



**2019 HOUSE BY HOUSE RESERVATION REHAB PROGRAM TIER II SITE-SPECIFIC CHECKLIST**

*(Includes Section 58.6 compliance factors required for every project site.)*

Project Address:

Grantee: **New Mexico Mortgage Finance Authority** Subgrantee:

Complete this form for each proposed project site attaching all source documentation.

**1. Airport Hazards §58.6(d) Runway Clear Zones and Clear Zones [24 CFR §51.303(a)(3)]**

A. Is the project located within 2,500 feet of a civil airport or within 15,000 feet of a military airport? Nearest airport is \_\_\_\_\_ miles away in \_\_\_\_\_, NM

Yes  No

If No, compliance with this section is complete. Continue to Section D.

If Yes, continue to Section B.

B. Is your project located within a Runway Potential Zone/Clear Zone (RPZ/CZ) or Accident Potential Zone (APZ)?

Yes  No

If No, compliance with this section is complete. Continue to Section D.

If Yes, the project is in an APZ. Continue to Section C.

If Yes, the project is in an RPZ/CZ, the project cannot proceed at this location.

C. Is the project in conformance with DOD guidelines for APZ?

Yes  No

If No, the project cannot be brought into conformance with DOD guidelines and has not been approved. The project cannot proceed at this location.

If Yes, the project is consistent with DOD guidelines without further action.

Continue to Section D.

D. Cite and attach source document: Map indicating project site in proximity to end of nearest runway. For more information see HUD Airport Hazards Guidance:

<https://www.hudexchange.info/programs/environmental-review/airport-hazards/>

If mitigation measures have been or will be taken, attach proposed detailed measures that must be implemented to mitigate for the impact or effect, including the timeline for implantation.

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**2. Flood Insurance §58.6(a) and (b) Flood Disaster Protection Act of 1973, as amended; National Flood Insurance Reform Act of 1994**

A. Does the project involve mortgage insurance, refinance, acquisition, repairs, rehabilitation, or construction of a structure, mobile home, or insurable personal property?

Yes  No

If No, the project does not require flood insurance or is excepted from flood insurance. Continue to Section D.

If Yes, continue to Section B.

B. Is the structure, part of the structure, or insurable property located in a FEMA-designated Special Flood Hazard Area?

Yes  No

If No, compliance with this section is complete. Continue to Section D.

If Yes, continue to Section C.

C. Is the community participating in the National Flood Insurance Program or has less than one year passed since FEMA notification of Special Flood Hazards?

Yes  No

If Yes, the community is participating in the National Flood Insurance Program. Flood insurance is required. Provide a copy of the flood insurance policy declaration or a paid receipt for the current annual flood insurance premium and a copy of the application for flood insurance. Continue to Section D.

If Yes, less than one year has passed since FEMA notification of Special Flood Hazards, no flood Insurance is required. Continue to Section D.

If No, the community is not participating, or its participation has been suspended, federal assistance may not be used at this location.

D. Cite and attach source documentation: FEMA Flood Insurance Rate Map showing project location in reference to flood zone designation. If flood map is not available, use best available information. For additional information see: FEMA Map Service Center: <https://msc.fema.gov/portal>

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3. **Floodplain Management** 24 CFR §55 Executive Order 11988, Floodplain Management

A. Does 24 CFR 55.12(c) exempt this project from compliance with HUD's floodplain management regulations in Part 55?

Yes  No

If No, continue to Section B.

If Yes, provide the applicable citation at 24 CFR 55.12(c) and provide supporting documentation. Continue to Section F.

B. Does your project occur in a floodplain?

Yes  No

If No, compliance with this section is complete. Continue to Section F.

If Yes, select the applicable floodplain using the FEMA/FIRM map or the best available information:

Floodway, continue to Section C

500-year floodplain. Continue to Section D

100-year floodplain. The 8-step process is required. Continue to Section E.

C. Floodways. Is this a functionally dependent use?

- Yes, the 8-step process is required. Work with MFA Environmental Officer to complete the 8-Step Process.
- No, federal assistance may not be used at this location unless a 55.12(c) exception applies.
- D. 500-year Floodplain. Is this a critical action?
- No, compliance with this section is complete. Continue to Section C.
- Yes, the 8-step process is required. Work with MFA Environmental Officer to complete the 8-Step Process.
- E. 100-year Floodplain. Is this 8-Step Process required? Select one of the following options:
- 8-Step Process applies. This project will require mitigation and may require elevating structure or structures. See the link to the HUD Exchange above for information on HUD's elevation requirements. Work with MFA Environmental Review Officer to complete 8-Step Process.
- 5-Step Process is applicable per 55.12(a)(1-3). Provide the applicable citation at 24 CFR 55.12(a). Work with MFA Environmental Review Officer to complete 5-Step Process.
- 8-Step Process is inapplicable per 55.12(b)(1-4). Provide the applicable citation at 24 CFR 55.12(b). Check with MFA Environmental Review Officer to ensure inapplicability of 8-Step Process. The review is in compliance with this section, continue to Section F.
- F. Cite and attach source documentation: FEMA Flood Insurance Rate Map showing project location in reference to flood zone designation. If flood map is not available, use best available information. For additional information see: FEMA Map Service Center: <https://msc.fema.gov/portal>

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4. **Contamination and Toxic Substances** 24 CFR 58.5(i)(2), 24 CFR 50.3(i)

- A. Evaluate the site for contamination. Were any on-site or nearby toxic, hazardous, or radioactive substances found that could affect the health and safety of project occupants or conflict with the intended use of the property?
- Yes  No
- If No, Continue to Section D.
- If Yes, describe the findings, including any recognized environmental conditions (RECs). Continue to Section B.
- B. Can adverse environmental impacts be mitigated? Work with MFA Environmental Review Officer to identify mitigation needed according to the requirements of the appropriate federal, state, tribal, or local oversight agency.
- Yes  No

If No, adverse environmental impacts cannot feasibly be mitigated. HUD assistance may not be used for this project.

If Yes, adverse environmental impacts can be eliminated through mitigation. Provide all mitigation requirements and documents. Continue to Section C.

C. Provide a description of how compliance was achieved. Include any of the following that apply: State Voluntary Clean-up Program, a No Further Action letter, use of engineering controls, or use of institutional controls. If a remediation plan or clean-up program is necessary, which standard does it follow?

- Complete removal
- Risk-based corrective action (RBCA)
- Other

D. Cite and attach source documentation: Map and/or other documents indicating absence of contamination. Explanation of evaluation that was taken.

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5. **Historic Preservation** 36 CFR 800 “Protection of Historic Properties”

Service providers may consult with SHPO and THPOs directly for historic preservation clearance. All properties include activities with potential to cause effects (direct or indirect) to historic properties and districts. Please use the attached historic preservation letter template to initiate consultation. MFA encourages the use of one letter for multiple properties, if possible. Provide MFA with a copy of the correspondence.

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58.5 factors not listed here, but requiring a Tier II review should be identified and cleared in the “Other” section, below.

Other. Environmental factor: \_\_\_\_\_ Determination/findings: \_\_\_\_\_  
Source documentation used to make this determination: \_\_\_\_\_

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Source documentation used to make this determination: \_\_\_\_\_

**PREPARER:**

\_\_\_\_\_  
Preparer’s Name and Title

\_\_\_\_\_  
Date

**AUTHORIZED RESPONSIBLE ENTITY OFFICIAL:**

\_\_\_\_\_  
Authorized Responsible Entity Signature

\_\_\_\_\_  
Date