

# DETAILED MODEL PLAN (LIHEAP)

## 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: 06/30/2017

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

<b>* 1.a. Type of Submission:</b> Plan	<b>* 1.b. Frequency:</b> Annual	<b>* 1.c. Consolidated Application/Plan/Funding Request?</b>  <b>Explanation:</b>	<b>* 1.d. Version:</b> Initial
		<b>2. Date Received:</b>	<b>State Use Only:</b>
		<b>3. Applicant Identifier:</b>	
		<b>4a. Federal Entity Identifier:</b>	<b>5. Date Received By State:</b>
		<b>4b. Federal Award Identifier:</b>	<b>6. State Application Identifier:</b>

#### 7. APPLICANT INFORMATION

<b>* a. Legal Name:</b> State of North Dakota			
<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 45-0309764W		<b>* c. Organizational DUNS:</b> 80-274-3534	
<b>* d. Address:</b>			
<b>* Street 1:</b>	600 EAST BOULEVARD AVENUE	<b>Street 2:</b>	DEPARTMENT 325
<b>* City:</b>	BISMARCK	<b>County:</b>	Burleigh
<b>* State:</b>	ND	<b>Province:</b>	N/A
<b>* Country:</b>	United States	<b>* Zip / Postal Code:</b>	58505 - 0250

#### e. Organizational Unit:

<b>Department Name:</b> Department of Human Services	<b>Division Name:</b> Economic Assistance Policy Division
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#### f. Name and contact information of person to be contacted on matters involving this application:

<b>Prefix:</b>	<b>* First Name:</b> Carol	<b>Middle Name:</b> F	<b>* Last Name:</b> Cartledge
<b>Suffix:</b>	<b>Title:</b> Dir, Economic Assistance Policy	<b>Organizational Affiliation:</b>	
<b>* Telephone Number:</b> (701) 328-4008	<b>Fax Number:</b> (701) 328-1060	<b>* Email:</b> ccartledge@nd.gov	

#### \* 8a. TYPE OF APPLICANT:

A: State Government

**b. Additional Description:**

#### \* 9. Name of Federal Agency:

	<b>Catalog of Federal Domestic Assistance Number:</b>	<b>CFDA Title:</b>
<b>10. CFDA Numbers and Titles</b>	93568	Low-Income Home Energy Assistance

#### 11. Descriptive Title of Applicant's Project

#### 12. Areas Affected by Funding:

#### 13. CONGRESSIONAL DISTRICTS OF:

<b>* a. Applicant</b> AL	<b>b. Program/Project:</b> Statewide
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Attach an additional list of Program/Project Congressional Districts if needed.  
N/A

<b>14. FUNDING PERIOD:</b>		<b>15. ESTIMATED FUNDING:</b>	
<b>a. Start Date:</b> 10/01/2014	<b>b. End Date:</b> 09/30/2015	<b>* a. Federal (\$):</b> \$0	<b>b. Match (\$):</b> \$0
<b>* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?</b>			
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.			
<b>* 17. Is The Applicant Delinquent On Any Federal Debt?</b>			
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)			
<b>**I Agree</b> ✓			
** 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		18c. Telephone (area code, number and extension)	
		18d. Email Address	
18b. Signature of Authorized Certifying Official		18e. Date Report Submitted (Month, Day, Year)	
<b>Attach supporting documents as specified in agency instructions.</b>			

## 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: 06/30/2017

### 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 20447

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01  
OMB Approval No. 0970-0075  
Expiration Date: 02/28/2005

**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
✓	Heating assistance	10/01/2014	05/31/2015
✓	Cooling assistance	10/01/2014	09/30/2015
✓	Crisis assistance	10/01/2014	09/30/2015
✓	Weatherization assistance	10/01/2014	09/30/2015

**Provide further explanation for the dates of operation, if necessary**

North Dakota's regular heating season program runs from 10/1/14 - 5/31/15. Applications for North Dakota's emergency (year-round crisis) program are accepted from 10/1/14 - 9/30/15.

The North Dakota State LIHEAP does not routinely include a cooling program. However, the State reserves the option to implement a temporary cooling program in the event of unusual cooling needs due to weather aberrations, contingent upon available funding.

See Section X (Cooling Assistance Program) of the attached State Plan of Operation for details.

**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	60.00%
Cooling assistance	0.10%
Crisis assistance	4.90%
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)	0.00%

Used to develop and implement leveraging activities	0.00%
<b>TOTAL</b>	<b>100.00%</b>

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 checked="" type="checkbox"/>	Heating assistance		Cooling assistance
<input checked="" type="checkbox"/>	Weatherization assistance	<input checked="" type="checkbox"/>	Other (specify:) NOTE: Year-round crisis assistance end date extends beyond the federal winter crisis

**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? 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				
SSI				
SNAP				
Means-tested Veterans Programs				

	Program Name	Heating	Cooling	Crisis	Weatherization
Other(Specify) 1					

**1.5 Do you automatically enroll households without a direct annual application?**

If Yes, explain:

**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?**

SNAP Nominal Payments

**1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households? 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**

**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 checked="" type="checkbox"/>	Contract Income
<input checked="" type="checkbox"/>	Payments from mortgage or Sales Contracts
<input checked="" type="checkbox"/>	Unemployment insurance

<input checked="" type="checkbox"/>	Strike Pay			
<input checked="" type="checkbox"/>	Social Security Administration (SSA ) benefits			
	<table border="1"> <tr> <td>Including MediCare deduction</td> <td><input checked="" type="checkbox"/></td> <td>Excluding MediCare deduction</td> </tr> </table>	Including MediCare deduction	<input checked="" type="checkbox"/>	Excluding MediCare deduction
Including MediCare deduction	<input checked="" type="checkbox"/>	Excluding MediCare deduction		
<input checked="" type="checkbox"/>	Supplemental Security Income (SSI )			
<input checked="" type="checkbox"/>	Retirement / pension benefits			
	General Assistance benefits			
<input checked="" type="checkbox"/>	Temporary Assistance for Needy Families (TANF) benefits			
	Supplemental Nutrition Assistance Program (SNAP) benefits			
	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits			
	Loans that need to be repaid			
	Cash gifts			
	Savings account balance			
	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.			
<input checked="" type="checkbox"/>	Jury duty compensation			
<input checked="" type="checkbox"/>	Rental income			
<input checked="" type="checkbox"/>	Income from employment through Workforce Investment Act (WIA)			
	Income from work study programs			
<input checked="" type="checkbox"/>	Alimony			
<input checked="" type="checkbox"/>	Child support			
<input checked="" type="checkbox"/>	Interest, dividends, or royalties			
<input checked="" type="checkbox"/>	Commissions			
<input checked="" type="checkbox"/>	Legal settlements			
<input checked="" type="checkbox"/>	Insurance payments made directly to the insured			
	Insurance payments made specifically for the repayment of a bill, debt, or estimate			
<input checked="" type="checkbox"/>	Veterans Administration (VA) benefits			
	Earned income of a child under the age of 18			
	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.			
	Income tax refunds			

	Stipends from senior companion programs, such as VISTA
	Funds received by household for the care of a foster child
	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
	Reimbursements (for mileage, gas, lodging, meals, etc.)
✓	<p><b>Other</b></p> <p>Some of the above categories of income may or may not be counted. For example, Interest on savings and CDs is not counted, however, dividends and interest on investments and trusts is counted.</p> <p>See Section H.1. (Income Eligibility Criteria for Heating Assistance) of the attached State Plan of Operation for list of income inclusions, exclusions, and allowable deductions.</p> <p>See Countable and Excluded Income list attached.</p>
<p><b>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.</b></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  
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### 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	State Median Income	60.00%

2.2 Do you have additional eligibility requirements for HEATING ASSISTANCE? Yes

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

Do you require an Assets test ? Yes

#### Do you have additional/differing eligibility policies for:

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

#### Do you give priority in eligibility to:

Elderly?	Yes
Disabled?	No
Young children?	No
Households with high energy burdens ?	No
Other? Crisis situations	Yes

#### Explanations of policies for each "yes" checked above:

**Assets:** No household that has non-exempt real and personal property assets that exceed an equity value of \$10,000, plus \$5,000 for each household member 60 years of age and over, will be eligible to receive heating assistance.

The equity of all assets held by any household member is considered available to the household unless specifically exempt, or if the household can demonstrate that the asset is not available. (See Section H(2) attached)

**Subsidized Housing:** Households that pay rent in a government-subsidized housing project or program and are not directly responsible for home energy costs are considered to be fully protected from the rising cost of heating fuel and are not eligible for LIHEAP. The rental costs for these households are based on a fixed percentage of the household's income and/or other factors, and does not increase or decrease when fuel costs increase or decrease. (See Section H(3) attached)

Preference is given to high risk households that are identified when the heating assistance application is received, or a utility or other fuel supplier may refer a household when a serious payment problem is first discovered.

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.

Generally, household are served on a first come-first served basis, however, applications from fixed income households are accepted prior to the official start of the heating season. A mass mailing of applications to fixed income households is completed in September.

Households with elderly members are allowed an additional \$5000 in assets for each household member that is 60 or over.

Early identification and crisis prevention is considered essential for "high risk" households, particularly those with vulnerable members. These households may be identified when the heating assistance application is received; or a utility or other fuel supplier may establish appropriate procedures to refer households with a vulnerable member for assistance or when a serious payment problem is first discovered.

In addition, all outreach activities emphasize reaching those households that include at least one elderly person or person with a disability. Each of the county social service boards is also responsible to administer TANF, SNAP, Medicaid, and Title XX and other service programs. Therefore, the county social service boards can assure that these programs and energy programs are fully coordinated and are able to refer households with vulnerable members.

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

✓ <b>Income</b>
✓ <b>Family (household) size</b>
✓ <b>Home energy cost or need:</b>
<b>Fuel type</b>
<b>Climate/region</b>
<b>Individual bill</b>
<b>Dwelling type</b>
<b>Energy burden (% of income spent on home energy)</b>
<b>Energy need</b>
✓ <b>Other - Describe:</b>

Cost/Consumption Tables (Estimated Cost of Heating Matrix): LIHEAP in North Dakota uses a statewide cost/consumption table to determine a household's estimated costs of heating. The table is used to determine heating assistance benefits only. The table is based upon actual cost and consumption data reported for LIHEAP recipients in the LIHEAP data system.

Billing data reported directly from fuel suppliers, either electronically or on paper billing statements, is used to determine the cost of heating a dwelling/residence for the entire heating season. Billing data (i.e., total amount billed to client) is determined by several factors, including fuel consumption, cost of fuel, temperature/heating degree day data, the heating values of various fuels, and furnace efficiency factor for various fuels. Billing data therefore accounts for these factors in a single number/value.

Using actual billing data from the four most recent federal fiscal years (i.e., heating seasons), a distribution of total amount billed is generated, and values at the 95<sup>th</sup> percentile are identified. Using these 95<sup>th</sup> percentile values, a single cost/consumption table is produced for the entire state, based on various sizes of living units, various types of buildings, and various types of fuel.

Accurate consumption/cost data are not available for wood, coal, and other miscellaneous types of fuel, due to the very small number of LIHEAP recipients with these primary fuel types. Therefore, consumption and cost rates are best negotiated with the individual household on a case-by-case basis, using the previous year's usage and cost data. If not available, the natural gas rate will be used to compute benefits. (See Section I attached)

Benefit Calculation (See Section J attached): Heating assistance benefits are an individually determined percentage of the eligible household's actual heat cost incurred during each eligible month of the heating season, October through May. Heating fuel and some incidental charges may be included in the household's cost of heat.

The household is responsible to pay an affordable percentage of the actual heat cost. The amount each household can afford to pay for heat cost is based on family size and income:

- (1) One percent of the household's adjusted annual income if that income is less than or equal to one-third (1/3) of the income eligibility limits described in Section H, 1, of attached state plan, or
- (2) Two percent of the household's annual income if the income is more than one-third (1/3) but less than or equal to two-thirds (2/3) of the income eligibility limits described in Section H, 1, of attached state plan, or
- (3) Three percent of the household's adjusted annual income if the income is more than two-thirds (2/3) of the income eligibility limits described in Section H, 1, or attached state plan.

The household's percentage share is the amount calculated in (1), (2), or (3) above, divided by the estimated cost of heat from the cost/consumption tables described in Section I, 2, and rounded down to the nearest 5%. The remainder is the LIHEAP percentage share of the actual heat cost. Some households can demonstrate that they maintain home temperatures higher than anticipated in the cost/consumption tables due to age, disability, or health problem. If so, the household's percentage share will be based on the higher estimated cost of heat. Therefore, benefits take into account family size, income, and heat cost so that the greatest amount of assistance is provided to households with the lowest income and the highest energy costs.

The maximum LIHEAP percentage is 95% and the minimum LIHEAP percentage share is 10%. Eligible households whose LIHEAP percentage calculates to less than 6% will receive a one-time, \$50 cash benefit. These limits will assure that the eligible household will always pay a portion of each heat bill. The total amount paid for households whose heating bills include non-residential heating costs will not exceed the amount of that household's Estimated Cost of Heat multiplied by their calculated LIHEAP Share Percentage. All households that meet the heating assistance eligibility criteria in any month of the year may be provided any of the defined services and/or premium assistance, as needed, anytime through September 30, 2015, the end of this federal fiscal year. (See Section N of the attached state Plan for Emergency Assistance Eligibility Criteria)

Maximum Benefit Note: Since our benefit is calculated as a LIHEAP Share Percentage (LS%), unless the primary fuel source is used to heat other buildings in addition to the home, we do not have a maximum benefit.

Attached is a copy of the Statewide Benefit Matrix for the 2014-2015 Heating Season.

Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

**2.6 Describe estimated benefit levels for FY 2015:**

<b>Minimum Benefit</b>	\$50	<b>Maximum Benefit</b>	\$1,000,000
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**2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits? Yes**

**If yes, describe.**

Temporary heating devices and/or other consumer type goods may be provided under the emergency component only in order to protect household members from a severe loss or lack of home energy.

**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 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  
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### 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 componenet:**

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	State Median Income	60.00%

**3.2 Do you have additional eligibility requirements for COOLING ASSISTANCE?** Yes

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

**Do you require an Assets test ?** Yes

**Do you have additional/differing eligibility policies for:**

<b>Renters?</b>	No
<b>Renters Living in subsidized housing ?</b>	Yes
<b>Renters with utilities included in the rent ?</b>	No

**Do you give priority in eligibility to:**

<b>Elderly?</b>	Yes
<b>Disabled?</b>	No
<b>Young children?</b>	No
<b>Households with high energy burdens ?</b>	No
<b>Other? Medical Necessity</b>	Yes

**Explanations of policies for each "yes" checked above:**

The North Dakota State LIHEAP does not routinely include a cooling program. However, the State reserves the option to implement a temporary cooling program in the event of unusual cooling needs due to weather aberrations, contingent upon available funding.

This component will allow for the purchase and installation of approved cooling devices for households who can document a medical need for cooling.

A special application will be required for this assistance. The application will establish that the income and assets of the household are within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 and H, 2 of the attached state plan.

Since this assistance is for cooling devices, the applicant does not need to have responsibility to pay a heating or cooling bill. Therefore, households who are not eligible under the Heating Assistance component, as described in Section H, 3, of the state plan may be eligible for purchase of cooling devices under this cooling component.

The documentation of medical need will require a signed statement from a physician, physician's assistant, nurse practitioner, or public health nurse that identifies the member of the household who needs a cooled living space, the nature of the medical condition and why cooling of the living space is needed. An assertion that cooling is required because of advanced age or disability is not sufficient to establish medical need.

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

Eligibility is based upon documented medical need. (See Section X attached)

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):**

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

<b>Fuel type</b>			
<b>Climate/region</b>			
<b>Individual bill</b>			
<b>Dwelling type</b>			
<b>Energy burden (% of income spent on home energy)</b>			
<b>Energy need</b>			
<input checked="" type="checkbox"/> <b>Other - Describe:</b>			
<p>The income and assets of the household must be within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 and H, 2 of the attached state plan (See Section X attached).</p>			
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)			
<b>3.6 Describe estimated benefit levels for FY 2015:</b>			
<b>Minimum Benefit</b>	\$1	<b>Maximum Benefit</b>	\$800
<b>3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? Yes</b>			
<b>If yes, describe.</b>			
<p>North Dakota cooling program (not regularly implemented) does not pay a household's cooling costs. Instead, a LIHEAP-eligible household may qualify for a cooling device (an air conditioner or a fan, as the need dictates) or repair on an existing cooling device, if a member of the household has a documented medical need. The household need not be responsible for paying heating costs so tenants in subsidized housing may qualify.</p> <p>The income and assets of the household must be within the guidelines allowed under the Heating Assistance component, as described in Section H, 1 and H, 2 of the attached state plan.</p>			
<p><b>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.</b></p>			

## Section 4 - CRISIS ASSISTANCE

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

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### 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	State Median Income	60.00%

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

See Section E of attached state plan of operation:

Energy Crisis: This term means weather-related and supply shortage emergencies and other household energy-related emergencies.

#### 4.3 What constitutes a life-threatening crisis?

See Section E of attached state plan of operation:

Life-Threatening Energy Crisis: This term refers to an energy-related crisis that poses a serious threat to the health and safety of one or more members of the household.

#### 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

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

Do you require an Assets test ? Yes

Do you give priority in eligibility to :

Elderly?	No
Disabled?	No
Young Children?	No
Households with high energy burdens?	No
Other?	No

In Order to receive crisis assistance:

Must the household have received a shut-off notice or have a near empty tank?	No
Must the household have been shut off or have an empty tank?	No
Must the household have exhausted their regular heating benefit?	
Must renters with heating costs included in their rent have received an eviction notice ?	No
Must heating/cooling be medically necessary?	No
Must the household have non-working heating or cooling equipment?	No
Other?	No

Do you have additional / differing eligibility policies for:

<b>Renters?</b>	No
<b>Renters living in subsidized housing?</b>	Yes
<b>Renters with utilities included in the rent?</b>	No
<b>Explanations of policies for each "yes" checked above:</b>	
Renters living in subsidized housing do not qualify for emergency assistance.	
Determination of Benefits	
<b>4.8 How do you handle crisis situations?</b>	
<input checked="" type="checkbox"/>	Separate component
<input type="checkbox"/>	Fast Track
<input type="checkbox"/>	Other - Describe:
<b>4.9 If you have a separate component, how do you determine crisis assistance benefits?</b>	
<input checked="" type="checkbox"/>	Amount to resolve the crisis.
<input type="checkbox"/>	Other - Describe:
Crisis Requirements, 2604(c)	
<b>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?</b>	
Yes Explain.	
Applications are available at all county social service offices. Emergency procedures include home visits when necessary, counseling, referrals, communication with suppliers, or other services and a 24 hour telephone number for requesting aid or reporting a crisis. Outreach activities assure that all potentially eligible households are informed of the heating assistance and emergency assistance components of the program and have the opportunity to submit an application. Aging service area coordinators and the North Dakota Council of Community Action Agency Directors, representing the seven (7) regional community action agencies, have agreed to continue to provide outreach and intake function for LIHEAP heating assistance and crisis situations.	
<b>4.11 Do you provide individuals who are physically disabled the means to:</b>	
<b>Submit applications for crisis benefits without leaving their homes?</b>	
Yes If No, explain.	
<b>Travel to the sites at which applications for crisis assistance are accepted?</b>	
Yes If No, explain.	
<b>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?</b>	
Benefit Levels, 2605(c)(1)(B)	
<b>4.12 Indicate the maximum benefit for each type of crisis assistance offered.</b>	
Winter Crisis	\$0 maximum benefit
Summer Crisis	\$0 maximum benefit
Year-round Crisis	\$999,999,999,999 maximum benefit
<b>4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?</b>	
Yes If yes, Describe	
Emergency assistance can provide assistance for the following:	
<ol style="list-style-type: none"> <li>Supplemental heating assistance, including unavoidable mandatory finance and other incidental charges, for households that are financially unable to pay all of the household's percentage share of a heat bill. The emergency assistance component may be used to justify re-computing the basic heating assistance benefit level if the financial shortage is expected to be long-term, or it may be used to pay the amount needed to resolve the current crisis, or a combination of both options. An eligible household may receive up to \$500.00 per season for heating costs (including re-connection charges) if the household is financially unable to contribute all or part of their co-payment percentage to the purchase of the fuel.</li> <li>Repair or replacement of a defective, inoperable, or unsafe heating system or water heater or a severely inefficient heating system or water heater for an eligible homeowner or an eligible renter with verifiable responsibility for such costs may be provided, depending on the availability of funds, weatherization or other resources, expected payback, and other related factors. The heating system includes chimney, air ducts, burners, tanks, pipes and all other components necessary to produce heat safely and efficiently.</li> <li>Minor home repairs or replacement components (excludes additions) to prevent the loss of home energy in the living unit of an eligible homeowner or a renter with verifiable responsibility for such costs. (up to \$400/season)</li> <li>Temporary shelter, temporary heating or cooling devices and/or other consumer type goods that may be needed to protect household members from a sever loss or lack of home energy. (Up to \$100.00/season).</li> <li>The state may delegate some or all of the responsibility for delivering the services described in 2, 3 and 4 above by administrative agreement with the Division of Community Services. (See Section N attached)</li> </ol>	

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

Yes

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			✓
Heating system replacement			✓
Cooling system repair			✓
Cooling system replacement			✓
Wood stove purchase			
Pellet stove purchase			
Solar panel(s)			
Utility poles / gas line hook-ups			✓
Other (Specify):			

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

Yes

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.**

Investor-owned utilities (there are four in the state) must follow the attached PSC disconnect rules.

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  
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### 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	State Median Income	60.00%

5.2 Do you enter into an interagency agreement to have another government agency administer a WEATHERIZATION component? Yes

5.3 If yes, name the agency. North Dakota Department of Commerce

5.4 Is there a separate monitoring protocol for weatherization? Yes

#### 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:

Income and asset eligibility for LIHEAP is a pre-requisite for weatherization services.

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

5.6 Do you require an assets test? Yes

5.7 Do you have additional/differing eligibility policies for :

Renters No

Renters living in subsidized housing? No

5.8 Do you give priority in eligibility to:

Elderly? Yes

Disabled? Yes

Young Children? Yes

House holds with high energy burdens? Yes

Other? High Energy Usage Yes

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.

Income and asset eligibility for LIHEAP is a pre-requisite for weatherization services.

All heating assistance applicants will automatically be referred for energy conservation services.

Discussion with applicants who live in poor quality housing, that have high-energy usage, or who are demonstrating a pattern of reliance on Energy Assistance should focus on the benefits of conservation services.

1. Energy conservation will stretch LIHEAP dollars.
2. The amount of money required for heating from the applicant's own pocket is reduced.
3. The conservation and weatherization services will continue to reduce energy costs, so even if the applicant is not eligible for LIHEAP, the out-of-pocket costs will be lower.
4. Their home will be more comfortable with fewer drafts and cold spots.

The long range advantage of taking the extra time to encourage participation in conservation services now is that program expenditures will be reduced, allowing more people to be served and reducing the chances that benefit levels will have to be decreased in the future.

See Section M (3) of attached state plan. Also see Section O attached.

**Benefit Levels**

5.9 Do you have a maximum LIHEAP weatherization benefit/expenditure per household? 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	Major appliance Repairs
<input checked="" type="checkbox"/> Storm windows	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
Cooling system modifications/ repairs	<input checked="" type="checkbox"/> Water Heater
Water conservation measures	Cooling system replacement
<input checked="" type="checkbox"/> Compact florescent light bulbs	<input checked="" type="checkbox"/> Other - Describe: If weatherization expenditures are above \$8,000 per household, state approval must be obtained

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  
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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):

The outreach activities described in section G are the basic methods of assuring that eligible households are aware of the program and have the opportunity and assistance necessary to complete an application. The county social service boards and alternate outreach organizations shall distribute heating assistance application forms to all individuals upon request, and provide such application forms to fuel suppliers, Community Action Agencies, senior citizen centers or any other individuals or organizations that are willing to distribute the form to potentially eligible households

See Section G of state plan attached:

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  
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**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.).**

	Joint application for multiple programs
✓	Intake referrals to/from other programs
✓	One - stop intake centers
	Other - Describe:

Each of the county social service boards is also responsible to administer TANF, SNAP, Medicaid, and Title XX and other service programs. Therefore, the county social service boards can assure that these programs and energy programs are fully coordinated.

See Section M of attached State Plan of Operation.

**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

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**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 checked="" 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?**

The North Dakota Council of Community Action Agency Directors, representing the seven (7) regional community action agencies, have agreed to continue to provide outreach and intake function for LIHEAP heating assistance and crisis situations.

The North Dakota Department of Human Services Aging Services Division, as the statewide agency for Aging Services employs coordinators in each of the eight (8) regional Human Service Centers. The division has agreed that the regional Aging Services coordinators will continue to provide outreach and intake functions for LIHEAP heating assistance and crisis situations.

The North Dakota LIHEAP has agreed to provide appropriate staff training, administrative forms and printed information to the regional community action agencies and the regional Aging Services coordinators.

The outreach function and the intake function assigned to these alternate sites are defined in Section E of the attached state plan.

Intake Function: Intake is defined as the beginning formal contact(s) with a potential applicant to provide program information and explanations, and to provide the application form with instructions for completion and submission.

Outreach Function: This term is similar to the general outreach activities and processes described in Section G except that special service outreach activities are not included. To assure that all households are aware of the program and the application process, the outreach function takes advantage of opportunities to publicize the LIHEAP through a variety of publicity methods including, but not limited to, the public media, meetings and presentations, fliers and brochures.

See Section B (2) of State Plan of Operations attached:

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

See Section B (2) of State Plan of Operations attached: Community Action Agencies provide alternate outreach for the cooling program.

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

See Section B (2) of State Plan of Operations attached: See above for heating

8.5 LIHEAP Component Administration.	Heating	Cooling	Crisis	Weatherization
8.5a Who determines client eligibility?	Local County Government	Local County Government Community Action Agencies	Local County Government	Local County Government
8.5b Who processes benefit payments to gas and electric vendors?	Local County Government Other	Non-Applicable	Local County Government	
8.5c who processes benefit payments to bulk fuel vendors?	Local County Government Other	Non-Applicable	Local County Government	
8.5d Who performs installation of weatherization measures?				Community Action Agencies

**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?

County offices (53):

CAAs (7):

8.7 How many local administering agencies do you use? 60

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

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  
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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
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Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7

9.1 Do you make payments directly to home energy suppliers?

Heating	Yes
Cooling	No
Crisis	Yes
Are there exceptions?	Yes

**If yes, Describe.**

Generally, payment is issued directly to the vendor for fuel costs incurred during a client's eligibility period. If, however, the fuel costs have been paid in full by the client, payment will be issued to the client.

Renters whose heating costs are included as an undesignated portion of their rent payment will receive LIHEAP payments directly. Payments will generally be made once per month, on the third Tuesday, and will continue for the client's eligibility period.

In unusual circumstance, third party payments may be issued (Ex: landlord who refuses to have the tenant's name on the vendor's account).

**Prepayment to Supplier:** Suppliers that provide a price discount, incentives, or supplemental services to LIHEAP eligible households may be granted a prepayment contract in advance of the heating season, of the estimated fuel costs for their customers who have been and are projected to be eligible for future LIHEAP heating assistance benefits. They will receive prorated cash advances from October 1, 2014 through May 31, 2015. As an alternative to price discounts, suppliers may agree to provide pre-established credits for the time the prepaid line of credit is not expended. Suppliers who can demonstrate that a discounted price or extended service is not possible or would be an undue hardship may also be granted prepayments, but will not receive cash advances. Suppliers to be offered prepayments will be determined by the State Program Director based on available funds and other criteria designed to ensure efficient, cost-effective use of this option.

The LIHEAP electronic system maintains a record of the total prepayment contract amount, cash advances made to the supplier, minus debits for customer bills as they are presented by the supplier, and the resulting balance of these transactions. Suppliers who have a prepayment contract and receive cash advance payments will continue to submit actual customer bills as they are incurred, as described in Section F, 5. The electronic system will record the customer billing and payment information to the appropriate customer account and the supplier account and produce all other documents normally issued with the supplier's check. A check will not be written, unless the total of bills to be paid exceeds the cash advance balance. In that case, the check will be the difference between the cash advance balance and the total of bills to be paid.

Suppliers who negotiate a prepayment contract but do not receive cash advance payments will bill and be paid in the same manner as suppliers who do not have a prepayment contract.

LIHEAP does not currently practice a policy of an actual cash advance (prepayment) to vendors and has not done so in many years.

See Section K (Supplier Agreements) of attached State Plan of Operation.

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

A notice detailing specific payments to be made is sent to the household (and supplier when appropriate) whenever miscellaneous, emergency, or premium payments are entered into the computer payment system by county or state office workers.

See Section L (4) of attached State Plan of Operation.

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?

The fuel supplier will be required to sign a standard agreement statement that is included on the Heating Assistance billing form. Suppliers who submit electronic tape in lieu of the Heating Assistance billing form will sign the same agreement but in letter form. The standard agreement will commit the fuel supplier:

- To charge the eligible household, in a normal billing process, the difference between the actual cost of the home energy and the amount of payment to be made by the State. (The household's co-payment)
- To give assurance that no household receiving assistance under this program will be treated adversely because of such assistance under applicable provisions of State Law or public regulatory requirements.
- Not to discriminate, either in the cost of the goods supplied or the services provided, against the eligible household on whose behalf payments are made.
- To cooperate in reviews or audits of LIHEAP payments, and to refund to the State any over-payments.

Suppliers who are granted prepayments will be required to sign a contract agreement. Such statements that are necessary to ensure proper crediting to customer accounts and security of the prepaid funds will be included in the prepayment agreement. These suppliers will also sign the standard agreement as bills are presented for fuel purchased by individual customers.

Violations of the agreements due to suspected fraud or other criminal action will be referred to the county attorney for action. Other agreement violations may be cause to suspend the supplier from participating in LIHEAP or the program director may prescribe other appropriate action.

At the end of the regular heating season, all LIHEAP households receive a payment notice showing all payments made on behalf of the household for the heating season. The notice instructs the client to review the payments and contact the county with any discrepancies or questions. The notice provides a level of program integrity by allowing client to review/verify what has been paid on their behalf.

See Section K (Supplier Agreements) of attached State Plan of Operation

**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?**

Per agreement signed with vendor (See Section K of attached State Plan of Operation).

Households eligible for heating assistance and/or emergency assistance will receive an electronically produced "notice of action" at the time their eligibility and benefits have been determined. This form will include co-payment percentages and duration of benefits, right to appeal, and all other necessary explanations. It also conveys their right to file a written complaint if they believe they have been discriminated against because of race, color, religion, national origin, age, gender, disability or status with respect to marriage or public assistance.

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

Yes

**If so, describe the measures unregulated vendors may take.**

Payments that are contingent on a vendor actions are typically reserved for emergency assistance. Good faith efforts of the household, and energy supplier if appropriate, to avoid or resolve crisis should be apparent. A budget payment plan or other formalized Action Plan to avoid future crises may be required as a condition of emergency payments.

The energy supplier's collection efforts and cooperation in extending credit and offering a reasonable payment plan is considered when a household requests emergency assistance.

**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  
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August 1987, revised 05/92,02/95,03/96,12/98,11/01  
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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
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Section 10: Program, Fiscal Monitoring, and Audit, 2605(b)(10)

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

See the following sections of the attached State Plan of Operation: P (Distribution of Grant Funds by Priority) Q (Benefits Excluded as Income) R (Administrative/Service Costs) S (Control of Fraud, Waste and Abuse) T (Fiscal Controls, Fund Accounting and Annual Audit) U (Reporting and Investigations)

**Audit Process**

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

Yes

**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

Client File Testing / Sampling

**Other program review mechanisms are in place. Describe:**

**10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.**

A state-wide monthly random sample of ten (10) Low Income Home Energy Assistance Program (LIHEAP) cases are reviewed by the Quality Assurance Unit staff. A sample of one (1) case per region (6) and four (4) cases selected statewide (total of 10 cases) are selected each month. The sampling methodology allows for a minimum of one (1) case to be sampled from each county agency during a 12 month review period.

The results of the case file reviews are shared with the eligibility worker and county director. If overpayment exists as a result of the review, overpayments are established regardless if the overpayment is due to agency error or recipient error. At the time an overpayment is established, the family is informed of the overpaid amount and that they are responsible for repayment of the overpayment.

Error trends are used to identify areas in need of training or possible policy revisions for clarity. Online LIHEAP course is available 24 hours a day for eligibility workers to develop competency and skill in applying CCAP policy.

Monitoring

North Dakota Department of Human Services has built a verification application called NDVerify. This tool allows eligibility workers to access some identifying information such as North Dakota Vital Records and some Social Security Administration information, wage data, unemployment data, motor vehicle date and Game and Fish data. LIHEAP eligibility workers also have access to additional information received through other major programs such as Numident - Social Security verification system, IRS information on income and assets, and PARIS interface information. They may so accesses SAVE to determine qualified alien status.

The following systems are sources of information to obtain verification of benefits available to eligibility workers for determination of eligibility:

- The BENDEX System - This is an on-line inquiry of recipients receiving Title II benefits.
- BENDEX wage match and SDX information will be available in the new tool called NDVerify.
- The Form 1610 System - If Social Security data or benefits information is not available from the client, BENDEX, SDX, or the TPQY system, the Social Security District Offices will honor the use of Form 1610. This form should be used selectively and only after other means of securing the data have been explored. Thus, the use of Form 1610 is basically limited to determining the following:
  - The amount of Social Security Title II benefits received during the three-month period preceding the date of application for Medicaid. The specific time period for which the data is needed must be indicated on Form 1610;
  - The amount of Social Security benefits or other data when all efforts through BENDEX, SDX, or TPQY have failed; and
  - To serve as a lead to determine potential eligibility for Social Security benefits for an individual who has never applied to the Social Security Administration. A telephone call to the Social Security District Office will also serve as a referral and eliminate the need for the Form 1610.

For weatherization and emergency furnace services, monitoring is flagged in the Department's electronic contract system on a specified schedule throughout the life of the contract.

**10.7. Describe how you select local agencies for monitoring reviews.**

**Site Visits:**

On-site visits are not conducted unless deemed necessary based on reviews completed by Quality Assurance Unit.

**Desk Reviews:**

The Quality Assurance Unit conducts monthly case file reviews. The county social service office provides the case file or an electronic case file is retrieved from FileNet for the review process. A standard form is used for the review process. The form includes LIHEAP policy and procedures, i.e. verification of income and assets, household members, etc. The results of the case file reviews are shared with the eligibility worker and county director. If overpayment exists as a result of the review, overpayments are established regardless if the overpayment is due to agency error or recipient error. At the time an overpayment is established, the family is informed of the overpaid amount and that they are responsible for repayment of the overpayment.

**10.8. How often is each local agency monitored ?**

See 10.6

**10.9. What is the combined error rate for eligibility determinations? OPTIONAL**

For the previous federal fiscal year, no errors were for eligibility determinations.

**10.10. What is the combined error rate for benefit determinations? OPTIONAL**

For the previous federal fiscal year, no errors were for benefits determinations.

**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  
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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:

See Section D (Public Participation, Review and Comments on State Plan) of the attached State Plan of Operation.

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

No substantive changes were made as a result of the participation other than updating income eligibility limits and minor clarifications of policy.

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	09/17/2014	Public Hearing at state office in Bismarck ND on proposed FY2015 ND State Plan of Operation for LIHEAP

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

11.5 Summarize the comments you received at the hearing(s). An affidavit of publication and any public hearing comments will be furnished after scheduled public hearing.

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, Changes (if any) resulting from the public hearing will be reported

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

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ADMINISTRATION FOR CHILDREN AND FAMILIES

August 1987, revised 05/92,02/95,03/96,12/98,11/01  
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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?** 5

**12.2 How many of those fair hearings resulted in the initial decision being reversed?** 0

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

None

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

If a client believes the decision made on their Heating Assistance or Emergency Assistance application may be wrong, or if they do not receive a written notice of the action taken on their Heating Assistance application within 45 days from the date their application is received, they should first contact the county social service office to be sure the eligibility worker has all the information they need to correctly determine your eligibility. If they still believe the decision is wrong for some reason, they are entitled to request a hearing before the North Dakota Department of Human Services. They are instructed to contact the county social service office for instructions on how to request a hearing. The request for a hearing must be received within 30 days of the date of the notice of action. The client can have an attorney, relative, friend or other person assist them at the hearing. If the hearing request is received within that time, benefits will not be changed until a decision is reached. However, they will be required to pay back any excess benefits received if their appeal is not successful. A hearing officer will contact them to arrange a hearing time and place that is convenient for them. The client will receive a written decision from the North Dakota Department of Human Services. See attached "Your Right to Appeal" notice.

**12.5 When and how are applicants informed of these rights?**

Whenever a case is processed or changed, the client receives a notice of the action taken on the case. The "Your Right to Appeal" document is on the back of all notices of action sent to clients.

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

Same as above.

**12.7 When and how are applicants informed of these rights?**

Same as above

**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

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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?**

N/A

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

N/A

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

N/A

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

N/A

**13.5 How many households applied for these services? N/A**

**13.6 How many households received these services? N/A**

**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

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Section 14:Leveraging Incentive Program, 2607(A)

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

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. Â§ 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  
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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
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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:** Federal webinars, conferences, work groups

**Employees are provided with policy manual**

**Other-Describe:**

There are various committees, groups, or taskforces that work to develop policy that is consistent among economic assistance programs and to provide training, and clarification on existing policies and procedures. These various groups also provide an excellent opportunity to develop effective communications and build rapport with county staff.

**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

✓ Policies are outlined in a vendor manual

✓ Other - Describe:

Regular oral communication with vendors (many on a daily basis)

15.2 Does your training program address fraud reporting and prevention?

Yes

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  
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August 1987, revised 05/92,02/95,03/96,12/98,11/01  
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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
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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.**

Since the LIHEAP benefit is calculated as a percentage that is to be paid on each read/delivery incurred during the client's eligibility period, vendors/clients are required to submit household energy cost data in order to receive payment. Because of this fact, our system already obtains the data need to calculate average annual main heating fuel bill by household's main heat source.

The requirement of reporting an average annual electricity cost by primary heat source will be a challenge. ND LIHEAP requests data from vendors on a 'need to know' basis. We do obtain household electricity cost data when that is the client's main source of heat, however, if the client's main source of heat is something other than electricity, we have "no need" to request that information. It is not needed to pay benefits. We are working to obtain information regarding average residential electric usage for households in North Dakota.

Our year-round crisis program (emergency home energy assistance program) provides assistance that is necessitated by weather-related or supply shortage emergencies or because the household is not able to secure home energy for financial or other reason. It is not an entitlement program. The program is designed to be preventative in nature. Eligibility and the amount of benefits provided are designed to resolve or prevent a home energy crisis. As such, approval for crisis assistance is considered a prevention measure unless payment codes indicate reconnection or emergency fuel delivery. Disconnection and totally empty fuel tanks is uncommon during the majority of the fuel season due to the harsh winters here.

The State of North Dakota subcontracts with the Department of Commerce for our Emergency Furnace Repair and Replacement Program so we will be working with them to report the preventative and restoration measures for home energy equipment.

We are currently in the process of developing a new eligibility system for use by all economic assistance programs so reporting will be sort of a cumbersome manual process. Developing a new data exchange system on an out-going system would be fiscally irresponsible at this point, however, we do plan to have numerous data exchange enhancements in the new system.

North Dakota does expect to be able to satisfy the LIHEAP Performance Measures reporting requirements by the end of FY2015 as requested.

**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

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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)  
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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:

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:

As part of the human service delivery system in North Dakota, LIHEAP has a visible presence in all 53 of the state's counties. In addition, DHS has a fraud hot-line, a toll-free number, and a website by which cases of suspected fraud can be reported at any time. The Department has an active public information unit which publishes press releases almost daily which include the website address.

Our tools and mechanisms are in place, but we are always seeking new and creative ways to encourage our citizens to inform on their neighbors.

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	Required	Required	Required
	Requested	Requested	Requested
Social Security Number (Without actual Card)	Required	Required	Required
	<input checked="" type="checkbox"/> Requested	<input checked="" type="checkbox"/> Requested	<input checked="" type="checkbox"/> Requested
Government-issued identification card	Required	Required	Required

(i.e.: driver's license, state ID, Tribal ID, passport, etc.)		Requested		Requested		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							
<p><b>b. Describe any exceptions to the above policies.</b></p> <p>LIHEAP in North Dakota has always used the head of household's Social Security Number (SSN) as its primary identifier in its computer system. Several years ago, DHS also began collecting the SSN's of all of the household members. Because of Privacy Act considerations, we informed applicants that providing the SSN was voluntary, but virtually all applicants complied.</p> <p>LIHEAP policy in North Dakota remains the same. If HHS directs that providing that information can no longer be voluntary, DHS will comply.</p>							
<b>17.3 Identification Verification</b>							
Describe what methods are used to verify the authenticity of identification documents provided by clients or household members. Select all that apply							
<input checked="" type="checkbox"/> Verify SSNs with Social Security Administration							
<input checked="" type="checkbox"/> Match SSNs with death records from Social Security Administration or state agency							
<input checked="" type="checkbox"/> Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)							
<input checked="" type="checkbox"/> Match with state Department of Labor system							
<input checked="" type="checkbox"/> Match with state and/or federal corrections system							
<input checked="" type="checkbox"/> 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)							
<p><b>Other - Describe:</b></p> <p>North Dakota Department of Human Services currently has a verification application called NDVerify. This tool allows eligibility workers to access some identifying information such as North Dakota Vital Records and some Social Security Administration information.</p> <p>DHS has also begun the process of developing a central integrated eligibility system which will include all of the Department's economic assistance programs. One of the requirements of the system will be the verification of applicant identities across all programs.</p>							
<b>17.4. Citizenship/Legal Residency Verification</b>							
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.							
<input checked="" type="checkbox"/> Clients sign an attestation of citizenship or legal residency							
<input checked="" type="checkbox"/> Client's submission of Social Security cards is accepted as proof of legal residency							
<input checked="" type="checkbox"/> Noncitizens must provide documentation of immigration status							
Citizens must provide a copy of their birth certificate, naturalization papers, or passport							
<input checked="" type="checkbox"/> Noncitizens are verified through the SAVE system							
Tribal members are verified through Tribal enrollment records/Tribal ID card							
<p><b>Other - Describe:</b></p> <p>DHS' verification system (NDVerify) is able to provide verification of identity through numerous interfaces (described below).</p>							
<b>17.5. Income Verification</b>							
What methods does your agency utilize to verify household income? Select all that apply.							
<input checked="" type="checkbox"/> Require documentation of income for all adult household members							
<input checked="" type="checkbox"/> Pay stubs							
<input checked="" type="checkbox"/> 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"/> <b>Unemployment Insurance letters</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b> All income must be verified. This may be accomplished by the use of wage stubs, signed statement from an employer, Internal Revenue Service (IRS) forms, automatic bank deposit slips for social security, award letters for SSI, or other types of benefits.
<input checked="" type="checkbox"/> <b>Computer data matches:</b>
<b>Income information matched against state computer system (e.g., SNAP, TANF)</b>
<input checked="" type="checkbox"/> <b>Proof of unemployment benefits verified with state Department of Labor</b>
<input checked="" type="checkbox"/> <b>Social Security income verified with SSA</b>
<input checked="" type="checkbox"/> <b>Utilize state directory of new hires</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b> North Dakota Department of Human Services' currently utilizes a verification application called NDVerify that interfaces with the Social Security Administration, Child Support Enforcement System, ND Unemployment Insurance Benefits, and ND Job Service. It can be accessed to verify Social Security/Supplemental Security Income benefits, Child Support and spousal support received and paid, quarterly wage match and unemployment benefits (through North Dakota Job Service). Information is not available from out-of-state employers. New hires is also part of NDVerify.

<b>17.6. Protection of Privacy and Confidentiality</b>
<b>Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.</b>
<input checked="" type="checkbox"/> <b>Policy in place prohibiting release of information without written consent</b>
<input checked="" type="checkbox"/> <b>Grantee LIHEAP database includes privacy/confidentiality safeguards</b>
<input checked="" type="checkbox"/> <b>Employee training on confidentiality for:</b>
<input checked="" type="checkbox"/> <b>Grantee employees</b>
<input checked="" type="checkbox"/> <b>Local agencies/district offices</b>
<input checked="" type="checkbox"/> <b>Employees must sign confidentiality agreement</b>
<input checked="" type="checkbox"/> <b>Grantee employees</b>
<input checked="" type="checkbox"/> <b>Local agencies/district offices</b>
<input checked="" type="checkbox"/> <b>Physical files are stored in a secure location</b>
<input checked="" type="checkbox"/> <b>Other - Describe:</b> DHS took a significant step in safeguarding client's privacy in 2011 with its SSN suppression initiative. All written communications being mailed out identify the client with a system-assigned "billing number" rather than a Social Security Number. This will continue in 2014.  Economic Assistance Policy Division addresses safeguarding of client information in Administrative Procedural manual 448-01 which may be found on North Dakota Department of Human Services website at <a href="http://www.state.nd.us/humanservices/policymanuals/home/financialhelp.htm">http://www.state.nd.us/humanservices/policymanuals/home/financialhelp.htm</a>  The Economic Assistance Policy Division Administrative Procedural manual 448-01 is utilized to provide county eligibility workers with guidance on policy and procedures of client information.

<b>17.7. Verifying the Authenticity</b>
<b>What policies are in place for verifying vendor authenticity? Select all that apply.</b>
<input checked="" type="checkbox"/> <b>All vendors must register with the State/Tribe.</b>
<b>All vendors must supply a valid SSN or TIN/W-9 form</b>
<input checked="" type="checkbox"/> <b>Vendors are verified through energy bills provided by the household</b>
<input checked="" type="checkbox"/> <b>Grantee and/or local agencies/district offices perform physical monitoring of vendors</b>
<b>Other - Describe and note any exceptions to policies above:</b> North Dakota's status as a rural state lends a generous hand to vendor authenticity. A majority of the vendor in the state are small 'mom and pop' businesses that have been established in the communities for many years and, in many cases, generations. County staff have developed an excellent working relationship with vendors in their areas as most of the vendors and their employees are part of rural community. Vendor reputation is very well known to county staff.

<b>17.8. Benefits Policy - Gas and Electric Utilities</b>
---

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.

Applicants required to submit proof of physical residency

Applicants must submit current utility bill

Data exchange with utilities that verifies:

Account ownership

Consumption

Balances

Payment history

Account is properly credited with benefit

Other - Describe:

Centralized computer system/database tracks payments to all utilities

Centralized computer system automatically generates benefit level

Separation of duties between intake and payment approval

Payments coordinated among other energy assistance programs to avoid duplication of payments

Payments to utilities and invoices from utilities are reviewed for accuracy

Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities

Direct payment to households are made in limited cases only

Procedures are in place to require prompt refunds from utilities in cases of account closure

Vendor agreements specify requirements selected above, and provide enforcement mechanism

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.

Vendors are checked against an approved vendors list

Centralized computer system/database is used to track payments to all vendors

Clients are relied on for reports of non-delivery or partial delivery

Two-party checks are issued naming client and vendor

Direct payment to households are made in limited cases only

Vendors are only paid once they provide a delivery receipt signed by the client

Conduct monitoring of bulk fuel vendors

Bulk fuel vendors are required to submit reports to the Grantee

Vendor agreements specify requirements selected above, and provide enforcement mechanism

Other - Describe:

Applicants are asked to include a copy of their current heating bill with their application. This serves to verify heating vendor's authenticity and to ensure that the proper vendor is authorized to submit heating bills on behalf of the client.

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.

Refer to state Inspector General

Refer to local prosecutor or state Attorney General

Refer to US DHHS Inspector General (including referral to OIG hotline)

Local agencies/district offices or Grantee conduct investigation of fraud complaints from public

Grantee attempts collection of improper payments. If so, describe the recoupment process

See Section J.1.4. (Erroneous Payments) of attached state plan of operation

Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned?

Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated

Vendors found to have committed fraud may no longer participate in LIHEAP

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.BrBbr.**
- 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)**

600 East Boulevard Avenue * Address Line 1		
Department 325 Address Line 2		
Burleigh County Address Line 3		
Bismarck * City	ND * State	58505-0250 * 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**

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

- **Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.**
- **Heating component benefit matrix, if applicable**
- **Cooling component benefit matrix, if applicable**
- **Minutes, notes, or transcripts of public hearing(s).**