Name & Phone Number of Person Completing Form: Original Submission Revision				am טו	is set L	Jp and Con	ple	tion F	orm (rev	8/2	2025)					
Original submission	☐ SETUP		TION		Or	iginal Submiss	ion D	ate:			Revisio	n Date	e:			
In Name of Participant: Subgrantee 2. Program Year 3. IDIS Activity ID: 4. Activity Name (property address)				ion	Na	nme & Phone N	lumb	er of Per	rson Com _l	plet	ing Form:					
Name of Participant: (Subgrantee) 2. Program Year 3. IDIS Activity ID: 4. Activity Name (property address)	A. Gener	al Inforn	nation													
5. Is this activity subject to Section 3 reporting? 6. 2 CFR 200 Question: Subrecipient Contractor 7. Is this an infastracture project, a defined by BABA? Y Sin A shared organization? Y Clin M Y Sin A shared organization? Y Clin M Y Sin A Y	IDIS Projec	t No.		Cont	tract No.		Wri	itten Agr	reement E	Exe	cution Date	(Date	Three-I	Party Agree	ement	t was signed):
September September September Underway September Underway September Underw	Name of Participant: (Subgrantee)				2.	2. Program Year 3. IDIS Activity ID			ctivity ID:	D: 4. Activity Name (property address)						
1. Is this participant a faith 2. Multi Address: 3. Loan Guarantee: 4. Homeowner Name: 3. Sabesed organization? Y ∈ N Y ∈ N		vity subject	to Section 3	3 report	ing? 6.	2 CFR 200 Que							defin	ed by BAI		
1. Is this participant a faith based organization? □ Y□ N □ Y ⊠ N □ Y W □ Y W □ Y N □ Y W □ Y W □ Y N □ Y W □ Y N □ Y W □ Y N □ Y N □ Y W □ Y N □ Y N □ Y N □ Y W □ Y N □ Y N □ Y W □ Y N □ Y N □ Y W □ Y N □ Y N □ Y W □ Y N □ Y N □ Y W □ Y N □ Y N □ Y W □ Y N □ Y W □ Y N □ Y N □ Y W □ Y W □ Y N □ Y W □ Y W □ Y N □ Y W □ Y W □ Y W □ Y W □ Y N □ Y W □ Y	8. Envirnmei	ntal Review	: 🛛 Comple	te 🗆 Ex	xempt 🗆	Underway	9.	HEROS E	Environme	enta	al Review ID): 900	000010	370378		
Section Comparison Compar	B. Activit	y Inform	ation													
5. Homeowner Street Address (same as #4 above): 10. Estimated HOME Units: 1	1. Is this par	ticipant a fa	aith- 2	2. Multi	Address:	3. Loan Gua	rante	ee:	4. Homeo	wne	er Name:					
10. Estimated HOME Units: 1 11. Estimated HOME Cost 12. Revised HOME Cost (from Change Orders):																
S S	5. Homeowi	ner Street A	ddress (sam	ie as #4	above):		6. City	y:				e:	8. Zip C	Code:	9. Co	unty Code:
Property Total HOME Housing was constructed before 1978 Lead Hazard Remediation Actions (if built before 1978); Total Type: Last Safe Units: 1 Units: Units: Units: 1 Units: Units	10. Estimate	d HOME U		Estim	nated HON	/IE Cost						ed HO	ME Co	st (from C	Chang	ge Orders):
Property Type: Completed Assisted Units: 14 Signed Family Units: 12 Signed Family Units: 15 Signed Family Units: 14 Signed Family Units: 15 Signed Fa	C. Activit	v Compl		e comple	eted unon n	roject completio	n)									
Type: Completed Assisted Units: Family 1 1 1		<u> </u>						nt:	lead	Ho	zard Remen	liation	Action	s (if huilt l	hefor	o 1978)·
1-4 Single Family 1 Units:									·							<u>. 1370j.</u>
The Insured? Y N	1-4 Single	•			•								-			35.93(c))
Value After Rehabilitation: \$	Family	1	1		•	_	24 15	70 01 1410						•		33.33(0))
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