DETAILED MODEL PLAN (LIHEAP)

Program Name: Low Income Home Energy Assistance

Grantee Name: CNMI DEPARTMENT OF COMMUNITY AND CULTURAL AFFAIRS DCCA

Report Name: DETAILED MODEL PLAN (LIHEAP) Revision # 1

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

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

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Mandatory Grant Application SF-424

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

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

LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)

MODEL PLAN SF - 424 - MANDATORY

* 1.a. Type of Submission: Plan		* 1.b. Frequency: • Annual		* 1.c. Consolidated Application/ Plan/Funding Request? Explanation:		* 1.d. Version: Initial Resubmission Revision Update
			2. Date	Received:		State Use Only:
			3. App	licant Identifie	er:	
				ique Entity Ide ISSBCXW9	entifier (UEI)	5. Date Received By State:
			4b. Fee	deral Award Id	lentifier:	6. State Application Identifier:
7. APPLICANT IN	FORMATION		•			
* a. Legal Name: (COMMONWEALTH	OF THE NORTHERN MARIAN	A ISLAN	DS		
* b. Address:			-ii		ı.	
* Street 1:	COMMONWEA MARIANA ISLA	ALTH OF THE NORTHERN AND	Stre	eet 2:	P.O. BOX 52	234
* City:	SAIPAN, CM		Cou	inty:	MP	
* State:	MP		Pro	vince:		
* Country:	Northern Mariana	ı Islands	* Zi Code:	p / Postal	96950 -	
c. Organizationa	ıl Unit:		-ii			
Department Name: DEPARTMENT OF COMMUNITY & CULTURAL AFFAIRS			Division Name: LOW INCOME HOME ENERGY ASSISTANCE PROGRAM			
		rson to be contacted on matters i Health and Human Services' Ll				be listed on Notice of Funding
* First Name: Reselann			* Last Name: Billy-Magofna			
Title: Federal Program C	oordinator IV		Organizational Affiliation: DCCA-Low Income Home			
* Telephone Numb 6709892577	er:		Fax Number			
* Email: resel.billy@liheap.	gov.mp					
* 8. TYPE OF APP F: U.S. Territory or						
* a. Is the applica	ant a Tribal Consor	tium: O Yes O No				
* b. If yes please	attach at least one t	he following documentation:				
		Catalog of Federal Dom Assistance Number:			C	FDA Title:
9. CFDA Numbers an	nd Titles	93.568	Low-Income Home Energy Assistance Program			
	E TITLE OF APPLI E Energy Assistance I	CANT'S PROJECT: Program				
	C TED BY FUNDIN PAN, TINIAN & RO					
12. CONGRESSIO	NAL DISTRICTS (OF APPLICANT:				
13. FUNDING PER	RIOD:					
a. Start Date: 10/01/2025			b. End 09/30/2			
* 14. IS SUBMISSI	ON SUBJECT TO	REVIEW BY STATE UNDER F	EXECUT	IVE ORDER 1	2372 PROCES	SS?

a. This submission was made available to the State under Executive Order 12	2372
Process for review on:	
b. Program is subject to E.O. 12372 but has not been selected by State for re	view.
c. Program is not covered by E.O. 12372.	
*15. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?	
C YES	
© NO	
If Yes, explain:	
16. By signing this application, I certify (1) to the statements contained in the lis complete and accurate to the best of my knowledge. I also provide the required accept an award. I am aware that any false, fictitious, or fraudulent statements penalties. (U.S. Code, Title 218, Section 1001) **I Agree	assurances** and agree to comply with any resulting terms if I
** The list of certifications and assurances, or an internet site where you may of specific instructions.	btain this list, is contained in the announcement or agency
17a. Typed or Printed Name and Title of Authorized Certifying Official	17c. Telephone (area code, number and extension)
Reselann Billy-Magofna	17d. Email Address resel.billy@liheap.gov.mp
17b. Signature of Authorized Certifying Official	17e. Date Report Submitted (Month, Day, Year) 09/24/2025

Section 1 - Program Components

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

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 Componer	nts	
Pro	gram Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C)		
(No	Check which components you will operate under the LIHEAP program. te: You must provide information for each component designated here as requested elsewhere in plan.)	Dates of (Operation
		Start Date	End Date
	Heating assistance		
>	Cooling assistance	10/01/2025	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
Pro	vide further explanation for the dates of operation, if necessary		
Esti	mated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16		
	Estimate what amount of available LIHEAP funds will be used for each component that you will operate: total of all percentages must add up to 100%.	Percentage (%)	Prior year totals
Н	leating assistance	0.00%	0.00%
C	ooling assistance	86.00%	85.00%
S	ummer crisis assistance	0.00%	0.00%
V	Vinter crisis assistance	0.00%	0.00%
Y	ear-round crisis assistance	2.00%	2.00%
V	Veatherization assistance	2.00%	2.00%
C	arryover to the following federal fiscal year	0.00%	0.00%
A	dministrative and planning costs	10.00%	10.00%
S	ervices to reduce home energy needs including needs assessment (Assurance 16)	0.00%	1.00%
τ	sed to develop and implement leveraging activities	0.00%	0.00%
TOT	TAL	100.00%	100.00%

Tribal grant recipients: direct-grant tribes, tribal organizations, or territories with allotments of \$20,000 or less may use for planning and administration up to 20% of the funds payable. Grant recipients that are direct grant tribes, tribal organizations, or territories with allotments over \$20,000 may use for planning and administration purposes up to 20% of the first \$20,000 (or \$4,000) plus 10% of the funds payable that exceeds \$20,000. Any administrative costs in excess of these limits must be paid from non-federal sources.

1.3 The funds re	f Crisis Assistance Funds, 2605(c) eserved for winter crisis assistance		ended by March 15 wi	ll be reprogrammed t	o:
	Heating assistance			Cooling a	
	Weatherization as	sistance		Other (sp	ecify:)
				(1	•
Categorical Elig	gibility, 2605(b)(2)(A) - Assurance	e 2, 2605(c)(1)(A), 2605(k	o)(8A) - Assurance 8		
	ider households categorically elig	ible if at least one house	hold member receives	at least one of the foll	owing categories of benefits
	nn below? • Yes O No				
If you answered	l "Yes" to question 1.4, you must	II.	_	0	1
TANF		Heating O Yes O No	Cooling C Yes No	Crisis C Yes No	Weatherization C Yes No
		O Yes O No	• Yes • No	O Yes O No	• Yes • No
SSI			_		
SNAP		O Yes O No	O Yes O No	O Yes O No	O Yes ⊙ No
Means-tested Vet	erans Programs	C Yes C No	C Yes 💿 No	C Yes 💿 No	C Yes O No
application pro	the benefits or just one member, i cess. upplemental Security Income (SSI) matically enroll households without	is not a countable income	Therefore, the total ho	ousehold income would	
	matically enroll nousenoids witho	чи а штест аппиаг арри	Cauon: 12 1es 12 No		
If Yes, explain:					
SNAP Nominal 1.7a Do you allo If you answered 1.7b Amount of 1.7c Frequency Once Per	cate LIHEAP funds toward a nor l "Yes" to question 1.7a, you muss Nominal Assistance: \$0.00 of Assistance Year	. No differentiation in pont in benefit level with vulne with vulne with payment for SNAl	int system among inconrable household compose	ne-eligible households sition.	
	u confirm that the household rece	iving a naminal navmer	at has an energy cost of	r need?	
-	/A	g puj mor			
Determination	of Eligibility - Countable Income				
1.8. In determin	ning a household's income eligibili	ty for LIHEAP, do you	use gross income or ne	t income?	
Gross Inc	rome				
Net Incom	ne				
Other - D	escribe				
	e applicable forms of countable in	ncome used to determine	a household's income	eligibility for LIHEA	P
	e applicable forms of countable ir	ncome used to determine	a household's income	eligibility for LIHEA	P
1.9. Select all th Wages	e applicable forms of countable in	ncome used to determine	a household's income	eligibility for LIHEA	P

	Payments from mortgage or Sales Contracts							
>	Unemployment insurance							
~	Strike Pay							
>	Social Security Administration (SSA) benefits							
	☐ Including MediCare deduction Excluding MediCare deduction							
	Supplemental Security Income (SSI)							
~	Retirement / pension benefits							
	General Assistance benefits							
H	The state of the s							
	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 I	Oo you have an online application process © Yes O No
1.1	a 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
Please	e include a link(s) to a statewide application, if available:
	Application is available and may be accessed online via website:cnmidcca.org
	Applications may be submitted via email to liheap@cnmidcca.org.
1.10b	Can all program components be applied for online? Yes No
If no,	explain which components can and cannot be applied for online.
1.11 I	Oo you have a process for conducting and completing applications by phone 💽 Yes 🔘 No
1.12 I	Oo you or any of your subrecipients require in person appointments in order to apply C Yes 💽 No
If yes	please provide more information regarding why in-person appointments are required and in what circumstances they are required.
1.13 H	Now can applicants submit documentation for verification? Select all that apply:
>	In-person
>	Mail
>	Email
	Portal application
	Other, please describe

Hidden for Section 1

Section 2 - HEATING ASSISTANCE

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

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LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP) MODEL PLAN

	Section	on 2 - H	Heating Assis	stance		
Eligibility, 2605(b)(2) - Assurance 2					
2.1 Designate the	e income eligibility threshold used for the	heating co	omponent:			
Add	Household size		Eligibi	lity Guideline	Eligibility Threshold	i
1						0.00%
2.2 Do you have Heating Assistan	additional eligibility requirements for nce?	C Yes	C No			
2.3 Check the ap	propriate boxes below and describe the p	policies for	each.			
Do you require a	nn Assets test?	O Yes	O No			
If yes, describe:	Do you have additional/differing eligibili	ty policies	for:			
Renters?		C Yes	O No			
If yes, describe:						
Renters Li	ving in subsidized housing?	C Yes	O No			
If yes, describe:						
Renters wi	th utilities included in the rent?	C Yes	O No			
If yes, describe:						
Do you give prio	rity in eligibility to:					
Older Adu	lts (60 years or older)?	C Yes	C No			
If yes, describe:						
Individual	s with a disability?	C Yes	C _{No}			
If yes, describe:						
Young chil	ldren?	C Yes	O _{No}			
If yes, describe:						
Household	s with high energy burdens?	C Yes	O _{No}			
If yes, describe:						
Other?		C Yes	O No			
If yes, describe:						
Explanations of 1	policies for each "yes" checked above:					
Determination of	f Benefits 2605(b)(5) - Assurance 5, 2605	(c)(1)(B)				
2.4 Describe how etc.	you prioritize the provision of heating a	ssistance to	o vulnerable popul	ations, e.g., benefit am	ounts, early application per	iods,
2.5 Check the va	riables you use to determine your benefi	t levels. (Cl	heck all that apply):	:		
Income						
Family (hor	usehold) size					
Home ener	gy cost or need:					
Fuel	l type					
Clin	nate/region					
Indi	vidual bill					
Dwe	elling type					
Ene	rgy burden (% of income spent on home	energy)				

Energy need					
Other - Describe:					
Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)					
2.6 Describe estimated benefit levels for the fis shown in the payment matrix.	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	\$0	Maximum Benefit	\$0		
2.7 Do you provide in-kind (e.g., blankets, space	ce heaters) and/or other for	rms of benefits?0 © Yes © No			
If yes, describe.					
If yes, describe.					
If yes, describe.					

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	on 3 - (Cooling Assistance	
Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2			
3.1 Designate Th	e income eligibility threshold used for the	e Cooling	component:	
Add	Household size		Eligibility Guideline	Eligibility Threshold
1	All Household Sizes		HHS Poverty Guidelines	110.00%
3.2 Do you have a	additional eligibility requirements for ce?	C Yes	⊙ No	
3.3 Check the ap	propriate boxes below and describe the p	policies for	each.	
Do you require a	n Assets test?	C Yes	⊙ No	
If yes, describe:		<u>.e</u>		
Do you have add	litional/differing eligibility policies for:			
Renters?		C Yes	⊙ No	
If yes, describe:		<u>,=</u>		
Renters Li	ving in subsidized housing?	C Yes	⊙ No	
If yes, describe:		<u> </u>		
Ж	JD Subsidized housing recipients are not el-	igible for L	JHEAP assistance.	
Renters wi	th utilities included in the rent?	C Yes	⊙ No	
If yes, describe:				
Do you give prio	rity in eligibility to:			
Older Adu	lts (60 years or older)?	Yes	O _{No}	
	der adults household have 5-day application plication process.	a processing	g period. Also, we do outreach for our vulnerab	ole household to assist with door-
Individuals	s with a disability?	Yes	C No	
If yes, describe: Inc door-to-do	dividuals with disability have 5-day application process. Also, they fall under	tion proces er a certain	sing period. Also, we do outreach for our vulne categorized benefit level.	rable household to assist with
Young chil	dren?	Yes	C _{No}	
	ousehold with very young children are prior ategorized benefit level.	itized throu	igh 5-day application process and categorized be	enefit level. Also, they fall under
** 1.11	44.11.1 1 1 1			
	s with high energy burdens?	C Yes	● No	
If yes, describe:				
Other?		O Yes	™ No	
If yes, describe:				
	policies for each "yes" checked above:			
3.4 Describe how etc.	you prioritize the provision of cooling as	ssistance to	o vulnerable populations, e.g., benefit amou	nts, early application periods,
	is is based on the point system. Vulnerable e household have a certain benefit level.	population	n applications are within 5 working days from co	ompleted application submission.

Determination of Benefits 2605(b)(5) - Assuran	nce 5, 2605(c)(1)(B)		
3.5 Check the variables you use to determine y	your benefit levels. (Check al	l that apply):	
✓ Income			
Family (household) size			
✓ Home energy cost or need:			
Fuel type			
Climate/region			
Individual bill			
Dwelling type			
Energy burden (% of income spen	nt on home energy)		
☑ Energy need			
Other - Describe:			
			·
Benefit Levels, 2605(b)(5) - Assurance 5, 2605((c)(1)(B)		
3.6 Describe estimated benefit levels for the fis shown in the payment matrix.	scal year for which this plan	applies. Please note: the maximum and min	nimum benefits must be
Minimum Benefit	\$25	Maximum Benefit	\$85
3.7 Do you provide in-kind (e.g., fans, air cond	litioners) and/or other forms	of benefits? C Yes O No	
If yes, describe.			
If any of the above questions re the fields provided, attach a doc	_		ould not be made i

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)

	MOI	DEL PLAN			
	Section 4: CR	ISIS ASSISTANCE	2		
Eligibility - 2604	4(c), 2605(c)(1)(A)				
4.1 Designate th	e income eligibility threshold used for the crisis com	ponent			
Add	Household size	Eligibility Guideline	e	Eligibility	Threshold
1	All Household Sizes	HHS Poverty Guidelines			100.00%
	r LIHEAP program's definition for determining a c nd), Include all program definitions.	risis. If you administer multiple	crisis assista	nce programs (w	inter, summer,
	risis determination: ervice disconnection or notice of disconnection, natural	disaster-flooding, tsunami, typho	oon, man-made	e disaster and wea	ither temperature.
4.3 What constit	tutes a <u>life-threatening crisis?</u>				
	life-threatening situation is where an eligible househols an immediate risk due to the loss of the energy source levice.				
Crisis Requirem	nent, 2604(c)				
4.4 Within how	many hours do you provide an intervention that wil	l resolve the energy crisis for el	igible househ	olds? 48Hours	
4.5 Within how situations? 18H	many hours do you provide an intervention that willours	ll resolve the energy crisis for el	igible househo	olds in life-threa	tening
Crisis Eligibility	v, 2605(c)(1)(A)				
			Winter Crisis	Summer Crisis	Year-Round Crisis
4.6 Do you have	additional eligibility requirements for Crisis Assist	ance?			< < >
4.7 Check the ap	oppropriate boxes below to indicate type(s) of assistan	nce provided		•	"
Do you require	an Assets test?				V
Do you give pric	ority in eligibility to:				
Older Adı	ults (60 years or older)?				V
Individual	s with a disability?				~
Young Ch	ildren?				~
Household	ls with high energy burdens?				~
Other (Sp	ecify):				
In Order to rece	eive crisis assistance:				
Must the l	nousehold have received a shut-off notice or have a	near empty tank?			~
Must the l	nousehold have been shut off or have an empty tank	?			~
Must the l	nousehold have exhausted their regular heating ben	efit?			
Must rent	ers with heating costs included in their rent have re	ceived an eviction notice?			
Must heat	ing/cooling be medically necessary?				V

Must the househo	old have non-working heating or cooling equipment?			>		
Other (Specify):						
Do you have additional	/differing eligibility policies for:					
Renters?						
Renters living in	subsidized housing?					
	ities included in the rent?					
Explanations of policie	s for each "yes" checked above:					
conducted. We l	s been practiced, our response time for Crisis is within the same hour as application andle crisis expeditiously within 2 hours the most. Priority is based on the outcomble household member.					
Determination of Bene	iits .					
4.8 How do you handle	crisis situations?					
	Separate component					
	Benefit Fast Track, no separate amount of crisis funds is issued. Rather benefi response time frames.	ts are issued to	crisis customer	s within crisis		
	Other - Describe: As soon as a crisis application is received, assistance is expedited with a phone call to the utility company with a confirmation email.					
4.9 If you have a separa	ate component, how do you determine crisis assistance benefits?					
	Amount to resolve the crisis. \$0					
	Other - Describe: Please refer to the attached benefit matrix.					
Crisis Requirements, 2	604(c)					
4.10 Do you accept app	lications for energy crisis assistance at sites that are geographically accessible	to all househol	ds in the area to	be served?		
⊙ Yes C No Ex	plain.					
	closely with our vendor, the Commonwealth Utilities Corporation (CUC), at times applications are readily available at the utility company. We also have application					
4.11 Do you provide in	lividuals who are individuals with a disability the means to:					
Submit applications	for crisis benefits without leaving their homes?					
⊙ Yes O No						
If No, explain.						
A phone	intake can be conducted for individuals under these circumstances.					
Travel to the sites at	which applications for crisis assistance are accepted?					
C Yes O No						
If No, explain.						
Traveling	to the application sites is not necessary.					
If you answered "No" disabled?	to both options in question 4.11, please explain alternative means of intake to t	hose who are h	omebound or p	hysically		
Our Offi	ce may accomodate these individuals either over the phone or face to face by c	oming to their	homes or locati	on.		
Benefit Levels, 2605(c)	(1)(B)					
4.12 Indicate the maxim	num benefit for each type of crisis assistance offered.					
Winter Crisis	\$0.00 maximum benefit					
Summer Crisis	\$0.00 maximum benefit					
Year-round Crisis	\$500.00 maximum benefit					
	kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?					
O Yes O No If yes	, Describe					

4.14 Do you provide for equipment repair or repla • Yes O No	cement usin	g crisis func	ds?				
If you answered "Yes" to question 4.14, you must	complete qu	estion 4.15.					
4.15 Check appropriate boxes below to indicate type(s) of assistance provided.							
	Winter Crisis	Summer Crisis	Year-round Crisis				
Heating system repair							
Heating system replacement							
Cooling system repair			✓				
Cooling system replacement			✓				
Wood stove purchase							
Pellet stove purchase							
Solar panel(s)							
Utility poles / gas line hook-ups							
Other (Specify):							
4.16 Do any of the utility vendors you work with en	nforce a mo	ratorium on	n shut offs?				
C Yes O No							
If you responded "Yes" to question 4.16, you must	respond to	question 4.1	17.				
4.17 Describe the terms of the moratorium and an	y special dis	pensation re	received by LIHEAP clients during or after the moratorium period.				
4.18 If you experience a natural disaster, do you in No	tend to utili	ze LIHEAP	P crisis funds to address disaster related crisis situations? • Yes				
If yes, describe Crisis payments for utility deposits, pu individuals warm and other logistical needs to			of generators, fans and airconditions, blankets as tangible benefits to keep Disaster Response.				
If any of the above questions requithe fields provided, attach a docum		-	anation or clarification that could not be made in xplanation here.				

Section 5 - WEATHERIZATION ASSISTANCE

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

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

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

Section	on 5: WEATH	HERIZATION ASSISTAN	ICE
Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assur	rance 2		
5.1 Designate the income eligibility thresho	ld used for the Weat	herization component	
Add Househo	old Size	Eligibility Guideline	Eligibility Threshold
1 All Household Sizes		HHS Poverty Guidelines	110.00%
5.2 Do you enter into an interagency agree No	ment to have another	government agency administer a WEAT	HERIZATION component? O Yes •
5.3 If yes, name the agency and attach a co	py of the Internal Ag	reement or Contract.	
5.4 Is there a separate monitoring protocol	for weatherization?	C Yes O 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 LIHE	EAP) rules		
Mostly under LIHEAP rules with the	e following DOE WA	P rule(s) where LIHEAP and WAP rules	differ (Check all that apply):
Income Threshold			
	fourily bossins store	t is manusitted if at least (CO/ ofits (500/ in 2 % 4 mit buildings) and
eligible units or will become eligible within		ture is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are
Weatherize shelters temporaril care facilities).	y housing primarily	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	OOE 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:			
Eligibility, 2605(b)(5) - Assurance 5			
5.6 Do you require an assets test?	C Yes O No		
5.7 Do you have additional/differing eligibi	lity policies for :		
Renters	C Yes O No		
Renters living in subsidized housing?	C Yes O 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 ○ No		
House holds with high energy burdens?	C Yes O No		

Other?	○ Yes						
If you selected "Yes" for any of the options in questions 5.6, 5.7, or 5.8, you must provide further explanation of these policies in the text field below.							
5.7 Renters w/utilities included in the rent: A household who pays energy through its rent payment is fully vulnerable if the rent is increased due to the rising cost of home energy. Therefore, they are qualified if they meet the LIHEAP eligibility requirements.							
5.7 Renters living in subsidized housing: Subsidized housing program is administered by the Northern Marianas Housing Corporation (NMHC) funded by the HUD, are automatically not qualified as they do receive utility allowance automatically.							
Benefit Levels							
5.9 Do you have a maximum	LIHEAP weatherization benefit/expen	diture per household? O Yes O No					
5.9a If yes, what is the max	ximum? \$0						
5.10 Do you use an Average (Cost per Unit (ACPU). Yes 🔞 No						
5.10a If so, what is the AC	PU amount? \$0						
Types of Assistance, 2605(c)(1), (B) & (D)							
Types of Assistance, 2605(c)((1), (B) & (D)						
	(1), (B) & (D) ization measures do you provide ? (Che	eck all categories that apply.)					
	ization measures do you provide ? (Che	eck all categories that apply.) Energy related roof repair					
5.11 What LIHEAP weather	ization measures do you provide ? (Che s assessments/audits						
5.11 What LIHEAP weather	ization measures do you provide ? (Che s assessments/audits	Energy related roof repair					
5.11 What LIHEAP weather Weatherization needs Caulking and insulati Storm windows	ization measures do you provide ? (Che s assessments/audits	Energy related roof repair Major appliance repairs					
5.11 What LIHEAP weather Weatherization needs Caulking and insulati Storm windows	ization measures do you provide ? (Che s assessments/audits ion em modifications/repairs	Energy related roof repair Major appliance repairs Major appliance replacement					
5.11 What LIHEAP weather Weatherization needs Caulking and insulati Storm windows Furnace/heating syste	ization measures do you provide ? (Che s assessments/audits ion em modifications/repairs	Energy related roof repair Major appliance repairs Major appliance replacement Windows/sliding glass doors					
5.11 What LIHEAP weather Weatherization needs Caulking and insulati Storm windows Furnace/heating syste Furnace replacement	ization measures do you provide ? (Che s assessments/audits ion em modifications/repairs	Energy related roof repair Major appliance repairs Major appliance replacement Windows/sliding glass doors Doors					
5.11 What LIHEAP weather Weatherization needs Caulking and insulati Storm windows Furnace/heating syste Furnace replacement Cooling system modif	ization measures do you provide ? (Che s assessments/audits ion em modifications/repairs	Energy related roof repair Major appliance repairs Major appliance replacement Windows/sliding glass doors Doors Water Heater					
5.11 What LIHEAP weather Weatherization needs Caulking and insulati Storm windows Furnace/heating syste Furnace replacement Cooling system modif Water conservation m	ization measures do you provide ? (Ches assessments/audits ion em modifications/repairs ications/repairs neasures	Energy related roof repair Major appliance repairs Major appliance replacement Windows/sliding glass doors Doors Water Heater Cooling system replacement					

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Section 6: Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A) 6.1 Select all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance available: V Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc. V Publish articles in local newspapers or broadcast media announcements. ~ Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance. Mass mailing(s) to prior-year LIHEAP recipients. Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs. Execute interagency agreements with other low-income program offices to perform outreach to target groups. V Web Posting Email Texting Events 4 Social Media Other (specify): As part of our outreach efforts, we have informational booths at big events hosted by partnering agencies such as the Blue ribbon campaign, Domestic Violence awareness month, Elder American Month, Energy Fair and etc...

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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) CNMI Office on Aging, State Independent Living, Division of Youth Services, Nutritional Assistance Program V One - stop intake centers Other - Describe: LIHEAP office is under the auspices of the CNMI Department of Community & Cultural Affairs (DCCA). DCCA is comprised of Social Services and Cultural Preservation programs. We have established a department-wide intake and referral process within to ensure we do not duplicate services and provide the right service to each individual.

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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 How would you categorize the primary responsibility of your State agency?									
>	Administration Agency								
	Commerce Agency								
	Community Services Agency								
	Energy/Environment Agency								
	Housing Agency								
	State Department of Welfare (administers	TANF, SNAP, and/or M	Iedicaid)						
	Economic Development Agency								
	Other - Describe:								
	e current list of subrecipient name, main off umber. Used for Near hotline and OCS Servic			er, county(s) served, Cor	ngressional District, and				
	ate Outreach and Intake, 2605(b)(15) - Assu								
	selected "State Department of Welfare (adm 8.4, as applicable.	imisters TANF, SNAP,	and/or Medicaid)'' in qi	iestion 8.1, you must coi	mplete questions 8.2, 8.				
8.2 Ho	w do you provide alternate outreach and int	ake for heating assistan	ce?						
	N/A								
8.3 Ho	w do you provide alternate outreach and int	ake for cooling assistan	ce?>						
Through department-wide professional development on annual basis. LIHEAP is alloted time to present about the program to other personnel within the department for better understanding and streamlined referral and intake process.									
8.4 Ho	w do you provide alternate outreach and int	ake for crisis assistance	?						
Through department-wide professional development on annual basis. LIHEAP is alloted time to present about the program to other personnel within the department for better understanding and streamlined referral and intake process.									
8.5 LII	HEAP Component Administration.	Heating	Cooling	Crisis	Weatherization				
8.5a W	ho determines client eligibility?		State Administration Agency	State Administration Agency	State Administration Agency				
8.5b Who processes benefit payments to gas and electric vendors? State Administration Agency State Administration Agency									

1		1	1	11				
8.5c w	ho processes benefit payments to bulk fuel rs?		State Administration Agency	State Administration Agency				
	8.5d Who performs installation of weatherization measures? State Administration Agency							
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.								
	of your LIHEAP components are not centra able, 8.9.	lly-administered by a st	ate agency, you must co	mplete questions 8.6, 8.7	7, 8.8, and, if			
8.6 Wl	8.6 What is your process for selecting local administering agencies?							
	As designated by the head of state, CN	MI Governor.						
8.7 Ho	w many local administering agencies do you	use? 1						
8.8 Ha Ye No		ncies in the last year?						
8.9 If s	o, why?							
	Agency was in noncompliance with Grant r	recipient requirements f	or LIHEAP -		,			
	Agency is under criminal investigation							
	Added agency							
	Agency closed							
	Other - describe							
N/A 8.10 If a subrecipient is no longer providing LIHEAP, are you aware of prior-year LIHEAP funds being mismanaged or misspent? © Yes								
C No								
0.10	8.10a If yes, please explain. $\label{eq:N/A} N/A$							
	b If you are aware, were other federal progr erization funding, etc. O Yes O No	rams impacted such as C	CSBG, SSBG, Head Star	t, TANF, and Departme	ent of Energy			
8.10	c If yes, please explain.							
	N/A							
If an	y of the above questions requi	re further expla	nation or clarific	cation that could	not be made			

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Section 9: Energy Suppliers, 2605(b)(7) - Assurance 7 9.1 Do you make payments directly to home energy suppliers? O Yes O No Heating Yes O No Cooling Tes O No Crisis O Yes O No Are there exceptions? If yes, Describe. Payments are paid directly to the energy supplier. Commonwealth Utilities Corporation(CUC) is the sole energy supplier in the CNMI. 9.2 How do you notify the client of the amount of assistance paid? Clients are made aware of their monthly benefits upon certification. The applicant/head of household is provided with "Notifice of Disposition" which states the certification period, and benefit amount on monthly basis. 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? CUC is the sole energy provider. They have a standard accounting payment processing system for all accounts, assuring payments are posted against utility expenses with available balances for the following month bill. A certified list is send to the vendor on monthly basis for posting in each respective electric account. Once all benefits applied, an invoice is generated and billed to LIHEAP office with a confirmation note of each account being credited. All are in accordance with Vendor Agreement. 9.4 How do you assure that no household receiving assistance under this title will be treated adversely because of their receipt of LIHEAP assistance? A vendor agreement states that no LIHEAP household shall be treated adversely nor be discriminated against in services provided. 9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households? O Yes O 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 assurances.

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

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

The DCCA accountant closely monitor LIHEAP expenditures and provide financial updates. The CNMI government uses and electronic accounting and reporting system called MUNIS to keep track of expenditures on local and federal funds.

10.1a Provide your definitions of the following:

Obligation

Obligation is commitment of LIHEAP funds in specific amount to a a vendor or entity, as of September 30 of each Fiscal Year.

Expenditures

Action when payments are liquidated that were obligated as of September 30 of each fiscal year. Liquidation period in the NMI is 90 days after end of fiscal year.

Expenditure timeframe

Period when expenditure may take place within the Fiscal year (October 1-September 30)

Administrative costs

Costs of a general nature incurred in the provision of energy assistance. These costs shall include, but not limited to, Planning, budgeting and accounting.

Audit Process

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

O Yes No

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

CNMI LIHEAP is not subjected to single audit due to the level of funds we expend on yearly basis.

10.3. Describe any audit findings of the grant recipient (i.e. State/Tribe/Territory) rising to the level of material weakness or reportable condition cited in the single audits, inspector general reviews, or other government agency reviews from the most recently audited fiscal year.

No Findings 🗹

Finding	nding Type Brief Summary		Resolved?	Action Taken
1	other		Yes	

10.4. Audits of Local Administering Agencies

What types of annual audit requirements do you have in place for local administering agencies/district offices? Select all that apply.

- Local agencies/district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133
- Local agencies/district offices are required to have an annual audit (other than A-133)
- Local agencies/district offices' A-133 or other independent audits are reviewed by Grant recipient as part of compliance process.
- Grant recipient conducts fiscal and program monitoring of local agencies/district offices
- Local agencies and district offices are required to have an annual audit in compliance with Single Audit Act and OMB Circular A-133

Compliance Monitoring

10.5. Describe your monitoring process for compliance at each level below. Check all that apply.

Grant recipients have a policy in place for appropriate separation of duties and internal controls.
☑ Internal program review
Departmental oversight
Secondary review of invoices and payments
Other program review mechanisms are in place. Describe:
The CNMI LIHEAP office is administratively attached to the Department of Community & Cultural Affairs. LIHEAP consists of one Program Coordinator (responsible for the program payments and budget) and one eligibility worker. All LIHEAP functions are the responsibility of the LIHEAP Coordinator such as supervision and support services. DCCA and Department of Finance support the program, i.e. fiscal management, IT Support and investigation. There are many layers of check and balances to avoid fraud in each stage of LIHEAP financial process; Eligible household listings certified through the vendor (CUC) is also verified and matched through department of finance for payment purposes.
Local Administering Agencies/District Offices:
On - site evaluation
Annual program review
Monitoring through central database
Desk reviews
Client File Testing/Sampling
Other program review mechanisms are in place. Describe:
CNMI Central government electronic accounting system called MUNIS.
10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.
I do not have monitoring schedule available. CNMI government does have annual audits for government-wide local and federal funds. Please see the attached audit report attached.
10.7. Describe how you select local agencies for monitoring reviews. Attach a risk assessment if subrecipients are utilized.
Site Visits:
LIHEAP doesn not have a subrecipient, therefore, there is no monitor reviews in place.
Desk Reviews:
LIHEAP doesn not have a subrecipient, therefore, there is no monitor reviews in place.
10.8. How often is each local agency monitored? Please attach a monitoring schedule if one has been developed. Other
10.9. How many local agencies are currently on corrective action plans? 0
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 Me	eaningful Public Participa	ation, 2605(b)(12), 2605(C)(2)						
11.1 How did you obtain input from the public in t Note: Tribes do not need to hold a public hearing bu								
Tribal Council meeting(s)								
✓ Public Hearing(s)	V Public Hearing(s)							
Draft Plan posted to website and available	le for comment							
Hard copy of plan is available for public	view and comment							
Comments from applicants are recorded								
Request for comments on draft Plan is a	lvertised							
Stakeholder consultation meeting(s)								
Comments are solicited during outreach	activities							
Other - Describe:								
Public Hearings, 2605(a)(2) - For States and the Co	ommonwealth of Puerto Rico Only							
11.2 List the date and location(s) that you held pub	olic hearing(s) on the proposed use and d	istribution of your LIHEAP funds?						
	Date	Event Description						
1	08/21/2025	Public hearing						
2	08/29/2025	Deadline for public comments						
11.3. How many parties commented on your plan a	at the hearing(s)? 0							
11.4 Summarize the comments you received at the	hearing(s)							
-	sites on August 21, 2025 at the CNMI Rota	Youth Center and Koblerville Youth Center . A total of						
11.5 What changes did you make to your LIHEAP	plan as a result of public participation a	and solicitation of input?						
None								
If any of the above questions requi		arification that could not be made in						

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

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

None

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

The client has the right to request a fair hearing that will include client, LIHEAP Coordinator, Eligibility worker and Financial manager. The hearing must take place within 72 hours from the submission of the hearing request.

12.5 When and how are applicants informed of these rights?

The rights to a fair hearing is described on the LIHEAP application. During the intake process, applicant is made aware of their right to fair hearing, should the application is denied and steps to take.

Upon completion and certification of each application, a Notice of Disposition is provided to each applicant that entails approval or disapproval, and the right to fair hearing. All documents are handed through face to face and mailing system.

All rights to fair hearing are transmitted through documentation and verbal orientation.

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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?

Purchase energy conservation material to give out during outreach. Materials such as lightbulbs, informational materials on conservation measures.

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

With the help of the department accountanting section, they keep track on the percentages expended per component in line with approved plan.

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

Most household have opted to switch meter from postpaid meter to prepaid meter as they see the reduction of electric usage on monthly

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

None

 $\textbf{13.5 How many households received these services?} \quad 150$

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:							
In-service trainings conducted twice a year program updates and uniform processing of applications.							
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 Do	es your training program address fraud reporting and prevention?						
•	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 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.

Collection of data (household information) saved on a simple excel spreadsheet.

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Section 17: Program Integrity, 2605(b)(10)							
17.1 Fraud Reporting Mechanisms	s						
a. Describe all mechanisms availab	ole to	the public for reporting cases of	susp	ected waste, frau	d, and abuse. S	elect	all that apply.
Online Fraud Reportin	g						
Dedicated Fraud Report	rting	Hotline					
Report directly to local	agei	ncy/district office or Grant recip	ient o	office			
Report to State Inspect	or G	eneral or Attorney General					
Forms and procedures	in pl	ace for local agencies/district off	ices a	and vendors to re	port fraud, was	te, ar	nd abuse
Other - Describe:							
b. Describe strategies in place for a	adve	rtising the above-referenced reso	urce	s. Select all that a	pply		
Printed outreach mater	rials						
Posted in local adminis	terin	g agencies offices.					
Addressed on LIHEAP	app	lication					
Website							
Other - Describe:							
CUC and LIHEAP w	orks	collaboratively to ensure there is no	o dup	licate of benefit fo	or each certified l	nouse	ehold.
17.2. Identification Documentation	n Rec	quirements					
a. Indicate which of the following to members.	form	s of identification are required o	r req	uested to be colle	cted from LIHE	EAP a	applicants or their household
				Collected from	Whom?		
Type of Identification Collected		Applicant Only		All Adults in H	ousehold		All Household Members
Gardel Garanda Gardia		Required		Required			Required
Social Security Card is photocopied and retained	>		>			>	
		Requested		Requested			Requested
			4				
		Required		Required			Required
Social Security Number (Without actual Card)	4		4			4	
		Requested		Requested			Requested
G (1 11 10 10 1		Required		Required			Required
Government-issued identification card	>		>			>	
(i.e.: driver's license, state ID, Tribal ID, passport, etc.)		Requested		Requested			Requested
						A	
Other		Applicant Only Applicant On	ly	All Adults in	All Adults in		All Household

		Required	Requested	Household Required	Household Requested	Members Required	Members Requested		
1									
17.3	3. Citizenship/Legal Residency Ver	ification		l.					
	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.								
Clients sign an attestation of citizenship or U.S. Citizen or Qualified Non-Citizen									
>	Client's submission of certain Social Security Administration cards is accepted as proof of U.S. Citizen or Qualified Non-Citizen.								
>	Non-Citizens must provide documentation of immigration status								
>	Citizens must provide a copy of their birth certificate, naturalization papers, or passport								
	Non-Citizens are verified through the SAVE system								
	Tribal members are verified through Tribal enrollment records/Tribal ID card								
	Other - Describe:								
17.4	17.4. Income Verification								
_	What methods does your agency utilize to verify household income? Select all that apply.								
¥	Require documentation of income for all adult household members								
	Pay stubs								
	Social Security award le	etters							
	Bank statements								
	Tax statements								
	Zero-income statements	1							
	✓ Unemployment Insuran	ce letters							
	Other - Describe:								
	Affidavit of support for the	ose with zero-incom	e.						
	Computer data matches:								
	Income information ma	tched against state	computer system	(e.g., SNAP, TAN	F)				
	Proof of unemployment	benefits verified w	ith state Departm	ent of Labor					
	Social Security income v	verified with SSA							
	Utilize state directory of	f new hires							
	Other - Describe:								
ЬD	escribe any exceptions to the above	e nolicies							
		poneres.							
	Identification Verification cribe what methods are used to ver	rify the authoricit-	of identification	documente provide	lad by cliente on be	usahald mambana	Solort all that		
appl	y	ing the authenticity	or rachimication	aocuments provid	ica by chemis of fio	asenoia members	. Delect an that		
>	Verify SSNs with Social Securi	ty Administration							
	Match SSNs with death records	s from Social Secur	ity Administratio	n or state agency					
	Match SSNs with state eligibilit	ty/case managemen	t system (e.g., SN	AP, TANF)					
	Match with state Department of	of Labor system							
	Match with state and/or federa	l corrections systen	1						
	Match with state child support	system							
	Verification using private softw	vare (e.g., The Wor	k Number)						
	In-person certification by staff	(for tribal Grant re	ecipients only)						
	Match SSN/Tribal ID number	with tribal databas	e or enrollment ro	ecords (for tribal (Grant recipients on	ly)			
>	Other - Describe:								

Request SS card for all household members is required.
17.6. Protection of Privacy and Confidentiality
Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.
Policy in place prohibiting release of information without written consent
Grant recipient LIHEAP database includes privacy/confidentiality safeguards
Employee training on confidentiality for:
Grant recipient employees
✓ Local agencies/district offices
Employees must sign confidentiality agreement
Grant recipient employees
✓ Local agencies/district offices
Physical files are stored in a secure location
☑ Electronic files are protected in a secure location.
Other - Describe:
Culci - Describe.
17.7. Verifying the Authenticity
What policies are in place for verifying vendor authenticity? Select all that apply.
All vendors must register with the State/Tribe.
All vendors must supply a valid SSN or TIN/W-9 form
Vendors are verified through energy bills provided by the household
Grant recipient and/or local agencies/district offices perform physical monitoring of vendors
Other - Describe and note any exceptions to policies above:
Vendors are required to register on MUNIS; an accounting system.
17.8. Benefits Policy - Gas and Electric Utilities
What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.
Applicants required to submit proof of physical residency
Applicants must submit current utility bill
Data exchange with utilities that verifies:
Account ownership
Consumption
☑ Balances
✓ Payment history
Account is properly credited with benefit
Other - Describe:
Centralized computer system/database tracks payments to all utilities
Centralized computer system automatically generates benefit level
Separation of duties between intake and payment approval
Payments coordinated among other energy assistance programs to avoid duplication of payments
Payments to utilities and invoices from utilities are reviewed for accuracy
Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities
Direct payment to households are made in limited cases only
Procedures are in place to require prompt refunds from utilities in cases of account closure
1 roccounts are in place to require prompt retuines from admites 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					
Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? 1 year					
Contracts with local agencies require that employees found to have committed fraud are reprimanded and/or terminated					
Vendors found to have committed fraud may no longer participate in LIHEAP					
Other - Describe:					
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.					

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

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

Instructions for Certification

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

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

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

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

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

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

Instructions for Certification

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

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

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

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

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

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

Section 19: Certification Regarding Drug-Free Workplace Requirements

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

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

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

1359 Achu Street, Capitol Hill * Address Line 1							
Low Income Home Energy Assistance Program Address Line 2							
CNMI Department of Community & Cultural Affairs Address Line 3							
Saipan * City	MP * State	96950 * 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.					