



CONFORMITY WITH THE APPLICATION Monitoring Checklist Form

Grantee:			Grant Number:	
Prepared By:			Date Prepared:	

1.	Do the grantees' project budget and expenditures conform to the project budget in GMS? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Activity Line Item	Budget	Expanded Financial Statement)
			Expenditures (Grantee)
	Totals:		
Explain any discrepancies <input type="checkbox"/> N/A			
2.	Does the grantee's schedule of proposed accomplishments conform to the accomplishments contained in the application? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Proposed Accomplishments	Complete to Date	
		Explain Discrepancies	
3.	Do the grantees' proposed LMI benefit by activity match the actual LMI by activity? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Proposed Accomplishments	Proposed LMI	
		Actual LMI	
		Explain Discrepancies:	
4.	Describe any changes in activities from the application or approved amendment.	<input type="checkbox"/> N/A	
5.	Is the average cost per unit (including service delivery) the same as in the application or approved amendment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	



	Average cost per unit in the application?		Comments:								
	Average cost per unit to date?										
6.	Does the grantee anticipate requesting an amendment within the next six months? If yes, describe the proposed amendment:		<input type="checkbox"/> Yes <input type="checkbox"/> No								
7.	Does the grantee maintain cumulative beneficiary data that includes income and protected class status? If yes, review the information on beneficiaries to date and compare benefits with those listed in the application. Note any differences greater than 10%. Attach a spreadsheet if beneficiary demographic data is available.		<input type="checkbox"/> Yes <input type="checkbox"/> No								
8.	For direct recipients of CDBG assistance (grants, loans, down payments, etc.), is the grantee using the most current income guidelines?		<input type="checkbox"/> Yes <input type="checkbox"/> No								
9.	What method of documentation has the grantee used to verify income?										
10.	Is there evidence that the grantee is using the federal and state debarment list before procuring goods and services		<input type="checkbox"/> Yes <input type="checkbox"/> No								
	<table border="1"> <tr> <td colspan="2">Check all that apply and list the Effective date.</td> </tr> <tr> <td><input type="checkbox"/> Sam.gov</td> <td></td> </tr> <tr> <td><input type="checkbox"/> NC DOA</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certificate of Eligibility</td> <td></td> </tr> </table>		Check all that apply and list the Effective date.		<input type="checkbox"/> Sam.gov		<input type="checkbox"/> NC DOA		<input type="checkbox"/> Certificate of Eligibility		
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11.	Is the grant on schedule? If not, what is the projected date for completion of grant activities and closeout?		<input type="checkbox"/> Yes <input type="checkbox"/> No								



12.	<p>How much local money has been expended on the project to date? <i>Attach evidence of local expenditures.</i></p>	
<p>Comments:</p>		

Grantee Representative

Date

Grant Management Representative

Date