

PROJECT TEAM UPDATE

Completion of the Project Team in its entirety is required, regardless of the source of funds. Failure to submit adequate information may delay the processing of the grant agreements, requests for funds and APR's. This has been provided as a fillable form; handwritten forms may be rejected and returned to the Recipient.

1. **Municipal Information**

- a. **Name**: Provide the official name of the Municipality
 - b. **Co/Ci/TV**: Select from dropdown list if the Municipality is a County, City, Town, or Village
 - c. **Address**: Please provide the official mailing address for the municipality; this must be the address where all official municipal correspondence is to be delivered.
 - d. **Phone**: Provide general phone number with area code
 - e. **County**: From dropdown list, select the County where municipality is located. Only counties with non-entitlement eligible municipalities are listed.
 - f. **E-mail**: Please provide a general e-mail address
 - g. **Website**: If available, please provide the official municipal website
 - h. **EIN**: Please provide the Federal Tax or Employer Identification Number
 - i. **UEI**: Please provide the Unique Entity Identifier (UEI) number; this is required for all municipalities. A UEI number can be obtained from [SAM.GOV](https://sam.gov).
 - j. **CDBG#**: Please enter the CDBG project number for which this Project Team is being submitted for. A separate Project Team **MUST** be submitted for each CDBG funded project.
 - k. **FY End**: Please provide the municipality's Fiscal Year End Date, (month/date).
2. **Chief Elected Official**: The Chief Elected Official (CEO) is responsible for signing all official documents, agreements, contracts, etc., with OCR.
 3. **Local Grant Contact**: This must be a municipal employee and **CAN NOT** be the Mayor, Supervisor, Chairperson or any other Chief Elected Official.
 4. **County/City/Town/Village Clerk**: Identify the County/City/Town/Village Clerk.
 5. **County/City/Town/Village Treasurer or Chief Financial Officer**: Identify the County/City/Town/Village Treasurer or CFO. This person is responsible for submitting the Federal Assistance Expenditure (FAE) Report and handling audit questions. If the Recipient utilizes a bookkeeper, do not identify the individual here.
 6. **Municipal Attorney**: Identify the County/City/Town/Village Attorney. If non-municipal employee, include firm name
 7. **Fair Housing Officer**: Any Recipient of CDBG funds are subject to compliance with Fair Housing, a Fair Housing Officer must be identified. Refer to the OCR Grant Administration Manual *Chapter 5-General Provisions* for further information regarding Fair Housing.
THIS PERSON MUST BE IDENTIFIED AND IS REQUIRED REGARDLESS THE ACTIVITY BEING UNDERTAKEN.

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8. **Section 3 Coordinator:** Any CDBG grant award to a municipality in excess of \$200,000 is subject to Section 3 Compliance, and the Recipient MUST identify a Section 3 Coordinator. Refer to the OCR Grant Administration Manual *Chapter 5-General Provisions* for further information regarding Section 3 compliance.
9. **Subrecipient:** If a Subrecipient is being utilized, please provide requested information. Refer to the OCR Grant Administration Manual *Chapter 1-Getting Started* for further information regarding Subrecipients.
10. **Labor Standards Compliance Officer:** If this project is subject to Federal Davis-Bacon Prevailing Wages, this section must be completed. The individual identified must have an understanding of Davis-Bacon and should be the person reviewing all Certified Payroll and completing the Semi-Annual Labor Standards Enforcement Report. Refer to the OCR Grant Administration Manual *Chapter 5-General Provisions* for further information regarding Labor Standards and Davis-Bacon.

PROFESSIONAL SERVICES

PLEASE NOTE, ALL PROFESSIONAL SERVICES ARE REQUIRED TO BE RETAINED IN COMPLIANCE WITH FEDERAL PROCUREMENT GUIDELINES AT 24CFR85.36
PLEASE REFER TO THE OCR GRANT ADMINISTRATION MANUAL CHAPTER 4 – PROCUREMENT FOR ADDITIONAL INFORMATION

11. **Consultant:** If the Recipient has retained the professional services of a consultant to assist with the administration and program delivery services of a program, please provide the requested information.
12. **Engineer:** If the Recipient has retained the professional services of an engineer to provide engineering services, please provide the requested information. If the Engineer is a municipal employee, please indicate.
13. **Lead Based Paint Risk Assessor:** If the project is undertaking any activities that are subject to compliance with lead-based paint at 24CFR Part 35 and/or 40CFR Part 745, this section must be completed.