**DISASTER RECOVERY COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

**GRANTEE/CEA FINAL PERFORMANCE REPORT**

**CONTENTS**

1. Grantee/CEA Final Performance Report
2. Housing Opportunities Form

**DISASTER RECOVERY COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

**GRANTEE/CEA FINAL PERFORMANCE REPORT**

|  |  |  |
| --- | --- | --- |
| 1. **Grantee/Recipient/Subrecipient:** | 1. **CEA Number:** | 1. **CEA Expiration Date:** |
|  |  |  |
| 1. **Report Prepared By:** | 1. **Phone Number:** | 1. **Email Address** |
|  |  |  |
| 1. **Activities/Projects Completed Under this CEA: *(Attach separate page if additional space is needed)*** | | |
| 1. **Activity/Project ID:** | 1. **Activity/Project Name:** | 1. **Date Activity/Project Closeout Approved:** |
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1. **FINAL COMPUTATION OF CEA FUNDS BALANCE**

|  |  |  |
| --- | --- | --- |
| Description | Grantee/Recipient/Subrecipient | OCD-DRU Use Only |
| Amount | Approved Amount |
| 1. Total Budget *<including amendments>* | $ | $ |
| 1. Total Funds Received | $ | $ |
| 1. Unutilized Funds <a-b>   (Amount to be de-obligated) | $ | $ |

|  |  |
| --- | --- |
| 1. **Typed or Printed Name of Responsible Party:** | |
|  | |
| 1. **Title:** | |
|  | |
| 1. **Signature:** | 1. **Date:** |
|  |  |

|  |  |
| --- | --- |
| **OCD-DRU APPROVAL** | |
| 1. **Typed or Printed Name of OCD-DRU Authorized Representative:** | |
|  | |
| 1. **Title:** | |
|  | |
| 1. **OCD-DRU Authorized Signature:** | 1. **Date:** |
|  |  |

**INSTRUCTIONS FOR GRANTEE FINAL PERFORMANCE REPORT**

ITEM

NUMBER

1. Enter the name of the Grantee, Recipient or Subrecipient.
2. Enter the CEA number that is being closed out.
3. Enter the CEA expiration date.
4. Enter the name of the person preparing the Final Performance Report and close-out documents.
5. Enter the phone number of the person preparing the Final Performance Report and close-out documents.
6. Enter the email address of the person preparing the Final Performance Report and close-out documents.
7. Use a separate line for each project that was completed under this CEA.
   1. List the activity/project ID for each activity/project
   2. Enter the name of each activity/project
   3. Enter the date the Activity/Project Close-out was approved (date of approval letter)
8. Complete the items in the table to indicate the final computation of CEA funds balance.
9. Enter the total budget from the CEA (including amendments)
10. Enter the combined total amount of funds received under this CEA (total for all projects).
11. Subtract b-a, and enter the amount in Unutilized funds. This is the amount that will be de-obligated.
12. Type in the name of the responsible official, e.g., the Mayor/President.
13. Type in the title of the responsible official.
14. The responsible official should sign in this box, verifying the information in the Final Performance Report is complete and accurate, and confirming that Disaster Recovery CDBG Project files are being maintained in the local governing body's offices.
15. Enter the date the Responsible Official signed the Final Performance Report.

13-16. For OCD-DRU use only.

|  |  |
| --- | --- |
| **DISASTER RECOVERY**  **COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**  **HOUSING OPPORTUNITIES FORM** | |
| **1. Grantee  Subrecipient** | |
|  | |
| **2. CEA:** | **3. Date:**       **Initial  Revision** |
|  |  |
| 1. **Actions taken to affirmatively further fair housing in your community:**   Actions Taken | Results |
| 1. **Actions taken to increase housing opportunities for lower income:**   Actions Taken | Results |

**INSTRUCTIONS FOR THE HOUSING OPPORTUNITIES FORM**

ITEM

NUMBER

1. Mark the appropriate checkbox that applies (Grantee or Subrecipient), and enter the name of the Grantee or Subrecipient.
2. Enter the CEA number for the Disaster Recovery CDBG project.
3. Enter the date, and indicate whether or not this form is the original submission or has been revised.
4. List all actions taken to affirmatively further fair housing in your community and the results of those actions.
5. Identify all actions taken to increase housing opportunities for lower income households in your community and the results of those actions.