List the date and location(s) that you held public hearing(s) on the proposed use and distribution of your LIHEAP funds?

	Date	Event Description
1	08/18/2022	Food
2	08/18/2022	Ross Fork Lodge Monthly Meeting
3	08/22/2022	Gibson Lodge Monthly Meeting
4	08/29/2022	Fort Hall Lodge Monthly Meeting

11.4. How many parties commented on your plan at the hearing(s)? 42

11.5 Summarize the comments you received at the hearing(s).

N/A Tribes did the public participation

11.6 What changes did you make to your LIHEAP plan as a result of the comments received at the public hearing(s)?

N/A tribes did a public participation

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 12 - Fair Hearings,2605(b)(13) - Assurance 13

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 12: Fair Hearings, 2605(b)(13) - Assurance 13

12.1 How many fair hearings did the grantee have in the prior Federal fiscal year? 0

12.2 How many of those fair hearings resulted in the initial decision being reversed? N/A

12.3 Describe any policy and/or procedural changes made in the last Federal fiscal year as a result of fair hearings?

Nothing that is updated.

12.4 Describe your fair hearing procedures for households whose applications are denied.

See attachment, "Program Responsibilities and Right to Appeal"

12.5 When and how are applicants informed of these rights?

They will get this as part of their application for services. They must initial stating that they have read their rights and responsibilities. If they don't it is considered a incomplete application.

12.6 Describe your fair hearing procedures for households whose applications are not acted on in a timely manner.

If the client had a request and had a complaint of how their services were not acted on in a timely manner it is first explained informally via in person, phone, or by email. If they do a formal letter stating they did not get the services requested then the Consumer Services Manager will write them a letter stating why a delay in their services and point out on our policies why this type of service they may have requested may be delayed. Also, we do give them other options as well as other program that may be able to help them with their request that may do similar services but would have to apply with them.

12.7 When and how are applicants informed of these rights?

They are notified on their applicaiton when they request services.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 13 - Reduction of home energy needs, 2605(b)(16) - Assurance 16

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 13: Reduction of home energy needs, 2605(b)(16) - Assurance 16

13.1 Describe how you use LIHEAP funds to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance?

With Assurance 16 funding we are hosting a set of weatherization classes and energy informationals. With these classes we would like see our client interested in weatherizing their home learn how to DIY weatherization to their home. Also help co-host resource fairs with other programs that can provide them with information about resources around the area. Then teach clients about financial literacy and tips to help save money and be better consumers.

With this we also put out information on energy savings in our annual elder christmas basket giveaway. Where we provide them with items that they can use to keep themselves warm during the winter time.

Help host a resource fair to distribute information about our program what we do and other similar programs have to offer.

13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities?

We usually submit a budget for the year of the activities we plan on doing for Assurance 16 activities. most case we usually budget 5% of the cost for those activities and has a designated specific line item in our finance ledger and is set at the 5% allowable cost for this line item. This is also cost shared with other budgets like our tribal funds or the CSBG under the 477 program.

13.3 Describe the impact of such activities on the number of households served in the previous Federal fiscal year.

The impact of the activities that we host is that the people will know the resources that are available from the program. They will know what to expect when doing weatherization to their homes and be proactive consumer and save where they can during the winter months.

13.4 Describe the level of direct benefits provided to those households in the previous Federal fiscal year.

There isn't any direct benefits provided to those households that benefit from Assurance 16. We use these funds as promotion about LIHEAP, what it can offer, Weatherization classes, informationals, resource fairs, and financial literacy. We hope the benefits and outcomes from these activities are lower power usage and being better consumers

13.5 How many households applied for these services? 0

13.6 How many households received these services? 0

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 14 - Leveraging Incentive Program ,2607A

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
 ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
 OMB Clearance No.: 0970-0075
 Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
 MODEL PLAN
 SF - 424 - MANDATORY**

Section 14:Leveraging Incentive Program, 2607(A)

14.1 Do you plan to submit an application for the leveraging incentive program?

Yes No

14.2 Describe instructions to any third parties and/or local agencies for submitting LIHEAP leveraging resource information and retaining records.

14.3 For each type of resource and/or benefit to be leveraged in the upcoming year that will meet the requirements of 45 C.F.R. § 96.87(d)(2)(iii), describe the following:

Resource	What is the type of resource or benefit ?	What is the source(s) of the resource ?	How will the resource be integrated and coordinated with LIHEAP?
1			

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 15 - Training

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN SF - 424 - MANDATORY

Section 15: Training

15.1 Describe the training you provide for each of the following groups:

a. Grantee Staff:

Formal training on grantee policies and procedures

How often?

Annually

Biannually

As needed

Other - Describe:

Employees are provided with policy manual

Other-Describe:

Weatherization updates for the weatherization crew about policies and details when it comes to weatherization. Financial Literacy training so we have our admin crew certified to teach financial literacy classes Fraud warning and protection for admin staff in cases of fraud.

b. Local Agencies:

Formal training conference

How often?

Annually

Biannually

As needed

Other - Describe:

On-site training

How often?

Annually

Biannually

As needed

Other - Describe:

Employees are provided with policy manual

Other - Describe

c. Vendors

Formal training conference

How often?

Annually

Biannually

As needed

Other - Describe:

Policies communicated through vendor agreements

<input type="checkbox"/> Policies are outlined in a vendor manual
<input checked="" type="checkbox"/> Other - Describe: Information is given out at our resource to energy vendors that attend.
15.2 Does your training program address fraud reporting and prevention? <input checked="" type="radio"/> Yes <input type="radio"/> No
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 16 - Performance Goals and Measures, 2605(b)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 16: Performance Goals and Measures, 2605(b) - Required for States Only

16.1 Describe your progress toward meeting the data collection and reporting requirements of the four required LIHEAP performance measures. Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

N/A for tribal grantees.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 17 - Program Integrity, 2605(b)(10)

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 12/31/2023

**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
MODEL PLAN
SF - 424 - MANDATORY**

Section 17: Program Integrity, 2605(b)(10)

17.1 Fraud Reporting Mechanisms

a. Describe all mechanisms available to the public for reporting cases of suspected waste, fraud, and abuse. Select all that apply.

- Online Fraud Reporting
- Dedicated Fraud Reporting Hotline
- Report directly to local agency/district office or Grantee office
- Report to State Inspector General or Attorney General

Forms and procedures in place for local agencies/district offices and vendors to report fraud, waste, and abuse

Other - Describe:

In reporting of Fraud this is either reported indirectly via a phone call or in person about fraudulent behavior of people abusing services. The Consumer Services Manager will investigate what is going on and make a determination if there is application fraud, energy fraud, or wrongful benefit payment fraud. If there is a case of fraud the client will have 10 working days to respond to the letter sent out to him to provide verifying information that there is no case of fraud. If they respond to the letter and bring in information that verifies that no fraud is happening then the case is closed. However, if the client fails to meet with the Consumer Services Manager then they are suspended from the program and their per-capita garnished for the benefit amount awarded to them. If there is cases that a client is frauding an energy vendor then we will notify that vendor immediately and request that they look into this matter because it is hurting another person unbeknownst to them.

b. Describe strategies in place for advertising the above-referenced resources. Select all that apply

- Printed outreach materials
- Addressed on LIHEAP application
- Website
- Other - Describe:

17.2. Identification Documentation Requirements

a. Indicate which of the following forms of identification are required or requested to be collected from LIHEAP applicants or their household members.

Type of Identification Collected	Collected from Whom?		
	Applicant Only	All Adults in Household	All Household Members
Social Security Card is photocopied and retained	<input type="checkbox"/> Required	<input type="checkbox"/> Required	<input checked="" type="checkbox"/> Required
	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested
Social Security Number (Without actual Card)	<input type="checkbox"/> Required	<input type="checkbox"/> Required	<input checked="" type="checkbox"/> Required
	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested
Government-issued identification card (i.e.: driver's license, state ID, Tribal ID, passport, etc.)	<input type="checkbox"/> Required	<input type="checkbox"/> Required	<input checked="" type="checkbox"/> Required
	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested	<input type="checkbox"/> Requested

	Other	Applicant Only Required	Applicant Only Requested	All Adults in Household Required	All Adults in Household Requested	All Household Members Required	All Household Members Requested
1	Certificate of Indian Blood if they don't have a tribal ID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	Medicaid/Medicare Card with Social security Numbers listed. Would be for Elders that have a Medicaid/Medicare Card that no longer have a social security card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	Tribal Identification Cards with Social Security Numbers listed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4	Social Security Letters for applicants that are collecting Social Security. Must come from the Social Security Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

b. Describe any exceptions to the above policies.

Exceptions to the above policies are going to be elders 62 on up. From time to time we run into elders who no longer need their Social Security Card and it is either lost and not retrieved. They can request a replacement, however they have a Medicare or Medicaid Card or it is listed on their Social Security statement they get from Social Security. They also have their Social Security number on a verified government ID (Tribal ID) which can pass through a TSA checkpoint when traveling.

This other exception is a letter from the social security office if they are applying for a replacement. It will be noted and part of the application and no future assistance will be done until we have that card. This is for applicants that are facing a shut off termination or threat of a shut off or termination.

17.3 Identification Verification

Describe what methods are used to verify the authenticity of identification documents provided by clients or household members. Select all that apply

- Verify SSNs with Social Security Administration
- Match SSNs with death records from Social Security Administration or state agency
- Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)
- Match with state Department of Labor system
- Match with state and/or federal corrections system
- Match with state child support system
- Verification using private software (e.g., The Work Number)
- In-person certification by staff (for tribal grantees only)
- Match SSN/Tribal ID number with tribal database or enrollment records (for tribal grantees only)
- Other - Describe:

17.4. Citizenship/Legal Residency Verification

What are your procedures for ensuring that household members are U.S. citizens or aliens who are qualified to receive LIHEAP benefits? Select all that apply.

- Clients sign an attestation of citizenship or legal residency
- Client's submission of Social Security cards is accepted as proof of legal residency
- Noncitizens must provide documentation of immigration status
- Citizens must provide a copy of their birth certificate, naturalization papers, or passport
- Noncitizens are verified through the SAVE system
- Tribal members are verified through Tribal enrollment records/Tribal ID card
- Other - Describe:

17.5. Income Verification

What methods does your agency utilize to verify household income? Select all that apply.

- Require documentation of income for all adult household members
- Pay stubs
- Social Security award letters

<input checked="" type="checkbox"/> Bank statements
<input checked="" type="checkbox"/> Tax statements
<input checked="" type="checkbox"/> Zero-income statements
<input checked="" type="checkbox"/> Unemployment Insurance letters
<input type="checkbox"/> Other - Describe:
<input type="checkbox"/> Computer data matches:
<input checked="" type="checkbox"/> Income information matched against state computer system (e.g., SNAP, TANF)
<input checked="" type="checkbox"/> Proof of unemployment benefits verified with state Department of Labor
<input checked="" type="checkbox"/> Social Security income verified with SSA
<input type="checkbox"/> Utilize state directory of new hires
<input type="checkbox"/> Other - Describe:
17.6. Protection of Privacy and Confidentiality
Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.
<input checked="" type="checkbox"/> Policy in place prohibiting release of information without written consent
<input checked="" type="checkbox"/> Grantee LIHEAP database includes privacy/confidentiality safeguards
<input checked="" type="checkbox"/> Employee training on confidentiality for:
<input checked="" type="checkbox"/> Grantee employees
<input type="checkbox"/> Local agencies/district offices
<input checked="" type="checkbox"/> Employees must sign confidentiality agreement
<input checked="" type="checkbox"/> Grantee employees
<input type="checkbox"/> Local agencies/district offices
<input checked="" type="checkbox"/> Physical files are stored in a secure location
<input type="checkbox"/> Other - Describe:
17.7. Verifying the Authenticity
What policies are in place for verifying vendor authenticity? Select all that apply.
<input checked="" type="checkbox"/> All vendors must register with the State/Tribe.
<input checked="" type="checkbox"/> All vendors must supply a valid SSN or TIN/W-9 form
<input checked="" type="checkbox"/> Vendors are verified through energy bills provided by the household
<input type="checkbox"/> Grantee and/or local agencies/district offices perform physical monitoring of vendors
<input type="checkbox"/> Other - Describe and note any exceptions to policies above:
17.8. Benefits Policy - Gas and Electric Utilities
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.
<input checked="" type="checkbox"/> Applicants required to submit proof of physical residency
<input checked="" type="checkbox"/> Applicants must submit current utility bill
<input checked="" type="checkbox"/> Data exchange with utilities that verifies:
<input checked="" type="checkbox"/> Account ownership
<input checked="" type="checkbox"/> Consumption
<input checked="" type="checkbox"/> Balances
<input checked="" type="checkbox"/> Payment history
<input checked="" type="checkbox"/> Account is properly credited with benefit
<input type="checkbox"/> Other - Describe:
<input checked="" type="checkbox"/> Centralized computer system/database tracks payments to all utilities

<input type="checkbox"/>	Centralized computer system automatically generates benefit level
<input checked="" type="checkbox"/>	Separation of duties between intake and payment approval
<input checked="" type="checkbox"/>	Payments coordinated among other energy assistance programs to avoid duplication of payments
<input checked="" type="checkbox"/>	Payments to utilities and invoices from utilities are reviewed for accuracy
<input type="checkbox"/>	Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities
<input type="checkbox"/>	Direct payment to households are made in limited cases only
<input checked="" type="checkbox"/>	Procedures are in place to require prompt refunds from utilities in cases of account closure
<input type="checkbox"/>	Vendor agreements specify requirements selected above, and provide enforcement mechanism
<input type="checkbox"/>	Other - Describe:
17.9. Benefits Policy - Bulk Fuel Vendors	
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.	
<input checked="" type="checkbox"/>	Vendors are checked against an approved vendors list
<input checked="" type="checkbox"/>	Centralized computer system/database is used to track payments to all vendors
<input checked="" type="checkbox"/>	Clients are relied on for reports of non-delivery or partial delivery
<input type="checkbox"/>	Two-party checks are issued naming client and vendor
<input type="checkbox"/>	Direct payment to households are made in limited cases only
<input type="checkbox"/>	Vendors are only paid once they provide a delivery receipt signed by the client
<input type="checkbox"/>	Conduct monitoring of bulk fuel vendors
<input type="checkbox"/>	Bulk fuel vendors are required to submit reports to the Grantee
<input type="checkbox"/>	Vendor agreements specify requirements selected above, and provide enforcement mechanism
<input type="checkbox"/>	Other - Describe:
17.10. Investigations and Prosecutions	
Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.	
<input type="checkbox"/>	Refer to state Inspector General
<input type="checkbox"/>	Refer to local prosecutor or state Attorney General
<input type="checkbox"/>	Refer to US DHHS Inspector General (including referral to OIG hotline)
<input type="checkbox"/>	Local agencies/district offices or Grantee conduct investigation of fraud complaints from public
<input checked="" type="checkbox"/>	Grantee attempts collection of improper payments. If so, describe the recoupment process The client will be mailed a letter detailing inconsistencies with their application and their assistance awarded. They will have 10 working days to explain these inconsistencies. if these inconsistencies are in relation to an internal issue with the program they will not be held accountable and will be taken care of internally. if the client is to be at fault of frauding the program they will be suspended from the program and will be garnished their per capita for the benefit awarded to the client. If they are a member of another tribe they will be reouted to the tribal court to recoup the fraudulent payment.
<input checked="" type="checkbox"/>	Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? 1 Calendar Year or until the benefit is paid back in full
<input checked="" type="checkbox"/>	Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
<input checked="" type="checkbox"/>	Vendors found to have committed fraud may no longer participate in LIHEAP
<input type="checkbox"/>	Other - Describe:
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.	

Section 18: 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 entering 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:

(a) 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 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 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 an 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.

By checking this box, the prospective primary participant is providing the certification set out above.

Section 19: Certification 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 pint 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 this 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, 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 a 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 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 prohibition;
- (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 good 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)

Shoshone Bannock Tribes * Address Line 1		
P.O. Box 306 Address Line 2		
306 Pima Drive Address Line 3		
Fort Hall * City	ID * State	83203 * 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.

[55 FR 21690, 21702, May 25, 1990]

By checking this box, the prospective primary participant is providing the certification set out above.

Section 20: Certification Regarding Lobbying

Section 20: Certification Regarding Lobbying

The submitter of this application 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 \$100,000 for each such failure.

By checking this box, the prospective primary participant is providing the certification set out above.

Assurances

Assurances

(1) use the funds available under this title to--

(A) conduct outreach activities and provide assistance to low income households in meeting their home energy costs, particularly those with the lowest incomes that pay a high proportion of household income for home energy, consistent with paragraph (5);

(B) intervene in energy crisis situations;

(C) provide low-cost residential weatherization and other cost-effective energy-related home repair;and

(D)plan, develop, and administer the State's program under this title including leveraging programs, and the State agrees not to use such funds for any purposes other than those specified in this title;

(2) make payments under this title only with respect to--

(A) households in which one or more individuals are receiving--

(i)assistance under the State program funded under part A of title IV of the Social Security Act;

(ii) supplemental security income payments under title XVI of the Social Security Act;

(iii) food stamps under the Food Stamp Act of 1977; or

(iv) payments under section 415, 521, 541, or 542 of title 38, United States Code, or under section 306 of the Veterans' and Survivors' Pension Improvement Act of 1978; or

(B) households with incomes which do not exceed the greater of -

(i) an amount equal to 150 percent of the poverty level for such State; or

(ii) an amount equal to 60 percent of the State median income;

(except that a State may not exclude a household from eligibility in a fiscal year solely on the basis of household income if such income is less than 110 percent of the poverty level for such State, but the State may give priority to those households with the highest home energy costs or needs in relation to household income.

(3) conduct outreach activities designed to assure that eligible households, especially households with elderly individuals or disabled individuals, or both, and households with high home energy burdens, are made aware of the assistance available under this title, and any similar energy-related assistance available under subtitle B of title VI (relating to community services block grant program) or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;

(4) coordinate its activities under this title with similar and related programs administered by the Federal Government and such State, particularly low-income

energy-related programs under subtitle B of title VI (relating to community services block grant program), under the supplemental security income program, under part A of title IV of the Social Security Act, under title XX of the Social Security Act, under the low-income weatherization assistance program under title IV of the Energy Conservation and Production Act, or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;

(5) provide, in a timely manner, that the highest level of assistance will be furnished to those households which have the lowest incomes and the highest energy costs or needs in relation to income, taking into account family size, except that the State may not differentiate in implementing this section between the households described in clauses 2(A) and 2(B) of this subsection;

(6) to the extent it is necessary to designate local administrative agencies in order to carry out the purposes of this title, to give special consideration, in the designation of such agencies, to any local public or private nonprofit agency which was receiving Federal funds under any low-income energy assistance program or weatherization program under the Economic Opportunity Act of 1964 or any other provision of law on the day before the date of the enactment of this Act, except that -

(A) the State shall, before giving such special consideration, determine that the agency involved meets program and fiscal requirements established by the State; and

(B) if there is no such agency because of any change in the assistance furnished to programs for economically disadvantaged persons, then the State shall give special consideration in the designation of local administrative agencies to any successor agency which is operated in substantially the same manner as the predecessor agency which did receive funds for the fiscal year preceding the fiscal year for which the determination is made;

(7) if the State chooses to pay home energy suppliers directly, establish procedures to --

(A) notify each participating household of the amount of assistance paid on its behalf;

(B) assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment made by the State under this title;

(C) assure that the home energy supplier will provide assurances that any agreement entered into with a home energy supplier under this paragraph will contain provisions to assure that no household receiving assistance under this title will be treated adversely because of such assistance under applicable provisions of State law or public regulatory requirements; and

(D) ensure that the provision of vendor payments remains at the option of the State in consultation with local grantees and may be contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households, including providing for agreements between suppliers and individuals eligible for benefits under this Act that seek to reduce home energy costs, minimize the risks of home energy crisis, and encourage regular payments by individuals receiving financial assistance for home energy costs;

(8) provide assurances that,

(A) the State will not exclude households described in clause (2)(B) of this subsection from receiving home energy assistance benefits under clause (2), and

(B) the State will treat owners and renters equitably under the program assisted under this title;

(9) provide that--

(A) the State may use for planning and administering the use of funds under this title an amount not to exceed 10 percent of the funds payable to such State under this title for a fiscal year; and

(B) the State will pay from non-Federal sources the remaining costs of planning and administering the program assisted under this title and will not use Federal funds for such remaining cost (except for the costs of the activities described in paragraph (16));

(10) provide that such fiscal control and fund accounting procedures will be established as may be necessary to assure the proper disbursement of and accounting for Federal funds paid to the State under this title, including procedures for monitoring the assistance provided under this title, and provide that the State will comply with the provisions of chapter 75 of title 31, United States Code (commonly known as the "Single Audit Act");

(11) permit and cooperate with Federal investigations undertaken in accordance with section 2608;

(12) provide for timely and meaningful public participation in the development of the plan described in subsection (c);

(13) provide an opportunity for a fair administrative hearing to individuals whose claims for assistance under the plan described in subsection (c) are denied or are not acted upon with reasonable promptness; and

(14) cooperate with the Secretary with respect to data collecting and reporting under section 2610.

(15) * beginning in fiscal year 1992, provide, in addition to such services as may be offered by State Departments of Public Welfare at the local level, outreach and intake functions for crisis situations and heating and cooling assistance that is administered by additional State and local governmental entities or community-based organizations (such as community action agencies, area agencies on aging and not-for-profit neighborhood-based organizations), and in States where such organizations do not administer functions as of September 30, 1991, preference in awarding grants or contracts for intake services shall be provided to those agencies that administer the low-income weatherization or energy crisis intervention programs.

*** This assurance is applicable only to States, and to territories whose annual regular LIHEAP allotments exceed \$200,000. Neither territories with annual allotments of \$200,000 or less nor Indian tribes/tribal organizations are subject to Assurance 15.**

(16) use up to 5 percent of such funds, at its option, to provide services that encourage and enable households to reduce their home energy needs and

thereby the need for energy assistance, including needs assessments, counseling, and assistance with energy vendors, and report to the Secretary concerning the impact of such activities on the number of households served, the level of direct benefits provided to those households, and the number of households that remain unserved.

Plan Attachments

PLAN ATTACHMENTS
The following documents must be attached to this application
<ul style="list-style-type: none">• Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.
<ul style="list-style-type: none">• Heating component benefit matrix, if applicable
<ul style="list-style-type: none">• Cooling component benefit matrix, if applicable
<ul style="list-style-type: none">• Minutes, notes, or transcripts of public hearing(s).