

**Facsimile Transmittal**

1178898573 - 6470

U. S. Department of Housing  
and Urban Development  
Office of Department Grants  
Management and Oversight

OMB Approval No. 2525-0118  
exp. Date (04/30/2005)

\* Name of of Document Transmitting:

**1. Applicant Information:**

\* Legal Name:

\* Address:

\* Street1:

Street2:

\* City:

County:

\* State:

\* Zip Code:  \* Country:

**2. Catalog of Federal Domestic Assistance Number:**

\* Organizational DUNS:  CFDA No.:

Title:

Program Component:

**3. Facsimile Contact Information:**

Department:

Division:

**4. Name and telephone number of person to be contacted on matters involving this facsimile.**

Prefix:  \* First Name:

Middle Name:

\* Last Name:

Suffix:

\* Phone Number:

Fax Number:

\* 5. Email:

**\* 6. What is your Transmittal? (Check one box per fax)**

- a. Certification     b. Document     c. Match/Leverage Letter     d. Other

\* 7. How many pages (including cover) are being faxed?

Manifest for Grant Application # GRANT00295243

Grant Application XML file (total 1):

1. GrantApplication.xml. (size 20234 bytes)

Forms Included in Zip File(total 5):

1. Form SF424-V2.0.pdf (size 9807 bytes)
2. Form FaithBased\_SurveyOnEEO-V1.2.pdf (size 5676 bytes)
3. Form HUD\_DisclosureUpdateReport-V1.1.pdf (size 8426 bytes)
4. Form HUD\_FaxTransmittal-V1.1.pdf (size 3448 bytes)
5. Form Attachments-V1.1.pdf (size 2082 bytes)

Attachments Included in Zip File (total 15):

1. Attachments-ATT9-7592-List\_of\_Incomes\_by\_Household.doc (size 109568 bytes)
2. Attachments-ATT10-9967-Procurement\_and\_Property\_Management.doc (size 332288 byte)
3. Attachments-ATT12-1059-Rehabilitation\_Policies\_and\_Standards.doc (size 95744 byt)
4. Attachments-ATT15-9738-NARRATIVE\_2007.doc (size 716288 bytes)
5. Attachments-ATT13-4028-Copy\_of\_424-cbw.xls (size 53760 bytes)
6. Attachments-ATT14-2293-Commitment\_to\_Sustain\_Activities.doc (size 70656 bytes)
7. Attachments-ATT11-8372-Tribal\_Resolution\_07\_55.doc (size 180736 bytes)
8. Attachments-ATT4-8824-Cost\_Summary\_HUD\_4123.doc (size 93696 bytes)
9. Attachments-ATT8-2112-Documentation\_of\_Leverage.doc (size 171520 bytes)
10. Attachments-ATT1-6288-Survey\_and\_Demographic\_Statement.doc (size 187904 bytes)
11. Attachments-ATT5-1794-Accounting\_Certifications.doc (size 174592 bytes)
12. Attachments-ATT7-1786-Indian\_Housing\_Plan\_2007.doc (size 3399168 bytes)
13. Attachments-ATT6-7961-Rehabilitation\_Cost\_Detail.doc (size 243200 bytes)
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15. Attachments-ATT2-5547-Community\_Development\_Statement.doc (size 561152 bytes)

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```

**Application for Federal Assistance SF-424**

Version 02

<b>* 1. Type of Submission:</b> <input type="radio"/> Preapplication <input checked="" type="radio"/> Application <input type="radio"/> Changed/Corrected Application	<b>* 2. Type of Application:</b> <input checked="" type="radio"/> New <input type="radio"/> Continuation <input type="radio"/> Revision	<b>* If Revision, select appropriate letter(s):</b> _____ <b>* Other (Specify)</b> _____
--	--	---

<b>* 3. Date Received:</b> 08/20/2007	<b>4. Applicant Identifier:</b> _____
--	--

<b>5a. Federal Entity Identifier:</b> _____	<b>* 5b. Federal Award Identifier:</b> _____
--	---

**State Use Only:**

<b>6. Date Received by State:</b> _____	<b>7. State Application Identifier:</b> _____
---	---

**8. APPLICANT INFORMATION:**

**\* a. Legal Name:** Lac Courte Oreilles Band of Lake Superior Chippewa Indians

<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 39-1165322	<b>* c. Organizational DUNS:</b> _____
--	---

**d. Address:**

<b>* Street1:</b>	13394W Trepania Road
<b>Street2:</b>	_____
<b>* City:</b>	Hayward
<b>County:</b>	_____
<b>* State:</b>	WI: Wisconsin
<b>Province:</b>	_____
<b>* Country:</b>	USA: UNITED STATES
<b>* Zip / Postal Code:</b>	54843

**e. Organizational Unit:**

<b>Department Name:</b> _____	<b>Division Name:</b> _____
----------------------------------	--------------------------------

**f. Name and contact information of person to be contacted on matters involving this application:**

<b>Prefix:</b> _____	<b>* First Name:</b> Lorene
<b>Middle Name:</b> _____	
<b>* Last Name:</b> Wielgot	
<b>Suffix:</b> _____	

**Title:** Grant Writer

**Organizational Affiliation:**  
Lac Courte Oreilles Tribal Governing Board

<b>* Telephone Number:</b> _____	<b>Fax Number:</b> 715 634 4797
----------------------------------	---------------------------------

**\* Email:** \_\_\_\_\_

**Application for Federal Assistance SF-424**

Version 02

**9. Type of Applicant 1: Select Applicant Type:**

I: Indian/Native American Tribal Government (Federally Recognized)

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

\* Other (specify):

**\* 10. Name of Federal Agency:**

US Department of Housing and Urban Development

**11. Catalog of Federal Domestic Assistance Number:**

14.862

CFDA Title:

Indian Community Development Block Grant Program

**\* 12. Funding Opportunity Number:**

FR-5100-N-22

\* Title:

Indian Community Development Block Grant Program

**13. Competition Identification Number:**

ICDBG-22

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

Lac Courte Oreilles Indian Reservation, Sawyer County, Wisconsin

**\* 15. Descriptive Title of Applicant's Project:**

Fu 2007 Mold Remediation Project and Comprehensive Planning

Attach supporting documents as specified in agency instructions.

**Application for Federal Assistance SF-424**

Version 02

**16. Congressional Districts Of:**

\* a. Applicant

\* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

**17. Proposed Project:**

\* a. Start Date:

\* b. End Date:

**18. Estimated Funding (\$):**

* a. Federal	<input type="text" value="600,000.00"/>
* b. Applicant	<input type="text" value="REDACTED"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="REDACTED"/>

**\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application 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 the State for review.
- c. Program is not covered by E.O. 12372.

**\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)**

- Yes
- No

21. \*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.

**Authorized Representative:**

Prefix:  \* First Name:

Middle Name:

\* Last Name:

Suffix:

\* Title:

\* Telephone Number:  Fax Number:

\* Email:

\* Signature of Authorized Representative:  \* Date Signed:

Authorized for Local Reproduction

Standard Form 424 (Revised 10/2005)  
Prescribed by OMB Circular A-102

**Application for Federal Assistance SF-424**

Version 02

**\* Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input field]

[Large empty text area for explanation]

## Attachments

AdditionalCongressionalDistricts

File Name

Mime Type

AdditionalProjectTitle

File Name

Mime Type



**Applicant/Recipient  
Disclosure/Update Report**

U.S. Department of Housing  
and Urban Development

OMB Approval No. 2510-0011  
(exp. 12/31/2006)

Applicant/Recipient Information \* Duns Number: [REDACTED] \* Report Type: INITIAL

1. Applicant/Recipient Name, Address, and Phone (include area code):

\* Applicant Name:

Lac Courte Oreilles Band of Lake Superior Chippewa Indians

\* Street1: 13394W Trepania Road

Street2:

\* City: Hayward

County:

\* State: WI: Wisconsin

\* Zip Code: 54843

\* Country: USA: UNITED STATES

\* Phone: [REDACTED]

2. Social Security Number or Employer ID Number: 39-1165322

\* 3. HUD Program Name:

Indian Community Development Block Grant Program

\* 4. Amount of HUD Assistance Requested/Received: \$ 600,000.00

5. State the name and location (street address, City and State) of the project or activity:

\* Project Name: Fy 2007 Mold Remediation & Comprehensive Planning

\* Street1: 13394W Trepania Road

Street2:

\* City: Hayward

County:

\* State: WI: Wisconsin

\* Zip Code: 54843

\* Country: USA: UNITED STATES

**Part I Threshold Determinations**

\* 1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or CDBG block grants. (For further information see 24 CFR Sec. 4.3).

\* 2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9

Yes  No

Yes  No

If you answered "No" to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form.

**However,** you must sign the certification at the end of the report.

**Part II Other Government Assistance Provided or Requested / Expected Sources and Use of Funds.**

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/State/Local Agency Name:

\* Government Agency Name:

Lac Courte Oreilles Tribal Government

Government Agency Address:

\* Street1: 13394W Trepania Road

Street2:

\* City: Hayward

County: Sawyer

\* State: WI: Wisconsin

\* Zip Code: 54843

\* Country: USA: UNITED STATES

\* Type of Assistance: Grant

\* Amount Requested/Provided: \$ 600,000.00

\* Expected Uses of the Funds:

Housing Rehabilitation, and Planning and Administration.

Department/State/Local Agency Name:

\* Government Agency Name:

Government Agency Address:

\* Street1:

Street2:

\* City:

County:

\* State:

\* Zip Code:

\* Country:

\* Type of Assistance:

\* Amount Requested/Provided: \$

\* Expected Uses of the Funds:

( Note: Use Additional pages if necessary.)

**Part III Interested Parties.** You must disclose:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	* Social Security No. or Employee ID No.	* Type of Participation in Project/Activity	* Financial Interest in Project/Activity (\$ and %)
Lac Courte Oreilles Band	039-11653	0	\$ 0.00 0.00%
			\$ %
			\$ %
			\$ %
			\$ %

( Note: Use Additional pages if necessary.)

**Certification**

**Warning:** If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation. I certify that this information is true and complete.

\* Signature: Lorene Wielgot  
 \* Date: (mm/dd/yyyy) 06/20/2007

## Attachments

AdditionalInfo\_attDataGroup0

File Name

Mime Type

AdditionalInfo1\_attDataGroup0

File Name

Mime Type

# Survey on Ensuring Equal Opportunity for Applicants

OMB NO. 1890-0014 EXP. 2/28/2009

**Purpose:** The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

**Instructions for Submitting the Survey:** If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

**Applicant's (Organization) Name:**

Lac Courte Oreilles Band of Lake Superior Chippewa Indians

**Applicant's DUNS Name:**

**Federal Program:**

Indian Community Development Block Grant Program

**CFDA Number:**

14.862

- |  |  |
|--|--|
| 1. Has the applicant ever received a grant or contract from the Federal government?<br><input checked="" type="radio"/> Yes <input type="radio"/> No | 5. Is the applicant a local affiliate of a national organization?<br><input type="radio"/> Yes <input checked="" type="radio"/> No   |
| 2. Is the applicant a faith-based organization?<br><input type="radio"/> Yes <input checked="" type="radio"/> No                                     | 6. How many full-time equivalent employees does the applicant have? (Check only one box).<br><input type="radio"/> 3 or Fewer <input type="radio"/> 15 - 50<br><input type="radio"/> 4 - 5 <input type="radio"/> 51 - 100<br><input type="radio"/> 6 - 14 <input checked="" type="radio"/> Over 1000   |
| 3. Is the applicant a secular organization?<br><input type="radio"/> Yes <input checked="" type="radio"/> No   | 7. What is the size of the applicant's annual budget? (Check only one box.)<br><input checked="" type="radio"/> Less Than \$150,000<br><input type="radio"/> \$150,000 - \$299,999<br><input type="radio"/> \$300,000 - \$499,999<br><input type="radio"/> \$500,000 - \$999,999<br><input type="radio"/> \$1,000,000 - \$4,999,999<br><input type="radio"/> \$5,000,000 or more |
| 4. Does the applicant have 501(c)(3) status?<br><input type="radio"/> Yes <input checked="" type="radio"/> No  |  |

# Survey on Ensuring Equal Opportunity for Applicants

OMB NO. 1890-0014 EXP. 2/28/2009

Provide the applicant's (organization) name and number and the grant name and CFDA number.

1. Self-explanatory.

2. Self-identify.

3. Self-identify.

4. 501(c)(3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.

5. Self-explanatory.

6. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.

7. Annual budget means the amount of money your organization spends each year on all of its activities.

## Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **1890-0014**. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

**If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** The Agency Contact listed in this grant application package.

## Attachments Form

**Instructions:** On this form, you will attach the various files that make up your grant application. Please consult with the appropriate Agency Guidelines for more information about each needed file. Please remember that any files you attach must be in the document format and named as specified in the Guidelines.

**Important:** Please attach your files in the proper sequence. See the appropriate Agency Guidelines for details.

- 1) Please attach Attachment 1      6288-Survey\_and\_Demographic\_State      Mime Type: application/msword  
ment.doc
- 2) Please attach Attachment 2      5547-Community\_Development\_Statem      Mime Type: application/msword  
ent.doc
- 3) Please attach Attachment 3      9380-HUD-96010\_Logic\_Model.xls      Mime Type: application/vnd.ms-excel
- 4) Please attach Attachment 4      8824-Cost\_Summary\_HUD\_4123.doc      Mime Type: application/msword
- 5) Please attach Attachment 5      1794-Accounting\_Certifications.doc      Mime Type: application/msword
- 6) Please attach Attachment 6      7961-Rehabilitation\_Cost\_Detail.doc      Mime Type: application/msword
- 7) Please attach Attachment 7      1786-Indian\_Housing\_Plan\_2007.doc      Mime Type: application/msword
- 8) Please attach Attachment 8      2112-Documentation\_of\_Leverage.doc      Mime Type: application/msword
- 9) Please attach Attachment 9      7592-List\_of\_Incomes\_by\_Household.d      Mime Type: application/msword  
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- 10) Please attach Attachment 10      9967-Procurement\_and\_Property\_Managem      Mime Type: application/msword  
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- 11) Please attach Attachment 11      8372-Tribal\_Resolution\_07\_55.doc      Mime Type: application/msword
- 12) Please attach Attachment 12      1059-Rehabilitation\_Policies\_and\_Stan      Mime Type: application/msword  
dards.doc
- 13) Please attach Attachment 13      4028-Copy\_of\_424-cbw.xls      Mime Type: application/vnd.ms-excel
- 14) Please attach Attachment 14      2293-Commitment\_to\_Sustain\_Activitie      Mime Type: application/msword  
s.doc
- 15) Please attach Attachment 15      9738-NARRATIVE\_2007.doc      Mime Type: application/msword

**Listing of Incomes by Household  
Rehabilitation List**

Lac Courte Oreilles

Unit Number	Bedroom Size	Occupancy Status	Family Size	Family Income	Income Category
1	3				
2	3				
3	3				
4	3				
1	4				
2	3				
3	3				
4	2				
5	4				
6	3				
	3				
8	4				
9	4				
10	2				

Number of persons benefiting:

57

100% are low Income  
46% are extremely low Income

Methods used to collect data: annual household and income recertification process of the Lac Courte Oreilles Indian Housing Authority.

\*Families whose income is considered exempt by federal law, such as income earned for participation in the Workforce Investment Act program.



2007 ICDBG MOLD REMEDIATION PROJECT  
LAC COURTE OREILLES BAND OF LAKE SUPERIOR CHIPPEWA

Documentation of Leverage:

1. Letter from the Tribal Chairman, Lac Courte Oreilles Tribal Governing Board
2. Letter from the Executive Director, LCO Indian Housing Authority
3. Letter from the Director, LCO Community Health Center



13394 W Trepania Road  
Hayward • Wisconsin • 54843  
PHONE [REDACTED] FAX (715) 634-4797

June 11, 2007

U.S. Department of Housing and Urban Development  
Office of Native American Programs  
Deborah M. Lalancette,  
1670 Broadway, 23<sup>rd</sup> Floor  
Denver, CO 80202

Dear Ms. Lalancette:

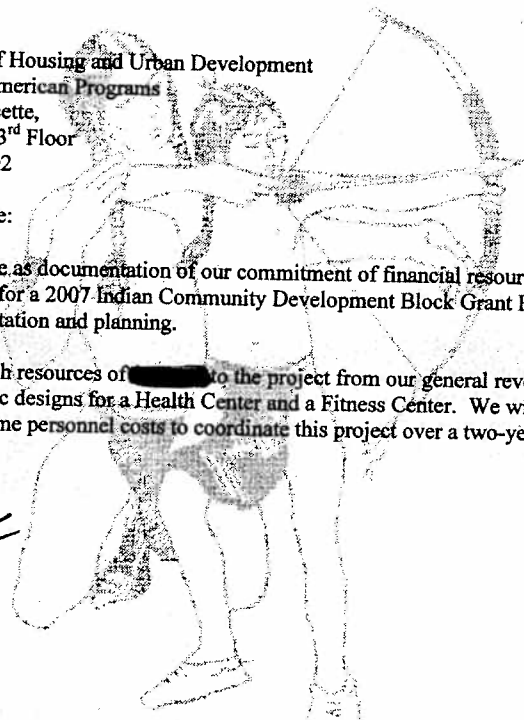
This letter will serve as documentation of our commitment of financial resources to the Tribe's application for a 2007 Indian Community Development Block Grant Program for housing rehabilitation and planning.

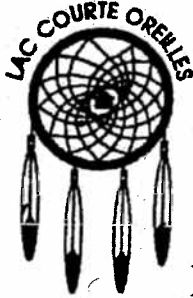
We will provide cash resources of [REDACTED] to the project from our general revenue fund to develop schematic designs for a Health Center and a Fitness Center. We will utilize the funds for part-time personnel costs to coordinate this project over a two-year period.

Sincerely,

Louis Taylor  
Tribal Chairman

LT:ljw





**LCO Housing Authority** 13416 W Trepania Rd Hayward, WI

54843 Phone (715) 634-2147 Fax (715) 634-5692

June 11, 2007

U.S. Department of Housing and Urban  
Development Office of Native American  
Programs  
Deborah M. Lalancette,  
1670 Broadway, 23<sup>rd</sup> Floor  
Denver, CO 80202

Dear Ms. Lalancette:

This letter will serve as documentation of our commitment of financial resources to the Tribe's application for a 2007 Indian Community Development Block Grant Program for housing rehabilitation and planning.

We will provide cash resources of \$500,000 to the project from our non-program income. Together with federal funds, this amount is necessary for mold remediation work in rehabilitation of fourteen low-rental units of the Housing Authority. Our Indian Housing Plan has been amended to reflect this project. The work will involve employment of a force account crew, materials and small subcontracts supervised by our Project Superintendent, George Perry.

Sincerely,

Jean Thayer  
Executive  
Director



[REDACTED]  
13380 W Trepania Road • Hayward, Wisconsin 54843-2186

Telephone: [REDACTED]

Administration Fax: 715-634-6107

Medical Records Fax: 715-634-2740

June 11, 2007

U.S. Department of Housing and Urban Development  
Office of Native American Programs  
Deborah M. Lalancette,  
1670 Broadway, 23<sup>rd</sup> Floor  
Denver, CO 80202

Dear Ms. Lalancette:

This letter will serve as documentation of our commitment of financial resources to the Tribe's application for a 2007 Indian Community Development Block Grant Program for housing rehabilitation and planning.

We will provide cash resources of [REDACTED] to the project to develop schematic designs for a new Health Center and a Fitness Center. We will utilize the funds to contract with an A & E firm to develop our designs. The contractor to be selected will employ Leeds-certified architects as we plan to incorporate renewable energy and energy saving design features as much as possible.

Sincerely,

Don Smith,  
Director

DS:ljw



**LCO Housing Authority**

13416 W Trepania Rd  
Hayward, WI 54843  
Phone (715) 634-2147  
Fax (715) 634-5692

June 14, 2007

U.S Dept of Housing & Urban Development  
Eastern Woodlands ONAP  
Kevin Fitzgibbons, Administrator  
Ralph H. Metcalfe Federal Building  
77 W Jackson Blvd Room 2404  
Chicago, IL 60604-3507

ATTN: Mr. George Simpson,  
Grants Management Specialist

Dear Mr. Simpson;

Enclosed please find amendments to our 2007 Indian Housing Plan. If anything further is required for this submission, please let me know.

Thank you in advance for your consideration.

Sincerely,

Jean Thayer,  
Executive Director

ENCLOSURE: 2007 IHP

3. FINANCIAL RESOURCES- An operating budget for the recipient, in a form prescribed by the Secretary, including:

a. an identification and a description of the financial resources reasonably available to the recipient to carry out the purposes of NAHASDA, including an explanation of the manner in which amounts made available will leverage additional resources; and

Please enter your Identification and Description here:

See IHP 2007 Table 2, Part I, for Sources of Funds.	
2007 IHBG of approximately \$2,508,309	
2007 ICDBG of \$490,000	
Non-Program Income of [REDACTED]	
Total funds available	\$ [REDACTED]
No leveraging is anticipated	



(Double-Click button to return to top)

2. STATEMENT OF NEEDS - A statement of the housing needs of the low-income Indian families residing in the jurisdiction of the Indian tribe, and outside the jurisdiction where tribal needs require consideration, and the means by which such needs will be addressed during the 1-year period, including a description of:

a. the estimated housing needs and the need for assistance for the low-income Indian families in the jurisdiction, and outside the jurisdiction where tribal needs require consideration, including a description of the manner in which the geographical distribution of assistance is consistent with the geographical needs and needs for various categories of housing assistance; and

Please enter your Low-income Housing Needs here:

The estimated need of 217 families for low-income housing assistance consists of:

1. There are 101 families on the waiting list for rental housing. The average length of time spent on waiting is approximately one year from date of application.
2. There are 34 families on the waiting list for homeownership units; however, there are no such units available. Mutual Help units vacated by heads of household are occupied by remaining family members.
3. 4 families residing within the community of Poppletown need their rental unit rehabilitated. Those homes have structural disintegration due to moisture. This need will be addressed by the ICDBG Program for FY 2007.
4. The rental units of Projects WI54-04, WI54-05 and WI54-07 require substantial renovation especially roofing, windows, siding and landscaping. (128 families)
5. The 24 rental units of WI54-08 require renovation; in particular are the 9 "shoe houses" within that project that have extensive mold due to construction defect.
6. A labor force needs to be trained to assume construction activities relative to new units and modernization activities.
7. Units within Project 54-1 and other units within Reserve and New Post require extensive mold remediation. This need will be addressed by the FY 2007 ICDBG Program.



(Double-Click button to return to top)

**TABLE 2  
FINANCIAL RESOURCES**

Name of Tribe: Lac Courte Oreilles Band of Lake Superior  
Chippewa  
Name of TDHE (if applicable): Lac Courte Oreilles Housing Authority  
Federal Fiscal Year: 2007  
Tribal/TDHE Program Year: 01/01/2007-12/31/2007



(Double-Click button to return to top)

PART I: SOURCES OF FUNDS FOR NAHASDA ACTIVITIES	
Sources of Funds	Planned Amount
column a	column b
<b>1. HUD Resources</b>	
a. NAHASDA Block Grant	\$2,508,309.00
b. NAHASDA Program Income	
c. NAHASDA Title VI	
d. Section 184 Loan Guarantee	
e. Indian Community Development Block Grant	\$490,000.00
f. Drug Elimination Grants and Drug Technical Assistance	
g. Prior Year Funds	
h. Other	
<b>2. Existing Program Resources</b>	
a. 1937 Housing Act Programs	\$0.00
b. Other HUD Programs	
<b>3. Other Federal or State Resources</b>	
a. BIA Home Improvement Program	\$0.00
b. Other	
<b>4. Private Resources</b>	
a. Tribal Contributions for affordable housing	\$0.00
b. Financial Institution	
c. Other	
<b>5. Other</b>	
<b>6. Total Resources</b>	



Table 2 Financial Resources Continued

PART II: ALLOCATION OF FUNDS FOR NAHASDA ACTIVITIES				
Activity		Planned		
		Budgeted Amount	Number of Units	Number of Families
column a		column b	column c	column d
7. Indian Housing Assistance				
a. Modernization (1937 Housing Act)				
b. Operating (1937 Housing Act)		\$2,001,346.00	394	394
8. Development				
a. Rental	1. Construction of new units			
	2. Acquisition			
	3. Rehabilitation	\$490,000.00		
b. Homeownership	1. Construction of new units			
	2. Acquisition			
	3. Rehabilitation			
9. Housing Services				
10. Housing Management Services				
11. Crime Prevention and Safety		\$5,302.00		394
12. Model Activities (specify below)				
a.				
13. Planning and Administration		\$501,661.00		
14. Reserves				
15. Other				
16. Total			394	788

**ICDBG MOLD RENOVATIONS  
3BEDROOM RANCH POPPLETOWN UNITS**

ESTIMATE COST: Prepared by		Project Superintendent	
Line Items /Basement	24 x44	1	\$ 22,000.00 \$ 22,000.00
FLOOR JOIST	18"span joist	22	\$ 34.00 \$ 748.00
FLOOR SHEATHIN	4X8-3/4"	32	\$ 29.00 \$ 928.00
SILL PLATE	2X10-14'treated	12	\$ 17.00 \$ 204.00
WALLS	2X6-8'	250	\$ 3.50 \$ 875.00
TRUSSES	2X4- 24'/18"HL/24"OH	25	\$ 64.00 \$ 1,600.00
ROOF SHEATING	4X8-1/2"	50	\$ 12.00 \$ 600.00
SHINGLES 14x53	30YR,3TAB	17	\$ 52.00 \$ 884.00
R50 BLOWN INS.	R50 CELLULOSE16"	1008	\$ 1.00 \$ 1,008.00
WINTERGUARD	3X65'	4	\$ 52.00 \$ 208.00
D-EDGE	10'	14	\$ 5.00 \$ 70.00
FELT #15	432'ASTM226	4	\$ 23.00 \$ 92.00
FACIA	10'	14	\$ 11.00 \$ 154.00
METAL FACIA	10'	14	\$ 9.00 \$ 126.00
SOFFIT	10'	14	\$ 8.00 \$ 112.00
HOUSE WRAP	150'RL	2	\$ 90.00 \$ 180.00
PLUMBING	INSTALLATION	1	\$ 6,555.00 \$ 6,555.00
ELECTRICAL	INSTALLATION	1	\$ 4,540.00 \$ 4,540.00
HEATING	INSTALLATION	1	\$ 5,980.00 \$ 5,980.00
WINDOWS	INSULATED LOW,E	11	\$ 344.00 \$ 3,784.00
POLY	8.4X100'	5	\$ 34.00 \$ 170.00
INSULATION	3.5X15FF	15	\$ 15.00 \$ 225.00
SHEETROCK	4X12-1/2"	55	\$ 15.00 \$ 825.00
SHEETROCK	4X12-5/8"	24	\$ 18.00 \$ 432.00
ADHESIVE	CASE of tubes	1	\$ 14.00 \$ 14.00
CAULKING	CASE of tubes	1	\$ 50.00 \$ 50.00
SCREWS	LBS	1	\$ 70.00 \$ 70.00
NAILS	50LBS	1	\$ 82.00 \$ 82.00
SHELVING	1X12	10	\$ 25.00 \$ 250.00
CLOSETS	POLES,BRACKETS	3	\$ 85.00 \$ 255.00
TAPERS	24X44	1	\$ 3,000.00 \$ 3,000.00
RANGE	30"	1	\$ 350.00 \$ 350.00
REFRIGERATOR	STANDARD SIZE	1	\$ 450.00 \$ 450.00
LUAN	4X8-1/4"	25	\$ 15.00 \$ 375.00
TILE	12X12SQ.	28	\$ 45.00 \$ 1,260.00
ADHESIVE	3GAL.	2	\$ 35.00 \$ 70.00
VINYLSHEETFLR	5X8	1	\$ 150.00 \$ 150.00
RANGEHOOD	30"	1	\$ 125.00 \$ 125.00
DECKING	6X5 W/STEPS	2	\$ 675.00 \$ 1,350.00
DOOR TRIM	7'	160	\$ 2.50 \$ 400.00
BASE BOARD	14'	298	\$ 3.00 \$ 894.00
INTERIOR DOORS	2-8/2-6/2-2/6-0.	13	\$ 90.00 \$ 1,170.00
SIDING	24X44	1050	\$ 3.00 \$ 3,150.00
EXT. DOORS	3-0, front	1	\$ 250.00 \$ 250.00
EXT. DOORS	3-0 side	1	\$ 250.00 \$ 250.00
STORM DOORS	3-0, 2-8	2	\$ 284.00 \$ 568.00
CABINERY	KIT/VANITY	1	\$ 7,320.00 \$ 7,320.00
ROOF VENT	CONT. RIDGE VENT	1	\$ 75.00 \$ 75.00
GUTTERS	FRONT/REAR	2	\$ 155.00 \$ 310.00
PAINT/PRIMER	WHITE/GALS	12	\$ 30.00 \$ 360.00
AIR EXCHANGE UNITS	UNIT	1	\$ 950.00 \$ 950.00
DEBRI REMOVAL	20YD.DUMPSTER	1	\$ 450.00 \$ 450.00
		<b>TOTAL LABOR</b>	<b>\$49,200.00</b>
		<b>TOTAL MATERIAL</b>	<b>\$ 76,298.00</b>
		<b>GRAND TOTAL</b>	<b>\$ 125,498.00</b>

## MOLD RENOVATION ICDBG 2007

### SCATTERED UNITS

COST ESTIMATED BY [REDACTED] PROJECT SUPERINTENDENT

		2	4	4
		2 BR	3 BR	4 BR
		\$1,002	\$2,400	\$3,000
BASMT WATERPROOFING				
ROOF SHEATHING	4X8-1/2"	\$ 720.00	\$ 2,016.00	\$ 2,256.00
SHINGLES	25YR,3TAB	\$ 1,170.00	\$ 2,700.00	\$ 2,880.00
R50 BLOWN INS.	R50 CELLULOSE16"	\$ 1,800.00	\$ 4,032.00	\$ 4,032.00
WINTERGUARD	3X85'	\$ 400.00	\$ 800.00	\$ 800.00
D-EDGE	10'	\$ 140.00	\$ 280.00	\$ 280.00
FELT #15	432'ASTM226	\$ 200.00	\$ 400.00	\$ 400.00
FACIA PINE	10' - 1X6PINE	\$ 308.00	\$ 616.00	\$ 616.00
METAL FACIA	10"	\$ 252.00	\$ 504.00	\$ 504.00
SOFFIT	10'	\$ 224.00	\$ 448.00	\$ 448.00
HOUSE WRAP	150'RL	\$ 300.00	\$ 600.00	\$ 600.00
WINDOWS	INSULATED LOW,E	\$ 4,830.00	\$ 15,180.00	\$ 17,940.00
POLY	8.4X100'	\$ 340.00	\$ 680.00	\$ 680.00
INSULATION	3.5X15FF	\$ 300.00	\$ 900.00	\$ 900.00
SHEETROCK	4X12-1/2"	\$ 840.00	\$ 2,420.00	\$ 1,672.00
SHEETROCK	4X12-5/8"	\$ 540.00	\$ 1,056.00	\$ 924.00
ADHESIVE	CASE of tubes	\$ 28.00	\$ 56.00	\$ 56.00
CAULKING	CASE of tubes	\$ 100.00	\$ 200.00	\$ 200.00
SCREWS	LBS	\$ 140.00	\$ 280.00	\$ 280.00
NAILS	50LBS	\$ 164.00	\$ 328.00	\$ 328.00
SHELVING	1X12	\$ 500.00	\$ 1,000.00	\$ 1,000.00
CLOSETS	POLES,BRACKETS	\$ 510.00	\$ 1,020.00	\$ 1,020.00
LUAN	4X8-1/4"	\$ 750.00	\$ 1,500.00	\$ 1,500.00
TILE	12X12SQ.	\$ 1,800.00	\$ 5,040.00	\$ 5,040.00
ADHESIVE	3GAL.	\$ 140.00	\$ 280.00	\$ 280.00
VINYLSHEETFLR	5X8	\$ 300.00	\$ 600.00	\$ 600.00
DOOR TRIM	7'	\$ 480.00	\$ 1,280.00	\$ 1,280.00
BASE BOARD	14'	\$ 960.00	\$ 2,384.00	\$ 2,384.00
CABINTRY	SET	\$ 14,640.00	\$ 29,280.00	\$ 29,280.00
INTERIOR DOORS	2-8/2-8/2-2/6-0.	\$ 1,080.00	\$ 3,240.00	\$ 4,680.00
SIDING	26x48	\$ 5,184.00	\$ 12,800.00	\$ 14,976.00
EXT. DOORS	3-0,	\$ 420.00	\$ 840.00	\$ 840.00
EXT. DOORS	2'-8"	\$ 380.00	\$ 760.00	\$ 760.00
STORM DOORS	3-0, 2-8	\$ 1,136.00	\$ 2,272.00	\$ 2,272.00
ROOF VENT	CONT. RIDGE VENT	\$ 150.00	\$ 300.00	\$ 300.00
GUTTERS	FRONT/REAR	\$ 620.00	\$ 1,240.00	\$ 1,240.00
PAINT/PRIMER	WHITE/GALS	\$ 1,200.00	\$ 2,400.00	\$ 2,400.00
DEBRI REMOVAL	20YD.DUMPSTER	\$ 896.00	\$ 1,792.00	\$ 1,792.00
INSULATE BASEMENT WALLS	SEAL/INSULATE	\$ 3,400.00	\$ 6,800.00	\$ 6,800.00
BASEMT WDWS	32X16	\$ 420.00	\$ 840.00	\$ 840.00
AIR EXCHANGER	UNIT	\$ 1,900.00	\$ 3,800.00	\$ 3,800.00
DUCT CLEANING	SYSTEM	\$ 700.00	\$ 1,400.00	\$ 1,400.00
LANDSCAPING	UNIT	\$ 6,800.00	\$ 13,600.00	\$ 13,600.00
LABOR	UNIT	\$ 32,580.00	\$ 65,120.00	\$ 65,120.00
	ESTIMATED COST	\$90,724	\$198,284	\$202,000
	OLD RESERVE, NEW POST, BACON SQUARE, SIGNOR - ESTIMATE TOTAL COST			\$ 488,008.00
	POPPLTOWN UNITS ESTIMATE COST/TOTAL	4	\$ 125,498.00	\$ 501,992.00
	GRAND TOTAL \$			990,000.00

**ICDBG MOLD RENOVATIONS  
3BEDROOM RANCH POPPLETOWN UNITS**

ESTIMATE COST: Prepared by		Project Superintendent	
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TRUSSES	2X4- 24'/18"HL/24"OH	25	\$ 64.00 \$ 1,600.00
ROOF SHEATING	4X8-1/2"	50	\$ 12.00 \$ 600.00
SHINGLES 14x53	30YR,3TAB	17	\$ 52.00 \$ 884.00
R50 BLOWN INS.	R50 CELLULOSE16"	1008	\$ 1.00 \$ 1,008.00
WINTERGUARD	3X65'	4	\$ 52.00 \$ 208.00
D-EDGE	10'	14	\$ 5.00 \$ 70.00
FELT #15	432'ASTM226	4	\$ 23.00 \$ 92.00
FACSA	10'	14	\$ 11.00 \$ 154.00
METAL FACSA	10"	14	\$ 9.00 \$ 126.00
SOFFIT	10'	14	\$ 8.00 \$ 112.00
HOUSE WRAP	150'RL	2	\$ 90.00 \$ 180.00
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BASE BOARD	14'	298	\$ 3.00 \$ 894.00
INTERIOR DOORS	2-8/2-6/2-2/6-0.	13	\$ 90.00 \$ 1,170.00
SIDING	24X44	1050	\$ 3.00 \$ 3,150.00
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		<b>TOTAL MATERIAL</b>	<b>\$ 76,298.00</b>
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## MOLD RENOVATION ICDBG 2007

SCATTERED UNITS

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		2 2 BR	4 3 BR	4 4 BR
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SHINGLES15x50	25YR,3TAB	\$ 1,170.00	\$ 2,700.00	\$ 2,880.00
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FACSLA PINE	10' - 1X6PINE	\$ 308.00	\$ 618.00	\$ 618.00
METAL FACSLA	10'	\$ 252.00	\$ 504.00	\$ 504.00
SOFFIT	10'	\$ 224.00	\$ 448.00	\$ 448.00
HOUSE WRAP	150'RL	\$ 300.00	\$ 600.00	\$ 600.00
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BASE BOARD	14'	\$ 960.00	\$ 2,384.00	\$ 2,384.00
CABINETRY	SET	\$ 14,640.00	\$ 29,280.00	\$ 29,280.00
INTERIOR DOORS	2-8/2-6/2-2/6-0.	\$ 1,080.00	\$ 3,240.00	\$ 4,680.00
SIDING	26x48	\$ 5,184.00	\$ 12,600.00	\$ 14,976.00
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ROOF VENT	CONT. RIDGE VENT	\$ 150.00	\$ 300.00	\$ 300.00
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INSULATE BASEMENT WALLS	SEAL/INSULATE	\$ 3,400.00	\$ 6,800.00	\$ 6,800.00
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DUCT CLEANING	SYSTEM	\$ 700.00	\$ 1,400.00	\$ 1,400.00
LANDSCAPING	UNIT	\$ 6,800.00	\$ 13,600.00	\$ 13,600.00
LABOR	UNIT	\$ 32,580.00	\$ 65,120.00	\$ 65,120.00
	<b>ESTIMATED COST</b>	<b>\$90,724</b>	<b>\$195,284</b>	<b>\$202,000</b>
<b>OLD RESERVE, NEW POST, BACON SQUARE, SIGNOR - ESTIMATE TOTAL COST</b>			<b>\$ 488,008.00</b>	
<b>POPPLETOWN UNITS ESTIMATE COST/TOTAL</b>		<b>4</b>	<b>\$ 125,498.00</b>	<b>\$ 501,992.00</b>
<b>GRAND TOTAL \$</b>			<b>990,000.00</b>	

### Accounting Certification

We have reviewed the financial management systems of grants for the Lac Courte Oreilles Band of Lake Superior Chippewa Indians for the year ended September 30, 2006 and the related internal controls to determine if the financial management systems and controls in effect are in compliance with standards as set forth in Title 25, Chapter V of the Code of Federal Regulations, Part 900 Subpart F. The financial management systems for grants shall provide for:

1. Accurate, current and complete disclosure of the financial results of each grant program in accordance with federal reporting requirements and for each sub grant in accordance with the Lac Courte Oreilles Band of Lake Superior Chippewa Indians Tribal Council's requirements.
2. Records which identify adequately the source and application of funds for each grant or sub grant supported activities. These records shall contain information pertaining to grant or sub grant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays, and income.
3. Effective control over and accountability for all grant or sub grant funds and real and personal property required with grant or sub grant funds. The Lac Courte Oreilles Band of Lake Superior Chippewa Indians Tribal Council shall adequately safeguard all such property and shall assure that it is used solely for authorized purposes.
4. Comparison of actual with budgeted amounts for each grant or sub grant, and, when specifically required by the performance reporting requirements of the grant or sub grant, relation of financial information with performance or productivity data, including the production of unit cost information.
5. Procedures to minimize the time elapsing between the transfer of funds from the United States Treasury and the disbursement by the Lac Courte Oreilles Band of Lake Superior Chippewa Indians Tribal Council, whenever funds are advanced by the federal government. When advances are made by a letter-of-credit method, the Lac Courte Oreilles Band of Lake Superior Chippewa Indians Tribal Council shall make draw downs from the U.S. Treasury as close as possible to the time of making the disbursements.
6. Procedures for determining the allowability and allocability of costs shall be in accordance with the applicable cost principles.
7. Accounting records which are supported by source documentation.
8. A systematic method to assure timely and appropriate resolution of audit findings and recommendations.

Based on our review, we hereby certify that the financial management systems for grants do meet the requirements, in all material respects, with the provisions referred to above, except for not implementing a property management system in accordance with Common Rule.

*Roe and Meyer SC*

Roe and Meyer, S.C. Certified  
Public Accountants

June 4, 2007

**TOSTRUD & TEMP, S.C.**  
*Certified Public Accountants*

**Accounting Certification**

We have reviewed the financial management systems of grants for the Lac Courte Oreilles Housing Authority for the year ended December 31, 2005 and the related internal controls to determine if the financial management systems and controls in effect are in compliance with auditing standards generally accepted in the United States of America and Government Auditing Standards, issued by the Comptroller General of the United States.

1. Accurate, current and complete disclosure of the financial results of each grant program in accordance with federal reporting requirements and for each sub grant in accordance with the Lac Courte Oreilles Housing Authority's requirements.
2. Records which identify adequately the source and application of funds for each grant or sub grant supported activities. These records shall contain information pertaining to grant or sub grant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays, and income.
3. Effective control over and accountability for all grant or sub grant funds and real and personal property required with grant or sub grant funds. The Lac Courte Oreilles Housing Authority shall adequately safeguard all such property and shall assure that it is used solely for authorized purposes.
4. Comparison of actual with budgeted amounts for each grant or sub grant, and, when specifically required by the performance reporting requirements of the grant or sub grant, relation of financial information with performance or productivity data, including the production of unit cost information.
5. Procedures to minimize the time elapsing between the transfer of funds from the United States Treasury and the disbursement by the Lac Court Oreilles Housing Authority. Whenever funds are advanced by the federal government, when advances are made by a letter-of-credit method, the Lac Courte Oreilles Housing Authority shall make draw downs from the U.S. Treasury as close as possible to the time of making the disbursements.
6. Procedures for determining the allowability and allocability of costs shall be in accordance with the applicable cost principles.



7. Accounting records which are supported by source documentation.
8. A systematic method to assure timely and appropriate resolution of audit findings and recommendations.

Based on our review, we hereby certify that the financial management systems for grants do meet the requirements, in all material respects, with the provisions referred to above.

*Tostrud + Temp S.C.*

TOSTRUD & TEMP, S.C.

September 19, 2006

14077 e central avenue. brule, wisconsin 54820

phone (715) 372-4660. fax (715) 372-4661

*"For the Lord is great and greatly to be praised." - Ps. 96-4a*



**IT IS RECOMMENDED THAT YOU PRINT THESE INSTRUCTIONS BEFORE CONTINUING**

It may be helpful to print out a copy of the instructions and have them on hand while creating your eLOGIC MODEL™. These instructions may not look exactly as displayed on your screen. To print any of the 12 Worksheets, select the TAB with your cursor at the bottom of screen and use your print function (usually File | Print).

**Do not modify the workbook. Do not change the integrity of the form by adding additional tabs or worksheets. The instructions provided here will meet your needs.**

**SECURITY AND THE USE OF "MACROS"**

The 2007 HUD eLogic Model™ when downloaded and opened may prompt a "Macro" alert on your screen. "Macros" are a form of programming used in Excel to enable additional functionality. You will need to "enable" the "Macros" to use all functions on your eLOGIC MODEL™. After submission of your eLogic Model™ grant application, you may reset your security levels to their original settings. Depending on your version of Excel™, there are several steps you must take in order to use the eLogic Model™. A description is provided below for three most common versions of Excel™ in use today, one of which is probably installed on your computer.

**NOTE: If you do not enable the "Macros" your eLogic Model™ will not function properly. If you are working in a network, and you cannot control your desktop settings, contact your system administrator for support. Some of you may already be very familiar with Macros. If you are not, here are some easy step-by-step instructions for you to follow to enable the Macros.**

Excel™ 2003 - There are four levels of security regarding the use of "Macros": Very High, High, Medium, and Low. If upon opening the eLogic Model™ the dialog box states that you must change your Security setting to enable "Macros", your security settings are either set to Very High or High and you must take the following steps: Go to the toolbar at the top of the screen and click on "Tools". Then click "Options" and then click the tab labeled "Security" located on the top right of the window. At the bottom right of the window, click the button that says "Macro Security" and select Medium as your setting. Click "OK" and then click "OK" in the Options window. Close your eLogic Model™. Re-open your eLogic Model™. You will now receive a dialog box with the message "Security Warning". Click on the button at the bottom that says "Enable Macros". Your eLogic Model™ will open and be fully functional.

If upon opening the eLogic Model™ the dialog box gives you an option to enable "Macros" at that moment, it means that Security is set to Medium. All you need to do is to click the button at the bottom of the dialog box that says "Enable Macros". Your eLogic Model™ will open and be fully functional.

If upon opening the eLogic Model™ there is no dialog box, your Security setting is set on "Low" and your Macros are already enabled. There is no additional step needed.

Excel™ 2000 - There are three levels of security regarding the use of "Macros": High, Medium, and Low. The High security setting automatically disables most Macros and does not alert you to the action. If, when entering Services/Activities in Column 3, or Outcomes in Column 5, you select "other," the word "other" appears and remains in the cell, the Macro is not functioning. Save and close changes you have made thus far. Then from the menu, select "Tools," "Macro," "Security". A dialog box will open. Click on the "Security" TAB and select "Medium," then click "OK." Reopen your eLogic Model™. A dialog box will open. Select "Enable Macros". Your eLogic Model™ will open and be fully functional.

If your copy of Excel is already set to "Medium" security, the enable Macros dialog box will appear and you can proceed as above.

The low security setting automatically enables all Macros and you will not receive any message. The eLogic Model™ will open and be fully functional.

Excel™ 1997 - If you are using this version of Excel, please contact HUD's NOFA Information Center for assistance at (800) HUD-8929. Persons with hearing or speech impairments may access this number via TTY by calling the Federal Information Relay Service at (800) 877-8339. The NOFA Information Center is open between the hours of 10 a.m. and 6:30 p.m. eastern time, Monday through Friday, except federal holidays.

#### **eLOGIC MODEL™ SPECIAL FEATURES**

There are several new features available in this year's eLOGIC MODEL™:

**Populate Worksheets** - When identifying information is entered in the Year1 worksheet, e.g. Applicant Name, Project Name, and Component Name, this information will automatically populate or carryover into the Year2, Year 3, and Total worksheets. Activities and Outcomes do not populate as there are any number of combinations of activities that can be performed over the life of an award.

**Expand Worksheet Columns for Better Viewing** - The Need (Column 2), Service or Activity (Column 3) and Outcome (Column 3) columns can be expanded for better viewing. See additional details under, COLUMNS OF THE eLOGIC MODEL™ (1-7).

#### **Use of "Other" in the Dropdown List for "Services or Activities/Output" and "Outcome"**

The dropdown lists for "Services or Activities/Output" and "Outcome" can be expanded to include up to three additional entries. If a service/activity and outcome in the existing dropdown lists do not adequately reflect your project, you may select "other" and add up to three additional entries for "Services or Activities/Output" and three additional entries for "Outcome". These entries are for the total duration of the project, not each year. For example, if you want to add one "other" activity and associated outcome in Year1, Year2 and Year3 you will not be able to add any additional "other" items. Please bear this in mind when determining the need to select "other" rather than an item already identified in the drop down menu. See additional details under, COLUMNS OF THE eLOGIC MODEL™ (1-7).

#### **A Reporting TAB Has Been Added**

The worksheets of the eLogic Model™ contain projections of services or activities and outcomes in support of your proposed project. If you are selected for funding, your approved eLogic Model™ will lock the approved activities/output and proposed projections of your eLogic Model™ and also open up the post reporting functionality. You will be provided a copy of your approved eLogic Model™ with your award agreement. The approved eLogic Model™ will allow you to report actual numbers in the space provided in the "post" column.

A "Reporting" TAB has been designed to contain two text boxes. Use the text boxes provided. The first provides an area for reporting any positive/negative deviations from the approved eLogic Model™ projections and the basis for the deviations. The second text box is to be used to report responses to the Management Questions negotiated by the HUD program offices as part of your award. See additional details under, INSTRUCTIONS FOR REPORTING PERFORMANCE TO HUD.

This ends the highlights section. The following are detailed instructions for completing the eLogic Model™.

## INSTRUCTIONS FOR COMPLETING THE eLOGIC MODEL™

### BACKGROUND

The eLogic Model™ form (4 copies, Year1 Year2 Year3 and Total) is contained within this Excel™ Workbook. The Workbook has 12 separate worksheets and each worksheet is identified by a TAB at the bottom of the page. **If you cannot see all the TABS, be sure to maximize the workbook by clicking the middle button in the top right corner of the workbook to expand your window or move your bottom scroll bar so all the TABS appear. Usually this situation does not occur. If it does, the Reporting TAB and the Evaluation TAB may be hidden until you follow the above procedure.** The worksheet(s) labeled "Year1 Year2 Year3 and Total" contain the actual form that you should complete. The other Worksheet(s) provide supportive and reporting information. The TABS are:

Instructions	} 12 - Worksheets
Year1	
Year2	
Year3	
Total	
GoalsPriorities	
Needs	
Services	
Outcomes	
Tools	
Reporting	
Evaluation	

### ACCESSING THE eLOGIC MODEL™

Select the TAB labeled "Year1." This is the first copy of the eLogic Model™ form. The additional copies of the form labeled Year2 Year3 and Total are used for multiple year grants to specify Activities and Outcomes for each year of the proposed program. Year2, for example, would contain Activities and Outcomes projected for the second year ONLY (not a cumulative total from Year1). Applicants applying for a multiple year grant must complete a worksheet for each year of performance, plus a total worksheet showing a cumulative total for all years covered by the award. The "Total" worksheet must reflect the sum of all years of the grant. For example, a two-year grant would include Year1 and Year2 and Total. A three-year grant would include Year1 Year2 Year3 and Total. A one-year grant would include ONLY Year1. A Total worksheet is not required for one year grants.

**NOTE: Each cell of the worksheet is "lock protected" so you can only make entries in cells that are for input as directed by these instructions.**

To complete the eLogic Model™ form, in the first row there is a label, "Applicant Name", cell [E1]. Enter the name of the applicant organization applying for funding. Enter the Applicant Name exactly as it appears in box 8a of the SF-424. Once you have entered your "Applicant Name" in the worksheet labeled Year1, the Year2, Year3, and Total worksheets will automatically populate the same information.

In the second row there is a label, "Project Name." Enter the name of your project in cell [E2]. Use exactly the same name as you did on box 15 of the form SF-424. If you are submitting multiple applications under the same applicant name for the same HUD program, you must include a project name that can distinguish between the two applications and logic models submitted, e.g. HBCU-Dillard-Affordable Housing15, HBCU-Dillard-Affordable Housing16. If the project name is not known at time of application then insert TBD1, TBD2, etc, e.g. HBCU-Dillard-TBD1, HBCU-Dillard-TBD2. Once you have entered your "Project Name" in the worksheet labeled Year1, the Year2, Year3, and Total worksheets will automatically populate the same information.

Immediately below "Project Name," there is a field for "Term," which corresponds to worksheets for Year1, or Year2, or Year3, or Total. This field is already pre-filled. Immediately below TERM is a field designated for the HUD Program Name. This field is already pre-filled; please verify that it matches the program for which you are applying. You will also see a field labeled "Component Name:", cell [L-4]. If the program under which you are applying has components, e.g., EOI or PEI under the Fair Housing Initiatives Program, or a TA Program under the CDTA NOFA, enter the name of the program component for which you are applying. If there are no components in the funding opportunity for which you are seeking funding, leave this field blank. Once you have entered your "Component Name" in the worksheet labeled Year1, Year2, Year3, and Total will automatically populate the same information.

To the right of the Applicant and Project fields, there are fields labeled Period and Start Date and End Date. Leave these fields blank. They are for reporting purposes. See additional details under, INSTRUCTIONS FOR REPORTING PERFORMANCE TO HUD.

## COLUMNS OF THE eLOGIC MODEL™ (1-7)

### Column 1 – Policy

Under the "Policy" Column (1), there are actually two columns; one for HUD Goals, and one for Policy Priority. Review the HUD Goals and Policy Priorities by clicking on the TAB labeled "GoalsPriorities" at the bottom of the workbook. For each of the eLogic Model™ worksheets used in your application (Year1 Year2 Year3 Total) select the HUD Goals and Policy Priorities that your program will address. You do this by clicking the mouse in one of the cells in column (1) of the worksheets labeled (Year1 Year2 Year3 Total). A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of letters and numbers that correspond to the HUD Goals and Policy Priority will appear. Select one of the HUD Goals and Policy Priority letter/number in the list by clicking it. Repeat this process in other cells of the HUD Goals column and the Policy Priority column until you have selected all that apply to your application.

### Column 2 – Planning

Under the "Planning" Column (2), select a Problem,Need,Situation statement. Do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of Need Statements appears. Select one or more of the Need Statements in the list by clicking it. Because the column is too narrow to show the full Need Statement in the dropdown list, you may wish to refer to the TAB labeled "Needs" to see the full Need Statement or you can (using your mouse) click on the shaded cell [D5] labeled **Problem, Need, Situation** and this will expand the cell. To return the cell to its original size, click again on cell [D5] labeled **Problem, Need, Situation**.

**NOTE: When expanding and returning the cell to its original size, click once. Do not double click.**

When you select a Need Statement, the full Need Statement will fill the cell. If you don't want this Need Statement, you can simply click the dropdown arrow again and select another item. Or, you can delete a Need Statement by selecting the cell and clicking the DELETE KEY on your keyboard. If you want to select more than one Need Statement, go to the next cell in the column and repeat the process, selecting the appropriate Need Statement. You can do this until you have selected all the Needs Statements that are appropriate to your proposed program. The selections should reflect the needs identified in your response to your Rating factor narratives. There is no need to select all the Need Statements if they do not apply to what you plan to address or accomplish with the funding requested.

### Column 3 – Programming

Under the "Programming" Column (3), select a Service or Activity. You do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of eligible Services or Activities appears. Select one of the Services or Activities in the list by clicking it. List Year1 Services or Activities using the Year1 worksheet of the form. List Year2 Services or Activities using the Year2 worksheet of the form. List Year3 Activities using the Year3 worksheet of the form. Make a composite Logic Model of all years on the Total worksheet. If you are only applying for one year grant, you do not need to create a composite Logic Model on the Total TAB. Because the column is too narrow to show the full Services or Activities/Outputs Statement in the dropdown list, you may wish to refer to the TAB labeled "Services" to see the full range of eligible Services or Activities/Outputs or you can (using your mouse) click on the shaded cell [E5] **Service or Activities/Outputs**. This will expand the cell. To return the cell to its original size, click on shaded cell [E5] **Service or Activities/Outputs**.

**NOTE: When expanding and returning the cell to its original size, click once. Do not double click.**

**NOTE: If the Service or Activity/Outputs that you are looking for does not appear on the dropdown list, choose "Other" from the dropdown list.** A dialog box will appear that says "Year1". Click "OK" and another dialog box will appear that says "You have selected "Other" which means that "you must create a new Activity or Outcome and a Unit of Measure, are you prepared to do this Now?"; click "Yes" if you wish to continue. You will see an input window that says "Enter a new Activity or Outcome to your selection list". Enter your Service or Activity in the field provided and click "OK". A second window will appear that says "Specify a Unit of Measure for the Activity or Outcome you entered". Enter the unit of measure in the field provided and click "OK". The new Service or Activity will appear in the Logic Model cell and it will be added to the dropdown list. **YOU ARE ONLY PERMITTED TO ADD A TOTAL OF THREE NEW SERVICES OR ACTIVITIES PER LOGIC MODEL.**

**In the event that you want to delete, or change your newly created Service or Activity, click the TAB labeled Services at the bottom of your screen and then click cell [B1] "Click here to allow deletion of New Activities" at the top right of the window.** A dialog box will appear that says "Click on a new Activity to delete it from you Logic Model", click "OK". A dialog box will appear that says "Caution! This will delete all instances of new services or activities in your Logic Model, do you wish to continue?" Click "Yes". The new Activity you added will be displayed with the prefix "new". You can only delete new Services or Activities.

### Column 4 – Measure

Notice that as the Service or Activity you selected appears in the cell, a corresponding unit of measure appears or populates in the Measure column. The unit of measure could be "persons", "dollars", "square feet", "houses", or some other unit of measure that relates to the selected Service or Activity. Immediately below the unit of measure are two blank cells. Enter the projected number of units you are proposing to deliver or accomplish in the "Pre" column. The "Post" column is locked to be used later for reporting purposes.

### Column 5 – Impact

Under the "Impact" Column (5), select the Outcome that best corresponds to the Need and Service or Activity that you just previously identified and selected for your logic model. Do this the same way as previously described for Needs and Services or Activities. Select an Outcome from the dropdown list. Notice that once again, a unit of measure automatically appears in the next column "Measure". Because the column is too narrow to show the full Outcome Statement in the dropdown list, you may wish to refer to the TAB labeled "Outcomes" to see the full range of Outcomes or you can (using your mouse) click on the shaded cell [I5] **Outcome**. This will expand the cell. To return the cell to its original size, click on shaded cell [I5] **Outcome**.

**NOTE: When expanding and returning the cell to its original size, click once. Do not double click.**

**NOTE:** If the Outcome that you are looking for does not appear on the dropdown list, choose "Other" from the dropdown list. A dialog box will appear that says "Year1". Click "OK" and another dialog box will appear that says "You have selected "Other" which means that "you must create a new Activity or Outcome and a Unit of Measure, are you prepared to do this Now?", click "Yes" if you wish to continue. You will see an input window that says "Enter a new Activity or Outcome to your selection list". Enter your Outcome in the field provided and click "OK". A second window will appear that says "Specify a Unit of Measure for the Activity or Outcome you entered". Enter the unit of measure in the field provided and click "OK". The new Outcome will appear in the Logic Model cell and it will be added to the dropdown list. **YOU ARE ONLY PERMITTED TO ADD A TOTAL OF THREE NEW OUTCOMES PER LOGIC MODEL.**

**In the event that you want to delete, or change your newly created Outcome,** click the TAB labeled Outcomes at the bottom of your screen and then click cell [B1] "Click here to allow deletion of New Outcomes" at the top right of the window. A dialog box will appear that says "Click on a new Outcome to delete it from your Logic Model", click "OK". A dialog box will appear that says "Caution! This will delete all instances of new outcomes in your Logic Model, do you wish to continue?" Click "Yes". The new Outcome you added will be displayed with the prefix "new". You can only delete new Outcomes.

#### **Column 6 – Measure**

Under the "Measure" Column 6, specify a projected number of Outcome units you are proposing.

**Repeat the process of specifying a Need, a Service or Activity, and an Outcome using as many rows as is necessary to fully describe your proposal.** The eLogic Model™ form extends to about three pages when printed out. You may view a preprint of your model at any time by selecting from the Menu bar at the very top of the Excel Window: FILES | Print Preview. It is recommended that you do this periodically to get a better view of the logic model you are creating.

**NOTE:** You can adjust the look of your logic model by skipping rows, so that Needs, Activities, and Outcomes are grouped appropriately.

**CAUTION, DO NOT CUT & PASTE ITEMS FROM ONE COLUMN TO ANOTHER.** For example, do not cut and paste an item from the Needs column to the Service or Activity column, or the Activity column to the Outcome column. You will produce an unstable worksheet which will behave erratically, requiring you to start over with a new blank eLogic Model™ workbook.

#### **Column 7 – Accountability**

Under the "Accountability" column (7), enter the tools and the process of collection and processing of data in your organization to support all project management, reporting, and responding to the Management Questions. This column provides the framework for structuring your data collection efforts. If the collection and processing of data is not well planned, the likelihood of its use to further the management of the program and support evaluation activity is limited. If data are collected inconsistently, or if data are missing, or if data are not retrievable, or if data are mishandled, the validity of any conclusions is weakened.

The structure of Column 7 contains five components in the form of dropdown fields that address the Evaluation Process. You are responsible for addressing each of the five steps that address the process of managing the critical information about your project.

- A. Tools for Measurement
- B. Where Data Maintained
- C. Source of Data
- D. Frequency Collection
- E. Processing of Data

You may select up to five choices for each of the five processes (A-E) that supports Accountability and tracks Outputs and Outcomes. Given the limited space, please identify the most frequent sources for the processes (A-E). As you proceed through the remaining components, B through E, specify those components in the same order as you selected the "Tools For Measurement" listed under item A. That is, if the first Tool is "Pre-post Test," then the first item under B "Where Data Maintained" must identify where the pre-post test data is maintained, and so on through E the first entry should pertain to "Pre-post Test." Likewise, if the second item in A is "Satisfaction Surveys," then specify the second item in B through E as it pertains to "Satisfaction Surveys."



**A. Tools for Measurement.** A device is needed for collecting data; e.g., a test, a survey, an attendance log, an inspection report, etc. The tool "holds" the evidence of the realized Output or Outcome specified in the logic model. At times, there could be multiple tools for a given event. A choice can be made to use several tools, or rely on one that is most reliable, or most efficient but still reliable. Whatever the tool, it is important to remain consistent throughout the project.

Instructions: Under the Accountability column, select your choices of Tools to Track Outputs and Outcomes. You do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of Tools appears. Select one or more of the Tools in the list by clicking it.

**B. Where Data Maintained.** A record of where the data or data tool resides must be maintained. It is not required that all tools and all data are kept in one single place. You may keep attendance logs at the main office files, but keep other tools or data such as a "case record" in the case files at the service site. It is important to designate where tools and/or data are to be maintained. For example, if your program has a sophisticated computer system and all data is entered into a custom-designed database, it is necessary to designate where the original or source documents will be maintained.

Instructions: Under the Accountability column, select your choices of Where Data Maintained. You do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of Where Data Maintained appears. Select one or more of the Where Data Maintained in the list by clicking it.

**C. Source of Data.** This is the source where the data originates. Identify the source and make sure that it is appropriate.

Instructions: Under the Accountability column, select your choices of Source of Data. You do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of Source of Data appears. Select one or more of the Source of Data in the list by clicking it.

**D. Frequency of Collection.** Timing matters in data collection. In most instances, you want to get it while it occurs. Collect data at the time of the encounter; if impossible, when it is most opportune immediately thereafter. For example, collect report card data immediately upon the issuance of report cards. Do not wait until after the school year is over. Collect feedback surveys at the conclusion of the event, not a few months later when clients may be difficult to reach. Reporting can be done at anytime if the data is already collected. Another important aspect of this dimension is consistency. If some post tests are collected soon after the event, but others are attempted months later, the data are confounded by the differences in the timing. If some financial data are collected at the middle of the month and others at the end of the month, the data may be confounded by systematic timing bias.

Instructions: Under the Accountability column select your choices of Frequency of Collection. You do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of Frequency of Collection appears. Select one or more of the Frequency of Collection in the list by clicking it.

**E. Processing of Data.** This is where you identify the mechanism that will be employed to process the data. Some possibilities are: manual tallies, computer spreadsheets, flat file database, relational database, statistical database, etc. The eLogic Model™ is only a summary of the program and it cannot accommodate a full description of your management information system. There is an implicit assumption that the grantee has thought through the process to assure that the mechanism is adequate to the task(s).

Instructions: Under the Accountability column, select your choices of Processing Data. You do this by clicking the mouse in one of the cells of this column. A little dropdown arrow appears. Click the dropdown arrow and a dropdown list of Processing of Data appears. Select one or more of the Process of Data in the list by clicking it.

#### **SAVING YOUR eLOGIC MODEL™**

When you are finished completing the eLogic Model™ form, or wish to stop and continue later, save the file by going to Excel's™ Menu bar and choosing FILE | Save As. Then specify a name for the file, and note where you save the file on your hard drive. Use the name of the HUD Program and your organization name to form a file name for your eLogic Model™, e.g., HBCU-Dillard.xls or HCP-UrbanLeague.xls. Excel™ automatically adds the file extension ".xls" to your file name. Make sure the file extension .xls is not capitalized. In following these directions, if your organizational name exceeds the 50 character limit for space, you should abbreviate your organizational name by either using its initials or a recognizable acronym, e.g. South Carolina State University maybe written as SCSU; Howard University maybe written as HOWDU.

If you are submitting multiple applications under the same applicant name for the same HUD program, you must include a project name that can distinguish between the two applications and logic models submitted, e.g. HBCU-Dillard-Affordable Housing15.xls, HBCU-Dillard-Affordable Housing16.xls. Please be sure to review the file formats and naming requirements contained in the General Section.

Later, you will "Attach" this file to your application. Please remember the name of the file that you are saving. Be sure to delete any earlier version so that when you go to attach the file to your application you select the appropriate and final file.

A single workbook will be adequate for completing your eLogic Model™.

This ends the instructions for completing your Logic Model for application submission.

#### **INSTRUCTIONS FOR REPORTING PERFORMANCE TO HUD**

**Do not change the integrity of the form by adding additional tabs or worksheets. The instructions and the worksheets provided in your eLogic Model™ will meet your needs.**

If your project is selected for funding, the eLogic Model™ will be used as a monitoring and reporting tool upon final approval from the HUD program office. Upon approval, HUD will open the reporting side of the eLogic Model™ allowing you to submit actual outputs and outcomes against approved activities and projected outcomes. HUD will also open the Reporting TAB for you to meet the reporting requirements that are discussed below. The HUD program office will send you the approved eLogic Model™ to be used for reporting purposes. Identify the reporting period covered by the report in Column "i" of the worksheet lines 1, 2 and 3.

To the right of the Applicant and Project fields, there are fields labeled Period and Start Date and End Date. When actually reporting performance on your approved eLogic Model™ form, enter a Start Date and End Date that reflects the reporting period you will be submitting in accordance with required reporting time frames, e.g.; quarterly, semiannually, annually, final. For the Start Date, enter the start date of the reporting period. For End Date enter the End Date for the reporting period. When entering the dates, use the format MM/DD/YYYY.

The Reporting TAB serves two functions: 1) If applicable, use it to describe or explain actual performance as compared to what was projected and provide an explanation of any deviation (positive or negative) from the projections in your approved eLogic Model™, 2); and to respond to the Management Questions identified in the Evaluation TAB.

The worksheet labeled "Reporting" contains three large text boxes to be used by grantees when reporting. Use the reporting worksheet to add any further description or explanation about actual performance or to explain variances between projected Services or Activities and Outcomes vs. Actual Services or Activities and Outcomes.

When responding to the Management Questions, first write the Management Question followed by the response.

#### **COMPLETING PERFORMANCE INFORMATION in YEAR1, YEAR2, YEAR3, AND TOTAL TABS.**

**The HUD approved eLogic Model™ will be used as a monitoring and reporting tool for your grant award.** HUD will open the reporting side of the eLogic Model™ allowing you to submit actual outputs and outcomes against approved activities and projected outcomes. The HUD program office will send you the approved eLogic Model™ to be used for reporting purposes. **Identify the reporting period covered by the report in Column "I" of the worksheet lines 1, 2 and 3.**

#### **Narrative Description - Positive/Negative Deviation from Approved Logic Model Projections**

In addition to your submission of your eLogic Model™ results, you must include a narrative indicating any positive or negative deviations from projected outputs and outcomes as contained in your approved eLogic Model™ and explain the basis for the actual performance as compared to what was projected. In your narrative be sure to identify the output and outcome that you are describing from your approved eLogic Model™ and the reason why this deviation occurred. When doing this, create a paragraph header labeled, "Narrative Description - Positive/Negative Deviation from Approved Logic Model Projections".

**Save the eLogic Model™ file you receive from HUD.** Each time you submit your report to HUD, add the reporting period and year to the file name, e.g. HBCU-Dillard-Affordable Housing16qtr107 for a 1st quarter report, HBCU-Dillard-Affordable Housing16qtr207 for a 2nd quarter or semi-annual report, HBCU-Dillard-Affordable Housing16qtr307 for a 3rd quarter report, and HBCU-Dillard-Affordable Housing 16qtr407 for a 4th quarter or annual report. When reporting for a multiple year award, use the same format but change the year, e.g HBCU-Dillard-Affordable Housing16qtr108.

#### **Response to Management Questions**

The Management Questions are located in the Evaluation TAB. It lists the Management Questions that apply to your proposed program. Applicants who receive awards will be notified about which Management Questions will be used for monitoring accountability throughout the project. The data in your eLogic Model™ should enable you to address most or all of these Management Questions. The data collected during the course of your work and captured in the eLogic Model™ will also be useful to you in evaluating the effectiveness of your program. For eLogic Model™ Training via webcast, consult the webcast schedule found at HUD's website at <http://www.hud.gov/offices/adm/grants/fundsavail.cfm>. If you have any questions regarding reporting requirements, please contact your HUD program representative.

In your report and in accordance with your NOFA instructions and grant agreement, respond to the Management Questions found in the Evaluation TAB. When responding to the Management Questions, use the text box in the Reporting TAB and write the Management Question followed by the response for all Management Questions applicable to your activities.

#### **Submission Requirements**

In addition to following the reporting requirements in your award agreement, you must also submit an electronic copy. (See the FY2007 General Section of the NOFA for the HUD approved electronic formats)









Housing and Urban Development  
535-0114 exp. 09/30/2007

Component Name:

Housing Rehabilitation

Evaluation Tools

7

Accountability

Component Name:

Housing Rehabilitation

Evaluation Tools

7

Accountability









Component Name:

Housing Rehabilitation

Evaluation Tools

7

Accountability

A. Tools for Measurement


B. Where Data Maintained


C. Source of Data


D. Frequency of Collection


E. Processing of Data





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Component Name:

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D. Frequency of Collection


E. Processing of Data






Component Name:

Housing Rehabilitation

Evaluation Tools

7

Accountability

Component Name:

Housing Rehabilitation

Evaluation Tools

7

Accountability

HUD Goals	
A1	<b>Increase homeownership opportunities.</b> (1) Expand national homeownership opportunities.
A2	<b>Increase homeownership opportunities.</b> (2) Increase minority homeownership.
A3	<b>Increase homeownership opportunities.</b> (3) Make the home-buying process less complicated and less expensive.
A4	<b>Increase homeownership opportunities.</b> (4) Reduce predatory lending practices through reform, education and enforcement.
A5	<b>Increase homeownership opportunities.</b> (5) Help HUD-assisted renters become homeowners.
A6	<b>Increase homeownership opportunities.</b> (6) Keep existing homeowners from losing their homes.
B1	<b>Promote Decent Affordable Housing.</b> (1) Expand access to and availability of decent, affordable rental housing.
B2	<b>Promote Decent Affordable Housing.</b> (2) Improve the management accountability and physical quality of public and assisted housing.
B3	<b>Promote Decent Affordable Housing.</b> (3) Improve housing opportunities for the elderly and persons with disabilities.
B4	<b>Promote Decent Affordable Housing.</b> (4) Promote housing self-sufficiency.
B5	<b>Promote Decent Affordable Housing.</b> (5) Facilitate more effective delivery of affordable housing by reforming public housing and the Housing Choice Voucher program.
C1	<b>Strengthen Communities.</b> (1) Assist disaster recovery in the Gulf Coast region.
C2	<b>Strengthen Communities.</b> (2) Enhance sustainability of communities by expanding economic opportunities.
C3	<b>Strengthen Communities.</b> (3) Foster a suitable living environment in communities by improving physical conditions and quality of life.
C4	<b>Strengthen Communities.</b> (4) End chronic homelessness and move homeless families and individuals to permanent housing.
C5	<b>Strengthen Communities.</b> (5) Mitigate housing conditions that threaten health.
D1	<b>Ensure Equal Opportunity in Housing.</b> (1) Ensure access to a fair and effective administrative process to investigate and resolve complaints of discrimination.
D2	<b>Ensure Equal Opportunity in Housing.</b> (2) Improve public awareness of rights and responsibilities under fair housing laws.
D3	<b>Ensure Equal Opportunity in Housing.</b> (3) Improve housing accessibility for persons with disabilities.
D4	<b>Ensure Equal Opportunity in Housing.</b> (4) Ensure that HUD-funded entities comply with fair housing and other civil rights laws.
E1	<b>Embrace High Standards of Ethics, Management, and Accountability.</b> (1) Strategically manage human capital to increase employee satisfaction and improve HUD performance.
E2	<b>Embrace High Standards of Ethics, Management, and Accountability.</b> (2) Improve HUD's management and its internal controls to ensure program compliance and resolve audit issues.
E3	<b>Embrace High Standards of Ethics, Management, and Accountability.</b> (3) Improve accountability, service delivery, and customer service of HUD and its partners.
E4	<b>Embrace High Standards of Ethics, Management, and Accountability.</b> (4) Capitalize on modernized technology to improve the delivery of HUD's core business functions.

HUD Priorities	
A	<b>Providing Increased Homeownership and Rental Opportunities for Low- and Moderate-Income Persons, Persons with Disabilities, the Elderly, Minorities, and Persons with Limited English Proficiency.</b>
B1	<b>Improve our Nation's Communities.</b> (1) Bring private capital into distressed communities.
B2	<b>Improve our Nation's Communities.</b> (2) Finance business investments to grow new businesses.
B3	<b>Improve our Nation's Communities.</b> (3) Maintain and expand existing businesses.
B4	<b>Improve our Nation's Communities.</b> (4) Create a pool of funds for new small and minority-owned businesses.
B5	<b>Improve our Nation's Communities.</b> (5) Create decent jobs for low-income persons.
B6	<b>Improve our Nation's Communities.</b> (6) Improve the environmental health and safety of families living in public and privately owned housing.
B7	<b>Improve our Nation's Communities.</b> (7) Make communities more livable.
C1	<b>Encouraging Accessible Design Features.</b> (1) Visitability in new construction and substantial rehabilitation.
C2	<b>Encouraging Accessible Design Features.</b> (2) Universal Design.
D	<b>Providing Full and Equal Access to Grassroots Faith-Based and Other Community Organizations in HUD Program Implementation.</b>
E	<b>Participation of Minority-Serving Institutions (MSIs) in HUD Programs.</b>
F1	<b>Ending Chronic Homelessness.</b> (1) Creation of affordable housing units, supportive housing, and group homes.
F2	<b>Ending Chronic Homelessness.</b> (2) Establishment of a set-aside of units of affordable housing for the chronically homeless.
F3	<b>Ending Chronic Homelessness.</b> (3) Establishment of substance abuse treatment programs targeted to the homeless population.
F4	<b>Ending Chronic Homelessness.</b> (4) Establishment of job training programs that will provide opportunities for economic self-sufficiency.
F5	<b>Ending Chronic Homelessness.</b> (5) Establishment of counseling programs that assist homeless persons in finding housing, managing finances, managing anger, and building interpersonal relationships.
F6	<b>Ending Chronic Homelessness.</b> (6) Provision of supportive services, such as health care assistance that will permit homeless individuals to become productive members of society.
F7	<b>Ending Chronic Homelessness.</b> (7) Provision of service coordinators or one-stop assistance centers that will ensure that chronically homeless persons have access to a variety of social services.
G	<b>Removal of Regulatory Barriers to Affordable Housing.</b>
H	<b>Participation in Energy Star.</b>

F1	<b>Promote Participation of Faith-Based and Other Community Organizations.</b> (1) Reduce barriers to faith-based and other community organizations.
F2	<b>Promote Participation of Faith-Based and Other Community Organizations.</b> (2) Conduct outreach and provide technical assistance to strengthen the capacity of faith-based and community organizations to attract partners and secure resources.
F3	<b>Promote Participation of Faith-Based and Other Community Organizations.</b> (3) Encourage partnerships between faith-based and other community organizations and HUD's grantees and subgrantees.



**CAMP eLogic Model™**

**Copy to Column 2**

**PROBLEM, NEEDS, SITUATION**

Indian Tribes and Alaskan natives are in need of suitable living environments with decent housing, particularly for people with low to moderate incomes.

Indian Tribes and Alaskan Natives are in need of community infrastructure and facilities to improve the health, safety, and well-being of residents.

Indian Tribes and Alaskan natives are in need of economic development and job creation activities to foster self-sufficiency.

There are urgent unmet needs that impact upon the health and safety of the Native American and Alaskan Native communities that must be addressed.



CAMP eLogic Model™

[Click here to allow deletion of 'New' Activities](#)

**Copy to Column 3**

SERVICES OR ACTIVITIES/OUTPUTS	UNITS
Acquisition of land-economic development – Acres	Acres
Acquisition of land-economic development – Square feet	Square Feet
Acquisition of land-housing – Acres	Acres
Acquisition of land-housing– Square feet	Square Feet
Acquisition of land-infrastructure – Acres	Acres
Acquisition of land-infrastructure – Square feet	Square Feet
Architectural/engineering drawings	Documents
Clearance-affordable housing – Acres	Acres
Clearance-affordable housing – Linear feet	Linear feet
Clearance-infrastructure – Acres	Acres
Clearance-infrastructure – Linear feet	Linear feet
Closing cost assistance	Homebuyer
Code enforcement	Violations
Connection to water distribution or sewer lines	Connections
Construction-multi-family homes – Owner occupied	Units
Construction-multi-family homes – Rental	Units
Construction-single family homes – Owner occupied	Units
Construction-single family homes – Rental	Units
Down payment assistance	Homebuyer
Drug and alcohol treatment center	Facilities
Energy efficiency improvements	Units
Environmental review	Documents
Families assisted with public services	Units of service
Financing	Dollars
Half-way houses	Houses
Health care facilities	Facilities
Homeless shelters	Shelters
Infrastructure-electric line	Linear feet
Infrastructure-gas line	Linear feet
Infrastructure-other	Other
Infrastructure-roads	Linear feet
Infrastructure-septic	Systems
Infrastructure-sewer	Linear feet
Infrastructure-utilities	Linear feet
Infrastructure-water line	Linear feet
Infrastructure-wireless	Networks created
Job training	Slots
Jobs created	Jobs
Jobs obtained	Jobs
Jobs retained	Jobs
Loan guarantees for mortgage financing – Guarantees	Guarantees
Loan guarantees for mortgage financing – Mortgages	Mortgages
Loan write down	Homebuyer
Micro-enterprises-grant – Businesses	Businesses
Micro-enterprises-grant – Dollars	Dollars
Micro-enterprises-loans – Businesses	Businesses

Micro-enterprises-loans – Dollars	Dollars
Public safety-ambulance station	Facilities
Public safety-detention center	Facilities
Public safety-fire station	Facilities
Public safety-police station	Facilities
Recreation center	Facilities
Rehabilitation-health hazard elimination	Interventions
Rehabilitation-multi-family homes-owner occupied	Units
Rehabilitation-multi-family homes-rental	Units
Rehabilitation-real property improvements-Dollars	Dollars
Rehabilitation-real property improvements-Units	Units
Rehabilitation-single family homes-owner occupied	Units
Rehabilitation-single family homes-rental	Units
Retrofit housing-accessibility	Units
Retrofit housing-visitability	Interventions
other	Other



CAMP eLogic Model™

[Click here to allow deletion of 'New' Outcomes](#)

**Copy to Column 5**

<b>ACHIEVEMENT OUTCOMES GOALS AND INDICATORS</b>	<b>UNITS</b>
Brought up to code	Buildings
Commercial space built	Square Feet
Education opportunities provided	Persons
Families receiving child care	Households
Families receiving child care-children in placement	Children
Half-way houses-residents	Persons
Infrastructure-households connected-electric line	Households
Infrastructure-households connected-gas line	Households
Infrastructure-households connected-other	Households
Infrastructure-households connected-roads	Households
Infrastructure-households connected-septic	Households
Infrastructure-households connected-sewer	Households
Infrastructure-households connected-utilities	Households
Infrastructure-households connected-water line	Households
Infrastructure-households connected-wireless	Households
Job training-training completed	Persons
Job training-training completed -- Jobs obtained	Persons
Jobs created	Persons
Jobs obtained	Persons
Jobs obtained - Dollars	Dollars
Jobs retained	Persons
Jobs retained - Dollars	Dollars
Micro enterprises established - Dollars	Dollars
Micro enterprises established - Micro enterprises	Micro enterprises
Micro enterprises expanded - Dollars	Dollars
Micro enterprises expanded - Micro enterprises	Micro enterprises
Micro enterprises stabilized - Dollars	Dollars
Micro enterprises stabilized - Micro enterprises	Micro enterprises
New clients served in homeless shelter	Persons
New clients who use facilities	Persons
New disabled clients who can now access facility	Persons
New homeowners	Households
New rental units	Households
Offices space built	Square Feet
Reduction in crime	Arrests
Reduction in drug-related crime	Arrests
Reduction in health related hazards	Injuries
Reduction in number of families in substandard housing	Families
Reduction in response time	Minutes
Retail space built	Square Feet
other	Other





## CAMP eLogic Model™

<b>A. Tools For Measurement</b>
Bank accounts
Construction log
Database
Enforcement log
Financial aid log
Intake log
Interviews
Mgt. Info. System-automated
Mgt. Info. System-manual
Outcome scale(s)
Phone log
Plans
Pre-post tests
Post tests
Program specific form(s)
Questionnaire
Recruitment log
Survey
Technical assistance log
Time sheets
<b>B. Where Data Maintained</b>
Agency database
Centralized database
Individual case records
Local precinct
Public database
School
Specialized database
Tax Assessor database
Training center
<b>C. Source of Data</b>
Audit report
Business licenses
Certificate of Occupancy
Code violation reports
Counseling reports
Employment records
Engineering reports
Environmental reports
Escrow accounts
Financial reports
GED certification/diploma
Health records
HMIS
Inspection results
Lease agreements
Legal documents
Loan monitoring reports
Mortgage documents
Payment vouchers
Permits issued
Placements
Progress reports
Referrals
Sale documents
Site reports
Statistics
Tax assessments
Testing results
Waiting lists
Work plan reports
<b>D. Frequency of Collection</b>
Daily
Weekly
Monthly
Quarterly
Biannually
Annually
Upon incident
<b>E. Processing of Data</b>
Computer spreadsheets
Flat file database
Manual tables
Relational database
Statistical database

**Explanation of Any Deviations From the Approved eLogic Model**

A large, empty rectangular box with a thin black border, intended for the user to provide an explanation of any deviations from the approved eLogic model. The box is currently blank.

**Response to Management Questions**

**Response to Management Questions**

## **Evaluation Process**

**These are standard requirements that HUD will expect every program manager receiving a grant to do as part of their project management.**

- An evaluation process will be part of the on-going management of the program.
- Comparisons will be made between projected and actual numbers for both outputs and outcomes.
- Deviations from projected outputs and outcomes will be documented and explained on space provided on the "Reporting" tab
- Analyze data to determine relationship of outputs to outcomes; what outputs produce which outcomes.

The reporting requirements are specified in the program specific NOFA and your funding award.

## **HUD Will Use The Following Management Questions To Evaluate Your Program**

1. How many public facilities were constructed, rehabilitated or renovated? Identify the number and total square footage for each type of public facility.
2. What was the value of public facilities constructed, rehabilitated or renovated?
3. How many residential buildings were constructed, rehabilitated or renovated? Identify the number and total square footage for each type of residential building.
4. What was the value of residential buildings constructed, rehabilitated or renovated?
5. How many new businesses or micro-enterprises were created?
6. What was the value (projected earnings) of new businesses or micro enterprises created?
7. How many jobs were created or obtained as a result of economic development activity?
8. What was the value of jobs created or obtained based on an annual wage?
9. How many persons purchased a home?
10. What was the value of homes purchased?
11. How many educational or job training opportunities were provided?

## **Carter-Richmond Methodology**

The above Management Questions developed for your program are based on the Carter-Richmond Methodology<sup>1</sup>. A description of the Carter-Richmond Methodology appears in the General Section of the NOFA.

<sup>1</sup> © The Accountable Agency – How to Evaluate the Effectiveness of Public and Private Programs," Reginald Carter, ISBN Number 9780978724924.

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Number



13394 W Trepania Road  
Hayward • Wisconsin • 54843  
PHONE [REDACTED] • FAX (715) 634-4797

### COMMUNITY DEVELOPMENT STATEMENT

The [REDACTED] has identified the housing rehabilitation needs for mold remediation as priority development needs of the Tribe for a 2007 Indian Community Development Block Grant through the U.S. Department of Housing and Urban Development. It has also identified the need for planning for a new Community Health Center and Fitness Center to meet the increased need for health services for the Tribe.

The Tribe will apply for a Housing Rehabilitation Project which will address the four rental units of Poppletown, and ten scattered rental units. The estimated cost is [REDACTED] which includes a contribution by the Housing Authority of [REDACTED].

Tribal members and other citizens are invited to review and comment on this information. Any comments must be submitted to Terri Miller, Administrative Assistant, by June 1, 2007. Comments may be made verbally or in writing.

Additional information on this potential project may be obtained by contacting the [REDACTED] or the Lac Courte Oreilles Indian Housing Authority, [REDACTED].

#### A. Housing Rehabilitation Threshold Requirements

1. 14 households receiving assistance under this project are of Very Low and Low Income as verified by income verification documentation on file with the Lac Courte Oreilles Indian Housing Authority. The Survey and Demographic Data Statement provides a listing of those households along with their annual income.
2. The estimated ICDBG grant funds per unit do not exceed the Housing Rehabilitation Cost Limits of \$35,000 as listed in the ICDBG NOFA, Section III.C.2.b. The Unit Cost List is attached.
3. The Lac Courte Oreilles Indian Housing Authority has adopted Rehabilitation Standards and Policies. Resolution No. 05-06 is provided to document such enactment.
4. Project funds will be used to rehabilitate HUD-assisted houses only when the homebuyer's payments are current or the homebuyer is current in a repayment agreement except in emergency situations.

B. HUD Form 4125, Implementation Schedule, is attached.

C. Form HUD-4123, Cost Summary, is attached that shows cost information for each separate project, including specific activity costs, administration, planning, technical assistance, and total HUD share.

SAMPLE SURVEY AND DEMOGRAPHIC DATA STATEMENT

Applicant: Lac Courte Oreilles Band of Lake Superior Chippewa Indians of Wisconsin

Project: \* FY 2007 Indian Community Development Block Grant Program

The following demographic data is submitted for purposes of evaluating our application for the Indian Community Development Block Grant Program. By submitting this information with our application, we state we are in compliance with all of the following:

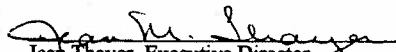
- ❖ Generally available, published data are substantially inaccurate or incomplete.
- ❖ Data provided have been collected systematically and are statistically reliable.
- ❖ Data provided are, to the greatest extent feasible, independently verifiable and differentiate between reservation and BIA service area population, when applicable.

In accordance with Section IV.B. of the Program NOFA, we have also submitted the following:

- ❖ Total number of persons benefiting from your proposed project.

*(Include both native and non-native persons served)*

- ❖ Number of persons benefiting who are low- and moderate-income.
- ❖ A sample copy of a completed survey form (see attachment).
- ❖ An explanation of the methods used to collect the data (see attachment).
- ❖ A listing of incomes by household (see attachment).

  
Jean Thayer, Executive Director

  
Administrative  
Assistant

\* A separate survey and demographic data statement (or its equivalent) must be submitted for each project that includes applicant generated data unless the service area is the same for each of the different projects. In such instances, a separate statement need not be submitted.



**FY 2007 Indian Community Development Block Grant  
Rehabilitation List**

Poppletown Units Project WI054-09

Non-program  
Income

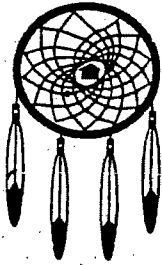
Unit Number	Bedroom Size	Occupancy Status	Family Size	Family Income	Income Level	Renovation Cost	ICDBG Limit	Leveraged Funds
1	3	Occupied			N/A		\$35,000	
2	3	Occupied			N/A		\$35,000	
3	3	Occupied			N/A		\$35,000	
4	3	Occupied			N/A		\$35,000	
Subtotal Poppletown Renovation:							\$140,000	

Mold Remediation Units, Scattered Sites

Non-program  
Income

Unit Number	Bedroom Size	Occupancy Status	Family Size	Family Income	Income Level	Renovation Cost	ICDBG Limit	Leveraged Funds
1	4	Occupied			47,400		\$35,000	
2	3	Occupied			39,500		\$35,000	
3	3	Occupied			39,500		\$35,000	
4	2	Occupied			43,900		\$35,000	
5	4	Occupied			43,900		\$35,000	
6	3	Occupied			50,900		\$35,000	
7	3	Occupied			39,500		\$35,000	
8	4	Occupied			43,900		\$35,000	
9	4	Occupied			43,900		\$35,000	
10	2	Occupied			39,500		\$35,000	
Subtotal Mold Remediation:							\$350,000	

\$490,000



Lac Courte Oreilles Housing Authority  
13416 W Trepania Road  
Hayward, WI 54843  
Phone (715) 634-2147  
Fax (715) 634-5692

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RESOLUTION NO. 05-06

WHEREAS, The Lac Courte Oreilles Housing Authority in conducting and insuring that certain quality housing standards are adhered to in both new construction and rehabilitation of existing units;

NOW, THEREFORE BE IT RESOLVED that the Board of Commissioners hereby adopts the attached Housing Rehabilitation and Construction Standards Policy of the Lac Courte Oreilles Housing Authority.

CERTIFICATION

I, the undersigned, as Secretary/Treasurer of the Lac Courte Oreilles Housing Authority Board of Commissioners, hereby certify that the Board is composed of 7 members, of whom 4 being present constituted a quorum at a meeting thereof, duly called, convened and held this 15th day of June, 2005; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of 4 members, 0 against, 0 abstaining, and that said resolution has not been rescinded or amended in any way.

  
Sandra Carley, Secretary/Treasurer  
LCO Housing Authority Board of Commissioners





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## RATING FACTOR 1: CAPACITY OF THE APPLICANT

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The Lac Courte Oreilles Tribe proposes a community development project for 2007 that will involve two tribal organizations: the Lac Courte Oreilles Tribal Government and the Lac Courte Oreilles Indian Housing Authority. The project focus is twofold: Housing Rehabilitation and Comprehensive Planning. Housing Rehabilitation will involve extensive mold remediation work; Comprehensive Planning will be conducted to develop schematic design plans for a new Community Health Center and Fitness Center. The projects have been designated as priority needs by the Tribal Governing Board as identified by the 2006 Comprehensive Plan for the Lac Courte Oreilles Tribe.

### 1 (a) MANAGERIAL & TECHNICAL STAFF

#### (i) The Lac Courte Oreilles Tribal Government

The Lac Courte Oreilles Tribal Government will have fiscal responsibility for the FY 2007 Community Development Project. Project oversight and Comprehensive Planning will be coordinated by [REDACTED] the Planner/Coordinator currently employed by the LCO Public Works Department. [REDACTED] is the individual most knowledgeable of ICDBG projects, business and management principles involved in planning, resource allocation, procurement,

leadership technique, technical production methods, and coordination of people and resources.

As Coordinator, [REDACTED] will ensure completion of Environmental Assessments, perform procurement activities according to 24 CFR Part 85 and tribal policies. [REDACTED] will coordinate the work of contractors, governmental representatives, and staff of tribal organizations to ensure that tasks are performed according to the project implementation schedule. [REDACTED] responsibilities include contract reporting requirements and other grant management activities.

Recent Experience

[REDACTED]

- [REDACTED]
- [REDACTED]

Relevant Experience

- Participated in architectural and engineering planning and design, including space and installation management for infrastructure projects;



- Coordinated meetings and ensured effective communication among contractors, Indian Health Service, EPA, Public Works/Utilities staff and the Tribal Governing Board members;
- Planned, administered and controlled budgets for contracts, equipment and supplies.
- Prepared and filed quarterly, annual, In-kind and Final Project reports;
- Coordinated the work of others in accomplishing work activities and assumed responsibility for work outcomes and results;

### Successful Experience

- Administered and closed out the EPA Capacity Grant. Created a database that held an inventory of all the components of water and wastewater systems under the responsibility of the Utilities Commission; created and maintained a maintenance log and schedule for the Director and maintenance personnel.
- Developed the Social Services and Infrastructure Plans for the Tribe and closed out the ANA grant project through which it was funded.
- Completed the Smart Growth Plan for the Tribe which involved the coordination of multiple tribal agencies and included development of a Comprehensive Land Use Master Plan.

The above projects required significant coordination with:

- 1) LCO Development Corporation
- 2) LCO Conservation
- 3) LCO Historic Preservation
- 4) LCO Realty Office
- 5) Lac Courte Oreilles Indian Housing Authority
- 6) Northwest Regional Planning Commission
- 7) LCO Ojibwe Community College and its GIS Lab
- 8) Indian Health Service
- 9) Environmental Protection Agency
- 10) Bureau of Indian Affairs
- 11) Coleman Engineering
- 12) MSA Engineering

- 13) Nehls and Webster Well Drilling
- 14) Howard Bros.
- 15) Roads and Transportation Departments
- 16) Wisconsin Community Action Program
- 17) Sawyer County UW-Extension
- 18) Lac Courte Oreilles Tribal Governing Board

(ii) The Lac Courte Oreilles Indian Housing Authority

The Housing Authority was chartered in 1968 and is the TDHE for the Tribe. Under current management are 428 homes: 361 low rent units and 65 Mutual Help Homeownership units. Over the past 39 years, the Housing Authority has developed the expertise to manage its property and employ a force account crew to construct and rehabilitate its housing stock.

The day to day manager for the Housing Rehabilitation component of this project will be [REDACTED] [REDACTED] is a Lac Courte Oreilles tribal member who started with the Housing Authority in 1998 and has worked his way up to Project Supervisor. [REDACTED] has 25 years experience in the construction and maintenance field and is certified in Mold Extraction Methods by the U.S. Department of Housing and Urban Development. Within the past five years the Lac Courte Oreilles Housing Authority has rehabilitated eight housing units with mold and moisture problems similar to those units identified for this project.

The charts below demonstrate the Recent, Relevant and Successful experience of the Lac Courte Oreilles Indian Housing Authority and its force account personnel. Within the past three years, the Housing Authority has successfully completed \$1,455,000 in fire renovations/reconstruction, and

\$338,000 in construction work of 4 units. The force account crew has also completed substantial rental move-out rehabilitations during this same period of time.

Insurance Claims - Fire Damage							
AMERIND CLAIM No.	UNIT No.	START DATE	COMPLETION DATE	NUMBER OF STRUCTURES	NUMBER EMPLOYED	GENERAL SCOPE OF WORK	FINAL COST
975	23-08	6/23/2005	9/29/2005	1 (2-BR)	5	Total rebuild with minor basement repairs	\$74,000
1337	5-27	6/11/2006	10/19/2006	1 (3-BR)	7	Total rebuild with minor basement repairs	\$93,000
1898	4-21	10/1/2006	4/12/2007	1 (3-BR)	5	Total rebuild including new basement	\$113,000
2519	5-26	11/12/2006	6/30/07 (estimated)	1 (5-BR)	3-6	Total rebuild w/minor basement repairs.	\$85,000
253	Phase I	6/28/2004	7/7/2006	138 Dwelling structures, 30 garages	12-15	Repair/reshingle roofs, repair/replace flashing, roof vents,	\$662,000
253	Phase II	10/4/2004	7/31/07 (estimated)	100 Dwelling structures, 49 garages	12	gutters, soffits, fascia, siding, windows, screens, storm doors,	\$328,000
253	Phase III	10/4/2004	7/31/07 (estimated)	51 Dwelling structures	12	foundation insulation, dryer vents and exterior light globes of dwelling structures and	\$190,000

						garages damaged by hail storm.	
							<b>Total Cost: \$1,455,000</b>

<b>New Construction – Indian Housing Block Grant Program</b>							
<b>PROJECT No.</b>	<b>UNIT No.</b>	<b>START DATE</b>	<b>COMPLETION DATE</b>	<b>NUMBER OF STRUCTURES</b>	<b>NUMBER EMPLOYED</b>	<b>GENERAL SCOPE OF WORK</b>	<b>FINAL COST</b>
25	1	10/14/2004	1/31/06*	1 (2-BR)	3-6	Construct single family homes on previously formed basements. Includes labor and materials.	\$71,000
25	2	10/7/2004	2/28/06*	1 (2-BR)	3-6		\$71,000
25	3	8/25/2005	9/30/06*	1 (4-BR)	3-6		\$98,000
25	4	8/25/2005	6/30/06*	1 (3-BR)	3-6		\$86,000
							<b>Total Costs: \$338,000</b>
* Total time to complete the 4 houses was 57 weeks. Construction was put on hold for 48 weeks due to weather and to complete the most urgent repairs of the hail damaged units.							

### (iii) Contractor Capability/Qualifications

An Architectural and Engineering firm will be engaged by the Project Coordinator, Leslie Isham. Their minimum qualifications will be: (1) experience with health care facilities; and (2) employment of Leeds-Certified staff, because the Tribe is interested in exploring the attributes of sustainable design and Energy Star features. The following is a list of general responsibilities for this contract.

- Attend and document initial Client Development meetings. Acquire general information required to establish type, "expectations", and scope of work/criteria for the intended project. Must insure that building standards are comparable to nationally accepted standards of the Indian Health Service.

- Request any As-Built documents (site plan, utilities, etc.) or previous documents assembled for the Project from the Project Coordinator. Obtain proper release if required.
- Proceed with research, programming and preliminary Schematic Design to set the direction for the Project.
- Submit appropriate architectural presentation drawings to staff of the LCO Community Health Center and Tribal Governing Board.
- Conduct project charrettes involving the entire team in the new Health Center and Fitness Center design process.
- Continue the development and/or refinement of the Schematic Design/Design Development drawings to the agreed upon level required for completion of the preliminary cost estimate and schedule.
- Meet with Project Coordinator and others regularly throughout the development and coordination of working drawings to keep communications current relative to design and any other concerns of owner.
- Communicate with I.H.S. engineers in Bemidji Office to ensure that design standards are comparable to I.H.S. standards.

## **1(b) PROJECT IMPLEMENTATION PLAN AND PROGRAM EVALUATION**

The process for housing rehabilitation and comprehensive planning have become standardized at Lac Courte Oreilles. The major milestones for this project are provided on form HUD-4125 and also listed within the table below. The implementation schedule is flexible enough so that the Housing Authority has leeway for any time modifications, taking advantage of the short construction period between June - September of years 2008 and 2009. Logic model HUD 96010 is also provided which identifies, measures and evaluates

the specific benchmarks of the project, including the goals that enhance community viability.

TASK/MILESTONE	TIMELINE IN QUARTERS							
	2007	2008			2009			
Contract award is signed October 1st	X							
Environmental assessment completed	X							
Request for Release of Funds Approved		X						
Procurement for materials starts		X						
Request for Qualifications issued for A		X						
Subcontract Procurement starts			X					
A & E Contract signed			X					
Site for new Health Facility is approved				X				
Poppletown work starts		X						
Trenching basements starts			X					
Scattered units work starts		X						
Inside rehabilitation work is performed		X	X	X	X	X	X	X
Outside rehabilitation work is performed			X	X			X	X
Poppletown units completed							X	
Schematic Designs and estimates completed							X	
Scattered units completed								X
Trenching basements completed								X
Project End Date September 30, 2009								X
Final Project Reports due December 30								X
<i>Summer construction season: June - September of each year as highlighted</i>								
Financial Status Reports due Jan 30 <sup>th</sup> , April 30 <sup>th</sup> , July 30 <sup>th</sup> , Oct 30 <sup>th</sup> of each year								
Annual Status and Evaluation Reports due Feb 15 <sup>th</sup> , 2008 for 2007; Feb 15 <sup>th</sup> , 2009 for 2008								
Semi-Annual Progress Reports due July 30 <sup>th</sup> , 2008; January 30 <sup>th</sup> , 2009; July 30 <sup>th</sup> , 2009								

## **(1)(c) FINANCIAL MANAGEMENT**

Tribal organizations which enter into contracts and grants with government agencies are required to maintain a Financial Management system which meets the standards of 24 CFR Part 85. The Lac Courte Oreilles Tribe, as current grantee of the Indian Community Development Block Grant program, also ensures compliance with 24 CFR Part 1003.

The Financial Management system has received a certification (attached) by a licensed accountant, Roe & Meyer, and meets the following standards for financial management systems:

- (1) **Financial reporting.** Accurate, current, and complete disclosure of the financial results of financially assisted activities are made in accordance with the financial reporting requirements of the grant and subgrants.
- (2) **Accounting records.** Records are maintained which adequately identify the source and application of funds provided for financially assisted activities. The records contain information pertaining to grant or subgrant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income.
- (3) **Internal control.** Effective control and accountability is maintained for all grant and subgrant cash, real and personal property, and other assets. Grantees and subgrantees adequately safeguard all such property and assure that it is used solely for authorized purposes.
- (4) **Budget control.** Actual expenditures and outlays are compared with budgeted amounts for each grant or subgrant. Financial information is related to performance or productivity data, including the development of unit cost information whenever appropriate or specifically required in the grant or subgrant agreement.

(5) **Allowable cost.** Applicable OMB cost principles, agency program regulations, and the terms of grant and subgrant agreements are followed in determining the reasonableness, allowability, and allocability of costs.

(6) **Source documentation.** Accounting records are supported by source documentation such as cancelled checks, paid bills, payrolls, time and attendance records, contract and subgrant award documents, etc.

(7) **Cash management.** Procedures for minimizing the time elapsing between the transfer of funds from the U.S. Treasury and disbursement by grantees and subgrantees is followed whenever advance payment procedures are used. Grantees must establish reasonable procedures to ensure the receipt of reports on subgrantees' cash balances and cash disbursements in sufficient time to enable them to prepare complete and accurate cash transactions reports to the awarding agency. When advances are made by letter-of-credit or electronic transfer of funds methods, the grantee makes drawdowns as close as possible to the time of making disbursements. Grantees monitor cash drawdowns by their subgrantees to assure that they conform substantially to the same standards of timing and amount as apply to advances to the grantees.

The Lac Courte Oreilles Tribe, as a government entity, complies with the requirements and standards of OMB Circular No. A-87, "Principles for Determining Costs Applicable to Grants and Contracts with State, Local and Federally recognized Indian Tribal Governments", and OMB Circular A-128, "Audits of State and Local Governments."

#### HOW WE WILL APPLY OUR FINANCIAL MANAGEMENT SYSTEMS TO THE PROPOSED PROJECT

The Tribe's Executive Director, Norma Ross, will have oversight responsibility for the entire project. She has 25 years experience with the Tribe



in financial management and has successfully managed a minimum of 10 Indian Community Development Block Grant projects. Prior to her present position, she was employed as [REDACTED] and was employed by the [REDACTED] for federal programs.

Upon receipt of an ICDBG grant award, the Contracts Officer, [REDACTED] will approve the grant budget and establish the contract within the LOCCS system. [REDACTED] will then transmit the approved budget to the Accounting Department. After a Request for Release of Funds is approved, staff of the LCO Housing Authority will initiate procurement activities and submit periodic reimbursement requests to the Executive Director, who will perform LOCCS draw downs and issue reimbursements to the Housing Authority. Accounts payable and payroll functions are performed by both the Housing Authority (for housing rehabilitation work) and the Tribal Accounting Department (for comprehensive planning and administration) who ensure internal controls. Monthly financial management reports are provided to staff for reconciliation. Audits will be performed by the Tribe; the Housing Authority will provide documents to the auditors.

The example of sound fiscal management can be verified by the following ICDBG projects:

- **FY 2001 -- SBR Upgrades: COMPLETED 2007**

Contract No. B01SR553418 \$500,000

Project Coordinator: [REDACTED]

Because multiple upgrades were identified by the engineering company, MSA, the recommended upgrades exceeded available funds for

improvements. The company was therefore directed to limit their focus to seepage cell design and construction specifications. Two seepage cells were completed; the bid specifications for the generator were completed in May, 2006; the flow meter and samplers were completed by the contractor, LCO Development and the supplier, Energetics. This project was closed out in May, 2007.

• FY 2003 -- Health and Human Services Building - COMPLETED 2005

Contract No. B03SR553418 \$500,000

Project Coordinator: [REDACTED]

The project, involving construction a wing that houses the Tribal Human Services program providers within a new Tribal Government Building, was completed and closed out.

• FY 2004 — New Post Water Project - IN PROGRESS

Contract No. B04SR553418 \$500,000

Project Coordinator: [REDACTED]

The project is on-hold pending award of additional funding. The costs of water storage were higher than anticipated and the Tribe is awaiting USDA approval for additional funds for the water sphere costs. Also pending approval is a Memorandum of Agreement between the Tribe and the Indian Health Service for the same.

(1)(D) PROCUREMENT AND  
CONTRACT MANAGEMENT

(i) Procurement & Contract Management

The staff persons responsible for procurement activities for the FY 2007 Indian Community Development Block Grant Program are [REDACTED] Project Coordinator with the LCO Public Works/Utilities Commission and [REDACTED] Project Superintendent with the Housing Authority. They will compile

information and records to draw up requisitions/purchase orders for procurement of materials and services. They will compare prices, compile specifications, and determine delivery dates in order to schedule work. [REDACTED]

[REDACTED] will direct the work of carpenters and subcontractors and:

- Prepare invitation-of-bid forms, and distribute forms to supplier firms or distribute forms for public posting.
- Prepare purchase orders and send copies to suppliers and to departments originating requests.
- Review requisition orders in order to verify accuracy, terminology, and specifications.
- Track the status of requisitions, contracts, and orders.
- Prepare, maintain, and review purchasing files, reports and price lists.
- Maintain sufficient records to enable completion of progress reports.

To verify that the Tribe's and Housing Authority's procurement and contract management systems comply with all regulatory requirements, letters are provided from Roe & Meyer, and Tostrud and Temp, Accountants, within the attachments section of this application.

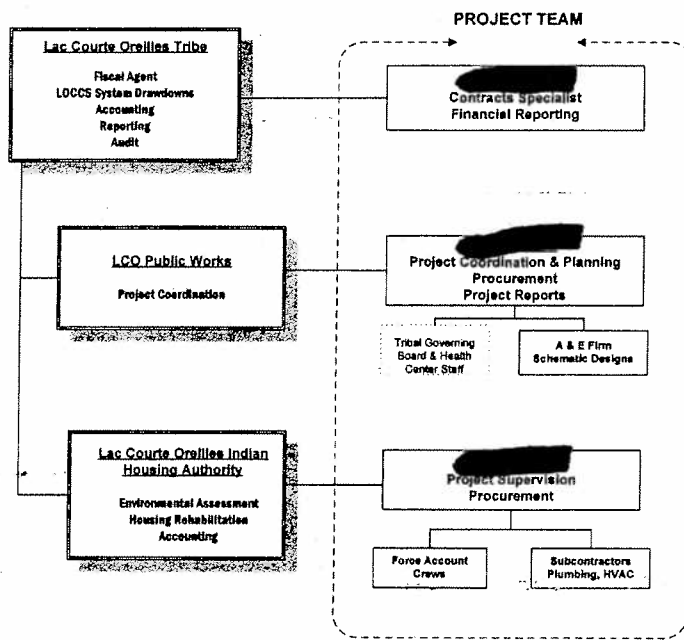
The Project will be coordinated by [REDACTED] who will be responsible to ensure that reporting requirements are met and that all work is completed as scheduled.

(ii) Contract Management

The contract management process will be performed by the Contracts Officer, [REDACTED] who has 4 years experience in Contracts Administration.

received a certification in [REDACTED] as an Account Clerk. [REDACTED] is [REDACTED] short of receiving certification in Computer Information Systems from [REDACTED]. [REDACTED] contract responsibilities include preparation of financial forms SF 269A, ensuring narrative reporting requirements, the ASER, contract close outs and other contract conditions are met on behalf of the Lac Courte Oreilles Tribe.

FY 2007 Indian Community Development Block Grant Program  
Lac Courte Oreilles Band of Lake Superior Chippewa



RATING FACTOR 2: NEED/EXTENT OF THE PROBLEM

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## 1. ESSENTIAL COMMUNITY DEVELOPMENT NEED

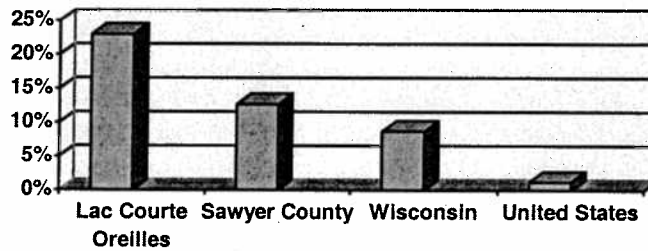
The Lac Courte Oreilles Tribe is located in northern Wisconsin, within Sawyer County. The surrounding community is a typical northern tourist town, providing seasonal employment that caters to hunters, fishermen and snowmobile riders. The northern region of Wisconsin is much different than the southern region of the state (which is conducive to farming and has given Wisconsin its "cheese" reputation.) The topography consists of forests and lakes; the Lac Courte Oreilles Indian Reservation is closer to the Canadian border than it is to the state capital of Madison, or to the city of Milwaukee. The summers are humid and intensely green and winters are notorious for snow, freezing rains, blizzards and high winds.

Until recently, there was a construction boom as tourists vociferously purchased lakefront properties to build second homes. The Lac Courte Oreilles Tribe also had its share of construction activity with housing improvement funds and bond-funded development. Within the past five years however, the bottom has dropped out of housing market and with rising gas prices, tourism activity has dwindled, negatively impacting the local economy. Housing funds and development at Lac Courte Oreilles are now at a standstill. Unemployment in Sawyer County was 6.8% in 2003. The unemployment rate for Lac Courte Oreilles is at 75%. (2003 Indian Labor Force Report, BIA.)

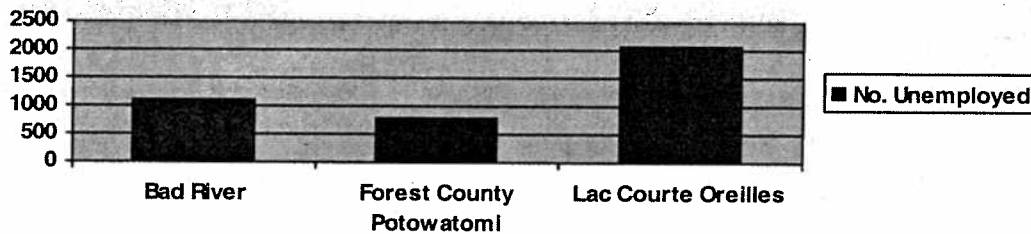
There are 2,800 members residing on or near the Lac Courte Oreilles Indian Reservation:

- ✓ They have a higher rate of poverty than the balance of Sawyer County

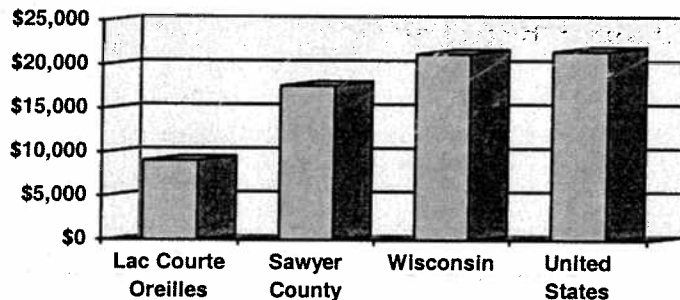
Poverty Level, U.S. Census 2000



- ✓ They have a higher unemployment rate than the rest of the county. Of the 27 Tribes in the BIA Midwest Region, the Lac Courte Oreilles Tribe had the 3<sup>rd</sup> highest unemployment rate. (BIA Labor Force Report of 2003)



- ✓ They have a per capita income which is half that of the balance of Sawyer County.



*Need for suitable living environments*

Records of the Community Health Center document that in 1 in 4, family households, a child suffers from asthma. While mold may not cause the problems, [REDACTED] Environmental Health Officer, Indian Health Service, states that those conditions are aggravated by mold and standing water in the residential units. [REDACTED] also notes that the Indian Health Service identifies asthma as the biggest non-critical issue in Indian country.

The outcomes of this project will meet essential community development needs for suitable living environments with decent housing, free of mold and moisture. 14 homes will be brought up to code. The project will also provide job opportunities for 5 additional force account positions for two years, and jobs for current force account staff. Subcontracts, when required, will provide for Indian preference thus benefiting the tribal economy.

## **2(b) BENEFIT THE NEEDIEST**

### **SEGMENT OF THE POPULATION:**

#### **HOUSING REHABILITATION**

This project will benefit the neediest segment of the population. The need ratio for the Lac Courte Oreilles Tribe is \$621 as posted at [www.hud.gov/offices/adm/grants/fundsavail.cfm](http://www.hud.gov/offices/adm/grants/fundsavail.cfm).

A list of income by households is provided as part of the Survey and Demographics Data Statement within the Attachments section of this application. 100% of the persons benefiting from the proposed project are Low Income; 46% fit within the Extremely Low Income category.

### **RATING FACTOR 3: SOUNDNESS OF APPROACH**

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#### **1. DESCRIPTION OF AND RATIONALE FOR PROPOSED PROJECT**

In 2004 and 2006, Public Hearings were conducted to seek input from the community as to the type of projects that should be developed with Indian Community Development Block Grant funds. The following suggestions were made by members of the community: Chippewa Wood Crafters Business; tribal business assistance; solar & other renewable energy; Boys & Girls Club site improvements; Health & Wellness Center; Signor Water; Cultural Tourism Center; Playgrounds; Homeownership Assistance; Kinnamon School Restoration; Public Safety Center; Financial Education/IDA Accounts; Daycare Facility; Housing Renovation; Salt/Sand Storage Facility; and Water & Sewer Needs. From this list, the Tribe developed its priorities for the 2007 application, addressing the basic needs of the community for healthy homes and a new Health & Wellness (Fitness) Center.



In 2007, the Tribal Governing Board finalized its Smart Growth Comprehensive Plan and had identified, as a major goal, the renovation of existing housing stock. It had also targeted an expansion of the LCO Community Health Center as a goal due to the increased service population and need for medical services and to prevent medical problems through prevention of obesity and chronic conditions.

**a. Housing Rehabilitation**

By far the most urgent need for renovation are the rental units experiencing mold problems, especially the notorious "Poppletown."

The Poppletown Project was born in 1983 when the U.S. Department of Housing and Urban Development developed a special initiative to show that they could build homes in Indian Country faster and "more economically" than they had in the past. They made forty units of modular housing available under this initiative to certain Indian Housing Authorities that they had invited to apply. Lac Courte Oreilles was selected to participate and received twenty units at a development cost of \$45,000 each. The Tribe, via its Governing Board and its Legal Council, protested the construction of this type of structure, stating that it would not work in this northern climate. Even though the Tribe was skeptical of this initiative, they felt unable to turn it down because a long list of members needed housing. Twenty units of modular housing were constructed in the community now known as "Poppletown."

After 14 years of occupancy, the homes in Poppletown have serious structural defects: the sill plates, box joists, floor joists, wall studs, and window framing are all affected by dry rot in varying degrees. The seriousness of the problem was discovered when a vacancy required a window replacement. It was first believed that structural rot affected just the window frame but further inspection revealed the extent of the damage. At that point, the staff architect and construction inspector inspected all twenty units for building integrity. It was found that all twenty units were falling apart. The Housing Authority filed a loss with Amerind Risk Management Corporation. The inspector determined that the damage "would appear to be related to the material and methods used in the initial construction of these units." Amerind denied coverage of the property loss claim because their scope of coverage excludes damage caused due to structural rotting, depreciation or deterioration.

Since 1998, the Housing Authority had been able to rehabilitate 16 of the original 20 units. The remaining 4 units are proposed for rehabilitation via this application.

The remaining 10 units scheduled for renovation are scattered throughout the Lac Courte Oreilles Reservation. 9 of the 10 units are from Project Nos. 54-1, 4 and 5. From 1995 - 1998, those units were renovated for the first time and the construction crew made the units as tight as possible. Since then, however, the homes have developed extensive mold and mildew; the sheetrock has absorbed moisture to the extent that one's finger can be pressed through the walls in some areas. A 2006 report by the University of

Wisconsin – Extension, Native American Task Force Green Communities Initiatives, states that “Alarminglly, some housewraps on the market can actually trap moisture in walls.”<sup>1</sup> It was found that an inexpensive grade housewrap was utilized prior to siding those units and dry rot has occurred in framing materials. (When moisture enters the wall cavity, the insulation is wet and cannot dry because the cavity is lined with impermeable surfaces.) Inexpensive windows were used that do not insulate well, and in the northern climate, condensate extensively during the winter. The inspection conducted by UWEX found many other sources to promote mold and dry rotting of the structure. Inadequately installed vapor barriers, gaps in insulation that cause condensation, lack of ventilation, Another form of moisture damage were caused by a lack of basement waterproofing and foundation drains, and negative slope (towards the home), lack of sump pits in basements which have allowed standing water to present a constant source of interior moisture.

In order to reduce moisture and rehabilitate units, it will be necessary to perform some or all of the following activities as recommended by UWEX architects:

- Excavate around basement and install elastomerics and bentonite, and spray on rubberized bitumen;
- Grade to slope away from house;
- Replace siding and utilize asphaltic building paper. (May need to remove sheathing if wet or damaged)
- Level concrete stoop;
- Replace framing materials as necessary;

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<sup>1</sup> LCO Housing Report, UW-Extension; Design Coalition, Inc., Architects. Lou Host-Jablonski AIA and Susan Thering Ph.D., July 2006.

- Replace windows with energy efficient models;
- Replace drywall with Mold Tough sheetrock;
- Reinsulate wall cavities;
- Replace fiberboard cabinets (that absorb moisture) with wooden cabinets;
- Replace floor deck if spongy.

Generally, it will be necessary to rehabilitate the rest of the unit in order to match the renovated sections of the home. The work to be performed on the Poppletown units will be considerably more extensive because of the dry rot that has occurred.

### (1) Proposed Outputs and Outcomes

The proposed outcomes of housing rehabilitation is that 14 low rent units of the Housing Authority will be brought up to standard. Energy efficient materials and design will reduce the cause of mold and moisture in the homes.

PROJECT	OUTPUTS	OUTCOMES
Housing Rehabilitation	Number of homes rehabilitated	Reduction in the number of families living in substandard housing
	Number of jobs provided	Increased employment opportunities for low income persons
Comprehensive Planning	Number of plans and estimates	Increase in Tribe's ability to improve the quality of life for its membership.

### (2) Anticipated Cost Savings

In renovating the housing units, the Housing Authority will include Energy Star materials and methods of construction that will result in cost savings while addressing the causes of mold and moisture in the homes. A few of the materials and methods are described within the following table:

**COST EFFECTIVENESS TABLE**

PROBLEM	SOLUTION & COST SAVINGS
<p>Cabinetry is a costly maintenance item for the Housing Authority. Drawers fall apart, children hang on doors, veneer peels off, and particleboard material absorbs moisture and warps or disintegrates. Mass market suppliers do not offer replacement drawers, doors or veneers. Must replace entire cabinets when renovating unit after move out, or on average every 7 years.</p>	<p>By using the Chippewa Wood Crafters, a tribal business, we will get cabinets that are constructed better using natural wood harvested at the Lac Courte Oreilles Reservation. We will also have a local source to replace drawers and doors, and save on landfill waste.</p> <p>Cost to replace cabinets from Arrow Building Center: [REDACTED]</p> <p>Cost of 4 replacement drawers: [REDACTED]</p> <p>Cost savings per move-out: [REDACTED]</p>
<p>Fiber cement siding has been recently used by the Housing Authority because it is more durable than the vinyl. (Due to a hail storm 4 years ago, the Housing Authority experienced a significant loss in vinyl siding damage.)</p>	<p>Smart Lap Siding will be used for this project because it is also durable - has a high rating for hail and has a strong protective coating - but is easier to replace and costs less to install.</p> <p>Average cost per home:</p> <p>Fiber cement siding:</p> <p>Smart Lap siding:</p> <p>Costs savings per unit:</p>
<p>The laboratories are a source of significant condensation/sweat, which causes the bathroom floors to rot and mold on walls.</p>	<p>There are two solutions: install warm water line to toilet tank, or replace toilet with an insulated tank.</p> <p>The Housing Authority will replace toilets with an insulated tank model, thus saving on the cost of fuel to heat the water line, and plumbing cost to install the new line.</p> <p>Estimated savings per year: [REDACTED]</p>
<p>Foundation drainage was not installed in many older homes, and almost all lack</p>	<p>Water could be removed and a dehumidifier installed, but that is not a long-term</p>

<p>basement waterproofing. Standing water in basement causes moisture and mold growth. A related problem is landscaping that has a negative slope which runs water towards the home, not away.</p>	<p>solution. Basements must be trenched and a water proofing sheet product must be installed as recommended by UWEX architects. Landscaping must be graded away from the home. The savings will result in the long-term in reduction of the need to remove mold from the home, and electrical costs to run a dehumidifier.</p>
<p>Energy efficient appliances and renovation activities have not been used in the older homes. The low-income residents can ill afford their heating and electrical costs. Inexpensive, uninsulated windows and exterior doors have caused excessive condensation and mold growth.</p>	<p>Energy Star recommendations for appliances and renovation activities include range hoods, bathroom fans, lighting fixtures, refrigerators, water heaters, heating, windows, and insulation methods will be utilized.</p> <p>The estimated monthly savings for a one-story home on a basement is [REDACTED] month, or [REDACTED] per year.</p> <p>The estimated energy savings value (ESV) for the same home is [REDACTED] (Source: <a href="http://www.energystar.gov">www.energystar.gov</a>)</p>

**b. Comprehensive Planning for Health Facilities**

The LCO Community Health Center was constructed in 1984 to provide basic medical services. What tribal leaders did not foresee was the rapid expansion of services and population. At present, the Health Center has three distinct sections: the upper, lower and an Urgent Care Center that house the following:

UPPER	LOWER	URGENT CARE CENTER
<ul style="list-style-type: none"> <li>• Medical Services</li> <li>• Dental</li> <li>• Pharmacy</li> <li>• Mammography</li> </ul>	<ul style="list-style-type: none"> <li>• Director's Office</li> <li>• Accounting Staff</li> <li>• Administrative Support Staff</li> <li>• WIC</li> </ul>	<ul style="list-style-type: none"> <li>• Night and Weekend Care</li> <li>• Diabetic Foot Clinic</li> </ul>

- X-Ray
- Nutritionist
- Honoring Our Children
- Vocational Rehabilitation
- Medical Benefit Specialist
- Birth to 3
- Vocational Rehabilitation
- Mental Health Counselors
- AODA Counselors
- Optical Department
- Contract Health Nurses
- Health Transportation

In 2005, the Tribe amended its Enrollment Ordinance to allow persons of 1/8 blood degree to become enrolled which increased membership by approximately 800 persons. The active patient charts of the Health Center are now at 3,600. The service population, and health care needs, of the tribal community have doubled since 1984. Pharmacy services need to be expanded to include prescription drug counseling; the dental services need to include orthodontic and pedodontic care; a full diabetic clinic is needed, as well as OB-GYN services. In light of the large health budget deficit, the patient intake process needs to be completely revamped so that alternative health care benefits are captured for all services provided by the Center. Programs and services of the Tribe also need to be expanded, such as the AODA and Mental Health. But everything is contingent upon adequate space. Adding on to the existing building is not feasible due to the layout and other constrictions. The Environmental Health Officer has identified that the building does not

accommodate wheelchairs, provide for patient privacy, or have adequate air flow. This is validated by reports from Indian Health Service inspections which identify that the existing building is too old to warrant the expenses necessary to bring it up to code. A new facility is necessary.

The Tribal Governing Board plans to incorporate as many renewable energy and energy efficient standards as possible in the new facility, including a site that maximizes natural daylight and solar energy. It will utilize an A & E Firm that employs Leeds-Certified staff in order to develop the schematic designs and cost estimates for a new Health Care Facility and a Fitness Center. Tribal experience in planning for a new government facility has shown that the planning process will require a two year timeframe. As required, the Tribe provides an assurance that the design will be comparable to the nationally accepted minimum standards of the Indian Health Service.

## 2. BUDGET AND COST ESTIMATES

ITEM	COST	QUALIFICATIONS	DOCUMENTATION
HOUSING REHABILITATION		Project Superintendent Experienced with Housing Authority Maintenance and Construction	Qualifications Statement and Resume
	Materials and labor costs are itemized per unit which includes Energy Star features, for 14 housing units =		
	Leverage is provided by the Housing Authority in the form of a cash match of from non-program income. Grant funds requested are equal to per unit, or		
COMPREHENSIVE PLANNING AND ADMINISTRATION		Experienced with ICDBG grants management, planning and coordination activities.	Qualifications Statement and Resume
	Costs include salary of 1 <sup>st</sup> year, and 2 <sup>nd</sup> year.		



Fringe benefits of [REDACTED] include FICA/Med at [REDACTED] SUTA at [REDACTED] Work Comp at [REDACTED] 401K at [REDACTED] and Health Benefits at [REDACTED] month for 24 months.		
Consultant costs are calculated at [REDACTED] for a schematic design and cost estimate for a new health facility, and [REDACTED] for a schematic design and cost estimate for a new fitness center. An A & E firm will be selected with Leeds-Certified staff in order to develop an energy efficient design.		
Leverage is provided in the form of a cash match from the Tribe of [REDACTED] and a cash match of [REDACTED] from the LCO Community Health Center. Grant funds requested are [REDACTED]		
INDIRECT COST OF [REDACTED] of [REDACTED] (base) = [REDACTED] Grant funds requested are \$26,438. The balance is absorbed by the Tribe.		
<b>Total Project Costs:</b> [REDACTED]	<b>Funds Requested</b> \$600,000	<b>Total Leverage</b> [REDACTED]

### 3. HUD POLICY PRIORITIES

This project is consistent with HUD's strategic missions. It will result in the rehabilitation of 14 homes to remove mold and its causal factors and therefore addresses HUD Goal b(2): Improve the management accountability and physical quality of public and assisted housing; and Goal c(5) Mitigate housing conditions that threaten health. The employment opportunities that this project provides will meet HUD's Goal c(2): Enhance sustainability of communities by expanding economic opportunities. Finally, plans for a New Health Facility will further HUD's goal c(3): Foster a suitable living environment in communities by improving physical conditions and quality of life.

The proposed activities will help to further HUD's policy priorities and achieve its goals for FY 2007 by eliminating health-related hazards in the homes such as mold, and make communities more livable by improving infrastructure and community facilities. (Priority b. Improving our Nation's Communities: subsection (6)(ii) and (7)(ii).

#### **4. INTENT TO MEET SECTION 3 REQUIREMENTS**

Lac Courte Oreilles Reservation is the 3<sup>rd</sup> poorest Tribe out of eleven within the State of Wisconsin. The average annual per capita income, according to the 2000 Census, is \$9,119. Tenant records of the Lac Courte Oreilles Indian Housing Authority and employment data of the Tribe indicate that 89% percent of the households are low income families. Within some communities, that percentage is even higher.

This project will create economic opportunities for low and very low income persons by employment opportunities created through the rehabilitation activities of the LCO Indian Housing Authority and by subcontracting work in accordance with Indian Preference policies. In hiring and subcontracting, the Housing Authority will give priority first to the lowest income applicant.

#### **5. COMMITMENT TO SUSTAIN ACTIVITIES**

The Lac Courte Oreilles Indian Housing Authority will provide the ongoing maintenance for the rehabilitated units as part of its property management responsibilities IHBG also requires, as a first goal, maintenance of the current assisted stock. . Revised Maintenance Policies and Procedures of the Housing

Authority were adopted in February of 1992, and the Housing Authority employs a Maintenance Crew consisting of the Manager and 3 technicians. The annual recertification process provides for a physical inspection of housing units and completion of maintenance work orders, if necessary. Residents also have the ability to make routine maintenance requests by calling in a work order. When a resident moves out of a unit, renovations are also performed to bring the unit up to standard. To document its commitment to maintenance responsibilities, a letter is provided by the Executive Director.

#### RATING FACTOR 4: LEVERAGING RESOURCES

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The contribution of the Lac Courte Oreilles Tribe to this project is greater than [REDACTED] of the total funds requested. Documentation of the required match consists of:

- A letter of firm commitment of a [REDACTED] cash contribution from the Chairman of the Tribe
- A letter of firm commitment of a [REDACTED] cash contribution from the Executive Director of the Housing Authority
- A letter of firm commitment of a [REDACTED] cash contribution from the Director of the Community Health Center

The above documentation is provided within the attachments section of this application.

#### RATING FACTOR 5: COMPREHENSIVENESS AND COORDINATION

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The projects were requested by the tribal membership for several years and prioritized by the tribal leadership. It is a coordinated, community-based process which involves the LCO Tribal Government; the LCO Indian Housing Authority; and the LCO Community Health Center in order to meet the stated objectives.

This project is consistent with the FY 2007 Indian Housing Plan of the Lac Courte Oreilles Tribe and is specifically identified within its: (1) One-Year Financial Resources Narrative; (2) Table 2, Financial Resources, Part I., Line 1E; and (3) Table 2 Financial Resources, Part II. Evidence of such is provided within the Attachments section of this application.

The measurable outputs and outcomes will enhance community viability and include the following:

<b>PROJECT</b>	<b>OUTPUTS</b>	<b>OUTCOMES</b>	<b>RESPONSIBILITY</b>	<b>COORDINATION</b>
Housing Rehabilitation	Number of homes rehabilitated: 14  Number of jobs provided: 6  Number of economic opportunities	Reduction in the number of families living in substandard housing  Increased employment opportunities for low income persons  Increased subcontract work for native-owned businesses	LCO Indian Housing Authority; George Perry, Project Superintendent	LCO Public Works/Utilities staff; Native subcontractors
Comprehensive Planning	Number of plans and estimates	Increase in Tribe's ability to improve the quality of life for its	Leslie Isham, Project Coordinator;	Indian Health Service; Health Center Staff;

		membership	A & E Contractor	Tribal Governing Board; Members of the Tribe.
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HUD Logic Model 96010 is included within the Attachments section of this application.



## LCO Housing Authority

13416 W Trepania Rd  
Hayward, WI 54843  
Phone (715) 634-2147  
Fax (715) 634-5692

June 20, 2007

U.S. Department of Housing and Urban Development  
Office of Native American Programs  
Deborah M. Lalancette  
1670 Broadway, 23<sup>rd</sup> Floor  
Denver, CO 80202

Dear Ms. Lalancette,

This letter will serve as documentation of our commitment to continue to provide maintenance for the renovated units described in the Tribe's application for the 2007 Indian Community Development Block Grant for housing rehabilitation.

We provide maintenance according to our Maintenance Policies and Procedures through the Annual Inspections process, Recertifications and work orders requests.

Sincerely,

Jean M. Thayer  
Executive Director

# Grant Application Detailed Budget Worksheet

Name and Address of Applicant:

Category	Detailed Description of Budget (for full grant period)											
	1. Personnel (Direct Labor) Position or Individual	Estimated Hours	Rate per Hour	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Project Coordinator	Year 1				\$14,557							
	Year 2				\$14,557							
	Total Direct Labor Cost				\$29,114							
2. Fringe Benefits	Year 1				\$4,725							
	Year 2				\$4,724							
	Total Fringe Benefits Cost				\$9,449							
3. Travel												
3a. Transportation - Local Private Vehicle	Mileage											
	Rate per Mile											
	Estimated Cost											
Subtotal - Trans - Local Private Vehicle												

# Grant Application Detailed Budget Worksheet

## Detailed Description of Budget

3b. Transportation - Airfare (show destination)	Trips	Fare	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Transportation - Airfare											
3c. Transportation - Other	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Transportation - Other											
3d. Per Diem or Subsistence (indicate location)	Days	Rate per Day	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Per Diem or Subsistence											
Total Travel Cost											
4. Equipment (Only items over \$5,000 Depreciated value)	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Total Equipment Cost											



# Grant Application Detailed Budget Worksheet

Detailed Description of Budget											
5. Supplies and Materials (Items under \$5,000 Depreciated Value)											
	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
5a. Consumable Supplies											
Subtotal - Consumable Supplies											
5b. Non-Consumable Materials	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Non-Consumable Materials											
Total Supplies and Materials Cost											
6. Consultants (Type)	Days	Rate per Day	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Architectural & Engineering				\$45,000							
Total Consultants Cost											
Total Estimated Cost: \$45,000											
7. Contracts and Sub-Grantees (List Individually)	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Total Subcontracts Cost											

# Grant Application Detailed Budget Worksheet

Detailed Description of Budget											
8. Construction Costs	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
<b>8a. Administrative and legal expenses</b>											
Subtotal - Administrative and legal expenses											
<b>8b. Land, structures, rights-of way, appraisal, etc</b>	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Land, structures, rights-of way, ...											
<b>8c. Relocation expenses and payments</b>	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Relocation expenses and payments											
<b>8d. Architectural and engineering fees</b>	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Architectural and engineering fees											
<b>8e. Other architectural and engineering fees</b>	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Other architectural and engineering fees											

# Grant Application Detailed Budget Worksheet

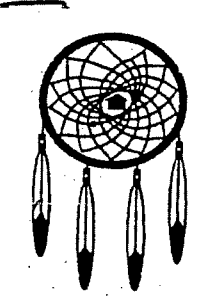
8f. Project Inspection fees	Quantity	Unit Cost	Estimated Cost	HUD Share	Applicant Match	Other HUD Funds	Other Federal Share	State Share	Local/Tribal Share	Other	Program Income
Subtotal - Project Inspection fees											
8g. Site work											
Subtotal - Site work											
8h. Demolition and removal											
Subtotal - Demolition and removal											
8i. Construction											
Rehabilitation: Poppletown											
Rehabilitation: Scattered Units		12498		\$140,000							
Subtotal - Construction				\$500,000							
8j. Equipment											
Subtotal - Equipment				\$490,000							
8k. Contingencies											
Subtotal - Contingencies											
8l. Miscellaneous											
Subtotal - Miscellaneous											
<b>Total Construction Costs</b>											



### Grant Application Detailed Budget Worksheet

Public reporting burden for this collection of information is estimated to average 3 hours 12 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. Information collected will provide proposed budget data for multiple programs. HUD will use this information in the selection of applicants. Response to this request for information is required in order to receive the benefits to be derived. The information requested does not lend itself to confidentiality.

Detailed Description of Budget		
Analysis of Total Estimated Costs	Estimated Cost	Percent of Total
1 Personnel (Direct Labor)		
2 Fringe Benefits		
3 Travel		
4 Equipment		
5 Supplies and Materials		
6 Consultants		
7 Contracts and Sub-Grantees		
8 Construction		
9 Other Direct Costs		
10 Indirect Costs		
Total:		
Federal Share:		
Match (Expressed as a percentage of the Federal Share):		



Lac Courte Oreilles Housing Authority  
13416 W Trepania Road  
Hayward, WI 54843  
Phone (715) 634-2147  
Fax (715) 634-5692

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RESOLUTION NO. 05-06

WHEREAS, The Lac Courte Oreilles Housing Authority in conducting and insuring that certain quality housing standards are adhered to in both new construction and rehabilitation of existing units;

NOW, THEREFORE BE IT RESOLVED that the Board of Commissioners hereby adopts the attached Housing Rehabilitation and Construction Standards Policy of the Lac Courte Oreilles Housing Authority.

CERTIFICATION

I, the undersigned, as Secretary/Treasurer of the Lac Courte Oreilles Housing Authority Board of Commissioners, hereby certify that the Board is composed of 7 members, of whom 4 being present constituted a quorum at a meeting thereof, duly called, convened and held this 15th day of June, 2005; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of 4 members, 0 against, 0 abstaining, and that said resolution has not been rescinded or amended in any way.

  
\_\_\_\_\_  
Sandra Carley, Secretary/Treasurer  
LCO Housing Authority Board of Commissioners



*Pride Of The Ojibwa*  
13394 W Trepania Road  
Hayward • Wisconsin • 54843  
PHONE (715) 634-8934 • FAX (715) 634-4797


**RESOLUTION NO. 07-55**

- WHEREAS,** the Lac Courte Oreilles Band of Lake Superior Chippewa Indians is a federally-recognized Tribal Government, organized pursuant to the Indian Reorganization Act of 1934, 25 U.S.C. 461 et. seq.; and
- WHEREAS,** the Lac Courte Oreilles Tribal Governing Board is the governing body of the Lac Courte Oreilles Band of Lake Superior Chippewa Indians pursuant to the Lac Courte Oreilles Constitution, Article III; and
- WHEREAS,** the U.S. Department of Housing and Urban Development has made available FY 2007 funding for Community Development Block Grants for Indian Tribes and Alaska Native Villages (24 CFR Part 953), and;
- WHEREAS,** the Lac Courte Oreilles Tribal Governing Board, recognizing the need to enhance livability within its communities, will address mold issues in low income housing, and conduct planning for a new Community Health Center and Fitness Center; and
- WHEREAS,** the Lac Courte Oreilles Tribal Governing Board has identified the priority community development needs of the Reservation community, and
- WHEREAS,** the Lac Courte Oreilles Indian Housing Authority has adopted a Maintenance and Operation Plan for the proposed units which ensures proper funding, addressing maintenance, repair and replacement as detailed within the Maintenance Policies and Procedures and the Indian Housing Plan;
- NOW THEREFORE BE IT RESOLVED,** that the Lac Courte Oreilles Tribal Governing Board does hereby authorizes the submission of this funding request for \$600,000 from the Community Development Block Grant Program for Indian Tribes and Alaska Native Villages for Fiscal Year 2007.

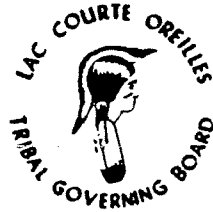
**BE IT FURTHER RESOLVED**, that the Chairperson and Secretary Treasurer of the Lac Courte Oreilles Tribal Governing Board is hereby authorized to sign for and on behalf of the Lac Courte Oreilles Band of Lake Superior Chippewa Indians of Wisconsin.

**CERTIFICATION**

I, the undersigned, as Secretary-Treasurer of the Lac Courte Oreilles Tribal Governing Board, hereby certify that the Tribal Governing Board is composed of seven members, of whom being present, constituted a quorum at a meeting thereof, duly called, convened, and held on this 29th day of May, 2007; that the foregoing Resolution was duly adopted at said meeting by an affirmative vote of 3 members, 0 against, 0 abstaining, and that said resolution has not been rescinded or amended in any way.

  
\_\_\_\_\_  
Brian Bisquette, Secretary-Treasurer  
Lac Courte Oreilles Tribal Governing Board





Pride Of The Ojibwa  
13394 W Trepania Road  
Hayward • Wisconsin • 54843  
PHONE (715) 634-8934 • FAX (715) 634-4797

RESOLUTION NO. 00-50

WHEREAS, the Lac Courte Oreilles Band of Lake Superior Chippewa Indians is a federally recognized Indian government organized pursuant to the Indian Reorganization Act of 1934, 35 U.S.C. Section 461 et seq.; and

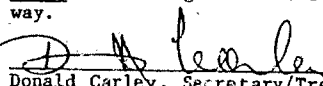
WHEREAS, the Lac Courte Oreilles Tribal Governing Body is the governing body of the Lac Courte Oreilles Band of Lake Superior Chippewa Indians, pursuant to the Lac Courte Oreilles Constitution, Article III; and

WHEREAS, the Lac Courte Oreilles Tribal Governing Board has determined that it is in the best interests of the Tribe to adopt the Lac Courte Oreilles Tribal Governing Board Property Management Manual as revised April 1998 by Insurance Officer Teri Tainter, and

NOW THEREFORE BE IT RESOLVED, that the Lac Courte Oreilles Tribal Governing Board approves the Lac Courte Oreilles Property Management Manual effective this date set by certification and shall be implemented immediately for guidance of the Lac Courte Oreilles Tribal use.

#### CERTIFICATION

I, the undersigned, as Secretary/Treasurer of the Lac Courte Oreilles Tribal Governing Board, hereby certify that the Governing Board is composed of 7 members, of whom 4 being present, constituted a quorum at a meeting thereof, duly called, convened and held on this 8th day of June, 2000; that the foregoing resolution was duly adopted at said meeting by an affirmative vote of 3 members, 0 against, 0 abstaining and that said resolution has not been rescinded or amended in any way.

  
Donald Carley, Secretary/Treasurer  
Lac Courte Oreilles Tribal Governing Board

**LAC COURTE OREILLES TRIBAL  
GOVERNING BOARD**

**PROPERTY  
MANAGEMENT  
MANUAL**

**Revised 10/19/98 Updated 2/14/02  
By: Teri Taimter, Officer  
Property/Procurement  
Insurance Office**

PROPERTY MANAGEMENT/PROCUREMENT MANUAL

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