DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance

Grantee Name: DEPARTMENT OF HUMAN SERVICES COLORADO **Report Name:** DETAILED MODEL PLAN (LIHEAP) Revision # 1

Report Period: 10/01/2025 to 09/30/2026

Report Status: Submission Accepted by CO (Revision #1)

Report Sections

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- 20. Section 19: Certification Regarding Drug-Free Workplace Requirements
- 21. Section 20: Certification Regarding Lobbying
- 22. Assurances
- 23. Plan Attachments

Mandatory Grant Application SF-424

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

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01 OMB Clearance No.: 0970-013 Expiration Date: 02/28/2027

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

* 1.a. Type of Submission: Plan		* 1.b. Frequency: Annual	Plan/Fi	* 1.c. Consolidated Application/ Plan/Funding Request? Explanation:		* 1.d. Version: C Initial Resubmission Revision Update State Use Only:	
			3. Appl	icant Identifie	er:		
				que Entity Ide FA1ZHJQ8	entifier (UEI)	5. Date Received By State:	
			4b. Fed	leral Award Id	lentifier:	6. State Application Identifier:	
7. APPLICANT IN							
	Colorado Departm	ent of Human Services					
* b. Address:	4420 7 19700	V.V. GED FIRE GAVEE 4005	₩ a.				
* Street 1:		LN STREET, SUITE 1007		et 2:	5th Floor		
* City:	DENVER		Cou	nty: vince:	Denver		
* State: * Country:	United States			p / Postal	Denver 80203 -		
Country.	Officed States		Code:	p / I UStai	80203 -		
c. Organizationa	ıl Unit:						
Department Nan Department of Hun			Division Name: Food and Energy Assistance Division				
d. Name and contac Awards and on the	ct information of U.S. Departmen	person to be contacted on matters in t of Health and Human Services' LII	nvolving HEAP co	this applicatio ntact list webj	n: (person will page)	be listed on Notice of Funding	
* First Name: Theresa			* Last Name: Kullen				
Title: LEAP Manager - C	Colorado		Organizational Affiliation: CDHS				
* Telephone Numb 720-788-8050	er:		Fax Number				
* Email: theresa.kullen@sta	te.co.us						
* 8. TYPE OF APP A: State Governmen							
* a. Is the applica	ant a Tribal Con	sortium: O Yes O No					
* b. If yes please	attach at least oi	ne the following documentation:					
		Catalog of Federal Dome Assistance Number:	stic		С	CFDA Title:	
9. CFDA Numbers an	nd Titles	93.568	Low-Income Home Energy Assistance Program				
10. DESCRIPTIVE Low Income Energ		PLICANT'S PROJECT: gram (LEAP)					
11. AREAS AFFEO Statewide	CTED BY FUND	ING:					
12. CONGRESSIO	NAL DISTRICT	S OF APPLICANT:					
13. FUNDING PER	RIOD:						
a. Start Date: 10/01/2025			b. End Date: 09/30/2026				
* 14. IS SUBMISSI	ON SUBJECT T	O REVIEW BY STATE UNDER EX	XECUTI	VE ORDER 1	2372 PROCES	SS?	
a. This submission	a. This submission was made available to the State under 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. *15. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? NO
 NO If Yes, explain: 16. 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 assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions. 17a. Typed or Printed Name and Title of Authorized Certifying Official 17c. Telephone (area code, number and extension) Theresa Kullen 17d. Email Address theresa.kullen@state.co.us 17b. Signature of Authorized Certifying Official 17e. Date Report Submitted (Month, Day, Year) 08/18/2025 sign

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

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. 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 OMR control number.

coll	collection of information unless it displays a currently valid OMB control number.					
	Section 1 Program Components					
Pro	gram Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C)					
(No	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.)					
		Start Date	End Date			
>	Heating assistance	11/01/2025	04/30/2026			
	Cooling assistance					
	Summer crisis assistance					
>	Winter crisis assistance	11/01/2025	04/30/2026			
	Year-round crisis assistance					
>	Weatherization assistance	10/01/2025	09/30/2026			
Pro	vide further explanation for the dates of operation, if necessary					
	CO provides a year round furnace repair and replacement program that is a component of our heating assistance program and shall be available until 9/30/2025 or until funding is exhausted. It used to be considered a year round crisis assistance program but it is now a component of our heating assistance program.					
Esti	mated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16					
	Estimate what amount of available LIHEAP funds will be used for each component that you will operate: total of all percentages must add up to 100%.	Percentage (%)	Prior year totals			
Н	eating assistance	66.00%	65.00%			
C	ooling assistance	0.00%	0.00%			
S	ummer crisis assistance	0.00%	0.00%			
V	Vinter crisis assistance	6.00%	0.00%			
Y	ear-round crisis assistance	0.00%	0.00%			
V	Veatherization assistance	10.00%	15.00%			
С	arryover to the following federal fiscal year	10.00%	10.00%			
A	dministrative and planning costs	8.00%	10.00%			
S	ervices to reduce home energy needs including needs assessment (Assurance 16)	0.00%	0.00%			
U	sed to develop and implement leveraging activities	0.00%	0.00%			
TOT	AL	100.00%	100.00%			
Trib	Tribal grant recipients: direct-grant tribes, tribal organizations, or territories with allotments of \$20,000 or less may use for planning and administration					

planr	20% of the funds payable. Grant recipients thating and administration purposes up to 20% of in excess of these limits must be paid from non	the first \$20,000 (or \$, 0				
	rnate Use of Crisis Assistance Funds, 2605(c						
1.3 T	he funds reserved for winter crisis assistance	e that have not been	expended by March 15 w	vill be reprogrammed t	0:		
	Heating assistance		Cooling assistance				
	Weatherization assistance		Other (specify:) Our year round program is our furnace repair and replacement program, which is a component of our heating assistance program, and shall be available through the program year or until funding is exhausted if prior to 9/30/2026.				
1.4 D	gorical Eligibility, 2605(b)(2)(A) - Assurance to you consider households categorically elige te left column below? Yes No			at least one of the follo	owing categories of benefits		
If yo	u answered "Yes" to question 1.4, you must	complete the table b	pelow and answer question	ns 1.5 and 1.6.			
		Heating	Cooling	Crisis	Weatherization		
TANI	7	O Yes O No	Yes No	O Yes O No	C Yes O No		
SSI		O Yes O No	Yes O No	C Yes O No	C Yes O No		
SNAF	•	O Yes O No		O Yes ⊙ No	C Yes ⊙ No		
Mean	s-tested Veterans Programs	O Yes O No		O Yes O No	C Yes No		
	a. Provide your definition of categorical eli						
1.5 D	cation process. o you automatically enroll households withous, explain:	out a direct annual a	pplication? C Yes • N	0			
	low do you ensure there is no difference in t determining eligibility and benefit amount		gorically eligible househol	ds from those not rece	iving other public assistance		
	P Nominal Payments						
1.7a	Do you allocate LIHEAP funds toward a no	minal payment for S	NAP households? C Yes	⊙ No			
If yo	u answered "Yes" to question 1.7a, you mus	t provide a response	to questions 1.7b, 1.7c, a	nd 1.7d.			
1.7b	Amount of Nominal Assistance: \$0.00						
1.7c	Frequency of Assistance						
	Once Per Year						
	Once every five years						
	Other - Describe:						
1.7d	How do you confirm that the household reco	eiving a nominal pay	ment has an energy cost of	or need?			
Dete	rmination of Eligibility - Countable Income						
1.8. I	n determining a household's income eligibil	ity for LIHEAP, do	you use gross income or n	et income?			
Gross Income							
	Net Income						
	Other - Describe						
1.9. 8	Select all the applicable forms of countable i	ncome used to deteri	mine a household's incom	e eligibility for LIHEA	P		
>	Wages						
>	Self - Employment Income						
V	✓ Contract Income						

	Payments from mortgage or Sales Contracts					
<	Unemployment 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					
	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
	ny of the above questions require further explanation or clarification that could not be made in fields provided, attach a document with said explanation here.
1.10	Do you have an online application process Yes No
-	.0a If yes, describe the type of online application (Select all boxes that apply)
V	A PDF version of the application is available online and can be downloaded, filled out and mailed in for processing.
~	A state-wide online application that allows a customer to complete data entry and submit an application electronically for processing.
	One or more locally available online applications that allows a customer to complete data entry and submit an application electronically for processing.
	Online application that is also mobile friendly
	Other, please describe
Pleas	se include a link(s) to a statewide application, if available:
	The application is not available anytime on line except for the program application period which is November 1 through April 30 annually. Here is the link:
	https://cdhs.colorado.gov/leap
1.10b	Can all program components be applied for online?
If no	explain which components can and cannot be applied for online.
1.11	Do you have a process for conducting and completing applications by phone © Yes ONo
1.12	Do you or any of your subrecipients require in person appointments in order to apply C Yes 🔞 No
	s, please provide more information regarding why in-person appointments are required and in what circumstances they are required.
1.13	How can applicants submit documentation for verification? Select all that apply:
>	In-person
~	Mail
~	Email
~	Portal application
	Other, please describe

Hidden for Section 1

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

	Section 2 - Heating Assistance				
Eligibility, 2605((b)(2) - Assurance 2				
2.1 Designate the	e income eligibility threshold used for th	ne heating c	omponent:		
Add	Household size		Eligibility Guideline	Eligibility Threshold	
1	All Household Sizes		State Median Income	60.00%	
2.2 Do you have Heating Assistar	additional eligibility requirements for nce?	• Yes	C No		
2.3 Check the ap	propriate boxes below and describe the	policies for	each.		
Do you require a	an Assets test?	C Yes	⊙ No		
If yes, describe:	Do you have additional/differing eligibil	lity policies	for:		
Renters?		C Yes	⊙ No		
If yes, describe:					
Renters Li	iving in subsidized housing?	⊙ Yes	C _{No}		
and are no	ouseholds in subsidized housing with heat ot eligible. Households in subsidized hous charge to their rent to their landlord are con	ing that pay	their heat directly to a heat vendor/		
Renters wi	ith utilities included in the rent?	C Yes	⊙ No		
If yes, describe:					
Do you give prio	ority in eligibility to:				
Older Adu	ılts (60 years or older)?	Yes	O _{No}		
	eference is given to the elderly by allowing seholds prior to the official start of the pro-				
Individual	s with a disability?	Yes	CNo		
	eference is given to households with a disa plications from these households prior to the r 1st.				
Young chi	Young children?				
If yes, describe:		*			
	eference is given to households with young ns from these households prior to the office				
Household	ls with high energy burdens?	C Yes	⊙ No		
If yes, describe:					
Other?		C Yes	⊙ No		
If yes, describe:		"			
Explanations of	policies for each "yes" checked above:				

Colorado LIHEAP coordinates a mass mailing of applications including instructions and self-addressed, stamped envelopes to all previous year LIHEAP recipients including households with elderly, disabled and young children prior to the start of the season. This early application period allows for local agencies to expedite the eligibility determination process for vulnerable households.

Determination of Benefits 2605(b)(5) - As	surance 5, 2605(c)(1)(B)		
2.4 Describe how you prioritize the provisetc.	sion of heating assistance to vu	Inerable populations, e.g., benefit amo	unts, early application periods,
Preference is given to the vul		early applications from this population sta eived LEAP last year has an application m	
2.5 Check the variables you use to determ	ine your benefit levels. (Check	all that apply):	
☑ Income			
Family (household) size			
✓ Home energy cost or need:			
☑ Fuel type			
Climate/region			
☑ Individual bill			
Dwelling type			
Energy burden (% of income	spent on home energy)		
Energy need			
Other - Describe:			
through April heating season. These costs for each fuel and dwelling type	costs are provided by each appli are utilized for households that	ermine each applicant household's benefit cant household's utility company. Flat rat use a vendor who does not have an agreen es chart. Please see the Methodology for	tes based on average home heating nent with the State or where heat is
Benefit Levels, 2605(b)(5) - Assurance 5,	2605(c)(1)(B)		
2.6 Describe estimated benefit levels for the shown in the payment matrix.	he fiscal year for which this pla	n applies. Please note: the maximum and	d minimum benefits must be
Minimum Benefit	\$200	Maximum Benefit	\$1,000
2.7 Do you provide in-kind (e.g., blankets	, space heaters) and/or other fo	rms of benefits?2 • Yes O No	
If yes, describe.			
	provide blankets, space heaters, a	the Crisis Intervention Program (CIP), Ener and optional shelter, if applicable, to those source due to severe weather.	
If any of the above questions	require further expl	anation or clarification tha	t 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

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Expiration Data 02/20

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

Section 3 - Cooling Assistance					
Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2				
3.1 Designate Th	e income eligibility threshold used for th	e Cooling	component:		
Add	Household size		Eligibility Guideline	Eligibility Thresho	old
1					0.00%
3.2 Do you have a Cooling assistant	additional eligibility requirements for ce?	C Yes	C No		
3.3 Check the ap	propriate boxes below and describe the 1	policies for	· each.		
Do you require a	n Assets test?	C Yes	O _{No}		
If yes, describe:					
Do you have add	itional/differing eligibility policies for:				
Renters?		C Yes	C No		
If yes, describe:					
Renters Li	ving in subsidized housing?	C Yes	C No		
If yes, describe:					
Renters wi	th utilities included in the rent?	O Yes	O _{No}		
If yes, describe:					
Do you give prior	rity in eligibility to:				
Older Adu	lts (60 years or older)?	C Yes	C _{No}		
If yes, describe:					
Individuals	s with a disability?	C Yes	C _{No}		
If yes, describe:					
Young chil	dren?	Oyes	C _{No}		
If yes, describe:		·			
Households	s with high energy burdens?	Oyes	C _{No}		
If yes, describe:					
Other?		C Yes	C _{No}		
If yes, describe:					
	policies for each "yes" checked above:				
3.4 Describe how etc.	you prioritize the provision of cooling a	ssistance t	o vulnerable populations, e.g., benefit amou	ınts, early application pe	eriods,
Determination of	f 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 (hou	usehold) size				
Home energ	gy cost or need:				
Fuel	type				
Clin	nate/region				
Indi	vidual bill				

Dwelling type					
Energy burden (% of income spent on home energy)					
Energy need			·		
Other - Describe:					
	·				
Benefit Levels, 2605(b)(5) - Assurance 5, 2605((c)(1)(B)				
3.6 Describe estimated benefit levels for the fis shown in the payment matrix.	cal year for which this plan	applies. Please note: the maximum and min	imum benefits must	be	
Minimum Benefit	\$0	Maximum Benefit	\$0	·	
3.7 Do you provide in-kind (e.g., fans, air cond	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 rec	-		ould not be ma	ade in	

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**

	Section 4: CR	ISIS ASSISTANCE	,			
Eligibility - 2604	4(c), 2605(c)(1)(A)					
4.1 Designate th	e income eligibility threshold used for the crisis com	ponent				
Add	Household size	Eligibility Guideline		Eligibility	Threshold	
1	All Household Sizes	State Median Income			60.00%	
	r LIHEAP program's definition for determining a cond), Include all program definitions.	risis. If you administer multiple	crisis assistan	ce programs (w	inter, summer,	
	household in crisis is one where service has been dis responsible for heating costs that are included in re			, is out of fuel or	will run out of	
4.3 What constit	tutes a <u>life-threatening crisis?</u>					
	A life threatening crisis means a household whose m ce or repair or replacement of the primary heating s		g would likely	be endangered	if energy	
Crisis Requiren	nent, 2604(c)					
4.4 Within how	many hours do you provide an intervention that wil	l resolve the energy crisis for eli	gible househo	lds? 48Hours		
4.5 Within how situations? 18H	many hours do you provide an intervention that wil ours	l resolve the energy crisis for eli	gible househo	lds in life-threat	ening	
Crisis Eligibility	v, 2605(c)(1)(A)					
			Winter Crisis	Summer Crisis	Year-Round Crisis	
4.6 Do you have	additional eligibility requirements for Crisis Assista	ance?	~			
4.7 Check the ap	opropriate boxes below to indicate type(s) of assistar	nce provided	#!		<u>"</u>	
Do you require	an Assets test?					
Do you give pric	ority in eligibility to:		"		"	
Older Adı	ults (60 years or older)?		~			
Individua	s with a disability?		~			
Young Ch	ildren?		~			
Household	ls with high energy burdens?					
Other (Sp	ecify):					
In Order to rece	eive crisis assistance:		- II		II.	
Must the l	nousehold have received a shut-off notice or have a 1	near empty tank?	~			
Must the l	nousehold have been shut off or have an empty tank	?	~			
Must the l	nousehold have exhausted their regular heating bene	efit?				
Must rent	ers with heating costs included in their rent have rec	ceived an eviction notice?	~			
Must heat	ing/cooling be medically necessary?					
Must the l	nousehold have non-working heating or cooling equi	pment?				
Other (Sn	Other (Specify):					

Renters?	ditional/differing eligibility policies for:	1 -		
Renters li	iving in subsidized housing?			
Renters w	vith utilities included in the rent?			
xplanations of	f policies for each "yes" checked above:	**	•	-15
to assure supplier of depleted	The household must provide the following verification to be considered in a crisic the health and safety of the household. 1. A shut-off notice or other documentate or landlord or that termination of services has occurred; 2. A declaration by the within the next two weeks and the specific amount needed to maintain heat; 3. A twill not be evicted for thirty (30) days, if approved, for those households where	tion of intent to termina household that the bulk An eviction notice and	ate heating serving serving the supply has a statement from	ices by the heatin s been or will be
Determination o	of Benefits			
.8 How do you	handle crisis situations?			
	Separate component			
~	Benefit Fast Track, no separate amount of crisis funds is issued. Rat response time frames.	ther benefits are issued	d to crisis custo	omers within cri
2	Other - Describe:			
	The furnace repair and replacement program, a compone year round support for inoperable home heating systems. Once assistance program the recipient is automatically eligible for the inoperable heating system; which is handled by a sub-contractor required for the benefit. Renters are only offered a repair or repl qualifies for LEAP. The disconnect/out of heating fuel component of the cris benefit. All crisis situations are fast tracked and applications are	eligibility is determined furnace repair or replace, Fenergy Outreach Colo- lacement of an inoperal sis program is part of the	d for the LIHEA cement program orado, and a sep ble heating system he regular heating	AP heating fuel n, if they have an parate application em if the landlord
	The furnace repair and replacement program is not a cris program.	sis program, it is an exte	ension of our he	eating assistance
O If you have	annunta annuncut han da una datamaina asisis assistanas han 64a2			
√ you have a	a separate component, how do you determine crisis assistance benefits? Amount to resolve the crisis. \$0			
			ļ	
✓	Other - Describe: The benefit for the furnace repair or replacement program inoperable home heating system with the average benefit of the preplacement component of our heating assistance program is an eavailable through the federal fiscal year or until funds run out.	program not to exceed \$	\$4,800. The fur	nace repair and
	The crisis benefit for the heating fuel impending disconne program is the amount needed to remedy the situation not to exceed benefit or the \$1,000 maximum benefit whichever is lower.			
Crisis Requiren	ments, 2604(c)			
		accessible to all house	eholds in the a	rea to be served?
Crisis Requiren	cept applications for energy crisis assistance at sites that are geographically	accessible to all house	eholds in the ar	rea to be served?
1.10 Do you acc	cept applications for energy crisis assistance at sites that are geographically	accessible to all house	eholds in the a	rea to be served?
.10 Do you acc	cept applications for energy crisis assistance at sites that are geographically	accessible to all house	eholds in the ar	rea to be served
.10 Do you acc	cept applications for energy crisis assistance at sites that are geographically No Explain.	accessible to all house	eholds in the a	rea to be served
.10 Do you acc	rept applications for energy crisis assistance at sites that are geographically No Explain. Explain. Evide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes?	accessible to all house	eholds in the a	rea to be served?
.10 Do you acc	no Explain. Explain. Explain. Evide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes?	accessible to all house	eholds in the a	rea to be served?
.10 Do you acc	no Explain. Explain. Explain. Evide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes?	accessible to all house	cholds in the a	rea to be served
.10 Do you acc	rept applications for energy crisis assistance at sites that are geographically No Explain. Divide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes? No	accessible to all house	cholds in the ar	rea to be served
In the second se	rept applications for energy crisis assistance at sites that are geographically No Explain. Divide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes? No sites at which applications for crisis assistance are accepted?	accessible to all house	cholds in the a	rea to be served
In No, explain.	rept applications for energy crisis assistance at sites that are geographically No Explain. Divide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes? No sites at which applications for crisis assistance are accepted?			
.10 Do you according Yes ON .11 Do you pro Submit applic Yes ON If No, explain. Travel to the Yes ON If No, explain. f you answered	rept applications for energy crisis assistance at sites that are geographically No Explain. Divide individuals who are individuals with a disability the means to: cations for crisis benefits without leaving their homes? No sites at which applications for crisis assistance are accepted? No di "No" to both options in question 4.11, please explain alternative means of			

Summer Crisis \$0.00 maximum benefit						
Year-round Crisis \$0.00 maximum benefit						
4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?						
• Yes O No If yes, Describe						
(furnace repair and replacement), make blank	ets, space he	aters, and alt	ernative lodging avail	for the management of the Crisis Intervention Program lable if deemed necessary to assure the health and when a fuel tank cannot be accessed due to severe		
4.14 Do you provide for equipment repair or repla	cement usin	g crisis fund	ds?			
C Yes No						
If you answered "Yes" to question 4.14, you must	complete qu	estion 4.15.				
4.15 Check appropriate boxes below to indicate ty	pe(s) of assis	stance provi	ded.			
	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 e	nforce a mo	ratorium on	shut offs?			
• Yes C No						
If you responded "Yes" to question 4.16, you must	t respond to	question 4.1	17.			
4.17 Describe the terms of the moratorium and an	y special dis	pensation re	eceived by LIHEAP	clients during or after the moratorium period.		
The Colorado Public Utilities Commis Certificates - a customer who has a medical co			0	ate's four regulated utility providers: Medical a potential 30 day extension.		
In addition, Xcel Energy (serves the largest number of LIHEAP households) has the following moratorium: Xcel Energy will not shut off a customer 55 or older that lives alone during the winter months. Xcel offers a company sponsored program for customers who are on ventilators whereby electric service will not be discontinued for 12 months with potential for recertification.						
				to provide continuous service for 60 days to LIHEAP rvice restored within 24 hours of approval and will		
4.18 If you experience a natural disaster, do you in No	ntend to utili	ze LIHEAP	crisis funds to addr	ess disaster related crisis situations? O Yes		
If yes, describe						
If any of the above questions requ the fields provided, attach a docur		_		rification that could not be made in		

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Section 5 - WEATHERIZATION 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**

Secti	on 5: WEATHE	RIZATION ASSISTANO	CE
Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assa	urance 2		
5.1 Designate the income eligibility thresh	old used for the Weatheri	zation component	
Add Housel	nold Size	Eligibility Guideline	Eligibility Threshold
1 All Household Sizes		State Median Income	60.00%
5.2 Do you enter into an interagency agree No	ement to have another gov	vernment agency administer a WEATHI	ERIZATION component? • Yes
5.3 If yes, name the agency and attach a co	opy of the Internal Agreer	nent or Contract. Colorado Energy Offic	ee
5.4 Is there a separate monitoring protoco	l for weatherization? 💽	Yes C No	
WEATHERIZATION - Types of Rules			
5.5 Under what rules do you administer L	IHEAP weatherization? (Check only one.)	
Entirely under LIHEAP (not DOE)	rules		
Entirely under DOE WAP (not LIH	EAP) rules		
Mostly under LIHEAP rules with the	ne following DOE WAP ru	ıle(s) where LIHEAP and WAP rules dif	ffer (Check all that apply):
Income Threshold			
Weatherization of entire mult eligible units or will become eligible within		e is permitted if at least 66% of units (50	% in 2- & 4-unit buildings) are
Weatherize shelters temporar care facilities).	ily housing primarily low	income persons (excluding nursing hom	es, prisons, and similar institutional
✓ Other - Describe:			
The use of administrative det	initions per DOE WAP rule	es.	
Mostly under DOE WAP rules, with	the following LIHEAP r	ule(s) where LIHEAP and WAP rules di	iffer (Check all that apply.)
Income Threshold			
Weatherization not subject to	DOE WAP maximum sta	tewide average cost per dwelling unit.	
Weatherization measures are	not subject to DOE Saving	gs to Investment Ration (SIR) standard	S.
Other - Describe:			
Eligibility, 2605(b)(5) - Assurance 5			
5.6 Do you require an assets test?	C Yes O No		
5.7 Do you have additional/differing eligib	ility policies for :		
Renters	⊙ Yes ○ No		
Renters living in subsidized housing?	C Yes O No		
Renters with utilities included in the rent?	Yes O No		
5.8 Do you give priority in eligibility to:			
Older Adults?	€ Yes C No		
Individuals with a disability?	• Yes O No		
Young Children?	• Yes ONo		

House holds with high energy burdens?	C Yes O No						
Other?	C Yes O No						
If you selected "Yes" for any of the option below.	ns in questions 5.6, 5.7, or 5.8, y	ou must provide further explanation of these policies in the text field					
Colorado's weatherization pr	ogram requires landlord permiss	ion during the application process for renters.					
Colorado Energy Office (CEO) duri	ng the program year for the purp	CO) access to data reports of all approved LIHEAP households to the ose of outreach. CEO targets households with elderly, disabled and young ceive weatherization services and is also now focusing on high energy					
Regarding Rooftop Solar Panels here is the description: The solar measure is a full rooftop solar photovoltaic system. The items in this system typically include (but are not limited to):							
Solar photovoltaic panels							
Balance of system componer	its such as inverters, power contr	rollers, monitoring devices, and racking					
Repairs and upgrades to exis	ting electrical components such a	as electrical service panels and wiring					
Fees for items such as utility	interconnection, permitting, and	engineering documents.					
Labor for installation of the s	solar system						
Benefit Levels							
5.9 Do you have a maximum LIHEAP we	atherization benefit/expenditur	re per household? C Yes O No					
5.9a If yes, what is the maximum? \$0							
5.10 Do you use an Average Cost per Unit	(ACPU). O Yes 💿 No						
5.10a If so, what is the ACPU amount?	\$0						
Types of Assistance, 2605(c)(1), (B) & (D)							
5.11 What LIHEAP weatherization measu	res do you provide ? (Check a	ll categories that apply.)					
✓ Weatherization needs assessments	audits/	Energy related roof repair					
✓ Caulking and insulation		Major appliance repairs					
✓ Storm windows		Major appliance replacement					
✓ Furnace/heating system modificati	ons/repairs	Windows/sliding glass doors					
✓ Furnace replacement		☑ Doors					
Cooling system modifications/repa	irs	☑ Water Heater					
Water conservation measures		Cooling system replacement					
✓ Roof top solar		Community solar projects					
Compact florescent light bulbs		Other - Describe: Rooftop solar panels not to exceed 25% of the transfer of funds to CEO. In addition, up to 10% of the Weatherization funds can be used for their weatherization readiness work					
If any of the above questions the fields provided, attach a		anation or clarification that could not be made in					

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) **MODEL PLAN**

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. V Publish articles in local newspapers or broadcast media announcements. V 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. V Web Posting Email 4 Texting Events • Social Media Other (specify): A media campaign is conducted each year that includes paid advertisements on television, interviews on major statewide news stations, interviews on a Spanish speaking network, ads on radio stations and monthly publications in local newspapers. The State maintains a website that provides eligibility information, a current application and instructions on the application process. Colorado LIHEAP also maintains a toll-free phone line, which is highly publicized. The customer service representatives provide information on the LIHEAP application process, answer questions, assist with taking applications over the phone and will provide the customer with instructions to access the application online or mail applications to interested households. The Colorado Department of Human Services maintains a website that provides information about the program, criteria,

directions on how to apply, access to an application that can be downloaded and a link to an on-line application.

the fields provided, attach a document with said explanation here.

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

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

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 (indicate programs included) All public assistance programs, WIC Intake referrals to/from other programs (indicate programs included) All public assistance programs in the counties that self-administer the program One - stop intake centers Other - Describe:

The State LIHEAP office coordinates with Colorado's four regulated utilities in the delivery of percentage of income payment plans (PIPP) that provide energy assistance to low income gas and electric consumers pursuant to rules established by the Colorado Public Utilities Commission. The PIPP program is offered to LIHEAP recipients that are customers of Atmos Gas, Black Hills Utilities, Colorado Natural Gas and Xcel Energy. Black Hills Utilities will offer their electric program to non-LIHEAP low income customers as well as LIHEAP customers and the gas program only to customers receiving LIHEAP. The State LIHEAP office provides LIHEAP eligibility criteria to the utilities through a secure automated transmission method for participating PIPP households upon written consent of the PIPP applicant. Utilities will calculate the "affordable" part of the bill as a prescribed percentage of the total household income as defined in the PUC ruling. The residual difference between the "affordable" portion and the annual bill will become the "non-affordable" portion. The LIHEAP benefit will be applied to the "non-affordable" portion of the bill for all the plans that are offered to LIHEAP eligible customers. Black Hills Utilities will apply the LIHEAP benefit to the "affordable" portion of the bill for those customers enrolled in their electric program because it is being offered to non-LIHEAP low-income customers. Utilities must treat any individual LIHEAP benefit amounts that are in total greater than the amount applied to the "unaffordable" portion of the utility bill by applying it first to pre-existing arrearages, and secondly, to the account of the program participant. For Black Hills Utilities electric program participants, any LIHEAP benefit amounts that are in total greater than the amount applied to the "affordable" portion of the utility bill will first be applied to the pre-existing arrearages and secondly to the account of the program participant.

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

	Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Required for state Grant recipients and the Commonwealth of Puerto Rico)								
8.1 Ho	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								
<	State Department of Welfare (administers 7	TANF, SNAP, and/or M	(edicaid)						
	Economic Development Agency								
	Other - Describe:								
	e current list of subrecipient name, main offi umber. Used for Near hotline and OCS Servic			er, county(s) served, (Congressional District, and				
If you	ate Outreach and Intake, 2605(b)(15) - Assur selected "State Department of Welfare (adm 8.4, as applicable.		and/or Medicaid)'' in q	uestion 8.1, you must	complete questions 8.2, 8.				
8.2 Ho	w do you provide alternate outreach and int	ake for heating assistan	ce?						
County and state offices mail or deliver outreach materials to several community agencies as well as LIHEAP vendors. Applications with instructions on how to apply are made available to consumers. Colorado LIHEAP and Energy Outreach Colorado maintain websites from which interested parties can print an application, complete it and mail it in. Colorado LIHEAP also maintains a toll-free phone line, which is highly publicized. People can call in, receive advice on how to apply for LIHEAP, complete an application over the phone and be given directions for an on-line option or get an application mailed to their home.									
8.3 How do you provide alternate outreach and intake for cooling assistance?>									
8.4 Ho	w do you provide alternate outreach and int	ake for crisis assistance	?						
	Information on the Crisis Intervention Program (CIP) is provided through various methods. Each approved household is informed of the service on his or her approval notice and is provided the toll-free number dedicated to the program. All information sheets that accompany LIHEAP applications provide information about (CIP). In addition, information about CIP is publicized in newspaper columns as well as in television ads and information is maintained on both the Colorado Department of Human Services' website and Energy Outreach Colorado's website.								
8.5 LII	HEAP Component Administration.	Heating	Cooling	Crisis	Weatherization				
8.5a W	a Who determines client eligibility? Other Non-Applicable Other Other								

8.5b Who processes benefit payments to gas and electric vendors?	State Administration Agency	Non-Applicable	State Administration Agency					
8.5c who processes benefit payments to bulk fuel vendors?	State Administration Agency	Non-Applicable	State Administration Agency					
8.5d Who performs installation of weatherization measures?				Other				
Include a current list of subrecipie number, county(s) served, Congres				Box), phone				
If any of your LIHEAP components are not centra applicable, 8.9.	lly-administered by a s	state agency, you must	complete questions 8.6, 8	3.7, 8.8, and, if				
8.6 What is your process for selecting local admini-	stering agencies?							
Colorado LIHEAP is a state supervi the administration and or outreach for LIE Colorado that determines eligibility on beh contractual relationship with Discover Goo 2016.	IEAP. The State curre alf of 55 counties for F	ntly contracts directly FY 2026. The State ca	with Discover Goodwill, n provide better oversigh	, a non-profit agency, loca at and monitoring throug				
County offices who are no longer pr there is a coordinated process with Discove		-	streach efforts, providing	information and referra				
8.7 How many local administering agencies do you	use? 10							
8.8 Have you changed any local administering age Yes No	ncies in the last year?							
8.9 If so, why?								
Agency was in noncompliance with Grant r	recipient requirements	for LIHEAP -						
Agency is under criminal investigation								
Added agency								
Agency closed								
Other - describe	Other - describe							
8.10 If a subrecipient is no longer providing LIHEAP, are you aware of prior-year LIHEAP funds being mismanaged or misspent? Yes No								
8.10a If yes, please explain.								
8.10b If you are aware, were other federal programs impacted such as CSBG, SSBG, Head Start, TANF, and Department of Energy Weatherization funding, etc. O Yes No								
8.10c If yes, please explain.								
If any of the above questions requi in the fields provided, attach a doc	-			d not be made				

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

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 O Yes O No
Crisis © Yes © No
Are there exceptions?
If yes, Describe.
If yes, Describe. The State maintains a centralized LIHEAP eligibility system whereby local agencies determine eligibility and the State p payment, which is sent directly to vendors through an electronic transfer of funds.
payment, which is sent directly to vendors through an electronic transfer of funds. If the vendor is not a LEAP vendor, or when heat is included in rent, the payment the applicant household receives their benefit on a state card The State processes payments directly to a client's Electronic Benefit Transfer (EBT) card when heat is included in rent and/or the client u who has not entered into an agreement with the State. Clients can also choose an electronic fund transfer of the LIHEAP payment to their bank a
The State processes payments directly to a client's Electronic Benefit Transfer (EBT) card when heat is included in rent and/or the client who has not entered into an agreement with the State. Clients can also choose an electronic fund transfer of the LIHEAP payment to their bank a an EBT card.
9.2 How do you notify the client of the amount of assistance paid?
A notice is generated from the LIHEAP computer system detailing the benefit amount that is paid on behalf of the applicant hous specified utility provider. A notice is also generated with the benefit amount for those clients that will receive a direct payment on their I heat is included in rent or they use a vendor who has not entered into agreement with the State. The county administering agencies and responsible for mailing notices to applicant households.
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 State has included a provision in the LIHEAP vendor agreement that requires the vendor to 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 vendor agrees to implement this provision by signing the LIHEAP vendor agreement.
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?
The vendor agrees that there will be no adverse treatment of a household due to receipt of LIHEAP assistance upon signing of the vendor agreement. The State will terminate a vendor agreement if it is determined that a vendor has treated LIHEAP households adversinactivate the vendor account in the LIHEAP eligibility system.
9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households? • Yes \bigcap No
If so, describe the measures unregulated vendors may take.
Unregulated utilities are required to sign a vendor agreement to serve LIHEAP households and receive payment from the State to directly household's account.
Attach a copy of the template statewide vendor agreement or a policy that indicates local agreements must adhere to statewide policies and assurances.

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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 funds?

In our internal team we have a Fiscal Analyst & Contracts Specialist and we also have an accounting team that we meet with quarterly and those are dedicated staff to specific programs. All invoices are reviewed by the manager and compared to the contracts prior to the manager authorizing the payment. We have a protocol for fiscal monitoring sub-grantees and contractors.

10.1a Provide your definitions of the following:

Obligation

Funding that is legally contracted/obligated for program specific uses.

Expenditures

Funds that are already spent.

Expenditure timeframe

Current FFY +1 year.

Administrative costs

Salaries and benefits for administrative staff. Preparation of plans and budgets. Monitoring Fraud and abuse prevention. Procurement. Au accounting, litigation, management of property, payroll, and personnel goods and services used during other administrative functions. IT system or regular maintenance and programming. Federal report preparation.

Audit Process

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

10.2a - if yes, describe your auditor selection process.

The state of Colorado has two internal auditing teams, the team decicated to the audit process for public assistance programs and at the program level we are not involved in the auditor selection process, it is determined by the State Audits Office.

10.3. Describe any audit findings of the grant recipient (i.e. State/Tribe/Territory) rising to the level of material weakness or reportable condition cited in the single audits, inspector general reviews, or other government agency reviews 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 Grant recipient as part of compliance process.
- Grant recipient conducts fiscal and program monitoring of local agencies/district offices
- Local agencies and district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133

Compliance Monitoring

10.5. Describe your monitoring process for compliance at each level below. Check all that apply.
Grant recipients have a policy in place for appropriate separation of duties and internal controls.
Internal program review
✓ Departmental oversight
Secondary review of invoices and payments
Other program review mechanisms are in place. Describe:
State LIHEAP staff review various reports on a daily, weekly, and monthly basis to determine a pattern or trend that indicates an issue with an agency's performance in adequately determining eligibility within required timelines. Staff follow up with each agency to provide the necessary technical assistance to assure compliance
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:
State LIHEAP staff review various reports on a daily, weekly, and monthly basis to determine a pattern or trend that indicates an issue with an agency's performance in adequately determining eligibility within required timelines. Staff follow up with each agency to provide the necessary technical assistance to assure compliance
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
Monitoring and schedule attached. Each agency is monitored triennually and when I try to mark it as other it does not save it that is the reason there is an error on this page.
10.7. Describe how you select local agencies for monitoring reviews. Attach a risk assessment if subrecipients are utilized.
Site Visits: Quality Assurance Division staff within the Colorado Department of Human Services monitors 10 county agencies/contractor on a every three year basis. On-site visits/virtual visits are conducted each year with three of the agencies with the largest client base and/or the contractor, Discover Goodwill. In addition, staff conduct an on-site visit with a small and medium county each year and these visits are prioritized based on performance. During the pandemic these on-site visits have occurred in a virtual environment
Desk Reviews:
Quality Assurance Division staff within the Colorado Department of Human Services monitors 10 county agencies/contractor on a year basis. On-site visits are conducted each year with three of the agencies with the largest client base and/or the contractor, Discover G addition, staff conduct an on-site visit with a small and medium county each year and these visits are prioritized based on performance. I pandemic these on-site visits have occurred in a virtual environment
10.8. How often is each local agency monitored? Please attach a monitoring schedule if one has been developed. Other
10.9. How many local agencies are currently on corrective action plans? 0

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	MODEL PLAN	
Section 11: Timely and	l Meaningful Public Participat	ion, 2605(b)(12), 2605(C)(2)
	lic in the development of your LIHEAP plan? Se ring but must ensure participation through other n	
Tribal Council meeting(s)		
Public Hearing(s)		
Draft Plan posted to website and a	vailable for comment	
Hard copy of plan is available for p	public view and comment	
Comments from applicants are rec	orded	
Request for comments on draft Pla	ın is advertised	
Stakeholder consultation meeting(s)	
Comments are solicited during out	reach activities	
Other - Describe:		
Public Hearings, 2605(a)(2) - For States and	the Commonwealth of Puerto Rico Only	
11.2 List the date and location(s) that you he	eld public hearing(s) on the proposed use and dis	tribution of your LIHEAP funds?
•	Date	Event Description
1	06/11/2025	Two State Plan Public Hearings held 1 in the morning and 1 in the afternoon - virtual.
11.3. How many parties commented on your	plan at the hearing(s)? 4	
11.4 Summarize the comments you received	at the hearing(s).	
to fax and email in documentation for e		rogram, discussing some of the barriers of people trying regards to next year funding and what the outlook is a asking for input.
11.5 What changes did you make to your LI	HEAP plan as a result of public participation an	d solicitation of input?
None		
If any of the above questions r	equire further explanation or cla	rification that could not be made in

the fields provided, attach a document with said explanation here.

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

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

- 12.1 How many fair hearings did the Grant recipient have in the prior federal Fiscal Year? 27
- 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?

N/A

12.4 Describe your fair hearing procedures for households whose applications are denied and/or not acted upon in a timely manner.

Applicant households denied a LIHEAP benefit are sent a notice immediately upon denial with information on appeal rights.

Applicants are given the right to request a review of their application at the county/contractor department within 10 days from the date of the notice, if they disagree with the action.

Any applicant who chooses to bypass the local review with the county/contractor or disagrees with the outcome of the local conference may request a state hearing within 90 days of the date of notice.

Applicant households may request a dispute resolution conference with the State LIHEAP office, if they believe the application was not acted upon in a timely manner.

12.5 When and how are applicants informed of these rights?

The local county agencies and contractor mail the notices immediately upon denial with information on appeal rights.

Applicant households are informed of these rights on the LIHEAP information sheet, which is provided along with a LIHEAP application t individual who is interested in applying for LIHEAP.

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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?

We do not conduct these activities as Energy Outreach Colorado conducts these activities.

- 13.2 How do you ensure that you don't use more than 5% of your LIHEAP funds for these activities?
- 13.3 Describe the impact of such activities on the number of households served in the previous federal Fiscal Year.
- 13.4 Describe the level of direct benefits provided to those households in the previous federal Fiscal Year.
- 13.5 How many households received these services?

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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?

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

Colorado LIHEAP instructs third parties and/or local agencies to keep detailed records on the services and the dollar amount of the benefits provided to each LIHEAP household for the fiscal year in which they were provided. Each agency is required to submit the information to the Colorado LIHEAP office on an annual basis.

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

Resource	What is the type of resource or benefit ?	What is the source(s) of the resource ?	How will the resource be integrated and coordinated with LIHEAP?				
1	Payment Assistance for LIHEAP clients who are in need of assistance and for low-income clients who exceed LIHEAP eligibility guidelines. Most of the assistance is provided during the months that LIHEAP is not in operation.	Energy Outreach Colorado	Energy Outreach Colorado staff and Colorado LIHEAP staff meet monthly to assure coordination of services.				
2	Weatherization Services	Colorado Energy Office	Colorado LIHEAP coordinates with the Colorado Energy Office (CEO) by providing data on LIHEAP eligible households. CEO then serves these households through coordination with local weatherization agencies. CO LIHEAP meets quarterly with the CEO regarding weatherization services.				
3	Percent of Payment Income Plans offered by Colorado's four regulated utility companies for gas and electric customers.	Atmos Energy, Black Hills Utilities, Colorado Natural Gas, and Xcel Energy.	Colorado LIHEAP coordinates with each utility by providing information on LIHEAP eligible households monthly for the purpose of outreach and the development of percentage of payment plans.				

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01 OMB Clearance No.: 0970-013 Expiration Date: 02/28/2027

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

Section 15: Training							
15.1 Describe the training you provide for each of the following groups:							
a. Grant recipient Staff:							
Formal training provided virtually, on-site, and/or formal training conference							
How often?							
Annually							
Biannually							
As needed							
Other, describe:							
Employees are provided with policy manual							
Other, describe:							
b. Local Agencies:							
Formal training provided virtually, on-site, and/or 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:							

15.2 Does your training program address fraud reporting and prevention?	
© Yes	
C No	

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

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 (Benefit Targeting Index, Burden Reduction Targeting Index, Restoration of Home Energy Service, and Prevention of Loss of Home Energy Service). Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

1. LIHEAP Bill Payment Assisted Households' Average Annual Usage of Main Fuel Heating, Electricity and Income - The State received the consumption and usage data from the top four gas and electric companies since FFY 2012 and was able to report the required data. The State is currently working on making changes to the LEAP system to assure that the consumption and cost data can be uploaded, which will allow for more efficient data reporting.

The State can obtain electric usage from 2 of our largest automated electric vendors and we will be attempting to match this with our propane primary heat users.

- 2. Restoration of Home Energy Service The State has revised the LIHEAP application to gather this information and has enhanced the LIHEAP eligibility system to track this information. The State is now able to report this information annually.
- 3. Prevention of Loss of Home Energy Service The State has revised the LIHEAP application to gather this information and made enhancements to the LEAP eligibility system to track this information. The State will be able to report this information annually.

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

		,	Section 17:	Program	In	tegrity, 260	05(b)(10)			
17.1 l	Fraud Reporting Mechanisms	s								
a. De	scribe all mechanisms availal	ole to	the public for rep	orting cases of	f susj	pected waste, frau	ıd, and abuse. S	elect	t all that apply.	
	Online Fraud Reportin	g								
>	Dedicated Fraud Repo	rting	Hotline							
>	Report directly to local	age	ncy/district office o	r Grant recip	ient (office				
	Report to State Inspect	or G	eneral or Attorney	General						
~	Forms and procedures	in pl	lace for local agenc	ies/district off	ices	and vendors to re	port fraud, was	te, a	nd abuse	
	Other - Describe:									
b. De	scribe strategies in place for	adve	rtising the above-r	eferenced reso	urce	s. Select all that a	apply			
¥	Printed outreach mater	rials								
	Posted in local adminis	terin	agencies offices.							
>	Addressed on LIHEAP	app	lication							
>	Website									
	Other - Describe:									
17.2.	Identification Documentation	ı Rec	quirements							
a. Ind	licate which of the following t bers.	form	s of identification a	re required o	r req	uested to be colle	ected from LIHI	EAP	applicants or the	eir household
						Collected from	whom?			
Туре	of Identification Collected		Applicant Only			All Adults in H	lousehold		All Household	Members
<u> </u>			Required			Required			Required	
	l Security Card is ocopied and retained									
			Requested			Requested			Requested	
			Required			Required			Required	
	l Security Number (Without ll Card)							>		
			Requested			Requested			Requested	
								4		
<u> </u>	1.1 (6. (.		Required			Required			Required	
card	rnment-issued identification									
	(i.e.: driver's license, state ID, Tribal ID, passport, etc.)		Requested		Requested			Requested		
			J					A		
	Other		Applicant Only	Applicant Or		All Adults in Household	All Adults in Household		All Household Members	All Household Members
	omer		Required	Requested		Required	Requested		Required	Requested
1				I	1		I			

17.3.	Citizen	ship/Legal Residency Ver	ification	•	-"-		<u> </u>		
What are your procedures for ensuring LIHEAP recipients are U.S. citizens or qualified non-citizens who are eligible to receive LIHEAP benefits? Select all that apply.									
A	Clients sign an attestation of citizenship or U.S. Citizen or Qualified Non-Citizen								
	Client's submission of certain Social Security Administration cards is accepted as proof of U.S. Citizen or Qualified Non-Citizen.								
>									
>	Citiz	zens must provide a copy o	of their birth certi	ficate, naturalizat	ion papers, or pass	sport			
>									
	Trib	al members are verified t	hrough Tribal en	rollment records/T	ribal ID card				
>	Oth	er - Describe:							
		Citizens must provide a co	opy of their birth ce	rtificate, naturaliza	tion papers or passp	oort if born outside o	f the United States		
	verific	All registered qualified no ation.	on-citizens must pro	ovide a photocopy	of their lawful perm	nanent resident card a	and they are run the	rough SAVE for	
	showir	We do not have LIHEAP ng as an error	reccipient tribes in	CO and we do not	verify the tribal enro	ollment records/IDs.	I do not know wh	y this is	
17.4.	Income	Verification							
What	metho	ds does your agency utiliz	e to verify househ	old income? Select	t all that apply.				
>	Requ	ire documentation of inco	me for all adult h	ousehold members	1				
	~	Pay stubs							
	~	Social Security award le	etters						
		Bank statements							
		Tax statements							
	~	Zero-income statements	3						
	~	Unemployment Insuran	ce letters						
	~	Other - Describe:							
		If written verification is no	ot available by the a	applicant or househ	old members a coll	ateral contact is allow	ved.		
>	Con	puter data matches:							
	~	Income information ma	tched against state	e computer system	(e.g., SNAP, TAN	(F)			
	~	Proof of unemployment	benefits verified v	with state Departn	nent of Labor				
	~	Social Security income v	verified with SSA						
		Utilize state directory of	f new hires						
		Other - Describe:							
b. Des	b. Describe any exceptions to the above policies.								
17.5 I	dentific	cation Verification							
Descr apply	ribe wh	at methods are used to ver	rify the authentici	ty of identification	documents provid	ded by clients or ho	usehold members	. Select all that	
>	Verif	y SSNs with Social Securi	ty Administration						
>	Matc	h SSNs with death records	s from Social Secu	ırity Administratio	on or state agency				
>	Matc	h SSNs with state eligibilit	ty/case manageme	ent system (e.g., SN	JAP, TANF)				
>	Matc	h with state Department o	of Labor system						
	Matc	h with state and/or federa	l corrections syste	em					
>	Matc	h with state child support	system						
	Verification using private software (e.g., The Work Number)								
	In-pe	rson certification by staff	(for tribal Grant	recipients only)					

Match SSN/Tribal ID number with tribal database or enrollment records (for tribal Grant recipients only)
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
Grant recipient LIHEAP database includes privacy/confidentiality safeguards
Employee training on confidentiality for:
Grant recipient employees
Local agencies/district offices
Employees must sign confidentiality agreement
Grant recipient employees
✓ Local agencies/district offices
Physical files are stored in a secure location
Electronic files are protected 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
Grant recipient 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
- rapprenance must submit current utility on
Zana di nananga wana di nananga d
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 grant recipient.						
V endor agreements specify requirements selected above, and provide enforcement mechanism						
Other - Describe:						
17.10. Investigations and Prosecutions						
Describe the Grant recipients procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients, staff, or 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 Grant recipient conduct investigation of fraud complaints from public						
Grant recipient attempts collection of improper payments. If so, describe the recoupment process						
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? Clients found to have committed fraud are banned from LIHEAP assistance. For how long a household is banned? One program year, 1st violation, 2 program years 2nd violation, permanently, for third violation.						
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						

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 Grant recipient 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 Grant recipient 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 Grant recipients other than individuals, Alternate I applies.
- 4. For Grant recipients who are individuals, Alternate II applies.
- 5. Workplaces under grants, for Grant recipients other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the Grant recipient does not identify the workplaces at the time of application, or upon award, if there is no application, the Grant recipient 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 Grant recipients 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 Grant recipient 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. Grant recipients 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 Grant recipient 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 Grant recipients payroll. This definition does not include workers not on the payroll of the Grant recipient (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the Grant recipients payroll; or employees of subrecipients or subcontractors in covered workplaces).

Certification Regarding Drug-Free Workplace Requirements

Alternate I. (Grant recipients Other Than Individuals)
The Grant recipient 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 Grant recipients 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 Grant recipients 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 Grant recipient 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 (That this must be physical address. No PO Boxes allowed.)

1575 Sherman St * Address Line 1							
5th Floor Address Line 2							
Address Line 3							
Denver * City	co * State	80203 * Zip Code					

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

Alternate II. (Grant recipients Who Are Individuals)

- (a) The Grant recipient 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 Grant recipients 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.

By checking this box, the prospective primary participant is agreeing to the Assurances set out above.

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).					
Policy Manual.					
Subrecipient Contract.					
Model Plan Participation Notes for Tribes.					