# Low Income Household Water Assistance Program (LIHWAP) Consolidated Appropriations Act of 2021 and American Rescue Plan

### **GRANT IMPLEMENTATION PLAN**

**Grantee Name:** New York State

**Document Status:** Final Draft

Section 1 – Program Needs, Goals and Allocations

#### **Community Needs and Program Goals**

# 1.1 Description of Emergency Household Drinking Water and Wastewater Needs The OCS priorities are restoration of household water services, reducing arrearages, reducing rates charged to households. Briefly describe current needs related to these priorities within yourstate, territory, or tribal areas. Describe any areas of concentrated need or special issues within communities served by water utilities within your state, territory, or

tribal area.

Drinking water and wastewater rates and delivery structures vary by region of the state and by drinking water and wastewater provider. NYS will prioritize restoration of drinking water and wastewater services and arrears reduction for eligible households. If feasible and funding is available, NYS will consider rate reduction.

Surveys conducted by OTDA indicate that the percentage of households with drinking water and/or wastewater arrearages is dependent on the region and can range from less than 1% to more than 15% and the average reported arrearages are \$250 for each service. The NYS average combined drinking water and sewer bill is \$1,200 per year based on US Labor Statistics. Currently there is no centralized information to provide data on the number of households who have been terminated or have loss of service due to nonpayment.

#### 1.2 Operational Priorities and Emergency Flexibilities

Consistent with goal of the American Rescue Plan to provide immediate relief to the American people, briefly describe the operational priorities within your state. territory or tribal area

(e.g. immediate restoration of services to households without current water services, immediatepayment of existing arrearages to prevent disconnection of drinking water or wastewater services after a previous moratorium on water services due to Covid-19).

The program will prioritize payment of drinking water and wastewater arrears for households who have had service terminated, have a notification of shut-off, or would have had service terminated without theutility moratorium. If feasible and funding is available, NYS will consider rate reduction.

LIHWAP Plan: New York State Page 1 of 30

#### 1.3 Expected Date for Initial Water Payments on Behalf of Households

Provide an estimated date by which payments will be initiated based on the operational priorities identified above (e.g. first stage of payments to restore services for currently disconnected households, etc.).

Restoration of terminated service - January 1, 2022 Prevention of loss of service/arrears reduction - February 1, 2022 Rate reduction - TBD if feasible and funding is available

#### **Estimated Funding Allocations**

1.4 Estimate what amount of available LIHWAP funds willbe used for each component that you will operate: The total of all percentages must add up to 100%. The combined total of Administration (State) and Administration (Subrecipients) must not exceed 15% of the total for either the Consolidated Appropriations Act orthe American Rescue Plan Award.	Consolidated Appropriations Act of 2021 Percentage (%)	American Rescue Plan Grant Percentage %
Household Benefits	75 %	75 %
Outreach/Eligibility Determination	10 %	10 %
Administration - State	15 %	15 %
Administration - Subrecipients	0%	0%
Total (each column must equal 100%)	100 %	100%

#### **Categorical Eligibility**

# 1.5 As outlined in the Terms and Conditions, current recipients the following programs are categorically-eligible for LIHWAP assistance:

- Low-Income Home Energy Assistance Program (LIHEAP)
- · Means-tested Veterans Programs
- Supplemental Security Income (SSI)
- Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)

Briefly describe your operational plans for enrollment of categorically eligible populations based on operational priorities outlined in question 1.2 (e.g. automatic enrollment, acceptance of documentation of enrollment during intake processes). If it will not be possible to include any ofthese programs in your intake/eligibility processes, provide a brief explanation.

The following groups will be considered categorically income eligible and will not be required to provide documentation of income:

- Low-Income Home Energy Assistance Program (LIHEAP) recipients
- Supplemental Security Income (SSI), Living Alone recipients
- Supplemental Nutrition Assistance Program (SNAP) recipients

N/A

Temporary Assistance recipients\*

\*Whenever Temporary Assistance or TA is used in this document, it means Temporary Assistance for Needy Families (TANF) or NYS Safety Net Assistance

We are not including Means-tested Veterans Programs to uphold program integrity across other agencyrun programs.

Note:	ermination of Eligibility for Direct Enrollment  The information below is focused on eligibility determination for households that are notcategorically le based on the enrollment in one of the programs outlined in question 1.5.
1.6	What type of countable income do you use for eligibility determination? (select one)  ☐ Gross Income ☐ Net Income
1.7	List all the applicable forms of countable income used to determine a household's income eligibility for LIHWAP. Note: The forms of countable income used for benefit eligibility are generally left to the discretion of the grantee; however, the following sources are not applicable forms of countable income used to determine a household's income eligibility for LIHWAP:
	Temporary Assistance for Needy Families (TANF) benefits
	<ul> <li>Supplemental Nutrition Assistance Program (SNAP) benefits</li> </ul>
	<ul> <li>Women, Infants, and Children Supplemental Nutrition Program (WIC) benefits</li> </ul>
	Covid-19 Economic Impact Payments (Stimulus Checks)
	Wages, self-employment income, contract income, payments from mortgage or sales contracts, unemployment insurance, strike pay, Social Security Administration benefits, retirement/pension benefits, cash gifts, jury duty compensation, rental income, employment through Workforce Investment Act, Income from work study programs, alimony, child support, interest, dividends or royalties, commissions, legal settlements, insurance payments made directly to the insured, insurance payments made specifically for the repayment of a bill, debt or estimate, Veterans Administration (VA) benefits, earned income of a child under the age of 18, stipends from senior companion programs, such as VISTA.
	If any of the above questions require further explanation or clarification that could not be made in thefields, provide said explanation here.

Page 3 of 30 LIHWAP Plan: New York State

### **Section 2: Benefits**

### **Eligibility**

2.	1 Designate the income eligibility t	hreshold used for the water benefit.
2.	Eligibility Threshold (select one)	Eligibility Threshold
	,	Percent
	Federal Poverty Guideline	150 %
	State Median	
	Income  Hybrid Federal and State	
	(Based on Household Size)	
2.2	Do you anticipate additional eligibinoted in 2.1 for water assistance?	ility requirements beyond the income threshold
	If the answer to question 2.2. is "Yes"	please provide an explanation below
	The household must be the customer utility provider.	of record with the drinking water and/or wastewater
2.3.	How will you support households very payments?	vhose utility payments are included in their rental
	households who have had service tel	f drinking water and wastewater arrears for rminated, have a notification of shut-off, or would theutility moratorium. If feasible and funding is action.
	The household must be the customer utility provider.	of record with the drinking water and/or wastewater
		er included in rent, and not eligible for LIHWAP, will ental Assistance Program (ERAP), TA and/or local od to serve these households.
2.4		termine your benefit levels. (Check all that apply. er Burden and Household Wastewater Burden if or drinking water and wastewater):
	☐ Income	
	☐ Household size	
	☐ Household Drinking Water Burde	n
	Household Wastewater Burden	
	☐ Other (Please describe):	
	, ,	inpaid payments for drinking water and/or wastewater

LIHWAP Plan: New York State Page 4 of 30

services up to \$2,500 per benefit per provider.

Benefit equals household's water and/or wastewater account balance, including regular fees, up to maximum benefit of \$2,500 per household. Based on our survey of water suppliers, New York expects funds will be exhausted quickly by serving households who have had service terminated, have a notification of shut-off, or would have had service terminated without the utility moratorium. If we have resources to help households with current bills, we will amend our plan accordingly.

2.5	Describe estimated ben	efit levels	for the project period for w	which this plan applies
	Minimum Benefit \$	25	Maximum Benefit	\$ 2,500
2.6		equency of	Yes ⊠ No f allowable benefit (e.g., mor drinking water bill and wast	
		. If feasible	and funding is available, NY	
2.7	Do you give priority in	eligibility	to:	
	People with Disabilities		☐ Yes	⊠ No
	Young Children?		Yes	No
	Older Adult/Seniors (60	and over)?	☐ Yes	⊠ No
	Households with high was burdens?	ater	☐ Yes	⊠ No
	Other?			□No
	Households currently disconnected from drink and/or wastewater servi			
2.8			ovision of water assistanc , early application periods	
			come, first served basis unle o restore or retain drinking v	
		ouseholds v	olds with current bills, we wi with people with disabilities, ter burdens.	
2.9			ing those who are physica s without leaving their hon	

LIHWAP Plan: New York State Page 5 of 30

eligible households.

2.10	For individual who are homebound or physically disabled, do you provide travel to the sites at which applications for assistance are accepted? Yes No If No, explain and explain alternative means of intake to those who are homebound or physically disabled?
	Applications will be accepted online. Households who are unable to complete an online application may request a paper application by contacting NYS OTDA.
2.11	Are any of the utility vendors you work with subject to a moratorium on shut offs?  ☑ Yes ☐ No
	If you responded "Yes" to question 2.11, you must respond to question 2.12.
2.12	Describe the terms of the moratorium and any special dispensation received by LIHWAP clients during or after the moratorium period.
	The NYS Public Service Commission (PSC) regulated utilities agree to provide a two-week moratorium around the Christmas and New Year holidays. Chapter 106 of the Laws of 2021extends a moratorium that prevents utility companies from disconnecting utilities to residential households and small businesses that are struggling with their bills due to the COVID-19 pandemic. The moratorium is extended from the June 24, 2021 lifting of the COVID-19 state of emergency to December 21, 2021.
	Drinking water and wastewater customers are included in the PSC moratorium, however suspensions of disconnections for nonpayment will end December 21, 2021.
2.13	Do you make payments contingent on vendors taking appropriate measures or maintaining existing supports to alleviate the water burden of eligible households?  No
	If so, describe the measures vendors may take or maintain.
	Each utility vendor must sign a NYS LIHWAP vendor agreement to participate. The vendor

LIHWAP Plan: New York State Page 6 of 30

agreement provides that the utility vendor agrees and assures to NYS OTDA that the vendor will take appropriate measures to maintain existing supports to alleviate the water burden of

COVID-Specific	General (Not COVID specific)
<ul> <li>□ Disconnection moratorium</li> <li>□ No late fees, interest, or penalty charges</li> <li>□ Ability to enter into a payment</li> </ul>	Consumer protections regarding shutoffs (e.g., minimum notice period, protection of vulnerable populations, minimum amount overdue before disconnection allowed opportunity for payment plan before disconnection, other procedural or substantive restrictions on shutoffs)
plans of 6 months or longer  Reconnection of service for disconnected customers	☐ Data reporting requirements for utilities – on a permanent basis – e.g., periodic reporting on number of shutoffs
☐ Enrollment in a discounted rate	<ul> <li>□ Percentage of income payment plan other utility-funded arrearage assistance</li> <li>□ Lifeline rates</li> </ul>
	☐ Water efficiency assistance
	☐ Provisions ensuring continued service for a specific time period (Describe below)
	☐ Provisions ensuring reconnection within a specific Time period (Describe below)

If any of the above questions require further explanation or clarification that could not be made in the fields, provide said explanation here.

- 2.1. Income eligibility is based on the higher of 60% of State Median Income (SMI) or 150% of the Federal Poverty Level (FPL). The income eligibility threshold used for households including 13 or more members is based on 150% of the FPL.
- 2.7. Based on our survey of water suppliers, New York expects funds will be exhausted quickly by serving households who have had service terminated, have a notification of shut-off, or would have had service terminated without the utility moratorium. If we have resources to help households with current bills, we will amend our plan accordingly to prioritize households with people with disabilities, young children, older adults, and households with high water burdens.

### **Section 3: Outreach**

3.1	Select all outreach activities that you conduct that are designed to assure that eligiblehouseholds are made aware of all LIHWAP assistance available:
$\boxtimes$	Place posters/flyers in local and county social service offices, offices of aging, Social Securityoffices, VA, etc.
$\boxtimes$	Publish articles or public service announcements in local newspapers or broadcast media announcements.
$\boxtimes$	Work directly with water utilities to identify potential recipients.
$\boxtimes$	Include inserts in water vendor billings to inform individuals of the availability of all types of LIHWAP assistance.
	Mass mailing(s) to prior-year LIHEAP recipients or recipients of other government benefits:
	Automated phone campaigns and/or social media outreach
	Multi-lingual announcements in languages spoken by low income households within utilityservice area and/or notification in ethnic language news and broadcast media outlets
$\boxtimes$	Inform low income applicants of the availability of all types of LIHWAP assistance at application intake for other low-income programs.
$\boxtimes$	Execute interagency agreements with other low-income program offices and/or public healthpathways created for Covid-19 outreach to perform outreach to target groups.
	Outreach to faith-based institutions, including those serving low-income people and people ofcolor
	Other (specify):
	ny of the above questions require further explanation or clarification that could not be made nefields, provide said explanation here. N/A
	IV/A
Sec	tion 4: Coordination
4.1	Describe how you will ensure that the LIHWAP program is coordinated with other programs available to low-income households (LIHEAP, TANF, SSI, SNAP, EPA, Emergency Rental Assistance Program, Homeowner Assistance Program, WAP, etc.) etc.).
	☐ Joint application for multiple programs:
	Intake referrals to/from other programs:
	One - stop intake centers:
	Other - Describe:

LIHWAP Plan: New York State Page 8 of 30

OTDA is the program administrator for SNAP, TA, and LIHEAP and will match data against those programs to maximize program access.

# 4.2 Describe how you will coordinate with relevant regulatory authorities that govern watersuppliers.

NYS OTDA will collaborate with the NYS Department of Health (DOH), the NYS Department of Environmental Conservation (DEC), and the NYS Public Service Commission (PSC) to make sure utilities are aware of the program through routine information sharing and policy coordination. An interagency taskforce will be established that will meet on a regular basis to discuss issues and share ideas related to drinking water and wastewater including program effectiveness, outreach, and best practices.

If any of the above questions require further explanation or clarification that could not be made in the fields, provide explanation here.

N/A

### **Section 5: Agency Designation**

(Red	quired fo	r State grantees and the Com	monwealth of Puerto Rico)	
5.1	How v	vould you categorize the pri	mary responsibility of your	State agency?
		Administration Agency		
		Commerce Agency		
		Community Services Agend	су	
		Energy / Environment Agen	су	
		Housing Agency		
	$\boxtimes$	Human Service Agency		
		Other - Describe:		
5.2	LIHW	/AP Component Administra	ition	
			Drinking Water Service	Wastewater Service
5.2a	Who	determines client eligibility?	State Agency	State Agency
5.3b	Who	processes benefit payments		
	to wa	ter service providers?	State Agency	State Agency

If any of your LIHWAP components are not centrally administered by a State agency, you must complete questions 5.3, 5.4 and 5.5.

LIHWAP Plan: New York State Page 9 of 30

6.3

LIHWAP Plan: New York State

Page 10 of 30

5.3	What is your process for selecting local administering agencies?  N/A
5.4	How many local administering agencies do you use?
	0
5.5	What types of local administering agencies do you use?
	Community Action Agencies
	Local Governments
	City Governments
	County Governments
	Other non-profits
	y of the above questions require further explanation or clarification that could not be made efields, provide said explanation here. N/A
Note:	tion 6: Water suppliers Water suppliers refers to both drinking and/or wastewater suppliers as they may be ent entities at the local level  The following question is specific to Tribes (only). Do you charge households drinkingwater and wastewater utility services?
	Yes If "Yes" please proceed to next questions.
	No If "No" please skip to question 6.5.
6.2	How do you notify the household of the amount of assistance paid, and the timing of theassistance payment?
	All applicants are provided with a notice which will advise them of their eligibility for
	LIHWAP benefits, the vendor to which the payment was authorized, and the amount paid
	on their behalf. Applicants will be notified of the determination of eligibility within 30
	business days from the date of receipt of the completed application.

be treatedadversely because of their receipt of LIHWAP assistance?

How do you assure that no household receiving assistance under this title will

Each utility vendor must sign a NYS LIHWAP vendor agreement to participate. The vendor agreement provides that the utility vendor agrees and assures to NYS OTDA that the households served by the vendor will not be treated adversely because of such assistance under applicable provision of the LIHWAP Supplemental Terms and Conditions 11h under Federal LIHWAP Assistance Listing No. 93.568 (B) (with modifications based on P.L. 116-260).

6.4 How do you assure that water suppliers are restoring disconnected service or otherwisemaintaining continuity of service due to the benefit payment?

Vendor agreements contain language that by accepting a LIHWAP payment, the vendor assures OTDA to continue or restore service and to provide 90 days of prospective service.

6.5 For Tribes who answered "No" to question 6.1, please describe how you intend to maintainaccurate records to show how LIHWAP funds are expended for drinking water and/or wastewater utilities on behalf of households. (I.E. Financial expenditure reports).

N/A

If any of the above questions require further explanation or clarification that could not be made in the fields, provide said explanation here.

N/A

### Section 7: Program, Fiscal Monitoring, and Audit

7.1 How do you ensure good fiscal accounting and tracking of LIHWAP funds?

NYS OTDA utilizes fiscal and fund accounting procedures similar to those utilized at the agency and districts in the administration of other income tested programs. All expenditures are monitored by NYS OTDA fiscal staff to ensure that allocation levels are not exceeded. OTDA fiscal staff tracks obligations and expenditures on a quarterly basis to ensure funds are expended within the allowable grant period. These expenditures are gathered from the Statewide Financial System (SFS). The SFS system allows OTDA to run reports for the Federal grant timeframe.

#### **Audit Process**

7.2 Describe any audit findings rising to the level of material weakness or reportable condition cited in the Single Audits (as required in the Single Audit Act), Grantee monitoring assessments, inspector general reviews, or other government agency reviews of the LIHWAP agency from themost recently audited fiscal year.

LIHWAP Plan: New York State Page 11 of 30

OMB Clearance No: 0970-057
Expiration Date: 12-31-202

### ☐ No Findings

Finding	Туре	Brief Summary	Resolved?	Action Taken
1.1. 2020 OTDA-004	Non-cost Reporting	Home Energy Assistance Program, Performance Measures Reporting Finding. Annually, as part of the preparation of the annual reporting, the Office requests necessary data from its third party vendors who provide services to beneficiaries. The Office uploads these vendor reports into the State of New York's Welfare Management System (WMS). Based on information from these vendor reports as well as information maintained within WMS, specifically fuel type information, outputs are taken from WMS calculations which management utilizes to complete the annual reporting. While the Office was able to provide the 38 underlying vendor reports utilized for the annual reporting period ending September 30, 2019, the Office was also unable to provide documentation supporting the information utilized from WMS which calculated certain key data elements. Additionally, the Office, does not have controls in place to ensure the accuracy of the WMS system calculations and was subsequently to reporting unable to recalculate the annual report key data elements.	☐ Yes ☐ No	Program will work with I.T. and Data Management to get a detailed report of all cases associated with the Performance Measures Data Form each year. Program will review our Performance Data Form procedures to ensure that adequate controls are in place.
2.			Yes No	
3.			Yes No	
4.			Yes No	
5.			Yes No	
6.			Yes No	

LIHWAP Plan: New York State Page 12 of 30

### **Compliance Monitoring**

7.3	Identify the Grantee's strategies for monitoring compliance with the Grantee's and Federal LIHWAP policies and procedures (e.g. certifications, Terms and Conditions, federal guidance, nondiscrimination requirements): Select all that apply.			
	Grantee employees:			
	□ Departmental oversight			
	Secondary review of invoices and payments			
	Reconciliation of water supplier records			
	Other program review mechanisms are in place. Describe:			
	Local Administering Agencies / District Offices:			
	On - site evaluation			
	☐ Annual program review			
	☐ Monitoring through central database			
	☐ Desk reviews			
	☐ Client file testing/sampling			
	Reconciliation of water supplier records			
	Other program review mechanisms are in place. Describe			
7.4	Explain or attach a copy of your local agency monitoring schedule and protocol. N/A			
7.5	Describe how you select local agencies for monitoring reviews.  Site visits:  N/A			
	Desk reviews:			
	N/A			
7.6	How often will each local agency be monitored? Note: This answer can be prospective.  N/A			

7.7.	. How many local agencies are currently on corrective action plans for eligibility
	and/or benefitdetermination issues for LIHEAP or other programs administered by
	your agency?

0

7.8. How many local agencies are currently on corrective action plans for financial accounting or administrative issues for LIHEAP or other programs administered by your agency?

0

If any of the above questions require further explanation or clarification that could not be made in the fields provide, said explanation here.

N/A

### **Section 8: Public Participation**

8.1	How did you obtain input from the public in the development of your LIHWAP plan? Select all that apply.
	Tribal Council meeting(s)
	Public hearing(s)
Ent	er the dates for Tribal Council meeting(s) or Public hearing(s):
	Draft Plan posted to website and available for comment
	Hard copy of plan is available for public view and comment
Ent	er how long draft plan and/or hard copy of plan was available for public view and comment
	Comments from applicants are recorded
	Request for comments on draft Plan is advertised
$\boxtimes$	Stakeholder or consultation meeting(s)
$\boxtimes$	Comments are solicited during outreach activities

8.2 How many parties commented on your plan?

10

Other - Describe

8.3 Summarize the comments you received on your plan here:

Comments from meetings with water and/or wastewater suppliers and related associations stated that arrears forgiveness and rate reduction will be extremely important to control costs as infrastructure costs rise. Consideration should be afforded for household infrastructure repairs similar to repair and replacement in LIHEAP. Varying rate structures across the state will need to be taken into account for program equity.

LIHWAP Plan: New York State Page 14 of 30

# 8.4 What changes did you make to your LIHWAP plan as a result of the comments received?

We afforded consideration for rate reduction if feasible and funds are available.

If any of the above questions require further explanation or clarification that could not be made in the fields, provide said explanation here:

- 8.1. NYS OTDA sought input from the following entities, including stakeholders and community representatives, in the development of this plan regarding rate structures and billing procedures of drinking water and wastewater utilities, vendor participation and outreach, and overviews of existing drinking water and wastewater assistance programs:
- New York Water Environment Association
- · National Association of Clean Water Agencies
- HEAP Block Grant Advisory Committee
- HEAP Interagency Taskforce
- National Energy Assistance Directors Association (NEADA)
- New York Section of the American Water Works Association
- · Natural Resources Defense Council
- Environmental Advocates NY
- Freshwater Future

NYS OTDA sought input from the following entities in the development of this plan regarding vendorparticipation and outreach:

- NYS DOH
- NYS DEC
- NYS PSC

Meetings were held via Webex and Zoom with additional correspondence through email. Comments from all meetings and discussions have been taken into consideration and/or implemented into the plan.

# **Section 9: Fair Hearings**

Note: Administrative hearing opportunities will be comparable to and may utilize existing processes, procedures, and systems currently in place for the State, Territory, or Tribe's Low Income Home Energy Assistance grant.

9.1 Describe your fair, independent hearing procedures for households whose applications are denied or where the applicant disputes the benefit amount. LIHWAP applicants who disagree with the eligibility determination are afforded an opportunity to an appeals process conducted by the NYS OTDA. All client notices, both approval and denial, contain information on how to request an appeal. Individuals whose have the opportunity to request an appeal through the online web based portal at which they applied, through a dedicated LIHWAP appeals email address, or by telephone. Appeals will be conducted by a supervisor who did not process or previously review the application. Individuals have 60 calendar days from the date of eligibility notification to

LIHWAP Plan: New York State

requestan appeal. An appeal can be denied if the request is made more than 60 calendar days from the date of eligibility notification.

#### 9.2 When and how are applicants informed of these rights?

When a client applies for a LIHWAP benefit they are informed of their right to an appeal at application and in their initial eligibility notification. This information is also available on OTDA's LIHWAP website.

# 9.3 Describe your fair hearing procedures for households whose applications are not acted onin a timely manner.

The agency is required to make determinations and provide notification of eligibility decisions on applications for LIHWAP benefits within 30 business days after the filing of such application. Applications which are incomplete may be pended for up to 10 business days and the pending period is not counted in the 30 business day timeframe for providing notification.

Individuals whose applications for LIHWAP benefits are not acted upon within the established timeframes have the opportunity to request an appeal through the online web based portal at which they applied, through a dedicated LIHWAP appeals email address, or by telephone. Appeals can be requested if it has been more than 30 business days since the LIHWAP certifier received your signed and completed application and you have not been told of the eligibility decision.

#### 9.4 When and how are applicants informed of these rights?

When a client applies for a LIHWAP benefit they are informed of their right to an appeal at application and in their initial eligibility notification. This information is also available on OTDA's LIHWAP website.

If any of the above questions require further explanation or clarification that could not be made in the fields, provide said explanation here.

N/A

# **Section 10: Training**

10.1 Training Strategy - Briefly describe the anticipated training strategy for ensuring that grantee staff, local administering agencies, and participating water utilities understandrequirements outlined in the Terms and Conditions as well eligibility requirements and procedures described in this plan. Indicate any technical assistance or resources needed by the State, Territory or Tribe to carry out this training strategy.

Grantee:

Staff involved in the administration of LIHWAP will be required to participate in

LIHWAP Plan: New York State Page 16 of 30

formal training both in person and online to ensure proper adherence to policies and procedures. Staff will be provided with updates as needed.

Participating Water and/or Wastewater Utilities:

Policies will be communicated through vendor agreements, and email updates. Informal conferences will be held via Webex and conference calls. Additionally, vendors will be provided with information and outreach material to conduct social media outreach and bill inserts.

### **Section 11: Performance Management**

11.1 Describe any challenges you anticipate with collecting and reporting data to ACF each year regarding how you implemented your LIHWAP. Examples of data may include, but are not limited to, the number of households assisted, the average benefit amount provided, the number of households whose water or wastewater services were restored because of the benefit, demographics of applicants and beneficiaries, and the number of imminent disconnections of water or wastewater services avoided because of the benefit.

NYS OTDA anticipates challenges due to the large number of water and/or wastewater utility providers. Drinking water and wastewater rates and delivery structures vary greatly by different regions of the stateand by drinking water and/or wastewater providers. Additionally, drinking water and/or wastewater utility providers billing procedures differ in terms of billing cycles, billing methods, and contracts with third party billing agencies and municipal governments.

11.2 List any technical assistance resources you request of ACF related to data collection, analysis and reporting on your LIHWAP.

N/A

If any of the above questions require further explanation or clarification that could not be made in the fields, provide said explanation here.

N/A

# **Section 12: Program Integrity**

#### 12.1 Fraud Reporting Mechanisms

a. Identify all mechanisms that will be available to the public for reporting cases of suspected LIHWAP waste, fraud, and abuse. Select all that apply.		
⊠ Onli	ne fraud reporting	
⊠ Ded	icated fraud reporting hotline	
⊠ Rep	ort directly to local agency/district office or Grantee office	

LIHWAP Plan: New York State Page 17 of 30

Report to State Inspector General or Attorney General

Forms and procedures in place for local agencies/district offices and vendors to report				
fraud, waste, and abuse				
Other - Describe:				
be used for adve pply	ertising the above	-referenced		
Printed outreach materials				
Addressed on LIHWAP application				
Requirements				
documentation required is left to the discretion of the grantee. The types of documentation included in the list below are examples of documentation required by LIHEAP grantees for some or all household members based on policies within the State, Territory or Tribe. Comparable documentation and procedures may be instituted for LIHWAP households or maybe modified or simplified for households that are categorically eligible based on enrollment in programs identified in question 1.5.				
from Whom?				
Applicant Only	All Adults in Household	All Household Members		
Required	Required	Required		
<u> </u>		Requested		
	☐ Required ☐ Requested	☐ Required ☐ Requested		
Requested	□ Requested	Requested		
		· ·		
☐ Requested ☑ Required ☐ Requested	<ul><li>☑ Requested</li><li>☑ Required</li><li>☑ Requested</li></ul>	<ul><li>☐ Requested</li><li>☐ Required</li><li>☐ Requested</li></ul>		
Requested Required	□ Requested     □ Required	Requested Required		
Requested Required Requested Required	Requested Required Required Required	Requested Required Required Required		
	be used for adverpply  Seplication  Requirements ing forms of identificants or their heat to the discretion of elist below are exact all household mean elementation are modified or simple enrollment in professional enrollment in professi	be used for advertising the above pply  Requirements  ing forms of identification will be required plicants or their household members to the discretion of the grantee. The list below are examples of documer all household members based on post edocumentation and procedures made modified or simplified for household en enrollment in programs identified in Collected from Whom Applicant Only Household  Required Required  Requested Requested		

LIHWAP Plan: New York State

#### 12.3 Identification Verification

	Identify what methods will be used to verify the authenticity of identification documents providedby clients or household members. <i>Select all that apply</i>
	∀ Verify SSNs with Social Security Administration
	Match SSNs with State eligibility/case management system (e.g.,
	SNAP, TANF
	☐ Match with State Department of Labor system
	☐ Match with State and/or federal corrections
	system
	☐ Match with State child support system
	☐ Verification using private software (e.g., The Work
	Number)
	☐ In-person certification by staff (for Tribal grantees
	only)
	☐ Match SSN/Tribal ID number with Tribal database or enrollment
	records ( for Tribal grantees only)
	Other - Describe:
12.4.	Citizenship/Legal Residency Verification
	What are your procedures for ensuring that household members are U.S. citizens or permanent residents who are qualified to receive LIHWAP benefits? Select all that apply.
	Clients sign an attestation of citizenship or legal residency
	☐ Client's submission of Social Security cards is accepted as proof of legal residency
	☐ Noncitizens must provide documentation of immigration status
	☐ Citizens must provide a copy of their birth certificate, naturalization papers, or passport
	☐ Noncitizens are verified through the SAVE system
	☐ Tribal members are verified through Tribal enrollment records/Tribal ID card
	Other - Describe:
12.5.	Income Verification Note: Income verification applies only to households that

12.5. Income Verification Note: Income verification applies only to households that have not been determined to be categorically eligible based on enrollment in other programs identified in question 1.5 above. Methods of income verification are left to the discretionof grantees and should be consistent with any sources of countable income identified inquestion 1.7 above.

LIHWAP Plan: New York State Page 19 of 30

What methods will your agency utilize to verify household income? Select all that apply. Require documentation of income for all adult household members Bank statements Pay stubs Social Security award letters □ Unemployment insurance letters statements Other - Describe: Computer data matches ☐ Income information matched against state computer system (e.g., SNAP, TANF) Proof of unemployment benefits verified with state Department of Labor Social Security income verified with SSA Utilize state directory of new hires Other - Describe: **HEAP** 12.6. Protection of Privacy and Confidentiality Identify the financial and operating controls that will be in place to protect client informationagainst improper use or disclosure. Select all that apply. Policy in place prohibiting release of information without written consent Grantee LIHWAP database includes privacy/confidentiality safeguards Employee training on confidentiality for: Grantee employees Local agencies/district offices Employees must sign confidentiality agreement ☐ Grantee employees Local agencies/district offices Physical files are stored in a secure location Other - Describe: All personally identifying information about a LIHWAP applicant or recipient is confidential and may be disclosed only for purposes of investigating or prosecuting suspected fraud or abuse, in cooperation with federal or State authorities regarding LIHWAP audits or investigations, or with the written consent

of the applicant or recipient.

# 12.7 Verifying the Authenticity

	What policies will be in place for verifying vendor authenticity? Select all that apply.
	All vendors must register with the State/Tribe.
	☑ All vendors must supply a valid SSN or TIN/W-9 form
	□ Vendors are verified through water bills provided by the household
	Grantee and/or local agencies/district offices perform physical monitoring of vendors
	Other - Describe and note any exceptions to policies above:
12.8	Benefits Policy - Water and Wastewater Utilities  What policies will be in place to protect against fraud when making benefit payments to waterutilities on behalf of clients? Select all that apply.  Applicants required to submit proof of physical residency
	Applicants must submit current water or wastewater bill
	Centralized computer system/database tracks payments to all water suppliers
	Centralized computer system automatically generates benefit level
	Computer databases are periodically reviewed to verify accuracy and timeliness of
	paymentsmade to water suppliers
	□ Data exchange with utilities that verifies:
	Account is properly credited with
	benefit
	□ Account ownership
	☐ Consumption
	☐ Payment history
	Other - Describe:
	Payments coordinated among other water and wastewater assistance programs to
	avoid duplication of payments
	Payments to water suppliers and invoices from water suppliers are reviewed for
	accuracy
	Procedures are in place to require prompt refunds from utilities in cases of account
	closure
	Separation of duties between intake and payment approval     □

LIHWAP Plan: New York State Page 21 of 30

	enforcement mechanism
	Other - Describe:
12.9	Investigations and Prosecutions Identify the Grantee's procedures for investigating and prosecuting reports of fraud, and any sanctions placed on clients/staff/vendors found to have committed fraud. Select all that apply.
	☐ Clients found to have committed fraud are banned from LIHWAP assistance. For
	how long is a household banned?
	Contracts with local agencies require that employees found to have committed fraud
	are reprimanded and/or terminated
	Grantee attempts collection of improper payments. If so, describe the recoupment
	process
	□ Local agencies/district offices or Grantee conduct investigation of fraud complaints
	from public
	Refer to local prosecutor or State Attorney General
	□ Refer to State Inspector General
	Refer to US DHHS Inspector General (including referral to OIG hotline)
	Other - Describe:

If any of the above questions require further explanation or clarification that could not be made in the fields, provide said explanation here.

12.5 Income documentation will be required and collected from the applicant. Applicants will be allowed to attest to income for additional household members.

# Section 13: Certification Regarding Debarment, Suspension, and Other Responsibility Matters

# **Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions**

#### **Instructions for Certification**

- 1. By signing and submitting this proposal, the prospective primary participant is providing thecertification set out below.
- 2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant

LIHWAP Plan: New York State Page 22 of 30

shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification an explanation shall disqualify such person from participation in this transaction.

- 3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition toother remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
- 4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changedcircumstances.
- 5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rulesimplementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
- 6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this coveredtransaction, unless authorized by the department or agency entering into this transaction.
- 7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled ``Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, checkthe List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
- 9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge andinformation of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a

LIHWAP Plan: New York State Page 23 of 30

person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

# Certification Regarding Debarment, Suspension, and Other Responsibility Matters--Primary Covered Transactions

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, orvoluntarily excluded by any Federal department or agency;
  - (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transactionor contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false Statements, or receiving stolen property;
  - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity(Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - (d) Have not within a three-year period preceding this application/proposal had one or more publictransactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the Statements in this certification, such prospective participant shall attach an explanation to this proposal.

# Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions

#### **Instructions for Certification**

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing theoretification set out below.
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- 3. The prospective lower tier participant shall provide immediate written notice to the person

LIHWAP Plan: New York State Page 24 of 30

to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

- 4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, asused in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal that, [[Page 33043]] shouldthe proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled `Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, checkthe List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

# Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--Lower Tier Covered Transactions

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor itsprincipals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

LIHWAP Plan: New York State Page 25 of 30

- (2) Where the prospective lower tier participant is unable to certify to any of the Statements in this certification, such prospective participant shall attach an explanation to this proposal.
- By checking this box, the prospective primary participant is providing the certification set out above.

# Section 14: Certification Regarding Drug-Free Workplace Requirements

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645(a)(1) and (b) provide that a Federalagency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central pint is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

# Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)

- 1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.
- 2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered afalse certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.
- 3. For grantees other than individuals, Alternate I applies.
- 4. For grantees who are individuals, Alternate II applies.
- 5. Workplaces under grants, for grantees other than individuals, need not be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee's drug-free workplace requirements.
- 6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., allvehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).
- 7. If the workplace identified to the agency changes during the performance of the grant, the granteeshall inform the agency of the change(s), if it previously identified the workplaces in question (seeparagraph five).
- 8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule

and Drug- Free Workplace common rule apply to this certification. Grantees' attention is called, in particular, to the following definitions from these rules:

Controlled substance means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through1308.15).

Conviction means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes.

Criminal drug statute means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance.

Employee means the employee of a grantee directly engaged in the performance of work under agrant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee's payroll. This definition does not include workers not on the payroll ofthe grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee's payroll; or employees of subrecipients or subcontractors in covered workplaces).

# Certification Regarding Drug-Free Workplace Requirements Alternate I.(Grantees Other Than Individuals)

The grantee certifies that it will or will continue to provide a drug-free workplace by:

- (a) Publishing a Statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition.
- (b) Establishing an ongoing drug-free awareness program to inform employees about --
  - (1) The dangers of drug abuse in the workplace.
  - (2) The grantee's policy of maintaining a drug-free workplace.
  - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
  - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace
- (c) Making it a requirement that each employee to be engaged in the performance of the grant begiven a copy of the Statement required by paragraph (a).
- (d) Notifying the employee in the Statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --
  - (1) Abide by the terms of the Statement; and

LIHWAP Plan: New York State Page 27 of 30

- (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statuteoccurring in the workplace no later than five calendar days after such conviction.
- (e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agencyhas designated a central point for the receipt of such notices. Notice shall include the identificationnumber(s) of each affected grant.
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfactorilyin a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).
- (B) The grantee may insert in the space provided below the site(s) for the performance of work done inconnection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)			
Address Line 1: 40 North Pearl Street			
Address Line 2:			
Address Line 3:			
City: Albany	State: NY	Zip Code: 12243	
Check if there are workplaces on file that are not identified here. Alternate II. (Grantees Who AreIndividuals)			
(a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conductingany activity with the grant;			

LIHWAP Plan: New York State Page 28 of 30

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a centralpoint for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.

[55 FR 21690, 21702, May 25, 1990]

By checking this box, the prospective primary participant is providing the certification set out above.

### **Section 15: Certification Regarding Lobbying**

The submitter of this application certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person forinfluencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shallcomplete and submit Standard Form-LLL, ``Disclosure Form to Report Lobbying," in accordance with its instructions
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placedwhen this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

#### Statement for Loan Guarantees and Loan Insurance

The undersigned States, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or

LIHWAP Plan: New York State Page 29 of 30

employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United Statesto insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL,

"Disclosure Form to Report Lobbying," in accordance with its instructions. Submission of this Statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required Statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By checking this box, the prospective primary participant is providing the certification set out above.

### Signature of Governor's Authorized Official

Name of State/Territory: New York

LIHWAP State/Territory Lead Agency: New York State Office of Temporary and Disability Assistance

I certify that the LIHWAP Plan is complete and that LIHWAP grant project will be implemented incompliance with the certifications contained herein.

Commissioner Michael Hein Digitally signed by Commissioner Date: 2021.09.02 09:19:11 -04'00'

Commissioner Michael Hein Print Name