**Monitoring Review Checklist Cover Page**

**Grantee:** Click or tap here to enter text. **Grant Number:** Click or tap here to enter text.

**Project Name:** Click or tap here to enter text. **Monitoring Date:** Click or tap to enter a date.

**CDBG-I Representative:** Click or tap here to enter text. **Monitoring Letter Date:**

**Grant Amount:** Click or tap here to enter text. **If Applicable, Local Funds and Sources:** Click or tap here to enter text.

**Contract Effective Date:** Click or tap to enter a date. **Contract Expiration Date:** Click or tap to enter a date.

**Project Activity(ies**): [ ]  Public Water Improvements [ ]  Public Sewer Improvements

 [ ]  Limited Housing Rehab-Water Connections [ ]  Limited Housing Rehab – Sewer Connections

 [ ]  Planning [ ]  Administration [ ]  Other Public Facilities

**National Objective & Documentation Method:** [ ] Surveys [ ]  Census

 **Is Income Verification Applicable**? [ ]  Yes [ ]  No

**Is the project complete?** [ ]  Yes [ ]  No

 **If No, what is project status:**

 **Estimated completion date:**

**Monitoring Checklist:**

[ ]  Conformity [ ]  Financial Management [ ]  Procurement Administration

[ ]  Compliance [ ]  General Administration [ ]  Procurement Construction

[ ]  Fair Housing [ ]  Labor Standards [ ]  Infrastructure Hook-Ups [ ]  Acquisition

**Person(s) Involved in Monitoring Visit / Exit Conference**(*I/We agree the checked monitoring areas above were discussed during the monitoring exit meeting):*