

**FORM 1-4B
HOUSING ASSISTANCE SUMMARY FORM INSTRUCTIONS**

A separate summary form must be submitted for each property and with each disbursement request.

Section I CDBG Recipient Information

1. Indicate of Disbursement 1, 2, 3 or 4
2. Enter the Recipient Name
 - a. The City/Town/Village/County that was awarded NYS CDBG Housing funds.
3. Enter the CDBG #
 - a. This is the OCR assigned CDBG project number.

Section II Housing Unit Information

1. Owner(s)
 - a. Provide the only last name of the property owner(s)
2. Provide the local project number.
3. Provide the street address.
4. Provide the Section-Block-Lot number.
 - a. Summary Forms submitted without this will be rejected.
5. From the dropdown list, select City, Town, or Village where the property is located.
6. Provide the address ZIP + 4 code that matches tax records.
7. Provide the name of the municipality, this must match tax records.
8. From the dropdown list, select the County where the property is located.
 - a. For Towns and Villages split between multiple Counties, select the County where the property is located.
9. Lead Based Paint (Select one of the options)
 - a. The property is pre-1978.
 - b. The property is post-1978.
 - c. The property is Otherwise Exempt
 - i. Select which of the exemptions is being claimed.
10. Provide the date of the lead-based paint (LBP) risk assessment, if applicable
 - a. Provide the date of the lead-based paint clearance report, if applicable
 - b. This cannot be more than six (6) months old at the start of construction.
11. Indicate the date the pre-construction asbestos survey was completed.
 - a. If NA is selected, an explanation must be provided.
12. Indicate the date the mandatory pre-construction radon testing was completed.
 - a. If NA is selected, an explanation must be provided.
13. Indicate the date of the SHPO clearance letter.
 - a. This cannot be more than twelve (12) months at the start of construction.
 - b. If NA is selected, an explanation must be provided.
14. Indicate the date of the THPO clearance letter.
 - a. This cannot be more than twelve (12) months at the start of construction.
 - b. If NA is selected, an explanation must be provided.
15. Provide any other comments.
 - a. Provide the date the Tier II review was completed.
16. Final Request for Funds
 - a. Select yes or no.
 - b. When yes is selected, provide the project completion date.
 - i. The project completion date is the date **all** rehabilitation work has been completed and the property has received an LBP clearance report.
 - ii. Beginning January 1, 2024, all Final Requests for Funds must include a copy of the recording sheet for a restrictive lien covenant

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Section III Project Cost Information

1. Provide the sources of all funds by activity type from the dropdown list that is proposed to be provided.
 - a. This section will auto calculate.

Section IV Prepared by

1. Provide the name, e-mail and phone number of the person that completed the form.
 - a. No signature required.
2. Provide the date that the form was completed.