DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance Grantee Name: DEPARTMENT WORK SERVICES 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
- 9. Section 8 Agency Designation,, 2605(b)(6) Assurance 6
- 10. Section 9 Energy Suppliers,, 2605(b)(7) Assurance 7
- 11. Section 10 Program, Fiscal Monitoring, and Audit, 2605(b)(10) Assurance 10
- 12. Section 11 Timely and Meaningful Public Participation, , 2605(b)(12) Assurance 12, 2605(c)(2)
- 13. Section 12 Fair Hearings, 2605(b)(13) Assurance 13
- 14. Section 13 Reduction of home energy needs, 2605(b)(16) Assurance 16
- 15. Section 14 Leveraging Incentive Program ,2607A
- 16. Section 15 Training
- 17. Section 16 Performance Goals and Measures, 2605(b)
- 18. Section 17 Program Integrity, 2605(b)(10)
- 19. Section 18: Certification Regarding Debarment, Suspension, and Other Responsibility Matters
- 20. Section 19: Certification Regarding Drug-Free Workplace Requirements
- 21. Section 20: Certification Regarding Lobbying
- 22. Assurances
- 23. Plan Attachments

Mandatory Grant Application SF-424

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

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

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

		* 1.b. Frequency: Annual	2. Date 3. App 4a. Uni JJKAP	3. Applicant Identifier: la. Unique Entity Identifier (UEI) JKAPZHF5KB3		* 1.d. Version: © Initial C Resubmission C Revision Update State Use Only: 5. Date Received By State: 6. State Application Identifier:	
* a. Legal Name: Sta	te of Utah						
* b. Address:							
* Street 1:	140 E 300 S		Stre	et 2:			
* City:	SALT LAKE	CITY	Cou	nty:			
* State:	UT		Pro	vince:			
* Country:	United States		* Zi Code:	p / Postal	84111		
c. Organizational	Unit:		·li				
Department Name Department of Works			Division Name: Housing and Community Development				
		person to be contacted on matters in t of Health and Human Services' LII				be listed on Notice of Funding	
* First Name: Michael			* Last Name: Murdock				
Title: Program Manager - U	Jtah LIHEAP		Organizational Affiliation:				
* Telephone Number 801-702-9137	:		Fax Number				
* Email: mikemurdock@utah.	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	ic CFDA Title:			
9. CFDA Numbers and	Titles	93.568	Low-Income Home Energy Assistance Program				
10. DESCRIPTIVE THEAT	TITLE OF API	PLICANT'S PROJECT:					
11. AREAS AFFECT UTAH	TED BY FUND	ING:					
12. CONGRESSION Statewide	AL DISTRICT	S OF APPLICANT:					
13. FUNDING PERI	OD:						
a. Start Date: 10/01/2025			b. End Date: 09/30/2026				
* 14. IS SUBMISSIO	N SUBJECT T	O REVIEW BY STATE UNDER EX	XECUTI	VE ORDER 1	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) Michael Murdock 17d. Email Address mikemurdock@utah.gov 17b. Signature of Authorized Certifying Official 17e. Date Report Submitted (Month, Day, Year) 07/29/2025 sign

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

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.

Section 1 Program Components Program Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C) **Dates of Operation** 1.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.) Start Date **End Date** 10/01/2025 09/30/2026 Heating assistance 10/01/2025 Cooling assistance 09/30/2026 Summer crisis assistance Winter crisis assistance Year-round crisis assistance 10/01/2025 09/30/2026 Weatherization assistance 10/01/2025 09/30/2026 Provide further explanation for the dates of operation, if necessary Applications for all clients will open on October 1st. Priority in processing will be given for the households with members of a target group (elderly, disabled, children under 6 years of age). Estimated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16 1.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: Percentage (%) Prior year totals The total of all percentages must add up to 100% Heating assistance 45.00% 43.00% Cooling assistance 15.00% 15.00% 9.00% Summer crisis assistance 0.00% 0.00% Winter crisis assistance 0.00% 8.00% 0.00% Year-round crisis assistance 15 00% Weatherization assistance 13.00% 10.00% 10.00% Carryover to the following federal fiscal year 9.00% 8.00% Administrative and planning costs 0.00% 0.00% Services to reduce home energy needs including needs assessment (Assurance 16) 0.00% 0.00% Used to develop and implement leveraging activities TOTAL 100.00% 100.00%

up to plann	l grant recipients: direct-g 20% of the funds payable. ing and administration pu n excess of these limits mu	Grant recipients that ar rposes up to 20% of the	re direct grant tribes, to first \$20,000 (or \$4,000	ribal organizations, or t	erritories with	allotments o	over \$20,000 may use for
Alter	nate Use of Crisis Assista	ance Funds, 2605(c)(1)((C)				
1.3 T	he funds reserved for wir	nter crisis assistance th	at have not been exp	W .	ll be reprogra	ammed to:	
4		Heating assistance		~	(Cooling assis	tance
V		Weatherization assist	ance		C	Other (specif	'y:)
Categ	Categorical Eligibility, 2605(b)(2)(A) - Assurance 2, 2605(c)(1)(A), 2605(b)(8A) - Assurance 8						
1.4 Do you consider households categorically eligible if at least one household member receives at least one of the following categories of benefits in the left column below? O Yes No							
If you	answered "Yes" to que	stion 1.4, you must con	nplete the table below	and answer questions	s 1.5 and 1.6.		
			Heating	Cooling	Cr	isis	Weatherization
TANF			O Yes O No	C Yes C No	O Yes	○ No	CYes CNo
SSI			C Yes C No	C Yes C No	O Yes	○ No	C Yes C No
SNAP			O Yes O No	C Yes C No	C Yes	🗆 No	C Yes C No
Means	s-tested Veterans Programs		O Yes O No	C Yes C No	O Yes	□ No	C Yes C No
need appli	a. Provide your definition to receive the benefits or cation process.	just one member, is th	ere a data exchange i	in place?) and how cat	egorical eligi		
	s, explain:	n nouscholds without a	a un ect amuai appne	ation. © 10s © 100			
	ow do you ensure there is determining eligibility a		reatment of categoric	ally eligible household	ls from those	not receiving	g other public assistance
SNAI	P Nominal Payments						
1.7a l	Do you allocate LIHEAP	funds toward a nomin	al payment for SNAF	households? CYes	⊙ No		
If you	answered "Yes" to que	stion 1.7a, you must pr	ovide a response to q	uestions 1.7b, 1.7c, an	d 1.7d.		
1.7b	Amount of Nominal Assis	stance: \$0.00					
1.7c I	requency of Assistance						
	Once Per Year						
	Once every five years						
	Other - Describe:						
1.7d	How do you confirm that	the household receiving	ng a nominal paymen	t has an energy cost or	r need?		
Deter	mination of Eligibility - (Countable Income					
1.8. I	n determining a househol	ld's income eligibility f	for LIHEAP, do you u	ise gross income or ne	t income?		
~	Gross Income						
	Net Income						
	Other - Describe						
1.9. S	elect all the applicable fo	orms of countable incor	ne used to determine	a household's income	eligibility for	LIHEAP	
~	Wages						
~	Self - Employment Inco	me					
~	✓ Contract Income						

>	Payments from mortgage or Sales Contracts
>	Unemployment insurance
>	Strike Pay
>	Social Security Administration (SSA) benefits
	✓ Including MediCare deduction deduction Excluding MediCare deduction
>	Supplemental Security Income (SSI)
>	Retirement / pension benefits
	General Assistance benefits
	Temporary Assistance for Needy Families (TANF) benefits
	Loans that need to be repaid
>	Cash gifts
	Savings account balance
>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.
	Jury duty compensation
>	Rental income
	Income from employment through Workforce Investment Act (WIA)
	Income from work study programs
>	Alimony
>	Child support
	Interest, dividends, or royalties
>	Commissions
	Legal settlements
	Insurance payments made directly to the insured
	Insurance payments made specifically for the repayment of a bill, debt, or estimate
>	Veterans Administration (VA) benefits
	Earned income of a child under the age of 18
	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.
	Income tax refunds
	Stipends from senior companion programs, such as VISTA
~	Funds received by household for the care of a foster child

_	
	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
	Reimbursements (for mileage, gas, lodging, meals, etc.)
	Other
	ny of the above questions require further explanation or clarification that could not be made in fields provided, attach a document with said explanation here.
1.10	Do you have an online application process Yes No
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:
	https://jobs.utah.gov/mycase-app/ui/heat
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	Do you have a process for conducting and completing applications by phone 💽 Yes 🖸 No
1.12	Do you or any of your subrecipients require in person appointments in order to apply C Yes 🙃 No
If yes	s, please provide more information regarding why in-person appointments are required and in what circumstances they are required.
	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

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

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

	Section 2 - Heating Assistance					
Eligibility, 2605	(b)(2) - Assurance 2					
2.1 Designate the	e income eligibility threshold used for t	he heating c	omponent:			
Add	Household size		Eligibility Guideline	Eligibility Threshold		
1	All Household Sizes		HHS Poverty Guidelines	150.00%		
2.2 Do you have Heating Assistar	additional eligibility requirements for nce?	C Yes	⊙ No			
2.3 Check the ap	propriate boxes below and describe the	e policies for	each.			
Do you require a	an Assets test?	C Yes	⊙ No			
If yes, describe:	Do you have additional/differing eligibi	lity policies	for:			
Renters?		O Yes	⊙ No			
If yes, describe:						
Renters Li	iving in subsidized housing?	• Yes	CNo			
If yes, describe:						
considered must prov	enters living in subsidized housing must h d vulnerable. If the utility bill is in the lan vide verification that they pay an unsubsid ent company.	dlord or prop	perty management name, renter			
Renters w	ith utilities included in the rent?	• Yes	CNo			
	enters with utilities included in the rent m t as verification to be eligible for energy a					
Do you give prio	ority in eligibility to:					
	ılts (60 years or older)?	• Yes	CNo			
If yes, describe:	,	103				
Ho disabilitie	ouseholds that include members of a targe es, or elderly persons) will receive an addi ds will also be prioritized for application r	tional \$150 i	n energy assistance benefits. These			
Individual	s with a disability?	• Yes	CNo			
If yes, describe:						
disabilitie	ouseholds that include members of a targe ss, or elderly persons) will receive an addi ds will also be prioritized for application r	tional \$150 i	n energy assistance benefits. These			
Young chi	ldren?	• Yes	CNo			
If yes, describe:						
disabilitie	ouseholds that include members of a targe ss, or elderly persons) will receive an addi ds will also be prioritized for application r	tional \$150 i	n energy assistance benefits. These			
Household	ls with high energy burdens?	• Yes	C _{No}			
If yes, describe:						
Tł	ne higher the energy burden, the higher the	e benefit for	the household.			
Other? su	pplemental payments	• Yes	C_{No}			

If yes, describe: We will determine the need to pay out supplemental payments to HEAT qualified households when funding permits and/or there are circumstances that warrant a supplemental payment to be paid out. This may be a flat benefit across the board or a benefit determined by energy burden and target group eligibility. This is different from the supplemental payments $% \left(1\right) =\left(1\right) \left(1\right) \left($ referred to in our policy manual that refers to supplemental payments when there is an underpayment on an account. 2.1 - We use 150% FPG for income eligibility. The benefit matrix is a bit confusing. It divides cell B8 (total income) from B9 (100% FPG) and it produces a decimal number in B10. Then in B11 you have to convert that decimal number to a whole number and that equals the FPG the client is at. If it is over 150 then the client is not eligible because that is over 150% FPG. We are working on simplifying the matrix. Explanations of policies for each "yes" checked above: Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B) 2.4 Describe how you prioritize the provision of heating assistance to vulnerable populations, e.g., benefit amounts, early application periods, Outreach activities are conducted for this population throughout the year. Applications received in October that have a target group member (elderly, disabled, or children under 6 years of age) will be prioritized for application review. All other applications are processed in the order they were received. Applications are mailed directly to elderly and/or disabled households during the year to give them an opportunity to apply for energy assistance as needed. Households with elderly, disabled, or children under 6 years of age will receive an extra \$150 in energy assistance benefits. 2.5 Check the variables you use to determine your benefit levels. (Check all that apply): 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 4 Other - Describe: Households with elderly, disabled, or children under 6 years of age will receive an additional \$150 in energy assistance benefits also known as Target Group Credit. Households using propane or oil as their primary heating source receive an additional \$150 in energy assistance benefits. Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B) 2.6 Describe estimated benefit levels for the fiscal year for which this plan applies. Please note: the maximum and minimum benefits must be shown in the payment matrix. **Minimum Benefit** \$140 **Maximum Benefit** \$800 2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits?2 • Yes No If yes, describe. Blankets, energy efficient light bulbs, window film, education materials, and calendars are given to clients at local agencies to educate customers on ways to save on their utility bills. The in-kind benefit varies by local HEAT agency. If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 3 - COOLING ASSISTANCE

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

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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 Tl	ne income eligibility threshold used for	r the Cooling	component:			
Add	Household size		Eligibility Guideline	Eligibility Threshold		
1	All Household Sizes		HHS Poverty Guidelines	150.00%		
3.2 Do you have Cooling assistan	additional eligibility requirements for ace?	· O Yes	⊙ No			
3.3 Check the ap	ppropriate boxes below and describe the	he policies fo	r each.			
Do you require	an Assets test?	C Yes	⊙ No			
If yes, describe:						
Do you have add	ditional/differing eligibility policies for	:				
Renters?		C Yes	⊙ No			
If yes, describe:		•				
Renters L	iving in subsidized housing?	Yes	CNo			
landlord o			ty bill in their name in order to be considered vu rification that they pay an unsubsidized utility b			
Renters w	ith utilities included in the rent?	• Yes	C _{No}			
Ro assistance		nust provide a	a landlord statement or lease agreement as verific	cation to be eligible for energy		
Do you give pric	ority in eligibility to:					
Older Adı	ılts (60 years or older)?	Yes	○ No			
		se households	ing children, individuals with disabilities, or eld s will also be prioritized for application review t			
Individual	ls with a disability?	Yes	C No			
			ing children, individuals with disabilities, or elds will also be prioritized for application review t	• 1		
Young chi	ldren?	Yes	ONo			
			ing children, individuals with disabilities, or elds s will also be prioritized for application review t			
Household	ls with high energy burdens?	⊙ Yes	C _{No}			
If yes, describe:	ne higher the energy burden, the higher the	he benefit for	the household.			
Other? St	upplemental payments		CNo			
If yes, describe:						

We will determine the need to pay out supplemental payments to HEAT qualified households when funding permits and/or there are circumstances that warrant a supplemental payment to be paid out. This may be a flat benefit across the board or a benefit determined by energy burden and target group eligibility. This is different from the supplemental payments referred to in our policy manual that refers to supplemental payments when there is an underpayment on an account.3.1 - We use 150% FPG for income eligibility. The benefit matrix is a bit confusing. It divides cell B8 (total income) from B9 (100% FPG) and it produces a decimal number in B10. Then in B11 you have to convert that decimal number to a whole number and that equals the FPG the client is at. If it is over 150 then the client is not eligible because that is over 150% FPG. We are working on simplifying the matrix.

Explanations of policies for each "yes" checked above:

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

Outreach activities are conducted for this population throughout the year. Applications received in October that have a target group member (elderly, disabled, or children under 6 years of age) will be prioritized for application review. All other applications are processed in the order they were received. Applications are mailed directly to elderly and/or disabled households during the year to give them an opportunity to apply for energy assistance as needed. Households with elderly, disabled, or children under 6 years of age will receive an extra \$150 in energy assistance benefits

Determination of Benefits 2605(b)(5) - As	Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)					
3.5 Check the variables you use to determ	ine your benefit levels. (Check	all that apply):				
✓ Income						
Family (household) size						
✓ Home energy cost or need:						
✓ Fuel type						
Climate/region						
✓ Individual bill						
✓ Dwelling type			i.			
Energy burden (% of income	spent on home energy)					
Energy need						
Other - Describe:						
Households with elderly, disabled, or children under 6 years of age, also known as target groups, will receive an additional \$150 in energy assistance benefits. Households using propane or gas as their primary heating source receive an additional \$150 in their energy assistance benefit calculation.						
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)						
3.6 Describe estimated benefit levels for the fiscal year for which this plan applies. Please note: the maximum and minimum benefits must be shown in the payment matrix.						
Minimum Benefit	\$140	Maximum Benefit	\$800			
3.7 Do you provide in-kind (e.g., fans, air	3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? • Yes No					
If yes, describe. Through our Weatherization cooling mechanisms.	program, fans and air conditioner	rs may be purchased by agencies for household	ds with a need for additional			

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: CRISIS ASSISTAN	ICE				
Eligibility - 2	2604(c), 2605(c)(1)(A)						
	e the income eligibility threshold used for the	crisis component					
Add							
1							
	your LIHEAP program's definition for determound), Include all program definitions.	mining a crisis. If you administer mu	ıltiple crisis assistan	ce programs (w	inter, summer,		
and it client	A crisis exists when a household has a 48 housected event beyond their control (within the last 4.1 - We use 150% FPG for income eligibility produces a decimal number in B10. Then in B1 is at. If it is over 150 then the client is not eligibility institutes a life-threatening crisis?	t 90 days) resulting in the inability to p. 7. The benefit matrix is a bit confusing. 1 you have to convert that decimal nurble because that is over 150% FPG. We	oay household energy It divides cell B8 (to nber to a whole numl e are working on sim	tal income) from ber and that equa plifying the matr	n B9 (100% FPG) als the FPG the ix.		
opera	A crisis situation (as defined above in 4.2) that a medical device or store medication and has						
Crisis Requi	rement, 2604(c)						
4.4 Within h	ow many hours do you provide an intervention	on that will resolve the energy crisis	for eligible househo	lds? 48 hoursHe	ours		
	ow many hours do you provide an intervention 8 hoursHours	on that will resolve the energy crisis	for eligible househo	lds in life-threat	tening		
Crisis Eligib	ility, 2605(c)(1)(A)						
			Winter	Summer			
4.6 Do you h	ana additional aliaibilitu naaninamanta fan Cu		Crisis	Crisis	Year-Round Crisis		
	ave additional eligibility requirements for Cr	isis Assistance?	Crisis				
4.7 Check th 0	e appropriate boxes below to indicate type(s)			Crisis	Crisis		
0				Crisis	Crisis		
0 Do you requ	e appropriate boxes below to indicate type(s)			Crisis	Crisis		
O Do you requ Do you give	e appropriate boxes below to indicate type(s) ire an Assets test?			Crisis	Crisis		
Do you requ Do you give Older	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to:			Crisis	Crisis		
Do you requ Do you give Older	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to: Adults (60 years or older)?			Crisis	Crisis		
Do you requ Do you give Older Individ	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to: Adults (60 years or older)? luals with a disability?			Crisis	Crisis		
Do you requ Do you give Older Individ	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to: Adults (60 years or older)? luals with a disability? Children?			Crisis	Crisis		
Do you requ Do you give Older Individ Young Housel	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to: Adults (60 years or older)? luals with a disability? Children? holds with high energy burdens?			Crisis	Crisis		
O Do you requ Do you give Older Individ Young Housel Other	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to: Adults (60 years or older)? duals with a disability? Children? holds with high energy burdens? (Specify):	of assistance provided		Crisis	Crisis		
Do you requ Do you give Older Individ Young Housel Other In Order to Must t	e appropriate boxes below to indicate type(s) ire an Assets test? priority in eligibility to: Adults (60 years or older)? luals with a disability? Children? holds with high energy burdens? (Specify): receive crisis assistance:	or have a near empty tank?		Crisis	Crisis V V V V V V V V V V V V V		

Must renters	with heating costs included in their rent have received an eviction notice?						
Must heating/	cooling be medically necessary?						
Must the hous	ehold have non-working heating or cooling equipment?						
Other (Specify	y):						
Do you have addition	nal/differing eligibility policies for:						
Renters?							
Renters living	in subsidized housing?			<u> </u>			
Renters with	Renters with utilities included in the rent?						
	cies for each "yes" checked above:			<u> </u>			
of October. R benefit payme HEAT payme	y, disabled and households with children under the age of 6 in the home have their a enters living in subsidized housing must have the utility bill in their name in order to the tests must be paid directly to a utility vendor and may not be paid to a client. If the cent, they are not eligible for Crisis assistance. Crisis assistance in the form of window on program if it is medically advised with a note from a doctor.	be considered lient has been p	vulnerable. Crist aid directly for a	is assistance ny portion of the			
Determination of Be	enefits						
4.8 How do you han	dle crisis situations?						
	Separate component						
>	Benefit Fast Track, no separate amount of crisis funds is issued. Rather benefits frames.	efits are issued	to crisis custom	ers within crisis			
	If a household has a 48 hour shut off notice or is within 10% of de beyond their control resulting in the inability to pay household's utility co treatment in the application process. The workers will work with the utilit to avoid shut off. The household may receive one crisis benefit once every 2 years and does	sts, the househory companies to	old will receive p make a commit	referential			
4.9 If you have a sep	parate component, how do you determine crisis assistance benefits?						
	Amount to resolve the crisis. \$0						
	Other - Describe:						
~							
Crisis Requirement	s, 2604(c) applications for energy crisis assistance at sites that are geographically accessib	lo to all hangel	alda in the ence	to be conved?			
• Yes O No		ie to an nousei	ioius iii tile ai ea	to be served:			
We ha	we agencies with multiple offices located throughout the state to assist with application in their geographical service area to assist clients with outreach applications. In son worker to go to a client's home to assist with an application.						
	individuals who are individuals with a disability the means to:						
	ons for crisis benefits without leaving their homes?						
Yes No							
If No, explain. Travel to the sites	at which applications for crisis assistance are accepted?						
C Yes No	are appreciations for crisis assistance are accepted.						
If No, explain.							
We do	o not provide transportation to our HEAT agencies for several reasons. We provide sone, mail and conduct various outreach activities. In addition to these options, in the passes for those who wish to use it.						
If you answered "N disabled?	o" to both options in question 4.11, please explain alternative means of intake t	o those who ar	e homebound or	physically			
Benefit Levels, 2605	(c)(1)(B)						
	eximum benefit for each type of crisis assistance offered.						

Winter Crisis	\$0.00 maximum benefit						
Summer Crisis	\$0.00 maximum benefit						
Year-round Crisis	\$1,500.00 maximum ben	efit					
4.13 Do you provide in-kir	nd (e.g. blankets, space h	eaters, fans) and/or oth	er forms of b	enefits?	-	
Yes O No If yes, D	Describe						
Each agency other energy saving		zation progra	am to determ	ines the needs	of their clients and pr	ovides blankets, space heaters,	fans, or
4.14 Do you provide for ea	quipment repair or repla	cement usin	ng crisis fund	ds?			
€ Yes C No							
If you answered "Yes" to	question 4.14, you must	complete qu	estion 4.15.				
4.15 Check appropriate b	oxes below to indicate ty	pe(s) of assis	stance provi	ded.			
		Winter Crisis	Summer Crisis	Year-round	Crisis		
Heating system repair				~			
Heating system replacement	ent			>			
Cooling system repair				>			
Cooling system replaceme	ent			>			
Wood stove purchase							
Pellet stove purchase							
Solar panel(s)							
Utility poles / gas line hoo	sk-ups						
Weatherization prog repair/replacements crisis eligibility defi these services. In ad	Crisis dollars to Utah's gram to perform crisis. The client must meet ined above to receive dition, client must have at equipment to receive a herization team.			>			
4.16 Do any of the utility	vendors you work with e	nforce a mo	ratorium on	shut offs?			
• Yes O No							
If you responded "Yes" to	o question 4.16, you must	respond to	question 4.1	17.			
4.17 Describe the terms of	f the moratorium and an	y special dis	pensation re	eceived by LI	HEAP clients during	or after the moratorium peri	od.
the option of beginn residential account l	ning it earlier or extending holder or have his/her nam	it longer whe	en severe we ount, live at	ather condition the address of	ns warrant. To qualify service needing protec	gh March 15. The state Heat of, , the applicant must be the adul- ting, has a termination notice hint basis during the moratorium.	t rom the
4.18 If you experience a n No	atural disaster, do you in	tend to utili	ize LIHEAP	crisis funds	o address disaster re	lated crisis situations? O Yes	0
If yes, describe							
If any of the abov the fields provide						hat could not be ma	de in

Section 5 - WEATHERIZATION ASSISTANCE

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

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

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

Section	on 5: WEATH	HERIZATION ASSISTAN	CE			
Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assu	rance 2					
5.1 Designate the income eligibility thresho	ld used for the Weath	nerization component				
Add Househo	old Size	Eligibility Guideline	Eligibility Threshold			
1 All Household Sizes		HHS Poverty Guidelines	200.00%			
5.2 Do you enter into an interagency agree No	ment to have another	government agency administer a WEATI	HERIZATION component? O Yes •			
5.3 If yes, name the agency and attach a co	py of the Internal Agr	reement or Contract.				
5.4 Is there a separate monitoring protocol	for weatherization?	€ Yes ○ No				
WEATHERIZATION - Types of Rules						
5.5 Under what rules do you administer LI	HEAP weatherization	n? (Check only one.)				
Entirely under LIHEAP (not DOE) r	rules					
Entirely under DOE WAP (not LIHI	EAP) rules					
Mostly under LIHEAP rules with the	e following DOE WAI	P rule(s) where LIHEAP and WAP rules of	differ (Check all that apply):			
Income Threshold						
	C	4	700/ i- 2 · 0 · 4 · · · · · · · · · · · · · · · ·			
eligible units or will become eligible within		ture is permitted if at least 66% of units (5	90% in 2- & 4-unit buildings) are			
Weatherize shelters temporaril care facilities).	ly housing primarily l	low income persons (excluding nursing ho	mes, prisons, and similar institutional			
Other - Describe:						
Mostly under DOE WAP rules, with	the following LIHEA	P rule(s) where LIHEAP and WAP rules	differ (Check all that apply.)			
Income Threshold						
Weatherization not subject to I	DOE WAP maximum	statewide average cost per dwelling unit.				
Weatherization measures are n	ot subject to DOE Sa	vings to Investment Ration (SIR) standar	rds.			
Other - Describe:		<u>g</u>				
Eligibility, 2605(b)(5) - Assurance 5						
5.6 Do you require an assets test?						
5.7 Do you have additional/differing eligibility policies for :						
Renters	⊙ Yes ○ No					
Renters living in subsidized housing?	CYes © No					
Renters with utilities included in the rent?	C Yes O No					
5.8 Do you give priority in eligibility to:						
Older Adults?	⊙ Yes ○ No					
Individuals with a disability?	⊙ Yes ○No					
Young Children?	⊙ Yes O No					
House holds with high energy burdens?	• Yes O No					

Other? time spent on the waiting list Yes 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.					
5.7 Renters: Renters must have the landlord's approval when applying for weatherization since the tenant cannot grant rights to alter the structure. An additional 50% cost share (match) is encouraged for the landlord to pay on certain measures. 5.8 Eligibility Other: We also give priority in eligibility to: time spent on the waiting list, and household income levels. Priority points are awarded to applicants on the waiting list. For every 6 months on the list they are awarded 10 points. For household income based on Federal Poverty Level they are awarded: Under 75%=40 points, 75-100%=30 points, 101-125%=20 points, 126-150%=10 points, 151-200%=0 points.					
Benefit Levels					
5.9 Do you have a maximum LIHEAP weatherization benefit/expenditur	re per household? O Yes O 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? \$8,547					
Types of Assistance, 2605(c)(1), (B) & (D)					
5.11 What LIHEAP weatherization measures do you provide ? (Check a	ll categories that apply.)				
Weatherization needs assessments/audits	Energy related roof repair				
✓ Caulking and insulation	Major appliance repairs				
Storm windows	Major appliance replacement				
Furnace/heating system modifications/repairs	Windows/sliding glass doors				
Furnace replacement	☑ Doors				
Cooling system modifications/repairs	☑ Water Heater				
✓ Water conservation measures	Cooling system replacement				
Roof top solar	Community solar projects				
Compact florescent light bulbs	Other - Describe: All other DOE weatherization improvements allowed. Fuel switching and appliance replacement is allowed, but under tight controls. LED lighting and other electrical base-level reduction measures including refrigerator replacement.				
If any of the above questions require further explanation or clarification that could not be made in					

MODEL PLAN

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

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)

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Section 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) See below V One - stop intake centers V Other - Describe: V

LIHEAP funds are transferred to the Weatherization Program for weatherization households with high energy usage and lowest income at 150% of the federal poverty level or below. We also contract with non-profit and local government entities to do outreach, intake, and process applications statewide. These entities also coordinate with other anti-poverty programs such as SNAP, TANF, SSI, etc. when the need is identified. We also have LIHEAP staff in Department of Workforce Service office buildings throughout the state where they can be a resource for and refer clients to other programs such as Medicaid, SNAP, TANF etc.

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Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Required for state Grant

	recipients and the Commonwealth of Puerto Rico)							
8.1 Ho	8.1 How would you categorize the primary responsibility of your State agency?							
V	Administration Agency							
	Commerce Agency							
	Community Services Agency							
	Energy/Environment Agency							
	Housing Agency							
	State Department of Welfare (administers	TANF, SNAP, and/or I	Medicaid)					
	Economic Development Agency							
	Other - Describe:							
	e current list of subrecipient name, main off umber. <i>Used for Near hotline and OCS Servi</i> o			er, county(s) served, Co	ngressional District, and			
If you	ate Outreach and Intake, 2605(b)(15) - Assu selected "State Department of Welfare (adn 8.4, as applicable.		, and/or Medicaid)'' in q	question 8.1, you must co	omplete questions 8.2, 8.			
8.2 Ho	w do you provide alternate outreach and int	ake for heating assista	nce?					
8.3 Ho	w do you provide alternate outreach and int	ake for cooling assista	nce?>					
8.4 How do you provide alternate outreach and intake for crisis assistance?								
8.5 LII	HEAP Component Administration.	Heating	Cooling	Crisis	Weatherization			
8.5a W	3.5a Who determines client eligibility? Community Action Agencies Community Action Agencies Community Action Agencies Community Action Agencies Agencies							
	Tho processes benefit payments to gas and c 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 Agencies							
	8.5d Who performs installation of weatherization measures? Community Action Agencies							

Include a current list of subrecipient(s) name, main office address (do not list P.O. Box), phone number, county(s) served, Congressional District, and UEI number. If any of your LIHEAP components are not centrally-administered by a state agency, you must complete questions 8.6, 8.7, 8.8, and, if applicable, 8.9. 8.6 What is your process for selecting local administering agencies? Local administering agencies are contracted on a yearly basis. We continue to use the same agencies each year unless there is a contractual or performance reason to terminate the contract. If the contract is canceled or we choose not to contract with an agency in the current season, an RFP will be administered to request bids for services to clients in the targeted areas. 8.7 How many local administering agencies do you use? 8 8.8 Have you changed any local administering agencies in the last year? \odot No 8.9 If so, why? Agency was in noncompliance with Grant recipient requirements for LIHEAP -Agency is under criminal investigation Added agency Agency closed Other - describe 8.10 If a subrecipient is no longer providing LIHEAP, are you aware of prior-year LIHEAP funds being mismanaged or misspent? C Yes No 8.10a If yes, please explain. 8.10b If you are aware, were other federal programs impacted such as CSBG, SSBG, Head Start, TANF, and Department of Energy Weatherization funding, etc. C Yes 🕟 No 8.10c If yes, please explain. If any of the above questions require further explanation or clarification that could not be made

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

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Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7 9.1 Do you make payments directly to home energy suppliers? Heating Yes O No Cooling **⊙** Yes **○** No Crisis • Yes O No Are there exceptions? If yes, Describe. Benefits are paid directly to the utility vendors unless the utility expense is included in the rent, the household heats with wood, or the state does not have a contract with a utility vendor. 9.2 How do you notify the client of the amount of assistance paid? A 'Notice of Decision' is mailed to each applicant notifying them of their approval or denial. Letters specify to whom the benefit will be paid: either applicant or fuel vendor(s), or combination of both, and the amount to each. The letter is generated upon the final determination of the application through the program eligibility system. 9.3 How do you assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment? Only home energy suppliers who have signed an agreement with the department will be paid directly from program funds. The agreement stipulates that suppliers will charge the households in the normal billing process. 9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assistance? The vendor agreement stipulates that there will be no discrimination as to the amounts charged for home energy services and that the households will not be treated adversely because of participation in the HEAT program. Please see attached "Attachment C" 9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households? C Yes 💿 No If so, describe the measures unregulated vendors may take. Attach a copy of the template statewide vendor agreement or a policy that indicates local agreements must adhere to statewide policies and

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

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

Fiscal accounting and tracking shall be completed in accordance with the 2 CFR 200 subpart F and 2 CFR 910 Subpart F. The department

Fiscal accounting and tracking shall be completed in accordance with the 2 CFR 200 subpart F and 2 CFR 910 Subpart F. The departmentwill ensure that duplicate payments are not made. The eligibility system will not allow a household to receive more than one heating and/orcooling benefit payment per season based on SSN, address, and account numbers of household members. Our sub-grantees are required to submitregular claims to drawdown funds and they are monitored to make sure funds are expended. Vendor refunds are tracked and monitored by theState LIHEAP team and by our financial department. Each federal fiscal year has a unique code for each program (HEAT, Crisis, Weatherization) to separate funding and to allow for better monitoring of award amounts per year. Regular meetings with the LIHEAP team and our financial department to track and monitor expenditure rates of each award year.

10.1a Provide your definitions of the following:

Obligation

The State of Utah's Department of Workforce Services (DWS) has categorized all expenses paid for by LIHEAP funding as benefit payments, local agency payments, or DWS operating expenses. The obligation of each category is defined as follows:

The State of Utah's Department of Workforce Services (DWS) has categorized all expenses paid for by LIHEAP funding as benefit payments, local agency payments, or DWS operating expenses. The obligation of each category is defined as follows:• Benefit Payments: Heating assistance, cooling assistance, and crisis assistance are determined to be obligated at the time an application is approved in DWS's eRep system.• Local Agency Payments: Payments made to local agencies are determined to be obligated once a contract is executed.• DWS Operating Expenses: DWS internal expenses, such as salaries, supplies, IT upgrades, travel, etc. are determined to be obligated when a payment is made for the goods and/or services.

Expenditures

DWS defines an expenditure as a payment or disbursement in exchange for goods and/or services.

Expenditure timeframe

Period by which expenditures are made.

Administrative costs

Expenses incurred by grantee or sub-recipient to administer the program which may

Expenses incurred by grantee or sub-recipient to administer the program which mayinclude but is not limited to payroll, communication, travel, supplies, indirect costsbased on a public approved cost allocation plan, etc.

Audit Process

10.2. Is your LIHEAP program audited annually under the Single Audit Act and OMB Circular A - 133? $oldsymbol{\odot}$ Yes $oldsymbol{\square}$ No

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

We are a department of the State of Utah and as such are required to be audited by the State Auditor by Utah Code. The Utah code, Title 67, Chapter 3, details the role of Utah's State Auditor. "The state auditor shall be the auditor of public accounts and as such shall be independent of any executive or administrative officers of the state." 67-3-1(3)(a)(i) The state auditor shall "audit each permanent fund, each special fund, the General Fund, and the accounts of any department of state government or any independent agency or public corporation on a regular basis as the auditor shall determine necessary or upon request of the governor or the Legislature. These audits are to be performed in accordance with generally accepted auditing standards and other auditing procedures as promulgated by recognized authoritative bodies. The audits shall be conducted to determine honesty and integrity in fiscal affairs, accuracy and reliability of financial statements, effectiveness and adequacy of financial controls, and compliance with the law, as the auditor shall determine necessary."

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 si	cited in the single audits, inspector general reviews, or other government agency reviews from the most recently audited fiscal year.						
No Findings	No Findings 🗹						
Finding	Туре	Brief Summary	Resolved?	Action Taken			
1							
	f Local Administering						
What types of Select all that		nents do you have in place for local	administering agencies/district offices	?			
✓ Loc	al agencies/district offi	ces are required to have an annual a	audit in compliance with Single Audit	Act and OMB Circular A-133			
Loca	al agencies/district offi	ces are required to have an annual a	audit (other than A-133)				
Loca	al agencies/district offi	ces' A-133 or other independent aud	lits are reviewed by Grant recipient a	s part of compliance process.			
Gra	nt recipient conducts f	iscal and program monitoring of loc	cal agencies/district offices				
Loc	al agencies and distric	t offices are required to have an anr	nual audit in compliance with Single A	audit Act and OMB Circular A-133			
Compliance M	Ionitoring						
10.5. Describe	your monitoring proc	cess for compliance at each level belo	ow. Check all that apply.				
Grant recipie	nts have a policy in pla	ace for appropriate separation of du	ties and internal controls.				
✓ Inte	rnal program review						
☑ Dep	artmental oversight						
✓ Seco	ondary review of invoic	ces and payments					
Oth	er program review me	chanisms are in place. Describe:					
Local Admini	stering Agencies/Distr	ict Offices:					
✓ On ·	site evaluation						
✓ Ann	ual program review						
✓ Mor	nitoring through centra	al database					
✓ Desl	k reviews						
✓ Clie	nt File Testing/Sampli	ng					
Oth	er program review me	chanisms are in place. Describe:					
10.6 Explain,	or attach a copy of you	ur local agency monitoring schedule	and protocol.				
	All local agencies are monitored at least once per season (10/1-9/30). Applications to review are selected at random. Applications selected for review include at least one per worker. Additional files are selected for areas that are lacking. See attached policy manual for additional details.						
10.7. Describe	10.7. Describe how you select local agencies for monitoring reviews. Attach a risk assessment if subrecipients are utilized.						
Site Visits	Site Visits:						
	All local agencies are monitored each year.						
Desk Revi	ews:						
	All local agencies are n	nonitored each year.					
10.8. How often is each local agency monitored? Please attach a monitoring schedule if one has been developed. Annually							
10.9. How ma	10.9. How many local agencies are currently on corrective action plans? None						
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.							

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	Section 11: Timely and Meaningful Public Participation, 2605(b)(12), 2605(C)(2)							
	11.1 How did you obtain input from the public in the development of your LIHEAP plan? Select all that apply. Note: Tribes do not need to hold a public hearing but must ensure participation through other means.							
	Tribal Council meeting(s)							
	Public Hearing(s)							
	✓ Draft Plan posted to website and available for comment							
L	Hard copy of plan is available for public view and comment							
Ļ	Comments from applicants are recorded							
L	Request for comments on draft Plan is advertised							
L	Stakeholder consultation meeting(s)							
Ļ	Comments are solicited during outreach activities							
	✓ Other - Describe:							
	Meetings are held each year with the local HEAT agencies to obtain feedback on the previous HEAT season. The comments during the meeting are taken into consideration when the agency policy manual is updated. Meetings are held with HEAT agency supervisors to review program changes and updates at least quarterly.							
	Public Hearings, 2605(a)(2) - For States and the Commonwealth of Puerto Rico Only							
	11.2 List the date and location(s) that you held public hearing(s) on the proposed use and distribution of your LIHEAP funds?							
	Date Event Description							
	1 06/25/2024 FY25 HEAT Public Hearing							
	11.3. How many parties commented on your plan at the hearing(s)? 0							
	11.4 Summarize the comments you received at the hearing(s).							
	None to report							
	11.5 What changes did you make to your LIHEAP plan as a result of public participation and solicitation of input?							
	None this year							
Ħ								

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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? 26
- 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?

The majority of fair hearing requests originated from misunderstandings regarding application requirements. Upon providing clarification to the clients concerning the necessary documentation or information, we were able to proceed with the processing of their applications, which in turn resulted in the voluntary withdrawal of their fair hearing requests.

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

On every document sent to the client, it includes information on how to request a fair hearing. This is the same fair hearing information that is used for Medicaid, SNAP, TANF etc. It outlines all the numbers, addresses and everything the client would need to make a request.

12.5 When and how are applicants informed of these rights?

As soon as they submit an application with LIHEAP they receive this information.

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

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

No fund set aside for FFY26.

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

No fund set aside for FFY26.

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

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

13.5 How many households received these services?

Section 14 - Leveraging Incentive Program ,2607A

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Section 14:Leveraging Incentive Program, 2607(A)

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

O Yes

No

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

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

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

Section 15 - Training

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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:
Staff are encouraged to attend the LIHEAP annual training. This training will be in person. We identify trends in processing to provide targeted training throughout the year on an as needed basis. We will also offer in person and virtual supervisor meetings at, at least quarterly, so each agencies leadership will be able to learn from and discuss best practices from other agencies. NEADA and NEUAC conferences available to learn new ideas from other states. We participate in webinars and other virtual meetings and conferences.
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 No	
If any of the above questions require further explanation or clarification that could not be made the fields provided, attach a document with said explanation here.	in

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

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

Section 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.

We continue to improve the quality of our data collection from year to year by following instructions given by Aprise as well as reconciling and un-duplicating data before it is reported. We are fine tuning the data collected from our eligibility system, eREP, so that we get more consistent and reliable data. eREP is a great system and we are learning to work with all the options that it has. We have made many improvements with our data and are continuing to improve the quality of the data for the required reports.

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

	Section 17: Program Integrity, 2605(b)(10)									
17.1	Fraud Reporting Mechanisms	s								
a. D	escribe all mechanisms availab	ole to	the public for repo	orting cases of	f susp	pected waste, frau	id, and abuse. S	elect	all that apply.	
L	Online Fraud Reportin	g								
ŀ	Dedicated Fraud Repor	rting	Hotline							
_	Report directly to local	ager	ncy/district office o	r Grant recip	ient (office				
ŀ	Report to State Inspect	or G	eneral or Attorney	General						
ŀ	Forms and procedures	in pl	lace for local agenci	ies/district off	ices a	and vendors to re	port fraud, was	te, aı	nd abuse	
	Other - Describe:									
_	escribe strategies in place for a	adve	rtising the above-re	eferenced reso	ource	s. Select all that a	pply			
Ŀ	Printed outreach mater	rials								
Ļ	Posted in local adminis	terin	g agencies offices.							
	Addressed on LIHEAP	app	lication							
ا	Website									
L	Other - Describe:									
17.2	. Identification Documentation	ı Red	quirements							
	dicate which of the following t bers.	form	s of identification a	re required o	r req	uested to be colle	cted from LIHI	EAP	applicants or the	eir household
						Collected from	Whom?			
Тур	e of Identification Collected									,
_			Applicant Only Required			All Adults in Household Required			All Household Required	Members
III .	al Security Card is ocopied and retained		Keyuncu			Keyuncu			Ксципси	
			Requested			Requested			Requested	
									1	
	al Security Number (Without al Card)		Required			Required			Required	
			Requested			Requested			Requested	
						1		>	<u> </u>	
card			Required			Required			Required	
	driver's license, state ID, al ID, passport, etc.)		Requested			Requested			Requested	
								4		
	Other		Applicant Only Required	Applicant Or Requested		All Adults in Household Required	All Adults in Household Requested		All Household Members Required	All Household Members Requested
		_				-		┰	-	

17.3. Citiz	izenship/Legal Residency Verification					**	
What are your procedures for ensuring LIHEAP recipients are U.S. citizens or qualified non-citizens who are eligible to receive LIHEAP benefits? Select all that apply.							
V	Clients sign an attestation of citizenship or U.S. Citizenship	zen or Qualifie	d Non-Citizen				
	Client's submission of certain Social Security Admir	nistration cards	is accepted as pr	roof of U.S. Citiz	en or Qualified N	on-Citizen.	
N	Non-Citizens must provide documentation of immig	gration status					
	Citizens must provide a copy of their birth certificat	te, naturalizatio	on papers, or pass	sport			
✓ N	Non-Citizens are verified through the SAVE system	l					
П	Tribal members are verified through Tribal enrollm	nent records/Tr	ibal ID card				
	Other - Describe:						
clie	If a household is registered in the eRep system an ne, they will need to provide their SSN (not a card) and ents are known to the system because they receive som e eRep as an eligibility system.	the system will	verify the authent	ticity of the SSN a	and that it belongs	to the client. Most	
	ome Verification						
. 4	ethods does your agency utilize to verify household i		all that apply.				
<u> </u>	equire documentation of income for all adult house	hold members					
	Pay stubs						
	Social Security award letters Rank statements						
	Dank statements						
	Tax statements						
	Zero-income statements						
	✓ Unemployment Insurance letters						
	Other - Describe:						
	Self-employment worksheet						
V (Computer data matches:						
	Income information matched against state con	nputer system (e.g., SNAP, TAN	(F)			
	Proof of unemployment benefits verified with	state Departme	ent of Labor				
	Social Security income verified with SSA						
	Utilize state directory of new hires						
	Other - Describe:						
	Office of Recovery Services child support interface	ce.					
b. Describ	be any exceptions to the above policies.						
17.5 Iden	atification Verification						
Describe apply	what methods are used to verify the authenticity of	identification o	locuments provid	ded by clients or	household membe	ers. Select all that	
✓ ve	erify SSNs with Social Security Administration						
✓ M	latch SSNs with death records from Social Security	Administration	or state agency				
✓ M	latch SSNs with state eligibility/case management sy	ystem (e.g., SNA	AP, TANF)				
✓ M	latch with state Department of Labor system						
М	latch with state and/or federal corrections system						
✓ M	latch with state child support system						
U Ve	erification using private software (e.g., The Work N	Number)					
In	n-person certification by staff (for tribal Grant recip	pients only)					
М	latch SSN/Tribal ID number with tribal database or	r enrollment re	cords (for tribal (Grant recipients	only)		

>	Other - Describe:
	If a household is registered in the eRep system and they are not known to the system or they are being registered to the system for the first time, they will need to provide their SSN (not a card) and the system will verify the authenticity of the SSN and that it belongs to the client. Most clients are known to the system because they receive some other type of public assistance benefit (SNAP, TANF, Medicaid). These programs also use eRep as an eligibility system.
17.6 F	Protection of Privacy and Confidentiality
	be 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
>	20cm agencies/unitate offices
_	Employees must sign confidentiality agreement Grant recipient employees
_	orant recipient employees
>	Physical files are stored in a secure location
<u>></u>	Electronic files are protected in a secure location.
	Other - Describe:
17.7. V	erifying 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:
	We perform vendor monitroing each year for all vendors that recieve client benefits from the LIHEAP program.
17.8. E	Benefits Policy - Gas and Electric Utilities
What apply.	policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that
>	Applicants required to submit proof of physical residency
>	Applicants must submit current utility bill
>	Data exchange with utilities that verifies:
	Account ownership
	Consumption
	✓ Balances
	✓ Payment history
	Account is properly credited with benefit
	✓ Other - Describe:
	A utility bill is required to process an application to ensure accurate account information and bill amounts.
>	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
	Anymono to dandes and invoices from dimines are reviewed for accuracy

Direct payment to households are made in limited cases only
Procedures are in place to require prompt refunds from utilities in cases of account closure
Vendor agreements specify requirements selected above, and provide enforcement mechanism
Other - Describe:
17.9. Benefits Policy - Bulk Fuel Vendors
What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.
Vendors are checked against an approved vendors list
Centralized computer system/database is used to track payments to all vendors
Clients are relied on for reports of non-delivery or partial delivery
Two-party checks are issued naming client and vendor
Direct payment to households are made in limited cases only
Vendors are only paid once they provide a delivery receipt signed by the client
Conduct monitoring of bulk fuel vendors
Bulk fuel vendors are required to submit reports to the grant recipient.
Vendor agreements specify requirements selected above, and provide enforcement mechanism
Other - Describe:
17.10. Investigations and Prosecutions
Describe the Grant recipients procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients, staff, or vendors found to have committed fraud. Select all that apply.
Refer to state Inspector General
Refer to local prosecutor or state Attorney General
Refer to US DHHS Inspector General (including referral to OIG hotline)
Local agencies/district offices or Grant recipient conduct investigation of fraud complaints from public
Grant recipient attempts collection of improper payments. If so, describe the recoupment process
If fraud is detected, the funds are requested to be returned by letter. If the funds are not returned, the applicant is sanctioned and not eligible to apply for benefits until the overpayment has been paid back in full.
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? Until payment is recouped, and the length of time has been met.
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated
✓ Vendors found to have committed fraud may no longer participate in LIHEAP
✓ Other - Describe:
If a client is found to have committed fraud, depending on the severity of the offense may be required to repay the funds, not be allowed to apply for benefits for up to and including banned for life.
If any of the above questions require further explanation or clarification that could not be made in

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

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

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

Instructions for Certification

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

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

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

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

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

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

Instructions for Certification

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

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

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

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

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

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

Section 19: Certification Regarding Drug-Free Workplace Requirements

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

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

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

140 E 300 S * Address Line 1						
Address Line 2						
Address Line 3						
Salt Lake City * City	Utah * State	84111 * 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.