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

* 1.a. Type of Submission: Plan		€ Annual		* 1.c. Consolidated Application/Plan/Funding Request? Explanation:		st?	* 1.d. Version: Initial Resubmission Revision Update			
						2. Date Receiv	ved:			State Use Only:
						3. Applicant 1	dentifier:			
						4a. Federal E	ntity Ident	ifier:		5. Date Received By State:
						4b. Federal A	ward Iden	tifier:		6. State Application Identifier:
7. APPLICANT	APPLICANT INFORMATION									
* a. Legal Name	* a. Legal Name: STATE OF KANSAS									
* b. Employer/	Гахрауег	Identification N	Number (EI	N/TIN): 48-	11248399	* c. Organiza	tional DUN	NS: 1759	937804	
* d. Address:										
* Street 1:		DCF Administr	ration Buildi	ing		Street 2:		555 S. I	Kansas A	Avenue
* City:		TOPEKA				County:		SHAW	NEE	
* State:		KS				Province:				
* Country:		United States				* Zip / Pos	tal Code:	66603-3	3444	
e. Organization	al Unit:							l-		
Department Name: DEPARTMENT FOR CHILDREN & FAMILIES				Division Name: ECONOMIC & EMPLOYMENT SERVICES						
f. Name and cor	ntact info	rmation of pers	on to be con	tacted on ma	tters involving tl	nis application:				
Prefix:	Prefix: * First Name: Middle Nam Lewis A			Middle Name:	* Last Name: Kimsey					
Suffix:	Title: Progran	n Manager			Organizational	Affiliation:		· ·		
* Telephone Number: (785)296-0147	* Telephone Number: 7852966960				sey@dcf.ks.gov					
* 8a. TYPE OF A: State Govern		ANT:								
b. Additional	Descripti	ion:								
* 9. Name of Fe	* 9. Name of Federal Agency:									
			og of Federal Dom ssistance Number:	g of Federal Domestic sistance Number:		CFDA Title:				
10. CFDA Numbe	ers and Tit	les	93	568			Low-Inco	me Home	Energy	Assistance
11. Descriptive	Title of A	pplicant's Proj	ect							
12. Areas Affected by Funding:										
13. CONGRESS	SIONAL I	DISTRICTS OF	F:							
* a. Applicant						b. Program/P State-wide	roject:			
				II.						

Attach an additional list of Program/Project Congressional Districts if needed.						
14. FUNDING PERIOD:		15. ESTIMATED FUNDING:				
a. Start Date: 10/01/2015		* a. Federal (\$): \$0				
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?						
a. This submission was made availab	le to the State under the Executive Order	12372				
Process for Review on :						
b. Program is subject to E.O. 12372 b	out has not been selected by State for revi	ew.				
c. Program is not covered by E.O. 12	372.					
* 17. Is The Applicant Delinquent On Any Federal Debt? O YES NO Explanation:						
18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001) **I Agree						
** The list of certifications and assurance	es, or an internet site where you may obt	ain this list, is o	contained in the announcemen	nt or agency specific instructions.		
18a. Typed or Printed Name and Title o	f Authorized Certifying Official		18c. Telephone (area code, n	number and extension)		
Shannon Connell 18d. Email Address shannon.connell@dcf.ks.gov						
18b. Signature of Authorized Certifying Official 18e. Date Report Submitted (Month, Day, Year) 10/15/2015						
Attach supporting docum	nents as specified in agenc	y instruct	tions.			

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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. **Dates of Operation** (Note: You must provide information for each component designated here as requested elsewhere in this plan.) **End Date Start Date** 1/19/2016 3/31/2016 Heating assistance V Cooling assistance Crisis assistance 1/19/2016 03/31/2016 V 03/31/2017 04/01/2016 Weatherization assistance V Provide further explanation for the dates of operation, if necessary 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 Percentage (%) 65.00% Heating assistance Cooling assistance 0.00% 10.00% Crisis assistance Weatherization assistance 15.00% Carryover to the following federal fiscal year 0.00% Administrative and planning costs 10.00% 0.00% Services to reduce home energy needs including needs assessment (Assurance 16) 0.00% Used to develop and implement leveraging activities TOTAL 100.00% Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C) 1.3 The funds reserved for winter crisis assistance that have not been expended by March 15 will be reprogrammed to:

~	I	Heating assistance			Cooling assistance				
	7	Weatherization assistance				Other	r (specify:)		
	11:								
		ity, 2605(b)(2)(A) - Assurance 2, 2605(c)				-4	6 1 6 4 41	1 . 64	
Yes	No No	households categorically eligible if one	household member recer	ves one	of the following ca	ategorie	es of benefits in th	ie left	column below?
If you	answered "Y	es" to question 1.4, you must complete t	he table below and answ	er quest	ions 1.5 and 1.6.				
			Heating		Cooling		Crisis		Weatherization
TANF			O Yes O No	O Ye	es O No		es O No	-	Yes O No
SSI			O Yes O No		es O No	!	es O No		Yes O No
SNAP			O Yes O No	O Ye	es O No	○ Ye	es O No	0	Yes O No
Means	-tested Veterar	s Programs	O Yes O No	O Ye	es O No	○ Ye	es O No	0	Yes O No
		Program Name	Heating	Cooling		Crisis			Weatherization
Other((Specify) 1	LIHEAP	C Yes C No	(O Yes O No	(O Yes O No		● Yes ○ No
1.5 De	o you automa	ically enroll households without a direct	annual application? 🔘	Yes 🖸	No				
If Yes	s, explain:								
1.6 He	ow do vou ens	ure there is no difference in the treatme	nt of categorically eligible	e housel	holds from those	not rece	eiving other publi	c assis	stance when
deteri	mining eligibi	lity and benefit amounts? program does recognize categorical eligibi							
		e based on established criteria with no cons							s of level of services. All
an i i									
	Nominal Pay				. 6				
_	-	e LIHEAP funds toward a nominal payr 'es'' to question 1.7a, you must provide a							
		minal Assistance: \$0	response to questions 1.	/D, 1./C,	, and 1./u.				
	1.7c Frequency of Assistance Once Per Year								
	Once every	ïve years							
	Other - Desc	ribe:							
1.7d I	How do you co	onfirm that the household receiving a no	minal payment has an en	ergy cos	st or need?				
Deteri	mination of El	gibility - Countable Income							
1.8. Ir	n determining	a household's income eligibility for LIH	EAP, do you use gross in	come o	r net income ?				
>	Gross Incon	ne							
	Net Income								
1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP									
>	✓ Wages								
V	✓ Self - Employment Income								
~	Contract Inc	come							
	Payments fr	om mortgage or Sales Contracts							
>	Unemploym	ent insurance							
>	Strike Pay								

>	Social Security Administration (SSA) benefits							
	✓ Including MediCare deduction Excluding MediCare deduction							
>	Supplemental Security Income (SSI)							
>	Retirement / pension benefits							
>	General Assistance benefits							
>	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.							
>	Jury duty compensation							
>	Rental income							
>	Income from employment through Workforce Investment Act (WIA)							
	Income from work study programs							
>	Alimony							
>	Child support							
>	Interest, dividends, or royalties							
>	Commissions							
>	Legal settlements							
>	Insurance payments made directly to the insured							
>	Insurance payments made specifically for the repayment of a bill, debt, or estimate							
>	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.)				
Other				
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.				

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	Section 2 - Heating Assistance					
Eligibility, 2605(b)(o(2) - Assurance 2					
2.1 Designate the i	income eligibility threshold used for the heat	ting compone	net:			
Add	Household size		Eligibility Guideline	Eligibility Threshold		
1	All Household Sizes		HHS Poverty Guidelines	130.00%		
2.2 Do you have ad HEATING ASSITA	dditional eligibility requirements for ANCE?	⊙ Yes (C _{No}			
2.3 Check the appr	ropriate boxes below and describe the polici	ies for each.				
Do you require an	Assets test ?	C Yes	⊙ _{No}			
Do you have addit	tional/differing eligibility policies for:					
Renters?		O Yes	€ No			
Renters Livi	ing in subsidized housing ?	⊙ Yes (C _{No}			
Renters with	h utilities included in the rent ?	O Yes	€ No			
Do you give priorit	ty in eligibility to:					
Elderly?		O Yes	⊙ No			
Disabled?		O _{Yes} (⊙ No			
Young childs	ren?	O Yes	⊙ No			
Households	with high energy burdens ?	O Yes	⊙ No			
Other?		O Yes	⊙ No			
Explanations of po	olicies for each "yes" checked above:					
Renters living in su	bsidized housing where the hearing fuel costs	are included in	n their rent are not eligilble for energy assistance.			
Determination of B	Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B	В)				
2.4 Describe how y	you prioritize the provision of heating assist:	ance tovulner	rable populations,e.g., benefit amounts, early applica	ation periods, etc.		
concept that all eligi			ive equally. All populations are processed the same. Ou I receive equally. An estimate of the number of eligible			
2.5 Check the vari	iables you use to determine your benefit leve	els. (Check all	that apply):			
Income	AMOUNT TO THE STATE OF THE STAT	- L	that apply).			
Family (house	sehold) size					
✓ Home energy	y cost or need:					
✓ Fuel ty	туре					
	ate/region					
Indivi	idual bill					
✓ Dwelli	ling type					
	gy burden (% of income spent on home energ	rgy)				
Energ	gy need					

Other - Describe:						
Other = Fuel provider. Kansas uses a matrix with the fuel providers in tiers based on a ranging of their rates during a specific month. A rate survey is conducted every two years.						
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)						
2.6 Describe estimated benefit levels for FY 2016:						
Minimum Benefit	\$59	Maximum Benefit	\$1,483			
2.7 Do you provide in-kind (e.g., blankets, space heaters) a	nd/or other forms	of benefits? C Yes O No				
If yes, 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.						

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	Section 3 - Cooling Assistance						
Eligibility, 2605(c)	(1)(A), 2605 (b)(2) - Assurance 2						
3.1 Designate The	income eligibility threshold used for the C	ooling compon	enet:				
Add	Household size		Eligibility Guideline	Eligibility Threshold			
1				0.00%			
3.2 Do you have additional eligibility requirements for COOLING ASSITANCE?							
3.3 Check the appr	ropriate boxes below and describe the poli	cies for each.					
Do you require an	Assets test ?	C Yes	C _{No}				
Do you have addit	ional/differing eligibility policies for:						
Renters?		C Yes	O No				
Renters Livi	ng in subsidized housing ?	C Yes	C _{No}				
Renters with	utilities included in the rent ?	C Yes	C _{No}				
Do you give priori	ty in eligibility to:	1					
Elderly?		C Yes	O _{No}				
Disabled?		C Yes	C _{No}				
Young children? C Yes C No							
Households	with high energy burdens ?	CYes	C _{No}				
Other?		C Yes	C _{No}				
Explanations of po	olicies for each "yes" checked above:	"					
3.4 Describe how y	you prioritize the provision of cooling assis	tance tovulnera	able populations,e.g., benefit amounts,	early application periods, etc.			
Determination of B	enefits 2605(b)(5) - Assurance 5, 2605(c)(1)((B)					
3.5 Check the vari	ables you use to determine your benefit lev	els. (Check all	that apply):				
Income							
Family (hous	sehold) size						
Home energy	y cost or need:						
Fuel t	ype						
Clima	nte/region						
Individual bill							
Dwelling type							
Energy burden (% of income spent on home energy)							
Energ	gy need						
Other	· - Describe:						

Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)					
3.6 Describe estimated benefit levels for FY 2016:					
Minimum Benefit	\$0	Maximum Benefit	\$0		
3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? O Yes O No					
If yes, describe.					
If any of the above questions require further exattach a document with said explanation here.	xplanation o	r clarification that could not be made in the field	s provided,		

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	Section 4: CRISIS ASSISTANCE					
Eligibility - 2604(c)), 2605(c)(1)(A)					
4.1 Designate the in	ncome eligibility threshold used for the crisis component					
Add	Household size	Eligibility Guideline	Eligibility Threshold			
1	All Household Sizes	HHS Poverty Guidelines	130.00%			
4.2 Provide your LIHEAP program's definition for determining a crisis.						
The household must system.	t have received a shut-off notice or have less than 15% fuel left	in their tank. Household has no heating fuel or no e	nergy to operate the primary heating			
4.3 What constitut	es a <u>life-threatening crisis?</u>					
If the household als infant respiratory fa	o contains members using medical support equipment (e.g., dia ilure alarm)	lysis machine, oxygen concentrator, intermittent pos	sitive pressure breathing machine,			
Crisis Requiremen	nt, 2604(c)					
4.4 Within how ma	any hours do you provide an intervention that will resolve th	e energy crisis for eligible households? 48Hours	1			
4.5 Within how ma	any hours do you provide an intervention that will resolve th	e energy crisis for eligible households in life-thre	eatening situations? 18Hours			
Crisis Eligibility, 26	Crisis Eligibility, 2605(c)(1)(A)					
4.6 Do you have ad	lditional eligibility requirements for CRISIS ASSISTANCE	? C Yes O No				
4.7 Check the appr	ropriate boxes below and describe the policies for each	·				
Do you require an	Assets test ?	C Yes O No				
Do you give priori	ty in eligibility to :	40				
Elderly?		C Yes O No				
Disabled?		C Yes O No				
Young Child	ren?	C Yes O No				
Households	with high energy burdens?	C Yes ⊙ No				
Other?		C Yes O No				
In Order to receive	e crisis assistance:	40				
Must the hou tank?	isehold have received a shut-off notice or have a near empty	Yes O No				
Must the hou	sehold have been shut off or have an empty tank?	C Yes O No				
Must the hou	sehold have exhausted their regular heating benefit?	C Yes C No				
Must renters eviction notice ?	Must renters with heating costs included in their rent have received an \cite{O} Yes \cite{O} No					
Must heating	z/cooling be medically necessary?	C Yes O No				
Must the hou	isehold have non-working heating or cooling equipment?	C Yes O No				
Other?	Other? C Yes O No					
Do you have additi	ional / differing eligibility policies for:	- P				
Renters?		C Yes O No	<u> </u>			

Renters living in subsidi	ized housing?			€ Yes C No			
Renters with utilities inc	cluded in the rent?			C Yes O No			
Explanations of policies for ea	nch "yes" checked above:						
Renters living in subsidized hou	Renters living in subsidized housing with the heating fuel costs included in their rent are not eligible for energy assistance.						
Determination of Benefits							
4.8 How do you handle crisis s	situations?						
	eparate component						
V	Fast Track						
	Other - Describe:						
4.9 If you have a separate com	ponent, how do you detern	nine crisis ass	sistance benef	its?			
	Amount to resolve the cris						
	Other - Describe:						
Crisis Requirements, 2604(c)							
	ns for energy crisis assistan	ce at sites tha	t are geograf	phically accessible to all households in the area to be served?			
• Yes O No Explain.	is for energy erisis assistant	CC UV SIVES VIII	ure geograf	and the state of the following in the state of the state			
In addition to State agency loca The applications are then forwa				accepted at all fuel providers and over 1,000 helping agencies throughout the State. termination.			
4.11 Do you provide individua							
Submit applications for cris		their homes?					
Yes O No If No, exp							
Travel to the sites at which		tance are acc	epted?				
Yes O No If No, exp							
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? Paper applications and general information are mailed to all prior year recipients, cash, SNAP, Medicaid, and MediKan recipients, not living in known non-energy vulnerable housing. Applications can be submitted by mail or online. Applicants can receive assistance with the completion of an application by calling the program toll-free number. A representative will complete the application based on the applicants answers to the questions and then mail it to the applicant for verification and signature(s). The applicant can then return the application by mail, email or fax.							
Benefit Levels, 2605(c)(1)(B)							
4.12 Indicate the maximum be	enefit for each type of crisis	assistance of	fered.				
	83 maximum benefit						
	naximum benefit						
Year-round Crisis \$0 maximum benefit							
4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits? O Yes No If yes, Describe							
10 Tes 10 No II yes, Describe							
4.14 Do you provide for equipment repair or replacement using crisis funds?							
C Yes ⊙ No							
If you answered "Yes" to question 4.14, you must complete question 4.15.							
4.15 Check appropriate boxes below to indicate type(s) of assistance provided.							
		Winter Crisis	Summer Crisis	Year-round Crisis			
Heating system repair							
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 moratoriur	n on shut offs	?			
⊙ Yes O No						
If you responded "Yes" to question 4.16, you must respo	nd to question	n 4.17.				
4.17 Describe the terms of the moratorium and any speci	al dispensatio	on received by	y LIHEAP clients during or after the moratorium period.			
Cold Weather Rule - November 1 - March 31						
circumstances.	s forecasted to	drop below 3.	5 degrees or be in the mid to low 30s over the next 24 hours, except in certain			
To prevent disconnection when it is 35 degrees or above, or	to be reconnect	cted regardless	s of temperature, customers must make pay arrangements with your utility.			
A utility may start the final notification and disconnection p	rocess if there	is a 48 hour fo	precast of temperatures above 35 degrees.			
On the day before disconnection, a utility must attempt to contact customers by phone. If that fails, they must go to the home and notify them or leave a message on the door. Some utilities have a third party notification plan.						
If the 48 hour forecast changes before the period ends and there is a forecast of below 35 degrees, the utility cannot disconnect until there is another Cold Weather Rule 48 hour forecast of temperatures above 35 degrees						
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

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Section 5: WEATHERIZATION ASSISTANCE					
Eligibility, 2605(c)(1	1)(A), 2605(b)(2) - Assurance	2			
5.1 Designate the in	come eligibility threshold use	d for the Weatherization co	mponent		
Add	Househo	ld Size	Eligibility Guideline	Eligibility Threshold	
1	1 All Household Sizes HHS Poverty Guidelines 130.00%				
5.2 Do you enter int	to an interagency agreement t	o have another government	agency administer a WEATHERIZATION com	ponent? • Yes • No	
5.3 If yes, name the	agency. Kansas Housing Reso	ources Corporation			
5.4 Is there a separa	ate monitoring protocol for w	eatherization? • Yes O	No		
WEATHERIZATIO					
5.5 Under what rule	es do you administer LIHEAI	weatherization? (Check or	ıly one.)		
Entirely unde	er LIHEAP (not DOE) rules				
Entirely unde	er DOE WAP (not LIHEAP) i	rules			
Mostly under	LIHEAP rules with the follo	wing DOE WAP rule(s) who	ere LIHEAP and WAP rules differ (Check all tha	t apply):	
Income	Threshold				
Weather become eligible with	•	y housing structure is permi	itted if at least 66% of units (50% in 2- & 4-unit l	ouildings) are eligible units or will	
Weathe	rize shelters temporarily hou	sing primarily low income p	persons (excluding nursing homes, prisons, and si	milar institutional care facilities).	
Other - Describe:					
Mostly under	DOE WAP rules, with the fo	llowing LIHEAP rule(s) wh	ere LIHEAP and WAP rules differ (Check all the	at apply.)	
✓ Income	Threshold	•			
Weathe	rization not subject to DOE V	VAP maximum statewide av	verage cost per dwelling unit.		
Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit. Weatherization measures are not subject to DOE Savings to Investment Ration (SIR) standards.					
 • LIHEAP defined income threshold is used to determine income eligibility. • Re-weatherization of a home is possible as long as no part of the costs were through use of DOE funds. • DOE average cost per unit is used along with consideration of special allowances (through written request by the sub-grantee) if there is a need to do certain repair measures. Those measures include small (measured by cost) amounts of repair that in normal instances would require the sub-grantee to "walk away" from the home until those minor repairs are completed. • LIHEAP funds may be used by weatherization agencies to purchase temporary electric space heaters for emergency "no heats." • DOE's automatic qualifiers of SSI and TANF are automatic qualifiers. Additionally, if the applicant received LIHEAP assistance during the most recent program cycle, the LIHEAP calculated income can be used and the application can be considered automatically eligible. • LIHEAP funds may be used to install duct work after all other funding possibilities have been eliminated. • LIHEAP funds may be used to weatherize multi-family units where eligible under DOE rules. Due to lower income qualifications, the 20% cap on multi-family units may be waived. • "Income calculated within the previous 12 months for HUD compliance may be utilized for income documentation" in reference to multi-family properties. • Either ASHRAE Standard 62-1989 or ASHRAE 62.2-2013 may be used for calculating acceptable indoor air quality. 					
Eligibility, 2605(b)(5) - Assurance 5					
5.6 Do you require a		C Yes € No			
	ditional/differing eligibility po	O Yes No			
Renters	l	i w≝/ Yes W./ No			

Renters living in subsidized housing?	C Yes O No		
5.8 Do you give priority in eligibility to:	u		
Elderly?	⊙ Yes ○ No		
Disabled?	⊙ Yes O No		
Young Children? © Yes O No			
House holds with high energy burdens?	n energy burdens? C Yes C No		
Other? C Yes C No			
If you selected "Yes" for any of the options in qu	nestions 5.6, 5.7, or 5.8, you must	provide further explanation of these policies in the text field below.	
(5.7) Landlords are required to partially pay for furn	nace replacements. Exemptions are	allowed for low-income landlords, public housing, and emergency shelters	
(5.8) The Kansas Weatherization Program and their subgrantees give priority in outreach methods and service to three groups of households: those with low-income elderly clients (age 60 or over), those with low-income clients who have disabilities (any individual who has a physical or mental disability which constitutes or results in a substantial handicap to the individuals employment; or a person who has a record of hanving, or is regarded as having, a physical or mental impairment which substantially limits one or more of the individual's major life activities; or someone who has a disability which would make the individual eligible to receive disability insurance benefits or supplemental security income from the SSA or developmentally disabled assistance from HHS), and those with low-income families with children 18 years of age or under.			
Benefit Levels 5.9 Do you have a maximum LIHEAP weatheriz	ation benefit/eynenditure ner bo	nsehold? Ves • No	
5.10 If yes, what is the maximum? \$0	ation benefit/expenditure per no	ischold. © 105 © 10	
Types of Assitance, 2605(c)(1), (B) & (D) 5.11 What LIHEAP weatherization measures do you provide ? (Check all categories that apply.)			
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	you provide ? (Check all catego	ries that apply.)	
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ries that apply.) Energy related roof repair	
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits		Energy related roof repair	
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits			
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits Caulking and insulation		Energy related roof repair Major appliance Repairs	
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits Caulking and insulation Storm windows		Energy related roof repair Major appliance Repairs Major appliance replacement	
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits Caulking and insulation Storm windows Furnace/heating system modifications/re		Energy related roof repair Major appliance Repairs Major appliance replacement Windows/sliding glass doors	
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits Caulking and insulation Storm windows Furnace/heating system modifications/ re Furnace replacement		Energy related roof repair Major appliance Repairs Major appliance replacement Windows/sliding glass doors Doors	
5.11 What LIHEAP weatherization measures do Weatherization needs assessments/audits Caulking and insulation Storm windows Furnace/heating system modifications/ re Furnace replacement Cooling system modifications/ repairs		Energy related roof repair Major appliance Repairs Major appliance replacement Windows/sliding glass doors Doors Water Heater	

attach a document with said explanation here.

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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):
A toll-free number is available for consumers. DCF also provides to weatherization a list of all recipients of LIHEAP to target services to those with potential need. DCF has an online application process to allow consumers to access many of our benefit programs through the internet including LIHEAP.

If any of the above questions require further explanation or clarification that could not be made in the fields provided,

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	J			
Section 7: Coordination, 2605(b)(4) - Assurance 4				
7.1 Desc	ribe 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:			

Up to 15% of the LIHEAP black grant may be allocated to the low-income weatherization assistance program. LIHEAP applicant's name, address, and energy consumption data is shared with the weatherization program. LIHEAP eligibility information is shared with federal, state and local governments, utilities, vendors, and non-profit organizations. Agreements are entered into with local agencies for the provision of voluntary outreach and intake services. A mass mailing of LIHEAP information directing them to apply is sent to prior year LIHEAP recipients at the beginning of the application period.

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.

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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? **Administration Agency** Commerce Agency Community Services Agency **Energy / Environment Agency** Housing Agency Welfare Agency ٧ 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 LIHEAP program uses a separate paper and online application from the other programs. A mass mailing of LIHEAP information to potential applicants, community helping agencies, and fuel providers is conducted at the beginning of the application period. Other interested persons may obtain an application, receive information, or assistance in completing the application by calling the toll-free number for the local LIEAP office directly, utilize the available online application process or by calling or visiting a local agency office. The applications are ultimately received and processed in a separate department from other assistance programs. The LIHEAP program has its own call center to answer questions and provide assistance. 8.3 How do you provide alternate outreach and intake for COOLING ASSISTANCE? 8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE? Same as 8.2 In addition to the above, additional outreach and intake services are provided for heating and crisis assistance by many volunteer agencies statewide; (e.g. Salvation Army, American Red Cross, Area Agencies on Aging, county health departments, local housing agencies, etc.). 8.5 LIHEAP Component Administration. Weatherization Heating Cooling Crisis 8.5a Who determines client eligibility? State Administration Non-Applicable State Administration Non-profits Agency Agency 8.5b Who processes benefit payments to gas and electric State Administration Non-Applicable State Administration vendors? Agency Agency State Administration Non-Applicable State Administration 8.5c who processes benefit payments to bulk fuel Agency 8.5d Who performs installation of weatherization Community Action

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	t is your process for selecting local administering agencies?
Not appli	icable. The State of Kansas administers the LIHEAP program internally.
8.7 How	many local administering agencies do you use? 1
8.8 Have Yes No	e you changed any local administering agencies in the last year?
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
	of the above questions require further explanation or clarification that could not be made in the fields provided, a document with said explanation here.

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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 C No
Cooling C Yes C No
Crisis • Yes O No
Are there exceptions? • Yes No
If yes, Describe.
Small utilities and vendors are paid using checks payable to the vendor f/b/o the household. In addition, households whose heating costs are included in their rent or in their landlord's name are issued a one party check.
9.2 How do you notify the client of the amount of assistance paid?
A notice of eligibility is sent directly to the client indicating benefit level. The vendor also notes LIHEAP benefit paid on the customer's next monthly billing statement.
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?
Vendor agreements identify expectations and procedures to be followed for heating and crisis assistance. Communication is ongoing between LIHEAP staff and every suppliers throughout the program.
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?
Vendor agreements identify expectations and procedures to be followed for heating and crisis assistance. Communication is ongoing between LIHEAP staff and every suppliers throughout the program.
9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households? O Yes No
If so, describe the measures unregulated vendors may take.
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.

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	Section 10: Program, Fiscal Monitoring, and Audit, 2605(b)(10)			
10.1. How do yo	ou ensure good fiscal acco	ounting and tracking of LIHEAP funds?		
accounting for, I	LIHEAP funds, including p	program expenditures and amounts transfer	ion with accounting and fiscal opertions nece rred to carry out the purposes of this program . Batch benefit printouts are monitored by the	. Monitoring for the assistace provided is
Audit Process				
10.2. Is your LI	HEAP program audited	annually under the Single Audit Act and	d OMB Circular A - 133?	
			rtable condition cited in the A-133 audits, agency from the most recently audited fisca	
No Findings 🗹]			
Finding	Туре	Brief Summary	Resolved?	Action Taken
1				
10.4. Audits of l	Local Administering Age	ncies		
What types of a Select all that a	-	s do you have in place for local adminst	ering agencies/district offices?	
Local	agencies/district offices a	re required to have an annual audit in o	compliance with Single Audit Act and OM	B Circular A-133
Local	agencies/district offices a	re required to have an annual audit (otl	her than A-133)	
Local	agencies/district offices'	A-133 or other independent audits are r	eviewed by Grantee as part of compliance	process.
Grantee conducts fiscal and program monitoring of local agencies/district offices				
Compliance Mo	onitoring			
10.5. Describe the	he Grantee's strategies fo	or monitoring compliance with the Gran	itee's and Federal LIHEAP policies and pr	ocedures: Select all that apply
Grantee employ	vees:			
✓ Internal program review				
✓ Depar	tmental oversight			
Secondary review of invoices and payments				
Other program review mechanisms are in place. Describe:				
data processing s provided under I	systems, fiscal, research an	d statistical models and procedures to mor	t determinations, and to maintain necessary c nitor the disbursal of funds and accounting of g received and expended. The State also requ	Federal funds, including the assistance
Local Adminste	Local Adminstering Agencies / District Offices:			
✓ On - s	ite evaluation			

Annual program review			
Monitoring through central database			
✓ Desk reviews			
Client File Testing / Sampling			
Other program review mechanisms are in place. Describe:			
State administered LIHEAP program			
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.			
N/A			
10.7. Describe how you select local agencies for monitoring reviews.			
Site Visits:			
N/A			
Desk Reviews:			
N/A			
10.8. How often is each local agency monitored ?			
N/A			
10.9. What is the combined error rate for eligibility determinations? OPTIONAL			
10.10. What is the combined error rate for benefit determinations? OPTIONAL			
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.			

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Section 11: Timely and Mean	ingful Public Participation, 26050	b)(12), 2605(C)(2)	
11.1 How did you obtain input from the public in the developmer Select all that apply.	nt of your LIHEAP plan?		
Tribal Council meeting(s)			
Public Hearing(s)			
Draft Plan posted to website and available for commen	t		
Hard copy of plan is available for public view and com	ment		
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:			
11.2 What changes did you make to your LIHEAP plan as a result of this participation? No changes			
Public Hearings, 2605(a)(2) - For States and the Commonwealth of Puerto Rico Only			
Public Hearings, 2605(a)(2) - For States and the Commonwealth	of Puerto Rico Only		
Public Hearings, 2605(a)(2) - For States and the Commonwealth 11.3 List the date and location(s) that you held public hearing(s)		EAP funds?	
11.3 List the date and location(s) that you held public hearing(s)	on the proposed use and distribution of your LIH	Event Description	
	on the proposed use and distribution of your LIH		
11.3 List the date and location(s) that you held public hearing(s)	on the proposed use and distribution of your LIH	Event Description	
11.3 List the date and location(s) that you held public hearing(s) 1 11.4. How many parties commented on your plan at the hearing(s)	on the proposed use and distribution of your LIH	Event Description	
11.3 List the date and location(s) that you held public hearing(s)	on the proposed use and distribution of your LIH	Event Description	
11.3 List the date and location(s) that you held public hearing(s) 1 11.4. How many parties commented on your plan at the hearing(s).	on the proposed use and distribution of your LIHI Date 9/29/2015 s)? None	Event Description Public hearing held at agency central offices	
11.3 List the date and location(s) that you held public hearing(s) 1 11.4. How many parties commented on your plan at the hearing(s) 11.5 Summarize the comments you received at the hearing(s). No comments	on the proposed use and distribution of your LIHI Date 9/29/2015 s)? None	Event Description Public hearing held at agency central offices	

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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? 32
- 12.2 How many of those fair hearings resulted in the initial decision being reversed? 2
- 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.

Requests for fair hearing must be made in writing and received by the agency or the Kansas Office of Administrative Hearings within 30 days of the date of the denial notice. Generally, the hearing is held within 45 days after your request is filed with the agency. Notice of the date, time, and place of the hearing will be sent to you at least 10 days before the hearing. The hearings are ususally conducted by telephone. A Presiding Officer from the Office of Administrative Hearings conducts the hearing.

12.5 When and how are applicants informed of these rights?

Households ineligible for assistance are informed of the reason(s) using a system generated notice once the determination has been made. The system generated notice also advises the household of their right to request a fair hearing.

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

Requests for fair hearing must be made in writing and received by the agency or the Kansas Office of Administrative Hearings within 90 days of the application date. Generally, the hearing is held within 45 days after your request is filed with the agency. Notice of the date, time, and place of the hearing will be sent to you at least 10 days before the hearing. The hearings are ususally conducted by telephone. A Presiding Officer from the Office of Administrative Hearings conducts the hearing.

12.7 When and how are applicants informed of these rights?

Households are informed through a system generated notice mailed to the household to advise of the eligibility determination on their application.

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.

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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?
No activities conducted at this time.
13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities?
Not applicable
13.3 Describe the impact of such activities on the number of households served in the previous Federal fiscal year.
Not applicable
13.4 Describe the level ofdirect benefitsprovided to those households in the previous Federal fiscal year.
Not applicable
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.

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Section 14:Leveraging Incentive Program, 2607(A)
1.1 Do you plan to submit an application for the leveraging incentive program? Yes No
1.2 Describe instructions to any third parties and/or local agencies for submitting LIHEAP leveraging resource information and retaining records.
l.3 For each type of resource and/or benefit to be leveraged in the upcoming year that will meet the requirements of 45 C.F.R. § 96.87(d)(2)(iii),describe the llowing:

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.

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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:
Employees are provided with policy manual
Other-Describe:
b. Local Agencies:
Formal training conference
How often?
Annually
Biannually
As needed
Other - Describe: Not Applicable
On-site training
How often?
Annually
Biannually
As needed
Other - Describe: Not Applicable
Employees are provided with policy manual
Other - Describe Not Applicable
c. Vendors
Formal training conference
How often?
Annually
Biannually
✓ As needed
Other - Describe:
V Policies communicated through vendor agreements

	Policies are outlined in a vendor manual
	Other - Describe:
15.2 Do • Yes • No	ses your training program address fraud reporting and prevention?
	of the above questions require further explanation or clarification that could not be made in the fields provided, a document with said explanation here.

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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.

Application changes have been made to more clearly collect data required. Work is ongoing with vendors to finalize vendor agreements' content to clearly define expectations and reporing criteria. New eligibility system design is ongoing and will include LIHEAP. Performance measures are being incorporated into design as appropriate. System go-live for LIHEAP is currently scheduled for 2017 eligibility season.

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.

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Section 17: Program Integrity, 2605(b)(10)										
17.1	Fraud Reporting Mechanisms									
a. De	scribe all mechanisms available to	the j	public for reporting o	ases of suspecte	d wa	ste, fraud, and abus	se. Select all that a	pply	·-	
	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:									
The a	agency is currently working on an on	ıline f	raud reporting tool.							
b. De	escribe strategies in place for adve	rtisin	g the above-reference	ed resources. Sel	lect a	ll that apply				
	Printed outreach materials									
•	Addressed on LIHEAP application									
	Website									
	Other - Describe:									
17.2.	17.2. Identification Documentation Requirements									
a. In	a. Indicate which of the following forms of identification are required or requested to be collected from LIHEAP applicants or their household members.									
			Collected from Whom?							
Type of Identification Collected			Applicant Only			All Adults in Household		All Household Members		
Conic	d Saannite Cond is what associate		Required			Required			Required	
	d Security Card is photocopied retained									
			Requested			Requested			Requested	
Social Security Number (Without actual Card)		V	Required		>	Required		>	Required	
			Requested			Requested			Requested	
Government-issued identification card (i.e.: driver's license, state ID, Tribal			Required			Required		Required		
	assport, etc.)		Requested			Requested			Requested	
	Other		Applicant Only	Applicant Onl	y	All Adults in Household	All Adults in Household		All Household Members	All Household Members

		Required	Requested	Required	Requested	Required	Requested
1							
b. Describe any exceptions to the above policies.							
45011							
	entification Verification	ho outhonticity of ide	ntification documen	te provided by client	e or household memb	nors Salast all that a	nnly
	be what methods are used to verify t	-	nuncation documen	ts provided by chem	s or nousehold memo	ers. Select all that a	рріу
	Verify SSNs with Social Security Ac Match SSNs with death records from		ninistration or state	agency			
	Match SSNs with state eligibility/ca	·		. ·			
	Match with state Department of La	-	ii (e.g., Sivai , Taiv	F)			
	Match with state and/or federal cor						
	Match with state child support syste	<u> </u>					
	Verification using private software		her)				
	In-person certification by staff (for		<i>(</i>				
	Match SSN/Tribal ID number with		rollment records (fo	r tribal grantees onl	v)		
	Other - Describe:	tribar database or en	Tomnent records (10	t tribar grantees om	3)		
	Other - Describe.						
17.4. C	itizenship/Legal Residency Verificat	tion					
What a	are your procedures for ensuring tha	at household members	s are U.S. citizens or	aliens who are qual	ified to receive LIHE	AP benefits? Select	all that apply.
	Clients sign an attestation of citize	nship or legal residen	cy				
~	Client's submission of Social Secur	rity cards is accepted	as proof of legal resi	idency			
>	Noncitizens must provide documen	ntation of immigration	n status				
	Citizens must provide a copy of the	eir birth certificate, n	aturalization papers	s, or passport			
>	Noncitizens are verified through th	ne SAVE system					
	Tribal members are verified throu	gh Tribal enrollment	records/Tribal ID c	ard			
>	Other - Describe:						
	Applicants signature on the program application, which includes citizenship and residency, is an attestation that all information provided is complete and accurate and that assistance received as a result of withholding or providing false information must be repaid and may result in criminal charges.						
17.5. Iı	ncome Verification						
What r	methods does your agency utilize to	verify household inco	me? Select all that a	pply.			
>	Require documentation of income for	or all adult household	members				
	Pay stubs						
	Social Security award letters	S					
	✓ Bank statements						
	✓ Tax statements						
	Zero-income statements						
	✓ Unemployment Insurance le	tters					
	Other - Describe:						
~	Computer data matches:						
	Income information matched						
	Proof of unemployment bene	efits verified with state	e Department of La	bor			
	Social Security income verifi						
	Utilize state directory of new	hires					
	Other - Describe:						

17.6. Protection of Privacy and Confidentiality
Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.
Policy in place prohibiting release of information without written consent
Grantee LIHEAP database includes privacy/confidentiality safeguards
Employee training on confidentiality for:
Grantee employees
Local agencies/district offices
Employees must sign confidentiality agreement
Grantee employees
Local agencies/district offices
Physical files are stored in a secure location
Other - Describe:
17.7. Verifying the Authenticity
What policies are in place for verifying vendor authenticity? Select all that apply.
All vendors must register with the State/Tribe.
All vendors must supply a valid SSN or TIN/W-9 form
Vendors are verified through energy bills provided by the household
Grantee and/or local agencies/district offices perform physical monitoring of vendors
Other - Describe and note any exceptions to policies above:
17.8. Benefits Policy - Gas and Electric Utilities
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.
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:
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
Recovery efforts are made against overpayments resulting from applicant misrepresentation or agency error. The household is advised of the overpayment at the time it is identified and given the option of paying any remaining balance through monthly installments or lump sum repayment. Referral to the Area Fraud/Recoupment Office is made if the misrepresentation appears to have been intentional.
The overpayment recovery system tracks overpayment account status from year to year. Client payments are received at LIEAP Central Office to be entered into the LIEAP system in the Recoupment register to be charged against the recipients overpayment amount. The funds are then deposited into the LIEAP fund. Any overpayment balances still owed will be deducted from subsequent benefits until the balance is repaid. Overpayment activity and status may be reviewed at any time using the LIEAP Overpayment Inquiry Option.
Households are exempt from overpayment recovery when all of the following circumstances are met: 1) Recipient is deceased, mentally incapacitated, or now living in nursing home, 2) Household is unable to repay through existing resources, and 3) Automatic withholding is not possible due to LIEAP ineligibility
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
- (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)

555 S. Kansas Avenue * Address Line 1		
Address Line 2		
Address Line 3		
Topeka (Shawnee) * City	KS * State	66603-3444 <u>*</u> 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

- (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 disbursal 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).