

DETAILED MODEL PLAN (LIHEAP)

Mandatory Grant Application SF-424

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

August 1987, revised 05/92,02/95,03/96,12/98,11/01
OMB Clearance No.: 0970-0075
Expiration Date: 06/30/2017

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

* 1.a. Type of Submission: <input checked="" type="radio"/> Plan	* 1.b. Frequency: <input checked="" type="radio"/> Annual	* 1.c. Consolidated Application/Plan/Funding Request? Explanation:	* 1.d. Version: <input checked="" type="radio"/> Initial <input type="radio"/> Resubmission <input type="radio"/> Revision <input type="radio"/> Update
		2. Date Received:	State Use Only:
		3. Applicant Identifier:	
		4a. Federal Entity Identifier:	5. Date Received By State:
		4b. Federal Award Identifier:	6. State Application Identifier:

7. APPLICANT INFORMATION

* a. Legal Name: State of Hawaii			
* b. Employer/Taxpayer Identification Number (EIN/TIN): I-9960001081-A6		* c. Organizational DUNS: 824671176	
* d. Address:			
* Street 1:	P.O. BOX 339	Street 2:	
* City:	HONOLULU	County:	
* State:	HI	Province:	
* Country:	United States	* Zip / Postal Code:	96813

e. Organizational Unit:

Department Name: Human Services	Division Name: Benefit Employment and Support Services Division
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f. Name and contact information of person to be contacted on matters involving this application:

Prefix: MRS	* First Name: Teri Ann	Middle Name:	* Last Name: Escudero
Suffix:	Title: LIHEAP Coordinator	Organizational Affiliation:	
* Telephone Number: (808) 586-5734 Ext.	Fax Number: 808-586-5744	* Email: tescudero@dhs.hawaii.gov	

* 8a. TYPE OF APPLICANT: A: State Government

b. Additional Description:

* 9. Name of Federal Agency:

	Catalog of Federal Domestic Assistance Number:	CFDA Title:
10. CFDA Numbers and Titles	93568	Low-Income Home Energy Assistance

11. Descriptive Title of Applicant's Project LIHEAP Coordinator

12. Areas Affected by Funding: State of Hawaii

13. CONGRESSIONAL DISTRICTS OF:

* a. Applicant HI	b. Program/Project: Statewide
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Attach an additional list of Program/Project Congressional Districts if needed.

14. FUNDING PERIOD:		15. ESTIMATED FUNDING:	
a. Start Date: 10/01/2015	b. End Date: 09/30/2016	* a. Federal (\$): \$0	b. Match (\$): \$0

*** 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?**

a. This submission was made available to the State under the 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.

*** 17. Is The Applicant Delinquent On Any Federal Debt?**

YES

NO

Explanation:

18. By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

****I Agree**

**** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.**

18a. Typed or Printed Name and Title of Authorized Certifying Official Teri Escudero	18c. Telephone (area code, number and extension) (808) 586- 5734 Ext.
	18d. Email Address tescudero@dhs.hawaii.gov
18b. Signature of Authorized Certifying Official 	18e. Date Report Submitted (Month, Day, Year) 08/27/2015

Attach supporting documents as specified in agency instructions.

Section 1 - Program Components

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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Department of Health and Human Services
Administration for Children and Families
Office of Community Services
Washington, DC 20447

August 1987, revised 05/92, 02/95, 03/96, 12/98, 11/01
OMB Approval No. 0970-0075
Expiration Date: 02/28/2005

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Use of this model plan is optional. However, the information requested is required in order to receive a Low Income Home Energy Assistance Program (LIHEAP) grant in years in which the grantee is not permitted to file an abbreviated plan. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Section 1 Program Components

Program Components, 2605(a), 2605(b)(1) - Assurance 1, 2605(c)(1)(C)

1.1 Check which components you will operate under the LIHEAP program. (Note: You must provide information for each component designated here as requested elsewhere in this plan.)		Dates of Operation	
		Start Date	End Date
<input type="checkbox"/>	Heating assistance		
<input checked="" type="checkbox"/>	Cooling assistance	05/01/2016	06/30/2016
<input checked="" type="checkbox"/>	Crisis assistance	10/01/2015	09/30/2016
<input type="checkbox"/>	Weatherization assistance		

Provide further explanation for the dates of operation, if necessary

Cooling assistance application period is open for one month, June. The month of May is for training and preparation for the month of application.

Estimated Funding Allocation, 2604(C), 2605(k)(1), 2605(b)(9), 2605(b)(16) - Assurances 9 and 16

1.2 Estimate what amount of available LIHEAP funds will be used for each component that you will operate: The total of all percentages must add up to 100%.	Percentage (%)
Heating assistance	0.00%
Cooling assistance	65.00%
Crisis assistance	15.00%
Weatherization assistance	0.00%
Carryover to the following federal fiscal year	10.00%
Administrative and planning costs	10.00%
Services to reduce home energy needs including needs assessment (Assurance 16)	0.00%
Used to develop and implement leveraging activities	0.00%
TOTAL	100.00%

Alternate Use of Crisis Assistance Funds, 2605(c)(1)(C)

1.3 The funds reserved for winter crisis assistance that have not been expended by March 15 will be reprogrammed to:

<input type="checkbox"/>	Heating assistance	<input checked="" type="checkbox"/>	Cooling assistance
<input type="checkbox"/>	Weatherization assistance	<input type="checkbox"/>	Other (specify):

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 one household member receives one of the following categories of benefits in the left column below? Yes No

If you answered "Yes" to question 1.4, you must complete the table below and answer questions 1.5 and 1.6.

	Heating	Cooling	Crisis	Weatherization
TANF	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
SSI	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
SNAP	<input type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Means-tested Veterans Programs	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

	Program Name	Heating	Cooling	Crisis	Weatherization
Other(Specify) 1		<input type="radio"/> Yes <input type="radio"/> No			

1.5 Do you automatically enroll households without a direct annual application? Yes No

If Yes, explain:

1.6 How do you ensure there is no difference in the treatment of categorically eligible households from those not receiving other public assistance when determining eligibility and benefit amounts?

There is no difference between income eligible and categorical eligible households in the setting of payment amounts. In crisis assistance, payment is issued according to the alleviation amount as verified by the utility company to restore service, with the same maximum payment for both groups. For cooling assistance, households not in public/subsidized housing with the lowest poverty levels of income receive the highest payments without consideration of categorical status. To provide relief to verify income for LIHEAP categorical households; the State assigns the amount of annual income equal to welfare grant amounts and SNAP income limits.

SNAP Nominal Payments

1.7a Do you allocate LIHEAP funds toward a nominal payment for SNAP households? Yes No

If you answered "Yes" to question 1.7a, you must provide a response to questions 1.7b, 1.7c, and 1.7d.

1.7b Amount of Nominal Assistance: \$0

1.7c Frequency of Assistance

<input type="checkbox"/>	Once Per Year
<input type="checkbox"/>	Once every five years
<input type="checkbox"/>	Other - Describe:

1.7d How do you confirm that the household receiving a nominal payment has an energy cost or need?

Determination of Eligibility - Countable Income

1.8. In determining a household's income eligibility for LIHEAP, do you use gross income or net income ?

<input checked="" type="checkbox"/>	Gross Income
<input type="checkbox"/>	Net Income

1.9. Select all the applicable forms of countable income used to determine a household's income eligibility for LIHEAP

<input checked="" type="checkbox"/>	Wages
<input checked="" type="checkbox"/>	Self - Employment Income
<input checked="" type="checkbox"/>	Contract Income
<input checked="" type="checkbox"/>	Payments from mortgage or Sales Contracts
<input checked="" type="checkbox"/>	Unemployment insurance

<input checked="" type="checkbox"/>	Strike Pay		
<input checked="" type="checkbox"/>	Social Security Administration (SSA) benefits		
<input checked="" type="checkbox"/>	Including MediCare deduction	<input type="checkbox"/>	Excluding MediCare deduction
<input checked="" type="checkbox"/>	Supplemental Security Income (SSI)		
<input checked="" type="checkbox"/>	Retirement / pension benefits		
<input checked="" type="checkbox"/>	General Assistance benefits		
<input checked="" type="checkbox"/>	Temporary Assistance for Needy Families (TANF) benefits		
<input type="checkbox"/>	Supplemental Nutrition Assistance Program (SNAP) benefits		
<input type="checkbox"/>	Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits		
<input type="checkbox"/>	Loans that need to be repaid		
<input checked="" type="checkbox"/>	Cash gifts		
<input type="checkbox"/>	Savings account balance		
<input checked="" type="checkbox"/>	One-time lump-sum payments, such as rebates/credits, winnings from lotteries, refund deposits, etc.		
<input checked="" type="checkbox"/>	Jury duty compensation		
<input checked="" type="checkbox"/>	Rental income		
<input checked="" type="checkbox"/>	Income from employment through Workforce Investment Act (WIA)		
<input type="checkbox"/>	Income from work study programs		
<input checked="" type="checkbox"/>	Alimony		
<input checked="" type="checkbox"/>	Child support		
<input checked="" type="checkbox"/>	Interest, dividends, or royalties		
<input checked="" type="checkbox"/>	Commissions		
<input checked="" type="checkbox"/>	Legal settlements		
<input checked="" type="checkbox"/>	Insurance payments made directly to the insured		
<input type="checkbox"/>	Insurance payments made specifically for the repayment of a bill, debt, or estimate		
<input checked="" type="checkbox"/>	Veterans Administration (VA) benefits		
<input type="checkbox"/>	Earned income of a child under the age of 18		
<input type="checkbox"/>	Balance of retirement, pension, or annuity accounts where funds cannot be withdrawn without a penalty.		
<input type="checkbox"/>	Income tax refunds		

<input checked="" type="checkbox"/>	Stipends from senior companion programs, such as VISTA
<input checked="" type="checkbox"/>	Funds received by household for the care of a foster child
<input checked="" type="checkbox"/>	Ameri-Corp Program payments for living allowances, earnings, and in-kind aid
<input type="checkbox"/>	Reimbursements (for mileage, gas, lodging, meals, etc.)
<input type="checkbox"/>	Other

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 2 - HEATING ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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**LOW INCOME HOME ENERGY ASSISTANCE PROGRAM(LIHEAP)
 MODEL PLAN
 SF - 424 - MANDATORY**

Section 2 - Heating Assistance

Eligibility, 2605(b)(2) - Assurance 2

2.1 Designate the income eligibility threshold used for the heating component:

Add	Household size	Eligibility Guideline	Eligibility Threshold
1			0.00%

2.2 Do you have additional eligibility requirements for HEATING ASSISTANCE? Yes No

2.3 Check the appropriate boxes below and describe the policies for each.

Do you require an Assets test ? Yes No

Do you have additional/differing eligibility policies for:

- Renters? Yes No
- Renters Living in subsidized housing ? Yes No
- Renters with utilities included in the rent ? Yes No

Do you give priority in eligibility to:

- Elderly? Yes No
- Disabled? Yes No
- Young children? Yes No
- Households with high energy burdens ? Yes No
- Other? Yes No

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, etc.

2.5 Check the variables you use to determine your benefit levels. (Check all that apply):

- Income
- Family (household) size
- Home energy cost or need:
 - Fuel type
 - Climate/region
 - Individual bill
 - Dwelling type
 - Energy burden (% of income 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 FY 2016:

Minimum Benefit	\$0	Maximum Benefit	\$0
2.7 Do you provide in-kind (e.g., blankets, space heaters) and/or other forms of benefits? <input type="radio"/> Yes <input type="radio"/> No			
If yes, describe.			
If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.			

Section 3 - COOLING ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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Section 3 - Cooling Assistance

Eligibility, 2605(c)(1)(A), 2605 (b)(2) - Assurance 2

3.1 Designate The income eligibility threshold used for the Cooling componenet:

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

3.2 Do you have additional eligibility requirements for COOLING ASSISTANCE? Yes No

3.3 Check the appropriate boxes below and describe the policies for each.

Do you require an Assets test ? Yes No

Do you have additional/differing eligibility policies for:

Renters? Yes No

Renters Living in subsidized housing ? Yes No

Renters with utilities included in the rent ? Yes No

Do you give priority in eligibility to:

Elderly? Yes No

Disabled? Yes No

Young children? Yes No

Households with high energy burdens ? Yes No

Other? other requirements listed below Yes No

Explanations of policies for each "yes" checked above:

Additional eligibility requirements for Cooling assistance:

1. A household must provide a current utility expense from a P.U.C. regulated company and proof of residence. Applications must be submitted by the person whose name appears on the utility bill or the applicant must provide written authorization, from the individual whose name is printed on the bill, to act on their behalf. The applicant must be the person who is responsible for paying the cost of energy for the household.
2. When a payment for energy undesignated in the form of rent, the household shall submit a current utility bill and bonafide rental or lease agreement or Hawaii Housing Authority statement for the address listed on the utility bill.
3. Identification for all adults in the household are required. If the utility bill is not in the applicant's name, identification of the individual on the utility bill will be required; unless the provider is the Hawaii Housing Authority or any other known private vendor. i.e. Hale Mahaolu.
4. All household members must be a U.S. Citizen or "qualified alien" as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA).
5. Applicant and household members older than one year must provide and verify their social security numbers.
6. All adult household members must sign the application form.
7. Household's must declare and provided verification of annual income in a reasonable amount greater than their expenditures for the same period. The contracted provider shall assist the household to develop the verification.
8. Households must keep their utility account active at the utility company for which they are requesting assistance until the day the utility company posts the credit to their account. If for any reason the utility company cannot locate or identify an active account for the household in its computer files, assistance shall not be issued and the household shall be ineligible for assistance.
9. All applications must be submitted by the last work day of the application period.
10. Households shall not be entitled to receive more than one LIHEAP payment (crisis or energy credit) per federal fiscal year.
11. The applicant and other adult household member(s) may be sanctioned for mis-representing their household circumstance that resulted in the household's ineligibility for one federal fiscal year. Household circumstances include but are not limited to household size and income.

12. The applicant must have a charge for kilowatt usage on a net metering bill to be eligible for a LIHEAP credit.

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

Households not in public/subsidized housing or households with a photovoltaic system are assigned an additional vulnerability point when the household consists of a child five or younger; an adult 60 years and older; or a disabled individual.

Determination of Benefits 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

3.5 Check the variables you use to determine your benefit levels. (Check all that apply):

- Income**
- Family (household) size**
- Home energy cost or need:**
 - Fuel type**
 - Climate/region**
 - Individual bill**
 - Dwelling type**
 - Energy burden (% of income spent on home energy)**
 - Energy need**
- Other - Describe:**

Benefit level for households in public/subsidized housing will be based on their household size as follows. Household size 1-2, \$350; Household size 3-5, \$400; Household size 6+, \$450 *Benefits are subject to change in the event federal appropriations are increased or decreased.

Benefit level for households with a photovoltaic system whose net metering bill reflects kilowatt usage in excess of generation will be based on their household size as follows. Household size 1-2, \$350; Household size 3-5, \$400; Household size 6+, \$450 *Benefits are subject to change in the event federal appropriations are increased or decreased.

Benefit levels for households in public/subsidized housing are varied according to points assigned to a household based on three income levels; three levels of household size; two levels or regions; energy burden; and vulnerability of household members.

Income Limits: 1 point for income up to 150% of the FPL; 2 points for income up to 100% of the FPL; 3 points for income up to 50% of the FPL.

Household size: 1 point: 1-2 persons; 2 points: 3-5 persons; 3 points: 6 or more persons

Regions: 1 point of Oahu, 2 points for Kauai, Maui (Molokai and Lanai) and Hawaii Island

Benefit Levels, 2605(b)(5) - Assurance 5, 2605(c)(1)(B)

3.6 Describe estimated benefit levels for FY 2016:

Minimum Benefit	\$350	Maximum Benefit	\$1,560
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3.7 Do you provide in-kind (e.g., fans, air conditioners) and/or other forms of benefits? Yes No

If yes, describe.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 4 - CRISIS ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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Section 4: CRISIS ASSISTANCE

Eligibility - 2604(c), 2605(c)(1)(A)

4.1 Designate the income eligibility threshold used for the crisis component

Add	Household size	Eligibility Guideline	Eligibility Threshold
1	All Household Sizes	HHS Poverty Guidelines	150.00%

4.2 Provide your LIHEAP program's definition for determining a crisis.

Utility power at the household's current residence has been terminated with 60 days from the date of application or will be terminated within seven days of application because of nonpayment of bill.

4.3 What constitutes a life-threatening crisis?

Utility power at the household's current residence will be terminated within seven days of the date of application and termination of power will result in a medical crisis leading to the endangerment of life.

Crisis Requirement, 2604(c)

4.4 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households? 48Hours

4.5 Within how many hours do you provide an intervention that will resolve the energy crisis for eligible households in life-threatening situations? 18Hours

Crisis Eligibility, 2605(c)(1)(A)

4.6 Do you have additional eligibility requirements for CRISIS ASSISTANCE? Yes No

4.7 Check the appropriate boxes below and describe the policies for each

Do you require an Assets test ? Yes No

Do you give priority in eligibility to :

Elderly? Yes No

Disabled? Yes No

Young Children? Yes No

Households with high energy burdens? Yes No

Other? Yes No

In Order to receive crisis assistance:

Must the household have received a shut-off notice or have a near empty tank? Yes No

Must the household have been shut off or have an empty tank? Yes No

Must the household have exhausted their regular heating benefit? Yes No

Must renters with heating costs included in their rent have received an eviction notice ? Yes No

Must heating/cooling be medically necessary? Yes No

Must the household have non-working heating or cooling equipment? Yes No

Other? Yes No

Do you have additional / differing eligibility policies for:

Renters? Yes No

Renters living in subsidized housing?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Renters with utilities included in the rent?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Explanations of policies for each "yes" checked above:	
<p>Additional Requirements:</p> <ol style="list-style-type: none"> 1. Households shall provide a current shut-off notice from a P.U.C. regulated company as well as documented verification that as of the date of application the household resides at the service address on the shut-off notice. 2. Application must be submitted by the person whose name appears on the utility bill or the applicant must provide written authorization, from the individual whose name is printed on the bill, to act on their behalf. The applicant must be the person who is responsible for paying the cost of energy for the household. 3. Identification of all adults in the household is required. If the utility bill is not in the applicant's name, identification of the individual on the utility bill will be required, unless the provider is the Hawaii Housing Authority or any other known private vendor. i.e Hale Mahaolu. 4. Applicants and all household members older than one year must provide and verify their social security numbers. 5. All adult members must sign the application. 6. Applicant and all household members be a U.S. Citizen or "qualified alien" as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Action of 1996 (PRWORA). 7. Household's must declare and provide verification of annual income in a reasonable amount greater than their expenditures for the same time period. The Community Action provider can assist the household to develop the verification. 8. The household must have an approved payment plan with the Utility Company for any outstanding balance in excess of LIHEAP's maximum payment of \$350. 9. The Utility Company agree that utility power would be restored at the current residence of the household if crisis assistance is approved. 10. The household shall not be entitled to receive more than one (crisis or energy credit) LIHEAP payment per federal fiscal year. 11. Applicant and other adult household members have not been sanctioned for misrepresenting their household's circumstance that resulted in a household's ineligibility for one federal fiscal year. Household circumstances include but are not limited to household size and income. 	
Determination of Benefits	
4.8 How do you handle crisis situations?	
<input checked="" type="checkbox"/>	Separate component
<input type="checkbox"/>	Fast Track
<input checked="" type="checkbox"/>	Other - Describe: Determine crisis situations by amount needed to resolve the crisis up to a maximum.
4.9 If you have a separate component, how do you determine crisis assistance benefits?	
<input checked="" type="checkbox"/>	Amount to resolve the crisis.
<input checked="" type="checkbox"/>	Other - Describe: Payments are based upon the past amount and any current outstanding charge, not to exceed the maximum of \$350*. This payment does not have any exclusions. *This payment is subject to change according to increases or reductions of federal appropriations. Payments shall be issued to the Utility Company.
Crisis Requirements, 2604(c)	
4.10 Do you accept applications for energy crisis assistance at sites that are geographically accessible to all households in the area to be served?	
<input checked="" type="radio"/> Yes <input type="radio"/> No Explain.	
All contractors have sites available for applications to be submitted. If not available, applications are done electronically or via telephone.	
4.11 Do you provide individuals who are physically disabled the means to:	
Submit applications for crisis benefits without leaving their homes?	
<input checked="" type="radio"/> Yes <input type="radio"/> No If No, explain.	
Travel to the sites at which applications for crisis assistance are accepted?	
<input type="radio"/> Yes <input checked="" type="radio"/> No If No, explain.	
If you answered "No" to both options in question 4.11, please explain alternative means of intake to those who are homebound or physically disabled?	
Applicants can submit an application via email, fax, or USPS.	

No travel services provided for the applicant to come to the office, but the local office staff will go to the applicant if there is a need.

Benefit Levels, 2605(c)(1)(B)

4.12 Indicate the maximum benefit for each type of crisis assistance offered.

Winter Crisis \$0 maximum benefit

Summer Crisis \$0 maximum benefit

Year-round Crisis \$350 maximum benefit

4.13 Do you provide in-kind (e.g. blankets, space heaters, fans) and/or other forms of benefits?

Yes No If yes, Describe

4.14 Do you provide for equipment repair or replacement using crisis funds?

Yes No

If you answered "Yes" to question 4.14, you must complete question 4.15.

4.15 Check appropriate boxes below to indicate type(s) of assistance provided.

	Winter Crisis	Summer Crisis	Year-round Crisis
Heating system repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heating system replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling system repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling system replacement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood stove purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pellet stove purchase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solar panel(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility poles / gas line hook-ups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.16 Do any of the utility vendors you work with enforce a moratorium on shut offs?

Yes No

If you responded "Yes" to question 4.16, you must respond to question 4.17.

4.17 Describe the terms of the moratorium and any special dispensation received by LIHEAP clients during or after the moratorium period.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 5 - WEATHERIZATION ASSISTANCE

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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OMB Clearance No.: 0970-0075
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Section 5: WEATHERIZATION ASSISTANCE

Eligibility, 2605(c)(1)(A), 2605(b)(2) - Assurance 2

5.1 Designate the income eligibility threshold used for the Weatherization component

Add	Household Size	Eligibility Guideline	Eligibility Threshold
1			0.00%

5.2 Do you enter into an interagency agreement to have another government agency administer a WEATHERIZATION component? Yes No

5.3 If yes, name the agency.

5.4 Is there a separate monitoring protocol for weatherization? Yes No

WEATHERIZATION - Types of Rules

5.5 Under what rules do you administer LIHEAP weatherization? (Check only one.)

- Entirely under LIHEAP (not DOE) rules
- Entirely under DOE WAP (not LIHEAP) rules
- Mostly under LIHEAP rules with the following DOE WAP rule(s) where LIHEAP and WAP rules differ (Check all that apply):
 - Income Threshold
 - Weatherization of entire multi-family housing structure is permitted if at least 66% of units (50% in 2- & 4-unit buildings) are eligible units or will become eligible within 180 days
 - Weatherize shelters temporarily housing primarily low income persons (excluding nursing homes, prisons, and similar institutional care facilities).
 - Other - Describe:
- Mostly under DOE WAP rules, with the following LIHEAP rule(s) where LIHEAP and WAP rules differ (Check all that apply.)
 - Income Threshold
 - Weatherization not subject to DOE WAP maximum statewide average cost per dwelling unit.
 - Weatherization measures are not subject to DOE Savings to Investment Ratio (SIR) standards.
 - Other - Describe:

Eligibility, 2605(b)(5) - Assurance 5

5.6 Do you require an assets test? Yes No

5.7 Do you have additional/differing eligibility policies for :

Renters Yes No

Renters living in subsidized housing? Yes No

5.8 Do you give priority in eligibility to:

Elderly? Yes No

Disabled? Yes No

Young Children? Yes No

House holds with high energy burdens? Yes No

Other? 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.

Benefit Levels

5.9 Do you have a maximum LIHEAP weatherization benefit/expenditure per household? Yes No

5.10 If yes, what is the maximum? \$0

Types of Assistance, 2605(c)(1), (B) & (D)

5.11 What LIHEAP weatherization measures do you provide ? (Check all categories that apply.)

<input type="checkbox"/> Weatherization needs assessments/audits	<input type="checkbox"/> Energy related roof repair
<input type="checkbox"/> Caulking and insulation	<input type="checkbox"/> Major appliance Repairs
<input type="checkbox"/> Storm windows	<input type="checkbox"/> Major appliance replacement
<input type="checkbox"/> Furnace/heating system modifications/ repairs	<input type="checkbox"/> Windows/sliding glass doors
<input type="checkbox"/> Furnace replacement	<input type="checkbox"/> Doors
<input type="checkbox"/> Cooling system modifications/ repairs	<input type="checkbox"/> Water Heater
<input type="checkbox"/> Water conservation measures	<input type="checkbox"/> Cooling system replacement
<input type="checkbox"/> Compact florescent light bulbs	<input type="checkbox"/> 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 6 - Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)

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Section 6: Outreach, 2605(b)(3) - Assurance 3, 2605(c)(3)(A)

6.1 Select all outreach activities that you conduct that are designed to assure that eligible households are made aware of all LIHEAP assistance available:

- Place posters/flyers in local and county social service offices, offices of aging, Social Security offices, VA, etc.
- Publish articles in local newspapers or broadcast media announcements.
- Include inserts in energy vendor billings to inform individuals of the availability of all types of LIHEAP assistance.
- Mass mailing(s) to prior-year LIHEAP recipients.
- Inform low income applicants of the availability of all types of LIHEAP assistance at application intake for other low-income programs.
- Execute interagency agreements with other low-income program offices to perform outreach to target groups.

Other (specify):

Send LIHEAP flyers to agencies that assist the elderly and disabled individuals to inform them of the start of LIHEAP and the program requirements.
Request that Utility companies encourage their customers to apply for LIHEAP.
Utility company provided applications to those interested in LIHEAP at their office.
Utility companies include LIHEAP reminders with bills and in a newsletter they provide customers.
Utility companies provide literature, freebies, and provide personnel to assist contractor's efforts in promoting LIHEAP benefits and performance measures.
Provide pamphlet to all organizations or individuals who work with the needy populations who request information.
Local contractors use radio and local newspapers to inform the public of LIHEAP application period and requirements.
Local contractors work review LIHEAP requirements with their clients in their other programs.
In remote areas, contracted community agencies will go door to door educating people about LIHEAP and encouraging them to apply for the program.

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 7 - Coordination, 2605(b)(4) - Assurance 4

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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.).

<input type="checkbox"/>	Joint application for multiple programs
<input type="checkbox"/>	Intake referrals to/from other programs
<input type="checkbox"/>	One - stop intake centers
<input checked="" type="checkbox"/>	Other - Describe:

Grantee coordinates LIHEAP with the SNAP, TANF, SSI and low-income weatherization programs. These programs are encouraged to inform, educate and refer their customers to LIHEAP. Grantee also works with P.U.C. in coordinating their programs with LIHEAP. Community Action provider agencies refer and coordinate with other existing federal, state and local low income home energy related programs to share data when not prohibited by law for LIHEAP. Grantee works with the utility companies to coordinate programs that the utility company can establish to assist LIHEAP households.

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 8 - Agency Designation,, 2605(b)(6) - Assurance 6

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Section 8: Agency Designation, 2605(b)(6) - Assurance 6 (Required for state grantees and the Commonwealth of Puerto Rico)

8.1 How would you categorize the primary responsibility of your State agency?

<input checked="" type="checkbox"/>	Administration Agency
<input type="checkbox"/>	Commerce Agency
<input type="checkbox"/>	Community Services Agency
<input type="checkbox"/>	Energy / Environment Agency
<input type="checkbox"/>	Housing Agency
<input type="checkbox"/>	Welfare Agency
<input checked="" type="checkbox"/>	Other - Describe: LIHEAP coordinator is administratively attached to the Department of Human Services, Benefit,Employment & Support Services Division (BESSD) that is responsible for the State's welfare program. LIHEAP's policies and procedures are developed by the LIHEAP coordinator but the intake of applications and eligibility determination is completed by community agencies on each island

Alternate Outreach and Intake, 2605(b)(15) - Assurance 15

If you selected "Welfare Agency" in question 8.1, you must complete questions 8.2, 8.3, and 8.4, as applicable.

8.2 How do you provide alternate outreach and intake for HEATING ASSISTANCE?

8.3 How do you provide alternate outreach and intake for COOLING ASSISTANCE?

Contracted Community Service agencies provide information about the energy assistance program including basic eligibility rules, assist applicants in completing the application, copy all required verifications and documentation, and make provisions for applicants who are homebound to receive the same services by utilizing home visits. Community agencies will make arrangements with senior centers and community centers to intake applications on site. Community agencies also go door to door in public housing complexes to inform households of LIHEAP.

8.4 How do you provide alternate outreach and intake for CRISIS ASSISTANCE?

Contracted Community Service agencies provide information about the energy assistance program including basic eligibility rules, assist applicants in completing the application, copy all required verifications and documentation, and make provisions for applicants who are homebound to receive the same services by utilizing home visits. Utility companies will also inform customers of LIHEAP and refer to community agencies for assistance.

8.5 LIHEAP Component Administration.	Heating	Cooling	Crisis	Weatherization
8.5a Who determines client eligibility?	Non-Applicable	Community Action Agencies	Community Action Agencies	Non-Applicable
8.5b Who processes benefit payments to gas and electric vendors?	Non-Applicable	Other	Other	
8.5c who processes benefit payments to bulk fuel vendors?	Non-Applicable	Non-Applicable	Non-Applicable	
8.5d Who performs installation of weatherization measures?				Non-Applicable

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?

LIHEAP has an exemption from the Hawaii procurement process as LIHEAP laws required a condition for state grantees to receive LIHEAP funds, the Governor shall assure that special consideration be give only to local non-profit agencies which 1) were receiving federal funds under any low income energy assistance or weatherization program under the Economic Opportunity Act of 1964, and 2) have the capacity to undertake a timely and effective energy crisis intervention program and the ability to carry out the program in the local community. These are only four such community action agencies (HCAP for Oahu, HCEOC for Hawaii, MEO for Maui which includes the islands of Molokai and Lanai, and KEO for Kauai). They are the only agencies who meet the criteria and are selected to administer LIHEAP.

8.7 How many local administering agencies do you use? 4

8.8 Have you changed any local administering agencies in the last year?

- Yes
- No

8.9 If so, why?

<input type="checkbox"/>	Agency was in noncompliance with grantee requirements for LIHEAP -
<input type="checkbox"/>	Agency is under criminal investigation
<input type="checkbox"/>	Added agency
<input type="checkbox"/>	Agency closed
<input type="checkbox"/>	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 9 - Energy Suppliers,, 2605(b)(7) - Assurance 7

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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 No

Cooling Yes No

Crisis Yes No

Are there exceptions? Yes No

If yes, Describe.

9.2 How do you notify the client of the amount of assistance paid?

For energy credit at the time the State forwards the payment to the utility companies, a notice of disposition is sent to inform the household of the amount sent to the utility company on their behalf. It also advises the household to confirm the payment was applied to their account by reviewing their next utility bill.

For crisis once the amount owed is confirmed with the utility company a disposition notice is provided to the applicant and the utility company.

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?

For both components, cooling and crisis, Memorandum of Agreements (MOA) are established with five Public Utility Companies (PUC) supplying residential energy in Hawaii. Utility companies use standard accounting payment processing systems for subscriber accounts, assuring payment processing systems for subscriber accounts, and assuring payments are posted against utility expenses with available balances for the following month's bill.

The utility companies must also make staff available to assist LIHEAP customers with balance inquiries.

Notices sent to eligible customers informing them of their benefit amount. If the benefit amount is different from the credited amount the name and phone number of the LIHEAP agencies are listed on the notice for inquiries.

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 MOA states that no LIHEAP household is neither treated adversely nor be discriminated against in cost of goods or services provided.

9.5. Do you make payments contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households?

Yes No

If so, describe the measures unregulated vendors may take.

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

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

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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 LIHEAP funds?

Community action provider agencies electronically submit names of eligible households to the State office. These files are merged into a State file for additional checks of duplicate case files. After all checks are completed a listing of all eligible customers are sent to the Department's Fiscal Office and the State's Department of Budget and Finance Office for processing.

The Department of Human Services fiscal office follows standard accounting procedures for all federal programs, including LIHEAP, the office uses State accounting manuals of the Department of Accounting and General Services and the statewide Financial Accounting and Management Information System (FAMIS).

Department accounting staff is not part of LIHEAP. They also track expenditures and cost allocations.

LIHEAP is also subject to state single program audits.

Audit Process

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

Yes No

10.3. Describe any audit findings rising to the level of material weakness or reportable condition cited in the A-133 audits, Grantee monitoring assessments, inspector general reviews, or other government agency reviews of the LIHEAP agency from the most recently audited fiscal year.

No Findings

Finding	Type	Brief Summary	Resolved?	Action Taken
1	financial	5 instances where the income information used in the determination to calculate the eligible credit amount was incorrect	Yes	training changes
2	other	1 instance where all adult household members did not sign the application	Yes	training changes
3	other	1 instance where calculation to determine the amount of assets was incorrect. the calculation error did not impact the determination of eligibility	Yes	procedure/policy changes

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 Grantee as part of compliance process.
- Grantee conducts fiscal and program monitoring of local agencies/district offices

Compliance Monitoring

10.5. Describe the Grantee's strategies for monitoring compliance with the Grantee's and Federal LIHEAP policies and procedures: Select all that apply

Grantee employees:

- Internal program review
- Departmental oversight

Secondary review of invoices and payments

Other program review mechanisms are in place. Describe:

The LIHEAP office in Hawaii is administratively attached to the Department of Human Services (DHS). LIHEAP consists of one Program Specialist in charge of LIHEAP with the support of a clerk, part-time. All functions of the LIHEAP program is the responsibility of the Program Specialist. Supervision and support services, i.e. Fiscal Management, IT support, and Investigation are supported by the DHS staff. The LIHEAP program has many checks and balances to avoid fraud in each stage of the LIHEAP process; there is no one person or agency that determines eligibility and pays benefits. Community Action Programs determine eligibility, which is submitted to the state for final review and payment generation, the eligible households are also matched against utility accounts to insure correct accounts are being credited. Hawaii has many internal layers of checks and balances before final payment is made, Hawaii fiscal requirements have multiple layers to clear prior to generation of payments.

Local Adminstering 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:

All applications and records are reviewed by the LIHEAP manager or designated worker in each contracted provider agency to ensure that a household or residence received the correct benefits. The contractors have internal steps to have an application be reviewed by more than one set of "eyes" to insure proper determination is made. These reviews are also subject to a review at the administrative level.

All contract LIHEAP employee applications are processed by the contract LIHEAP manager.

10.6 Explain, or attach a copy of your local agency monitoring schedule and protocol.

LIHEAP coordinator will conduct unscheduled site visits to monitor application processing.

LIHEAP coordinator conducts desk reviews of random sampling of cases for all islands.

Reviews of cases are discussed with the contract managers for correction.

Review of case process are also discussed for corrective action. i.e. making site more secure for employees and cases, posting signs visibly so applicants can locate the site, having a workflow to insure checks and balances are adhered to.

10.7. Describe how you select local agencies for monitoring reviews.

Site Visits:

All sites are monitored and reviewed.

Unannounced site visits are scheduled by Island on a rotation. These are scheduled and conducted by the LIHEAP coordinator to insure that they are unannounced.

The number of cases reviewed is dependent on the number of applications each site processed.

Desk Reviews:

A random sampling of cases are selected for review, review denials as well as approvals.

10.8. How often is each local agency monitored ?

All islands are monitored annually

Unannounced site visits maybe one every three years, unless time and funding allows visits more frequently or if corrective action requires it.

10.9. What is the combined error rate for eligibility determinations? OPTIONAL

10.10. What is the combined error rate for benefit determinations? OPTIONAL

10.11. How many local agencies are currently on corrective action plans for eligibility and/or benefit determination issues? 0

10.12. How many local agencies are currently on corrective action plans for financial accounting or administrative issues? 0

If any of the above questions require further explanation or clarification that could not be made in the fields provided, attach a document with said explanation here.

Section 11 - Timely and Meaningful Public Participation, , 2605(b)(12) - Assurance 12, 2605(c)(2)

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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.

- Tribal Council meeting(s)
- Public Hearing(s)
- Draft Plan posted to website and available 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 advertised
- Stakeholder consultation meeting(s)
- Comments are solicited during outreach activities
- Other - Describe:

11.2 What changes did you make to your LIHEAP plan as a result of this participation?

None, there was no participation

Public Hearings, 2605(a)(2) - For States and the Commonwealth of Puerto Rico Only

11.3 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	8/24/2015	Public Hearing @ 820 Mililani St Honolulu, HI 96813
2	8/24/2015	Public Hearing via Video Conference on all other islands, Maui, Kauai, Hawaii Island in Hilo and Kona, Molokai and Lanai

11.4. How many parties commented on your plan at the hearing(s)? 0

11.5 Summarize the comments you received at the hearing(s).

There were no comments received either in person or in writing

11.6 What changes did you make to your LIHEAP plan as a result of the comments received at the public hearing(s)?

None, no comments received

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

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

12.1 How many fair hearings did the grantee have in the prior Federal fiscal year? 15

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, the increase in the number of hearing this fiscal year was based on a eligibility requirement change. Out of the 15 hearings that were requested only 3 actually went to hearing, all decisions were in the Department's favor.

12.4 Describe your fair hearing procedures for households whose applications are denied.

The applicant submits a request in writing to the contractor who completed the action to allow the applicant to have the opportunity to have an informal discussion with the agency to determine if proper action was taken. Once that is done, within 2 days the manager will forward the request to the LIHEAP coordinator. The LIHEAP coordinator will review and make contact with the applicant, Hawaii fair hearing procedures require this. After the review is completed a Branch Report is completed stating the issues, facts leading to the decision, and the position taken. A hearing is scheduled with an impartial hearing officer who will render a decision based on the facts and rules.

12.5 When and how are applicants informed of these rights?

Applicants are informed of fair hearing rights at the point of application and on the notice of disposition. They are also informed of this verbally when discussing disagreement with the intake worker or manager.

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

Procedures are the same for all hearings, see item 12-4

12.7 When and how are applicants informed of these rights?

At application and on the notice of disposition. They are also informed of this right when discussing disagreement with intake worker or manager.

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

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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?

Community action agencies who are contracted to process LIHEAP applications also are contracted to do outreach. Their services include encouraging households to reduce energy needs. Community action agencies also provide weatherization programs and work with the community to educate households on the reduction of home energy consumption

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

No funds allocated at this time.

13.3 Describe the impact of such activities on the number of households served in the previous Federal fiscal year.

No, data collected at this time.

13.4 Describe the level of direct benefits provided to those households in the previous Federal fiscal year.

None

13.5 How many households applied for these services? 0

13.6 How many households received these services? 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.

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?

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. Â§ 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			

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 15 - Training

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Section 15: Training

15.1 Describe the training you provide for each of the following groups:

a. Grantee Staff:

Formal training on grantee policies and procedures

How often?

Annually

Biannually

As needed

Other - Describe:

Employees are provided with policy manual

Other-Describe:

There are no grantee staff, only myself and a clerk. Training provided to the clerk each year based on the model plan and any changes from the year before. The clerk is trained with community action staff. A handbook is provided.

b. Local Agencies:

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

All employees are trained by the State LIHEAP coordinator. Each staff member is provided a handbook, containing policies, forms, samples, and a copy of the training slide show. The training is formal but can be held on site. Training can be requested on demand, if the need arises.

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:

Vendors are invited to attend the new employee training each year. They are provided with a vendor training book with a LIHEAP information. As well as communicated through the vendor agreement. Training can be requested at any time.

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

Section 16 - Performance Goals and Measures, 2605(b)

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Section 16: Performance Goals and Measures, 2605(b) - Required for States Only

16.1 Describe your progress toward meeting the data collection and reporting requirements of the four required LIHEAP performance measures. Include timeframes and plans for meeting these requirements and what you believe will be accomplished in the coming federal fiscal year.

The LIHEAP application has been updated to gather data for Performance Measurements. Erroneously omitted the collection both main fuel type and electricity, only collected main fuel type. Will be corrected by 2016, planning to make corrections on the 2016 applications to gather more accurate data. New database is in development phase, trying to be operational by 2016.

Working with utility companies to gather the annual usage amounts, will have some data by 2015, but need to make corrections for 2016.

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 17 - Program Integrity, 2605(b)(10)

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

Section 17: Program Integrity, 2605(b)(10)

17.1 Fraud Reporting Mechanisms

a. Describe all mechanisms available to the public for reporting cases of suspected waste, fraud, and abuse. Select all that apply.

- Online Fraud Reporting
- Dedicated Fraud Reporting Hotline
- Report directly to local agency/district office or Grantee office
- Report to State Inspector General or Attorney General
- Forms and procedures in place for local agencies/district offices and vendors to report fraud, waste, and abuse
- Other - Describe:

Contracted staff instructed to report all suspected employee fraud to their manager or LIHEAP coordinator.

b. Describe strategies in place for advertising the above-referenced resources. Select all that apply

- Printed outreach materials
- Addressed on LIHEAP application
- Website
- Other - Describe:

Contracted agencies posted fraud posters providing information on where to report LIHEAP fraud in their offices, offices of utility companies and in the community.

17.2. Identification Documentation Requirements

a. Indicate which of the following forms of identification are required or requested to be collected from LIHEAP applicants or their household members.

Type of Identification Collected	Collected from Whom?					
	Applicant Only		All Adults in Household		All Household Members	
Social Security Card is photocopied and retained	<input type="checkbox"/>	Required	<input checked="" type="checkbox"/>	Required	<input checked="" type="checkbox"/>	Required
	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested
Social Security Number (Without actual Card)	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required	<input type="checkbox"/>	Required
	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested
Government-issued identification card (i.e.: driver's license, state ID, Tribal ID, passport, etc.)	<input type="checkbox"/>	Required	<input checked="" type="checkbox"/>	Required	<input type="checkbox"/>	Required
	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested	<input type="checkbox"/>	Requested

	Other	Applicant Only Required	Applicant Only Requested	All Adults in Household Required	All Adults in Household Requested	All Household Members Required	All Household Members Requested
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. Describe any exceptions to the above policies.

Children under one year are not required to submit a social security card.

17.3 Identification Verification

Describe what methods are used to verify the authenticity of identification documents provided by clients or household members. Select all that apply

- Verify SSNs with Social Security Administration
- Match SSNs with death records from Social Security Administration or state agency
- Match SSNs with state eligibility/case management system (e.g., SNAP, TANF)
- Match with state Department of Labor system
- Match with state and/or federal corrections system
- Match with state child support system
- Verification using private software (e.g., The Work Number)
- In-person certification by staff (for tribal grantees only)
- Match SSN/Tribal ID number with tribal database or enrollment records (for tribal grantees only)
- Other - Describe:

17.4. Citizenship/Legal Residency Verification

What are your procedures for ensuring that household members are U.S. citizens or aliens who are qualified to receive LIHEAP benefits? Select all that apply.

- Clients sign an attestation of citizenship or legal residency
- Client's submission of Social Security cards is accepted as proof of legal residency
- Noncitizens must provide documentation of immigration status
- Citizens must provide a copy of their birth certificate, naturalization papers, or passport
- Noncitizens are verified through the SAVE system
- Tribal members are verified through Tribal enrollment records/Tribal ID card
- Other - Describe:

Match with State eligibility system for TANF and SNAP

17.5. 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 letters
 - Bank statements
 - Tax statements
 - Zero-income statements
 - Unemployment Insurance letters
 - Other - Describe:
- Computer data matches:
 - Income information matched against state computer system (e.g., SNAP, TANF)
 - Proof of unemployment benefits verified with state Department of Labor
 - Social Security income verified with SSA

Utilize state directory of new hires

Other - Describe:

17.6. Protection of Privacy and Confidentiality

Describe the financial and operating controls in place to protect client information against improper use or disclosure. Select all that apply.

Policy in place prohibiting release of information without written consent

Grantee LIHEAP database includes privacy/confidentiality safeguards

Employee training on confidentiality for:

Grantee employees

Local agencies/district offices

Employees must sign confidentiality agreement

Grantee employees

Local agencies/district offices

Physical files are stored in a secure location

Other - Describe:

17.7. Verifying the Authenticity

What policies are in place for verifying vendor authenticity? Select all that apply.

All vendors must register with the State/Tribe.

All vendors must supply a valid SSN or TIN/W-9 form

Vendors are verified through energy bills provided by the household

Grantee and/or local agencies/district offices perform physical monitoring of vendors

Other - Describe and note any exceptions to policies above:

All utility companies are regulate by the State's Public Utility Commisson (P.U.C.) and tariff law. As an orgainzation regulated by the P.U.C., all companies must provide monthly and annual financial and reliability reports.

17.8. Benefits Policy - Gas and Electric Utilities

What policies are in place to protect against fraud when making benefit payments to gas and electric utilities on behalf of clients? Select all that apply.

Applicants required to submit proof of physical residency

Applicants must submit current utility bill

Data exchange with utilities that verifies:

Account ownership

Consumption

Balances

Payment history

Account is properly credited with benefit

Other - Describe:

Centralized computer system/database tracks payments to all utilities

Centralized computer system automatically generates benefit level

Separation of duties between intake and payment approval

Payments coordinated among other energy assistance programs to avoid duplication of payments

Payments to utilities and invoices from utilities are reviewed for accuracy

Computer databases are periodically reviewed to verify accuracy and timeliness of payments made to utilities

Direct payment to households are made in limited cases only

Procedures are in place to require prompt refunds from utilities in cases of account closure

Vendor agreements specify requirements selected above, and provide enforcement mechanism

Other - Describe:

17.9. Benefits Policy - Bulk Fuel Vendors

What procedures are in place for averting fraud and improper payments when dealing with bulk fuel suppliers of heating oil, propane, wood, and other bulk fuel vendors? Select all that apply.

Vendors are checked against an approved vendors list

Centralized computer system/database is used to track payments to all vendors

Clients are relied on for reports of non-delivery or partial delivery

Two-party checks are issued naming client and vendor

Direct payment to households are made in limited cases only

Vendors are only paid once they provide a delivery receipt signed by the client

Conduct monitoring of bulk fuel vendors

Bulk fuel vendors are required to submit reports to the Grantee

Vendor agreements specify requirements selected above, and provide enforcement mechanism

Other - Describe:

Hawaii does not have bulk vendors, natural gas or propaine is delivered but is handled by the utililty company.

17.10. Investigations and Prosecutions

Describe the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.

Refer to state Inspector General

Refer to local prosecutor or state Attorney General

Refer to US DHHS Inspector General (including referral to OIG hotline)

Local agencies/district offices or Grantee conduct investigation of fraud complaints from public

Grantee attempts collection of improper payments. If so, describe the recoupment process

Clients found to have committed fraud are banned from LIHEAP assistance. For how long is a household banned? one benefit 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 point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

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

- 1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.**
- 2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.**
- 3. For grantees other than individuals, Alternate I applies.**
- 4. For grantees who are individuals, Alternate II applies.**
- 5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.**
- 6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).**
- 7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).**
- 8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:**

***Controlled substance* means a controlled substance in Schedules I through V of the**

Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

Conviction means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

Criminal drug statute means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

Employee means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

Certification Regarding Drug-Free Workplace Requirements

Alternate I. (Grantees Other Than Individuals)

The grantee certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;**
- c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);**
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --**
 - (1) Abide by the terms of the statement; and**
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;**
- (e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;**
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted --**
 - (1) Taking appropriate**

personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
 (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).
 (B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

820 Mililani Street Rm. 606 * Address Line 1		
Address Line 2		
Address Line 3		
Honolulu * City	HI * State	96813 * Zip Code

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

Alternate II. (Grantees Who Are Individuals)

(a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;
 (b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

[55 FR 21690, 21702, May 25, 1990]

By checking this box, the prospective primary participant is providing the certification set out above.

Section 20: Certification Regarding Lobbying

The submitter of this application certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By checking this box, the prospective primary participant is providing the certification set out above.

Assurances

Assurances

(1) use the funds available under this title to--

(A) conduct outreach activities and provide assistance to low income households in meeting their home energy costs, particularly those with the lowest incomes that pay a high proportion of household income for home energy, consistent with paragraph (5);

(B) intervene in energy crisis situations;

(C) provide low-cost residential weatherization and other cost-effective energy-related home repair;and

(D)plan, develop, and administer the State's program under this title including leveraging programs, and the State agrees not to use such funds for any purposes other than those specified in this title;

(2) make payments under this title only with respect to--

(A) households in which one or more individuals are receiving--

(i)assistance under the State program funded under part A of title IV of the Social Security Act;

(ii) supplemental security income payments under title XVI of the Social Security Act;

(iii) food stamps under the Food Stamp Act of 1977; or

(iv) payments under section 415, 521, 541, or 542 of title 38, United States Code, or under section 306 of the Veterans' and Survivors' Pension Improvement Act of 1978; or

(B) households with incomes which do not exceed the greater of -

(i) an amount equal to 150 percent of the poverty level for such State; or

(ii) an amount equal to 60 percent of the State median income;

(except that a State may not exclude a household from eligibility in a fiscal year solely on the basis of household income if such income is less than 110 percent of the poverty level for such State, but the State may give priority to those households with the highest home energy costs or needs in relation to household income.

(3) conduct outreach activities designed to assure that eligible households, especially households with elderly individuals or disabled individuals, or both, and households with high home energy burdens, are made aware of the assistance available under this title, and any similar energy-related assistance available under subtitle B of title VI (relating to community services block grant program) or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;(4) coordinate its activities under this title with similar and related programs administered by the Federal Government and such State, particularly low-income energy-related programs under subtitle B of title VI (relating to community services block grant program), under the supplemental security income program, under part A of title IV of the Social Security Act, under title XX of the Social Security Act, under the low-income weatherization assistance program under title IV of the Energy Conservation and Production Act, or under any other provision of law which carries out programs which were administered under the Economic Opportunity Act of 1964 before the date of the enactment of this Act;(5) provide, in a timely manner, that the highest level of assistance will be furnished to those households which have the lowest incomes and the highest energy costs or needs in relation to income, taking into account family size, except that the State may not differentiate in implementing this section between the households described in clauses 2(A) and 2(B) of this subsection;

(6) to the extent it is necessary to designate local administrative agencies in order to carry out the purposes of this title, to give special consideration, in the designation of such agencies, to any local public or private nonprofit agency which was receiving Federal funds under any low-income energy assistance program or weatherization program under the Economic Opportunity Act of 1964 or any other provision of law on the day before the date of the enactment of this Act, except that -

(A) the State shall, before giving such special consideration, determine that the agency involved meets program and fiscal requirements established by the State; and

(B) if there is no such agency because of any change in the assistance furnished to programs for economically disadvantaged persons, then the State shall give special consideration in the designation of local administrative agencies to any successor agency which is operated in substantially the same manner as the predecessor agency which did receive funds for the fiscal year preceding the fiscal year for which the determination is made;

(7) if the State chooses to pay home energy suppliers directly, establish procedures to --

(A) notify each participating household of the amount of assistance paid on its behalf;

(B) assure that the home energy supplier will charge the eligible household, in the normal billing process, the difference between the actual cost of the home energy and the amount of the payment made by the State under this title;

(C) assure that the home energy supplier will provide assurances that any agreement entered into with a home energy supplier under this paragraph will contain provisions to assure that no household receiving assistance under this title will be treated adversely because of such assistance under applicable provisions of State law or public regulatory requirements; and

(D) ensure that the provision of vendor payments remains at the option of the State in consultation with local grantees and may be contingent on unregulated vendors taking appropriate measures to alleviate the energy burdens of eligible households, including providing for agreements between suppliers and individuals eligible for benefits under this Act that seek to reduce home energy costs, minimize the risks of home energy crisis, and encourage regular payments by individuals receiving financial assistance for home energy costs;

(8) provide assurances that,

(A) the State will not exclude households described in clause (2)(B) of this subsection from receiving home energy assistance benefits under clause (2), and

(B) the State will treat owners and renters equitably under the program assisted under this title;

(9) provide that--

(A) the State may use for planning and administering the use of funds under this title an amount not to exceed 10 percent of the funds payable to such State under this title for a fiscal year; and

(B) the State will pay from non-Federal sources the remaining costs of planning and administering the program assisted under this title and will not use Federal funds for such remaining cost (except for the costs of the activities described in paragraph (16));

(10) provide that such fiscal control and fund accounting procedures will be established as may be necessary to assure the proper disbursement of and accounting for Federal funds paid to the State under this title, including procedures for monitoring the assistance provided under this title, and provide that the State will comply with the provisions of chapter 75 of title 31, United States Code (commonly known as the "Single Audit Act");

(11) permit and cooperate with Federal investigations undertaken in accordance with section 2608;

(12) provide for timely and meaningful public participation in the development of the plan described in subsection (c);

(13) provide an opportunity for a fair administrative hearing to individuals whose claims for assistance under the plan described in subsection (c) are denied or are not acted upon with reasonable promptness; and

(14) cooperate with the Secretary with respect to data collecting and reporting under section 2610.

(15) * beginning in fiscal year 1992, provide, in addition to such services as may be offered by State Departments of Public Welfare at the local level, outreach and intake functions for crisis situations and heating and cooling assistance that is administered by additional State and local governmental entities or community-based organizations (such as community action agencies, area agencies on aging and not-for-profit neighborhood-based organizations), and in States where such organizations do not administer functions as of September 30, 1991, preference in awarding grants or contracts for intake services shall be provided to those agencies that administer the low-income weatherization or energy crisis intervention programs.

*** This assurance is applicable only to States, and to territories whose annual regular LIHEAP allotments exceed \$200,000. Neither territories with annual allotments of \$200,000 or less nor Indian tribes/tribal organizations are subject to Assurance 15.**

(16) use up to 5 percent of such funds, at its option, to provide services that encourage and enable households to reduce their home energy needs and thereby the need for energy assistance, including needs assessments, counseling, and assistance with energy vendors, and report to the Secretary concerning the impact of such activities on the number of households served, the level of direct benefits provided to those households, and the number of households that remain unserved.

Plan Attachments

PLAN ATTACHMENTS

The following documents must be attached to this application

- **Delegation Letter is required if someone other than the Governor or Chairman Certified this Report.**
- **Heating component benefit matrix, if applicable**
- **Cooling component benefit matrix, if applicable**
- **Minutes, notes, or transcripts of public hearing(s).**