

Small Cities Pre-Monitoring Checklist

Recipient: _____ Contract #: _____

1. Indicate which monitoring checklists you will be completing during this monitoring visit. (Refer to the risk analysis prepared following the application review site visit if this is a first monitoring. Review past monitoring reports prior to conducting the monitoring.)

- Form SC-12 – Small Cities Monitoring Summary
- Form SC-13 – Program Administration Checklist
- Form SC-14 – Civil Rights Monitoring Checklist
- Form SC-15 – Desk Monitoring Checklist
- Form SC-16 – Phase 1 Financial Management Checklist – Systems Review
- Form SC-17 – Phase 2 Financial Management Checklist – Transaction Testing
- Form SC-18 – Professional Services Procurement Monitoring Checklist
- Form SC-19 – Construction Procurement Monitoring Checklist
- Form SC-20 – Property Acquisition Monitoring Checklist
- Form SC-21 – Labor Standards Monitoring Checklist
- Form SC-22 – Program Income Monitoring Checklist
- Form SC-23 – Audit Review Checklist
- Form SC-24 – Neighborhood Revitalization Monitoring Checklist
- Form SC-25 – Housing Rehabilitation Monitoring Checklist
- Form SC-26 – Commercial Revitalization Monitoring Checklist
- Form SC-27 – Economic Development Monitoring Checklist
- Form SC-28 – Planning and Design Specifications Desk Monitoring Checklist
- Form SC-29 – Permanent Relocation Monitoring Checklist
- Form SC-63 – Internal Controls and Separation of Duties Monitoring Checklist
- Form SC-70 – Construction On-Site Monitoring Checklist

2. Indicate which GRITS reports were reviewed in preparing for the monitoring.

- | | |
|--|--|
| <input type="checkbox"/> Open Grants Report for this Recipient | <input type="checkbox"/> Special Conditions |
| <input type="checkbox"/> Audit Status with Notes | <input type="checkbox"/> Labor Standards – Full Detail |
| <input type="checkbox"/> Monitoring Tracking Report | <input type="checkbox"/> Projections by Quarter |
| <input type="checkbox"/> Payment Record for CDBG Grants | <input type="checkbox"/> Progress Reports by Quarter |
| <input type="checkbox"/> Line Item Expenditure Report | |

Attach copies of the reports to this checklist.



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3. Are there any findings or concerns from previous monitoring visits that have not been cleared? If yes , list the findings and concerns in the box below and review them with the Recipient.	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are there any special conditions which have not been cleared? If yes , list them below and review them with the Recipient.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Were any grant specific findings or recommendations referenced in the last Technical Audit Memo for this Recipient? If yes , print out a copy of the report and discuss those findings with the Recipient during the visit.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Comments:	

Prepared by:

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