DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance

Grantee Name: HUMAN SERVICES, GEORGIA DEPARTMENT OF

Report Name: DETAILED MODEL PLAN (LIHEAP)

Report Period: 10/01/2025 to 09/30/2026 **Report Status:** Submission Accepted by CO

Report Sections

- 1. Mandatory Grant Application SF-424
- 2. Section 1 Program Components
- 3. Section 2 HEATING ASSISTANCE
- 4. Section 3 COOLING ASSISTANCE
- 5. Section 4 CRISIS ASSISTANCE
- 6. Section 5 WEATHERIZATION ASSISTANCE
- 7. Section 6 Outreach, 2605(b)(3) Assurance 3, 2605(c)(3)(A)
- 8. Section 7 Coordination, 2605(b)(4) Assurance 4
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- 10. Section 9 Energy Suppliers,, 2605(b)(7) Assurance 7
- 11. Section 10 Program, Fiscal Monitoring, and Audit, 2605(b)(10) Assurance 10
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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	2. Date 3. Appl 4a. Uni	Plan/Funding Request? Explanation: 2. Date Received: 3. Applicant Identifier: 4a. Unique Entity Identifier (UEI) HSWDTRFJF396		* 1.d. Version: © Initial C Resubmission C Revision Update State Use Only: 5. Date Received By State: 6. State Application Identifier:
7. APPLICANT INFO		of Family and Children Services				
* a. Legal Name: Ge * b. Address:	orgia Division (of Family and Children Services				
* Street 1:	47 Trinity Av	venue SW	Stre	et 2:		
* City:	ATLANTA		Cou	nty:	GA	
* State:	GA		Pro	vince:		
* Country:	United States		* Zi Code:	p / Postal	30334	
c. Organizational	Unit:		SIF.			
Department Name Georgia Department		ices	Division Name: Division of Family and Children Services			
d. Name and contact Awards and on the U	information of .S. Departmen	person to be contacted on matters in t of Health and Human Services' LIE	nvolving HEAP co	this application intact list webp	n: (person will page)	be listed on Notice of Funding
* First Name: Cynthia			* Last Name: Bryant			
Title: LIHEAP Project Adr	ninistrator		Organizational Affiliation: Georgia Department of Human Se			
* Telephone Number (404) 656-5252	:		Fax Number			
* Email: cynthia.bryant@dhs.;	ga.gov					
* 8. TYPE OF APPL A: State Government	ICANT:					
* a. Is the applican	t a Tribal Con	sortium: O Yes O No				
* b. If yes please at	ttach at least or	ne the following documentation:				
		Catalog of Federal Domes Assistance Number:	stic		CFDA Title:	
9. CFDA Numbers and	Titles	93.568	Low-Income Home Energy Assistance Program			
10. DESCRIPTIVE To Low Income Home F		PLICANT'S PROJECT: ce Program				
11. AREAS AFFECT Statewide	TED BY FUND	ING:				
12. CONGRESSION	AL DISTRICT	S OF APPLICANT:				
13. FUNDING PERI	OD:		No.			
a. Start Date: 10/01/2025			b. End Date: 09/30/2026			
		O REVIEW BY STATE UNDER EX			2372 PROCES	SS?
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) Carla Fairley 17d. Email Address Carla.Fairley@dhs.ga.gov 17b. Signature of Authorized Certifying Official 17e. Date Report Submitted (Month, Day, Year) 08/26/2025 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 OMB control number.

coll	ection of information unless it displays a currently valid OMB control number.	ason is not required to	respond to, u			
	Section 1 Program Componer	nts				
Pro	gram Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C)					
(No	Check which components you will operate under the LIHEAP program. te: You must provide information for each component designated here as requested elsewhere in plan.)	Dates of (Operation			
	•	Start Date	End Date			
>	Heating assistance	12/01/2025	07/31/2026			
>	Cooling assistance	04/01/2026	07/31/2026			
>	Summer crisis assistance	04/01/2026	07/31/2026			
>	Winter crisis assistance	12/01/2025	07/31/2026			
	Year-round crisis assistance					
>	Weatherization assistance	10/01/2025	09/30/2026			
Pro	vide further explanation for the dates of operation, if necessary	*				
	The contract to the Community Action Agencies for the LIHEAP program is from October 1 Crisis assistance is seasonal from December 1, 2025, until August 31, 2026. The cooling program is 2026. The Program has determine that extending the season beneficial for the recipients. The weather 2025, until September 30, 2026.	seasonal from April 1,	2026, until August 31,			
	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	leating assistance	31.00%	30.00%			
C	ooling assistance	29.00%	24.00%			
S	ummer crisis assistance	2.00%	16.00%			
V	Vinter crisis assistance	8.00%	0.00%			
Y	ear-round crisis assistance	0.00%	0.00%			
Weatherization assistance 10.00%						
С	10.00%	10.00%				
A	dministrative and planning costs	10.00%	10.00%			
_	ervices to reduce home energy needs including needs assessment (Assurance 16)	0.00%	0.00%			
	Used to develop and implement leveraging activities 0.00% 0.00%					
TOT	AL	100.00%	100.00%			

up to plann	Tribal grant recipients: direct-grant tribes, tribal organizations, or territories with allotments of \$20,000 or less may use for planning and administration up to 20% of the funds payable. Grant recipients that are direct grant tribes, tribal organizations, or territories with allotments over \$20,000 may use for planning and administration purposes up to 20% of the first \$20,000 (or \$4,000) plus 10% of the funds payable that exceeds \$20,000. Any administrative costs in excess of these limits must be paid from non-federal sources.						
	nate Use of Crisis Assista	•					
	he funds reserved for wi			nded by March 15 will	be reprog	rammed to:	
>		Heating assistance			Î	Cooling ass	istance
		Weatherization assis	tance			Other (spec	cify:)
	gorical Eligibility, 2605(b				t least one	of the follow	ving categories of benefits
	e left column below?				110450 0110	01 0110 10110 1	, mg caregories or senems
If you	answered "Yes" to que	stion 1.4, you must con	mplete the table below	and answer questions	1.5 and 1.6	•	
			Heating	Cooling		risis	Weatherization
TANE			• Yes O No	• Yes O No	⊙ Yes		⊙ Yes O No
SSI SNAP			• Yes • No	• Yes • No	• Yes		Yes ONo
<u> </u>			O Yes O No	O Yes O No	© Yes		C Yes O No
	s-tested Veterans Programs a. Provide your definition				<u> </u>		
appli	o you automatically enro	ve pure public assistand	ce are categorically eligi	ble for LIHEAP.	gorrour ong	some of the	
II Ye	s, explain:						
	determining eligibility a	nd benefit amounts?	treatment of categorica				ing other public assistance t is also the same.
SNAI	P Nominal Payments						
1.7a l	Do you allocate LIHEAP	funds toward a nomin	nal payment for SNAP	households? OYes	⊙ No		
_	answered "Yes" to que		rovide a response to qu	estions 1.7b, 1.7c, and	1.7d.		
	Amount of Nominal Assis	stance: \$0.00					
1./c I	Frequency of Assistance Once Per Year						
	Once Ter Tear						
	Once every five years						
	Other - Describe:						
1.7d l	How do you confirm that	the household receivi	ng a nominal navment	has an energy cost or	need?		
	1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need? ${\rm N/A}$						
Deter	Determination of Eligibility - Countable Income						
1.8. I	1.8. In determining a household's income eligibility for LIHEAP, do you use gross income or net income?						
~	Gross Income						
	Net Income						
	Other - Describe						
1.9. S	lelect all the applicable fo	orms of countable inco	ome used to determine	a household's income e	eligibility fo	or LIHEAP	
~	Wages						
V	Self - Employment Income						

>	Contract Income					
>	Payments from mortgage or Sales Contracts					
	Tayments from movingage or panes communes.					
	77					
~	Unemployment insurance					
~	Strike Pay					
>	Social Security Administration (SSA) benefits					
	To be Fig. Mc PCom.					
	☐ Including MediCare deduction Excluding MediCare deduction					
~	Supplemental Security Income (SSI)					
>	Retirement / pension benefits					
>	General Assistance benefits					
	General Assistance benefits					
~	Temporary Assistance for Needy Families (TANF) benefits					
	Loans that need to be repaid					
	Cash gifts					
	Cush gite					
	Savings account balance					
	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.					
	Jury duty compensation					
	Rental income					
~	Rental income					
~	Income from employment through Workforce Investment Act (WIA)					
	Income from work study programs					
	'' "					
V	Alimony					
~	ramiony					
	CI-21					
~	Child support					
>	Interest, dividends, or royalties					
V	Commissions					
-						
	I agal cattlements					
	Legal settlements					
\blacksquare						
	Insurance payments made directly to the insured					
	Insurance payments made specifically for the repayment of a bill, debt, or estimate					
	Veterans Administration (VA) benefits					
~	vectans Auministration (va) denemb					
	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					
	income da retuius					
	ļ					

	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 1	Do you have an online application process Yes No
1.1	0a If yes, describe the type of online application (Select all boxes that apply)
	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	e include a link(s) to a statewide application, if available:
1.10b	Can all program components be applied for online? © Yes O No
If no,	explain which components can and cannot be applied for online.
1.11 1	Do you have a process for conducting and completing applications by phone 💽 Yes 🔘 No
1.12 1	Oo you or any of your subrecipients require in person appointments in order to apply 💽 Yes 🔼 No
If yes	, please provide more information regarding why in-person appointments are required and in what circumstances they are required.
	If the applicant does not have the capability to sign the application electronically.
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

Section 2 - HEATING 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	on 2 -]	Heating Assistance	
Eligibility, 2605	(b)(2) - Assurance 2			
2.1 Designate th	e income eligibility threshold used for the	e 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 Assistan	additional eligibility requirements for nce?	C Yes	⊙ No	
2.3 Check the ap	ppropriate boxes below and describe the	policies fo	r each.	
Do you require	an Assets test?	C Yes	€ No	
If yes, describe:	Do you have additional/differing eligibil	ity policies	for:	
Renters?		C Yes	⊙ No	
If yes, describe:				
Renters L	iving in subsidized housing?	C Yes	⊙ No	
If yes, describe:				
Renters w	ith utilities included in the rent?	C Yes	€ No	
If yes, describe:				
Do you give pric	ority in eligibility to:			
Older Adı	ults (60 years or older)?	• Yes	CNo	
TI	he elderly 65 years of age and older will be nt	served in t	he first 30 days of each program	
Individua	ls with a disability?	⊙ Yes	O _{No}	
If yes, describe:	he medically homebound are able to apply f	for services	in the first 30 days of the program.	
Young chi	ildren?	O Yes	⊙ No	
If yes, describe:		*		
Household	ls with high energy burdens?	O Yes	⊙ No	
If yes, describe:		~		
Other?		C Yes	⊙ No	
If yes, describe:		*		
L	policies for each "yes" checked above: IHEAP State policy states that the elderly 6 gram component.	5 years of a	nge and older, also the medically homebound m	nay be served in the first 30 days of
Determination of	of Benefits 2605(b)(5) - Assurance 5, 2605	5(c)(1)(B)		
etc.		icy states th	to vulnerable populations, e.g., benefit amonate the elderly 65 years of age and older, also the	
2.5 Check the va	ariables you use to determine your benefi	it levels. (C	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:					
\$1000 or more, that fuel source is no	Eligible households that have a fuel source with a credit of \$999 and below are eligible for LIHEAP. If they fuel source has a credit of \$1000 or more, that fuel source is not eligible for LIHEAP. If the household has another fuel sources that has a credit of \$999 or below they are able to use that fuel source for eligibility.				
Benefit Levels, 2605(b)(5) - Assurance 5, 2	2605(c)(1)(B)				
2.6 Describe estimated benefit levels for the shown in the payment matrix.	ne fiscal year for which this plan	applies. Please note: the maximum and mi	nimum benefits must be		
Minimum Benefit	\$400	Maximum Benefit	\$810		
2.7 Do you provide in-kind (e.g., blankets,	space heaters) and/or other for	ms of benefits?2 O Yes O No			
If yes, describe.					
If any of the above questions the fields provided, attach a	_	nnation or clarification that coxplanation here.	ould not be made in		

Section 3 - COOLING 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 3 - Cooling Assistance				
Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2			
3.1 Designate Th	e income eligibility threshold used for the	e Cooling o	component:	
Add	Household size		Eligibility Guideline	Eligibility Threshold
1	All Household Sizes		State Median Income	60.00%
3.2 Do you have Cooling assistant	additional eligibility requirements for ce?	C Yes	€ No	
3.3 Check the ap	propriate boxes below and describe the p	oolicies for	each.	
Do you require a	n Assets test?	C Yes	⊙ No	
If yes, describe:				
Do you have add	itional/differing eligibility policies for:			
Renters?		C Yes	⊙ No	
If yes, describe:				
Renters Li	ving in subsidized housing?	C Yes	⊙ No	
If yes, describe:				
	th utilities included in the rent?	C Yes	€ No	
If yes, describe:				
	rity in eligibility to:			
	lts (60 years or older)?	⊙ Yes	CNo	
If yes, describe:	,	- 103	210	
	e elderly 65 years of age and older will be s	served in th	e first 30 days of each program component	
Individuals	s with a disability?	⊙ Yes	C _{No}	
If yes, describe:				
Th	e medically homebound will be served in the	ne first 30 d	lays of each program component	
Young chil	dren?	Oyes	⊙ No	
If yes, describe:				
Household	s with high energy burdens?	Oyes	⊙ No	
If yes, describe:				
Other?		Cyes	⊙ No	
If yes, describe:				
Explanations of	policies for each "yes" checked above:			
	HEAP State policy states that the elderly 65 ram component.	years of ag	ge and older, also the medically homebound may	y be served in the first 30 days of
3.4 Describe how etc.	you prioritize the provision of cooling a	ssistance to	o vulnerable populations, e.g., benefit amou	nts, early application periods,
Early application periods: LIHEAP State policy states that the elderly 65 years of age and older, also the medically homebound may be served in the first 30 days of each program component.				
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 (household) size			-		
✓ Home energy cost or need:			=		
☑ Fuel type					
Climate/region					
Individual bill					
Dwelling type					
Energy burden (% of income spen	nt on home energy)				
Energy need					
Other - Describe:					
,,					
3.6 Describe estimated benefit levels for the fis shown in the payment matrix.	cal year for which this pla	n applies. Please note: the maximum and mu	inimum benefits must be		
Minimum Benefit	\$400	Maximum Benefit	\$500		
3.7 Do you provide in-kind (e.g., fans, air cond	itioners) and/or other forn	ns of benefits? O Yes O No			
If yes, describe.					
If any of the above questions rec the fields provided, attach a doc	•		ould not be made 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	(c), 2605(c)(1)(A)					
4.1 Designate the	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%	
	LIHEAP program's definition for determining a cond), Include all program definitions.	risis. If you administer multiple cr	isis assista	nce programs (w	inter, summer,	
restoration state. Clies regular he	crisis is determined when a low-income household is fa n of its heating or cooling fuel source. A crisis may also nts who utilize pre-pay vendors may be treated as a cri ating benefit or a crisis heating benefit. During the LIF a crisis cooling benefit. Only one benefit payment is al	o result from a weather-related emer sis. During the LIHEAP heating pro IEAP cooling program, a household	gency affect gram, a hou can only re	eting all or a special second can only receive either a reg	fic area of the eceive either a	
4.3 What constitu	utes a <u>life-threatening crisis?</u>					
assistance	life-threatening situation is a crisis application with a li applicant is without energy service. It must be validate or of the healing arts, or county health director.					
Crisis Requirem	ent, 2604(c)					
4.4 Within how r	nany hours do you provide an intervention that wil	l resolve the energy crisis for eligi	ble househ	olds? 48Hours		
4.5 Within how r situations? 18Ho	nany hours do you provide an intervention that will ours	l resolve the energy crisis for eligi	ble househo	olds in life-threat	ening	
Crisis Eligibility,	, 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	propriate boxes below to indicate type(s) of assistar	nce provided		•	"	
Do you require a	n Assets test?					
Do you give prio	rity in eligibility to:		_			
	lts (60 years or older)?		~	~		
Individuals	s with a disability?					
Young Chi	•					
	Households with high energy burdens?					
	Other (Specify):					
	ive crisis assistance:					
	ousehold have received a shut-off notice or have a r	near empty tank?	~	~		
	ousehold have been shut off or have an empty tank		>	V		
	ousehold have exhausted their regular heating bene					
	ers with heating costs included in their rent have rec					
Must heati	Must heating/cooling be medically necessary?					

Must the house	nold have non-working heating or cooling equipment?						
Other (Specify):							
Do you have additional/differing eligibility policies for: Renters?							
Renters living in	n subsidized housing?						
Renters with uti	lities included in the rent?						
Explanations of polici	es for each "yes" checked above:						
The program requires that each client submit documentation of shut-off notice or empty tank in order to be eligible for crisis assistance. Policy requires each client to submit a copy of the applicant's Secure and Verifiable Documents Under O.C.G.A. § 50-36-2 (e.g., driver's license, state-issued photo ID, etc.) for verification of age to qualify during the priority intake for the elderly and medically homebound populations. Medically homebound is defined as a household which, in the judgement of the eligible entity, contains no person who is able to travel to a LIHEAP intake location, and who is unable to send a representative to apply for energy assistance on their behalf, due to a medical condition which currently qualifies the applicant/household for home services through Medicaid or Medicare, and/or the household receives home delivered meals, home-health agency services, or homemaker services or the applicant/household member has disabilities which confines all adult residents to the home. The household is required to submit documentation of medically homebound status.							
Determination of Ben	ofite						
4.8 How do you handl							
	Separate component						
<u> </u>	Benefit Fast Track, no separate amount of crisis funds is issued. Rather benefit response time frames.	ts are issued to	crisis customer	s within crisis			
	Other - Describe:						
4.9 If you have a separ	rate component, how do you determine crisis assistance benefits?						
	Amount to resolve the crisis. \$0						
	Other - Describe:						
Crisis Requirements,	2604(c) plications for energy crisis assistance at sites that are geographically accessible	to all housahale	de in the eree to	he corred?			
Yes O No E		to an nousenon	is in the area to	be serveu:			
10 Tes 10 No E	храш.						
Applications.	tions are completed at local CAAs, senior centers, churches, and other designated pla	aces determined	appropriate to ta	ike			
4.11 Do you provide in	ndividuals who are individuals with a disability the means to:						
Submit applications	s for crisis benefits without leaving their homes?						
⊙ Yes O No							
If No, explain. The LIH	If No, explain. The LIHEAP Staff will travel to their home to complete the application.						
Travel to the sites at which applications for crisis assistance are accepted?							
C Yes ⊙ No							
If No, explain.							
The LIHEAP staff will travel to the applicant's home to complete the application.							
If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?							
The LIHEAP staff will travel to the applicant's home to complete the application.							
Benefit Levels, 2605(c)(1)(B)							
4.12 Indicate the maximum benefit for each type of crisis assistance offered.							
4.12 Indicate the max				=			
4.12 Indicate the maximum Winter Crisis				=			
	imum benefit for each type of crisis assistance offered.						
Winter Crisis	imum benefit for each type of crisis assistance offered. \$810.00 maximum benefit						

C Yes O No If yes, Describe					
4.14 Do you provide for equipment repair or repla	soment uci	a origie fun	29		
C Yes No	.cement usin	ig crisis runc	187		
If you answered "Yes" to question 4.14, you must	complete qı	uestion 4.15.			
4.15 Check appropriate boxes below to indicate ty					
	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 4.17 Describe the terms of the moratorium and an	•	-	17. eceived by LIHEAP clients during or after the moratorium period.		
Rules delay the disconnection of utilities for 30 days with medical certification. Also, the power or gas company cannot disconnect the service unless a bill is at least 45 days overdue and proper notification has been sent. No disconnection will occur during protection dates if the customer agrees and adheres to a payment plan. Also, if the temperature is going to be under 32 degrees Fahrenheit or if there is excessive heat for more than three (3) days, disconnection is not permissible, so shut offs are limited during both the summer and winter per state laws.					
4.18 If you experience a natural disaster, do you in $\rm No$	itend to utili	ize LIHEAP	crisis funds to address disaster related crisis situations? C Yes .		
If yes, describe					
If any of the above questions requi		_	nation or clarification that could not be made in		

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

Section 5 - WEATHERIZATION ASSISTANCE

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

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

Section 5: WEATHERIZATION ASSISTANCE Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assurance 2 5.1 Designate the income eligibility threshold used for the Weatherization component Household Size Eligibility Guideline Eligibility Threshold All Household Sizes HHS Poverty Guidelines 200.00% 5.2 Do you enter into an interagency agreement to have another government agency administer a WEATHERIZATION component? 💽 Yes 🔘 5.3 If yes, name the agency and attach a copy of the Internal Agreement or Contract. Georgia Environmental Finance Authority (GEFA) 5.4 Is there a separate monitoring protocol for weatherization? • Yes O No WEATHERIZATION - Types of Rules 5.5 Under what rules do you administer LIHEAP weatherization? (Check only one.) Entirely under LIHEAP (not DOE) rules Entirely under DOE WAP (not LIHEAP) rules Mostly under LIHEAP rules with the following DOE WAP rule(s) where LIHEAP and WAP rules differ (Check all that apply): **Income Threshold** Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities). Other - Describe: Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply.) Income Threshold ~ Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit. ~ Weatherization measures are not subject to DOE Savings to Investment Ration (SIR) standards. Other - Describe: Allowable health and safety measures may be installed and are not subject to the DOE health and safety limit. Weatherization is not subject to the DOE WAP average Health and Safety costs limitation per dwelling. - Weatherization services may be eligible for households in FFY 2026 to re-weatherize units in which work was performed on or before September 30, 2014. · Health and safety items that are not covered by DOE WAP Health and Safety Plan may be included. - The following measures are allowed: *Mobile home door installation *Exterior door installation *Gas cook stove repair/replacement for H&S concerns Additional measures not called for in the audit may be implemented to reduce deferrals. LIHEAP Weatherization Readiness funds will align with the DOE Weatherization Readiness Fund (WRF) Cost Category with the following exceptions: A total fiscal cost of this category not to exceed 25% of the LIHEAP allocation toward weatherization services. No maximum allowable ACPU for LIHEAP WRF funds Subgrantees must submit a waiver to Grantee (GEFA) for any measures not included as allowable under DOE WRF to address for deferral reduction and receive preapproval before work commences. Roof Replacement is not allowable under LIHEAP WRF. Eligibility, 2605(b)(5) - Assurance 5 5.6 Do you require an assets test? CYes ONo

5.7 Do you have additional/differing eligibility policies for :			
Renters	€ Yes C No		
Renters living in subsidized housing?	C Yes		
Renters with utilities included in the rent?	⊙ Yes O No		
5.8 Do you give priority in eligibility to:			
Older Adults?	⊙ Yes ○ No		
Individuals with a disability?	⊙ Yes C No		
Young Children?	⊙ Yes O No		
House holds with high energy burdens?	⊙ Yes O No		
Other? Those approved but did not receive services previously.	⊙ Yes O No		
If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you must provide further explanation of these policies in the text field below. According to the Georgia Environmental Finance Authority, who administers weatherization for Georgia LIHEAP, priority of services, which includes installing insulation, caulking, weather-stripping, air sealing, HVAC repair or replacement, and small repairs are given to the elderly and disabled. Priority is given to the disabled, elderly, handicapped, elderly handicapped, households with children, and households with high energy usage or high energy burden. Additionally, clients who have been eligible and on the wait-list for a period of three years or more will receive priority scoring. The landlord's written permission must be obatined to complete any work on a rental unit by the Landlord completing a Landlord Authorization Consent form.			
Benefit Levels 5.9 Do you have a maximum LIHEAP weatherization benefit/expenditure per household? Yes No			
5.9a If yes, what is the maximum? \$0			
5.10 Do you use an Average Cost per Unit (ACPU). 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 measur	res do you provide ? (Check a	ll categories that apply.)	
Weatherization needs assessments/a	udits	Energy related roof repair	
Caulking and insulation		Major appliance repairs	
Storm windows		Major appliance replacement	
Furnace/heating system modification	ns/repairs	Windows/sliding glass doors	
Furnace replacement		V Doors	
Cooling system modifications/repairs		✓ Water Heater	
Water conservation measures		Cooling system replacement	
Roof top solar Community solar projects		Community solar projects	
Compact florescent light bulbs		Other - Describe: WAP-related incidental repairs; door and window repair and replacement of LED bulbs	
If any of the above questions require further explanation or clarification that could not be made in			

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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 LIHEAI available:	P assistance			
☑ Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.				
Publish articles in local newspapers or broadcast media announcements.				
Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance.				
Mass mailing(s) to prior-year LIHEAP recipients.				
Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs.				
Execute interagency agreements with other low-income program offices to perform outreach to target groups.				
✓ Web Posting				
Email Email				
Texting Texting				
✓ Events				
Social Media				
Other (specify):				
If any of the above questions require further explanation or clarification that could not be	o mode in			

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Section 7: Coordination, 2605(b)(4) - Assurance 4 7.1 Describe how you will ensure that the LIHEAP program is coordinated with other programs available to low-income households (TANF, SSI, WAP, etc.). Joint application for multiple programs (indicate programs included) Intake referrals to/from other programs (indicate programs included) All LIHEAP staff also implement the CSBG program to make referral. One - stop intake centers Other - Describe: The LIHEAP State Office contracts out to another government agency, Georgia Environmental Finance Authority (GEFA) to implement the Weatherization Program. LIHEAP and GEFA contract with the same Community Action Agencies to implement both programs. When a household comes to an agency for LIHEAP, agency staff inquires if a weatherization referral is needed to ensure a seamless referral process.

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	Section 8: Agency Designati recipients a	ion, 2605(b)(6) nd the Commo		· -	tate Grant	
8.1 Ho	w would you categorize the primary respons	ibility of your State age	ency?			
	Administration Agency					
	Commerce Agency					
	Community Services Agency					
	Energy/Environment Agency					
	Housing Agency					
<	State Department of Welfare (administers	FANF, SNAP, and/or M	ledicaid)			
	Economic Development Agency					
	Other - Describe:					
	e current list of subrecipient name, main off mber. Used for Near hotline and OCS Servic		· · · -	er, county(s) served, Cor	ngressional District, and	
If you	ate Outreach and Intake, 2605(b)(15) - Assume selected "State Department of Welfare (adm 8.4, as applicable.		and/or Medicaid)'' in qu	uestion 8.1, you must co	mplete questions 8.2, 8.	
	w do you provide alternate outreach and int	ake for heating assistan	ce?			
	Applications for the Regular Energy A Agencies under contract to Department of Hur referrals. Outreach activities are coordinated b	nan Services. The local c	ounty offices of the Divis	sion of Family and Childs		
8.3 Ho	w do you provide alternate outreach and int	ake for cooling assistan	ce?>			
	The process is the same for cooling as	it is for Regular Energy A	Assistance.			
8.4 Ho	w do you provide alternate outreach and int	ake for crisis assistance	?			
	Applications for the Crisis Assistance I contract to Department of Human Services. The activities are coordinated between these agencians of the coordinate of the coordinate of the coordinate of the coordinate of the crisis Assistance I coordinate of the crisi	e local county offices of	the Division of Family a	nd Children Services mak		
8.5 LII	IEAP Component Administration.	Heating	Cooling	Crisis	Weatherization	
8.5a W	ho determines client eligibility?	Community Action Agencies	Community Action Agencies	Community Action Agencies	Community Action Agencies	

8.5b Who processes benefit payments to gas and electric vendors?	Community Action Agencies	Community Action Agencies	Community Action Agencies		
8.5c who processes benefit payments to bulk fuel vendors?	Community Action Agencies	Community Action Agencies	Community Action Agencies		
8.5d Who performs installation of weatherization measures?				State Energy/ Environment Agency	
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 c	omplete questions 8.6, 8	.7, 8.8, and, if	
8.6 What is your process for selecting local adminis	stering agencies?				
When applicable, local administering a the program.	agencies are selected via	the state's procurement p	rocess with consideration	to the CFR governing	
Georgia contracts with 18 Community LIHEAP. Each agency is required to go throug operational plan that must be approved by the	gh the contracting proces	ss annually. Included in the	ne contracting process is t		
The Community Action Agencies are of These locations must be geographically access			ons in all 159 counties in	the State of Georgia.	
8.7 How many local administering agencies do you	use? 18				
8.8 Have you changed any local administering ages Yes No	ncies in the last year?				
8.9 If so, why?					
Agency was in noncompliance with Grant r	ecipient requirements	for LIHEAP -			
Agency is under criminal investigation	Agency is under criminal investigation				
Added agency					
Agency closed	Agency closed				
Other - describe					
8.10 If a subrecipient is no longer providing LIHE $oldsymbol{\widehat{\bullet}}_{No}$	AP, are you aware of I	prior-year LIHEAP fun	ds being mismanaged or	misspent? C Yes	
8.10a If yes, please explain.					
8.10b If you are aware, were other federal progr Weatherization funding, etc. Yes No	ams impacted such as	CSBG, SSBG, Head Sta	rt, TANF, and Departm	nent of Energy	
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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	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	⊙ Yes ○ No	
Crisis	● Yes ○ No	
Are there excep	tions? © Yes © No	
If yes, Describe		
do not have	e local Community Action Agency makes the payment directly to the home energy supplier. Households whose home energy supplier a current Home Energy Supplier Agreement with the program receive funds from the local Community Action Agency to pay the nonitors this process through the Energy Assistance Program statewide data system.	
9.2 How do you n	otify the client of the amount of assistance paid?	
	on approval by the computer system, the local administering agency provides a cppy (indicating approval) of the application to the household. (This applies to both the Regular and Crisis components)	е
and comply the informa with the ho for extende approved E	me Energy Suppliers who participate in the Georgia Energy Assistance Program will satisfy all of the Federal Assurances by signifying with the Home Energy Supplier's Agreement. The Home Energy Supplier Agreement will remain in effect for one year. If any ation provided in the Agreement changes, the fuel supplier is required to notify the Department in writing. This partnership agreement energy suppliers provides additional benefits to low-income households by providing documentation of the need for considerated payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to EAP applications. The partnership agreement of the need for considerated payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to EAP applications. The partnership agreement of the need for considerated payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to the payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to the payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to the payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to the payment deadlines, delays in cut-off dates, and restoration of services based on the state's agreement to home energy suppliers to the payment deadlines.	y of nent ation to pay
assistance? Pag from partic made avail	ssure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP ge 6, number 11 of the vendor agreement states - That no person shall, on the basis of race, color, national origin, or sex, be excluding the properties of the benefits of, or be subjected to discrimination under any program or activity funded in whole or part with able under this subpart. Any prohibition against discrimination on the basis of age under the Age Discrimination Act of 1976 or we under the age of the properties of the provided in Section 504 of the Rehabilitation Act of 1973 shall also apply to any stivity.	funds ⁄ith
	e Division of Family and Children Services via the Department of Human Services provides a toll-free number that is to be posted AP intake location that can be used to report complaints against vendors should a client feel that they have been mistreated.	in
9.5. Do you make households? O Yes O No	payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible	
	the measures unregulated vendors may take. the template statewide vendor agreement or a policy that indicates local agreements must adhere to statewide policies and	l

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

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

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

Any other state agency receiving funds and any local administration agency will maintain an accounting system and supporting fiscal records adequate to audit and otherwise verify that the assistance payments and administrative cost claims for reimbursement meet Federal requirements. The DFCS will use its currently established and operational PeopleSoft System to ensure proper fiscal control and fund accounting for Federal funds paid to the State under this title. In addition, a separate computer system will be used to track agency and county use of benefit fund expenditures provided under this title.

An obligation of funds is a legal liability to disburse funds based on the obligation date of the grant for the purpose of providing assistance under the State program funded.

The process of obligating funds includes entering into a contract, awarding a subgrant, receiving goods or services, or otherwise incurring allowable costs during the grant period that will require payment immediately or in the future.

10.1a Provide your definitions of the following:

Obligation

The commitment of funds for LIHEAP purposes.

Expenditures

The payment of LIHEAP funds in the provision of services to eligible households. Allowable expenditures include, but are not limited to, client benefits, administrative costs, program outreach costs, travel, and training.

Expenditure timeframe

The timeframe in which relative program expenditures must be incurred and reported between the start and end dates of a contract.

Administrative costs

Costs directly related to program operations, planning and development, including direct and indirect costs. This includes the salaries, fringe, rent, utilities, travel, etc. associated with financial and administrative management of the program.

Audit Process

10.2. Is your LIHEAP program audited annually under the Single Audit Act and OMB Circular A - 133? $\columnwed{\bullet}_{Yes}$ $\columnwed{\cap}_{No}$

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

The auditors select LIHEAP each year for monitoring. The complete a random selection of Community Action Agencies to review their documents for accuracy.

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	Туре	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-13
--

_	Loca	l agencies/district	offices are required	l to have an annu	al audit (other	r than A-133
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	Local agencies/district offices	A-133 or other independent	audits are reviewed by Grant	t recipient as part of co	ompliance 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:
Local Administering Agencies/District Offices:
On - site evaluation
Annual program review
Monitoring through central database
✓ Desk reviews
Client File Testing/Sampling
Other program review mechanisms are in place. Describe:
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
Local reporting and Division/State Office monitoring efforts will be used to ensure proper dispersal of and accounting for Title XXVI benefit funds. CAAs will provide reports of fund allocation utilization and program implementation activities. The Division/State Office shall monitor the activities of CAAs and payment processing schedules. Details of local reporting procedures are included in the LIHEAP Policy Manual. The Department of Human Services will monitor the activities of the CAAs at least every three years using on-site reviews and desk audits. In addition, we conduct desk reviews, technical assistance by phone, and monitoring of the EAP subsystem. DHS can conduct unannounced monitoring visits if the agency is at high risk or presented with reasonable evidence of fraud, abuse, or neglect of program funds or mismanagement of the program. The Division/State office will ensure that the appropriate warning statements are included on benefit applications, Home Energy Supplier's Agreements, contracts with CAAs, and Letters of Agreement to prevent, detect, and correct waste, fraud, and abuse. Should households receive an overpayment, procedures as outlined in the LIHEAP Policy Manual will be implemented for recoupment or repayment of such overpayment or referred to the office that handles fraud and abuse.
10.7. Describe how you select local agencies for monitoring reviews. Attach a risk assessment if subrecipients are utilized. Site Visits:
All agencies could receive a site visit. If an agency has not received an on-site review within the past 2 FFY years, they are to be reviewed the following FFY. If an agency has received an unusual number of complaints or there is evidence of possible mismanagement, an on-site monitoring visit is conducted. If there is any information found during a desk review that may raise a red flag, the State will schedule an on-site monitoring review of that agency.
Desk Reviews:
If an agency is receiving a follow up visit we may decide to have a desk audit to review the most recent federal fiscal year.
10.8. How often is each local agency monitored? Please attach a monitoring schedule if one has been developed. Triannually
10.9. How many local agencies are currently on corrective action plans? 1
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

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MODEL PLAN		
Section 11: Timely and Meanir	ngful Public Participation, 2	2605(b)(12), 2605(C)(2)
11.1 How did you obtain input from the public in the devo Note: Tribes do not need to hold a public hearing but must		hat apply.
Tribal Council meeting(s)		
Public Hearing(s)		
✓ Draft Plan posted to website and available for co	omment	
Hard copy of plan is available for public view a	nd comment	
Comments from applicants are recorded		
Request for comments on draft Plan is advertise	d	
Stakeholder consultation meeting(s)		
Comments are solicited during outreach activiti	es	
Other - Describe:		
Public Hearings, 2605(a)(2) - For States and the Common	wealth of Puerto Rico Only	
11.2 List the date and location(s) that you held public hea	ring(s) on the proposed use and distribution	n of your LIHEAP funds?
	Date	Event Description
1	06/17/2025	Public Hearing Virtual
2	01/23/2025	Legislative Hearing
11.3. How many parties commented on your plan at the h	earing(s)? 1	
11.4 Summarize the comments you received at the hearin	g(s).	
The Georgia Environmental Finance Authority		tion "Other" section.
11.5 What changes did you make to your LIHEAP plan a	s a result of public participation and solicit	ntion of input?
State office made the requested changes.		
If any of the above questions require fu	rther explanation or clarifica	tion that could not be made in

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

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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? $\,0\,$
- 12.2 How many of those fair hearings resulted in the initial decision being reversed? $\,0\,$
- 12.3 Describe any policy and/or procedural changes made in the last federal Fiscal Year as a result of fair hearings?

None

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

Should the applicant request a fair hearing, the request is sent to the State LIHEAP office. The State will try to resolve the issue. The State will provide an opportunity for a fair hearing through the Office of State Administrative Hearings to individuals whose claims for assistance are denied or are not acted upon with reasonable promptness

12.5 When and how are applicants informed of these rights?

Each applicant will be notified of his or her Fair Hearings Rights or Procedures through receipt of an Information Notice at the time of application intake. Fair Hearings procedures are prescribed in the Fair Hearing Policy for individuals who are denied services or whose application is not acted upon with reasonable promptness.

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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?

The network stated that they would like to have all funds go toward benefits.

In an effort to address the issues related to lack of heating, choices of unsafe means of heating, cooking, and attending to personal needs, the following procedures are in place to perform the following types of activities:

Consumer counseling regarding bill payments, schedules of payments, unsafe means of heating, energy conservation, budget billing, and other such information necessary to alleviate the energy burden to eligible LIHEAP households.

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

N/A

13.3 Describe the impact of such activities on the number of households served in the previous federal Fiscal Year.

Assurance 16 was not used in the previous fiscal year.

13.4 Describe the level of direct benefits provided to those households in the previous federal Fiscal Year.

N/A

13.5 How many households received these services? 0

Section 14 - Leveraging Incentive Program ,2607A

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

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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? $\begin{cal}C\end{cal}$ Yes $\begin{cal}\bullet\end{cal}$ No

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

N/A

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	Fuel	Home Energy Assistance Team (HEAT)	Funds are used for all households except electricity.

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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.

Georgia LIHEAP revised the benefits matrix to ensure that Georgia includes the energy burden for the fuel type for the household. Georgia now has various benefit amounts per fuel type. Georgia adjusted the matrix to target those households with the lowest income and the highest energy burden to receive the higher benefit payment. Georgia updated the benefit matrix to remove all households with a member aged 60 or older receive the highest energy assistance benefit available, regardless of income of energy cost. Based on historical data, this is usually well over 50% of all LIHEAP assisted households in Georgia each year. The Georgia LIHEAP network will continue to prioritize elderly households by providing them with an early application period. If the benefit goes directly to the applicant, the applicant will receive the lowest benefit amount for either level 1 or level 2. Please see the updated Benefit Matrix.

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

J										
	Section 17: Program Integrity, 2605(b)(10)									
17.1	17.1 Fraud Reporting Mechanisms									
a. D	a. Describe all mechanisms available to the public for reporting cases of suspected waste, fraud, and abuse. Select all that apply.									
	✓ Online Fraud Reporting									
	▼ Dedicated Fraud Reporting Hotline									
	Report directly to local agency/district office or Grant recipient office									
	Report to State Inspector General or Attorney General									
	Forms and procedures in place for local agencies/district offices and vendors to report fraud, waste, and abuse									
	Other - Describe:									
b. D	escribe strategies in place for a	adve	rtising the above-re	eferenced reso	urce	s. Select all that a	apply			
	Printed outreach materials									
	Posted in local adminis	terin	g agencies offices.							
	Addressed on LIHEAP	app	lication							
	Website									
	Other - Describe:									
17.2	17.2. Identification Documentation Requirements									
	ndicate which of the following subers.	form	s of identification a	re required o	r req	uested to be colle	ected from LIHI	EAP	applicants or the	ir household
	Collected from Whom?									
Type of Identification Collected			Applicant Only		All Adults in Household		All Household Members			
			Required	,		Required	ousenoru		Required	1/1CIIIDCI 5
	ial Security Card is tocopied and retained	>			>			y		
			Requested			Requested			Requested	
G	Cal Carrow to Name to March and		Required			Required			Required	
	ial Security Number (Without ial Card)									
			Requested			Requested			Requested	
]			<u> </u>	
Government-issued identification		>	Required			Required		Required		
card (i.e.: driver's license, state ID,										
Tribal ID, passport, etc.)			Requested			Requested			Requested	
	Other		Applicant Only	Applicant Or	ıly	All Adults in Household	All Adults in Household		All Household Members	All Household Members
1			Required	Requested	_	Required	Requested		Required	Requested

17.3. (tizenship/Legal Residency Verification
	re your procedures for ensuring LIHEAP recipients are U.S. citizens or qualified non-citizens who are eligible to receive LIHEAP? Select all that apply.
>	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.
>	Non-Citizens must provide documentation of immigration status
	Citizens must provide a copy of their birth certificate, naturalization papers, or passport
>	Non-Citizens are verified through the SAVE system
	Tribal members are verified through Tribal enrollment records/Tribal ID card
	Other - Describe:
	come Verification
	nethods does your agency utilize to verify household income? Select all that apply.
>	Require documentation of income for all adult household members
	Pay stubs
	Social Security award letters
	Bank statements
	Tax statements
	Zero-income statements
	✓ Unemployment Insurance letters
	Other - Describe:
	Computer data matches:
	Income information matched against state computer system (e.g., SNAP, TANF)
	Proof of unemployment benefits verified with state Department of Labor
	Social Security income verified with SSA
	Utilize state directory of new hires
	Other - Describe:
b. Desc	ibe any exceptions to the above policies.
17.5 Io	entification Verification
Descri apply	e what methods are used to verify the authenticity of identification documents provided by clients or household members. Select all that
	Verify SSNs with Social Security Administration
	Match SSNs with death records from Social Security Administration or state agency
	Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)
	Match with state Department of Labor system
	Match with state and/or federal corrections system
	Match with state child support system
	Verification using private software (e.g., The Work Number)
	In-person certification by staff (for tribal Grant recipients only)
	Match SSN/Tribal ID number with tribal database or enrollment records (for tribal Grant recipients only)
>	Other - Describe:
	The Community Action Agency verify that the document submitted is a state issued document.
17.6. I	otection 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 required to submit proof of physical residency ✓ Applicants must submit current utility bill
- representation of the control of t
Applicants must submit current utility bill
Applicants must submit current utility bill Data exchange with utilities that verifies:
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe:
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level Separation of duties between intake and payment approval
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level Separation of duties between intake and payment approval Payments coordinated among other energy assistance programs to avoid duplication of payments
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level Separation of duties between intake and payment approval Payments coordinated among other energy assistance programs to avoid duplication of payments Payments to utilities and invoices from utilities are reviewed for accuracy
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level Separation of duties between intake and payment approval Payments coordinated among other energy assistance programs to avoid duplication of payments Payments to utilities and invoices from utilities are reviewed for accuracy Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level Separation of duties between intake and payment approval Payments coordinated among other energy assistance programs to avoid duplication of payments Payments to utilities and invoices from utilities are reviewed for accuracy Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities Direct payment to households are made in limited cases only
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system/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
Applicants must submit current utility bill Data exchange with utilities that verifies: Account ownership Consumption Balances Payment history Account is properly credited with benefit Other - Describe: Centralized computer system/database tracks payments to all utilities Centralized computer system automatically generates benefit level Separation of duties between intake and payment approval Payments coordinated among other energy assistance programs to avoid duplication of payments Payments to utilities and invoices from utilities are reviewed for accuracy Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities 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

>	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.				
	Vendor agreements specify requirements selected above, and provide enforcement mechanism				
	Other - Describe:				
17.10. I	nvestigations and Prosecutions				
	be the Grant recipients procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients, staff, or 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? Five years				
>	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:				
•	y of the above questions require further explanation or clarification that could not be made in elds provided, attach a document with said explanation here.				

Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters

Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

Instructions for Certification

- 1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
- 2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- 3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.BrBbr.
- 4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
- 6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
- 7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled ``Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or

voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

- 9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
- (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions

Instructions for Certification

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later

determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
- 4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal that, [[Page 33043]] should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled ``Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--Lower Tier Covered Transactions

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.
- **☑** By checking this box, the prospective primary participant is providing the certification set out above.

Section 19: Certification Regarding Drug-Free Workplace Requirements

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central pint is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)

- 1. By signing and/or submitting this application or grant agreement, the 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.)

47 Trinity Ave SW * Address Line 1		
Address Line 2		
Address Line 3		
Atlanta * City	GA * State	30334 * 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.