

CDBG Subrecipient Agreement

Required Document Checklist for Capital Improvement Projects

_____ 1. **Project Information Sheet.** On the enclosed document please input all organization and project information as indicated. Please note the items that are ***Department use only*** as those lines will be filled out by the CDBG team.

_____ 2. **Proposals from Contractors.** You should have submitted three (3) ***Proposals*** from contractors with your CDBG Application for exactly the “same” work description. If you did not, please submit three (3) detailed more up to date written ***Proposals*** from properly licensed and insured contractors for your Capital Improvement Project (CIP). Select one (1) ***Proposal*** (and contractor) for your project. Indicate which contractor you have selected. The ***Proposals*** must provide the following:

_____ A. **Scope of Work (Exhibit A).** All three (3) written ***Proposals*** from contractors must include “line item” written Work Descriptions. **The “line item” Work Description from the contractor you select will become the Scope of Work (Exhibit A) of your Subrecipient Agreement.** Therefore, the contractor’s **Work Descriptions** must include the following elements:

- a. The address where capital improvement project will be completed;
- b. A written “itemized” list of work tasks that your contractor(s) will complete **(using line item format)**. Each itemized work task must include materials, labor, overhead and profit;
- c. A separate line item for preparing, providing and revising the proper plans, as required by the City of Riverside;
- d. A separate line item for obtaining the proper permits and approvals, as required by the City of Riverside.

_____ B. **Project Budget (Exhibit B).** All three (3) detailed written ***Proposals*** from contractors must also include written, “line item” Cost Estimates. **The “line item” Cost Estimate from the contractor you select will become the Project Budget (Exhibit B) of your Subrecipient Agreement.** Therefore, the contractor’s **Cost Estimates** must include the following elements:

- a. Contractor’s payment of Davis Bacon Federal Prevailing Wages for labor pursuant to HUD requirements. All “current” Davis-Bacon wage decisions can be accessed on-line at no cost at: www.access.gpo.gov/davisbacon;
- b. Contractor’s submittal of weekly Certified Payrolls for all employees of the contractors, subcontractors and tier contractors;
- c. An “itemized” cost for each work task listed in your contractor’s Work Description **(using the line item format)**. The itemized cost must include materials, labor, overhead and profit for “each” work task;
- d. Separate line item for the cost of preparing, providing and revising the proper plans, as required by the City of Riverside;
- e. Separate line item for the cost of obtaining the proper permits and approvals, as required by the City of Riverside.

The Cost Estimate portion of your contractor's **Proposal** must include all project related costs, whether or not they are covered by CDBG funding. If your CDBG award is less than your project related costs, or less than what you originally requested, you, the Subrecipient are responsible for paying the amount of budget shortfall.

____ **3. Key Personnel (Exhibit D).** Please provide a list of the key personnel assigned to perform portions of the Services or supervise the performance of Services for the CDBG funded project activities on the attached document.

____ **4. Authorized Signatures on Transaction Documents (Exhibit E).** Please provide appropriate documentation, as specified in the attached Exhibit E-1, E-2 and E-3 documents, identifying those with binding authority to execute transaction documents on behalf of your organization. **Please refer to Exhibit E – Instructions Authorized Signatures.**

____ **5. Insurance Requirements.** As identified during the CDBG Application process, the City of Riverside **requires** all organizations receiving funding to obtain and maintain in good standing insurance coverage for general liability, automobile liability and workers compensation. In addition, you are required to name the City of Riverside as additionally insured and incorporate specific language into your insurance certifications.

In order to prepare and execute your agreement, you must submit certificates of insurance and additional insured endorsements which identify and confirm the existence of insurance coverage required by the Subrecipient Agreement, including:

- a. **Commercial General Liability Insurance** coverage for both bodily injury and property damage on a per occurrence basis with a minimal single coverage of not less than \$1,000,000 per occurrence and a general aggregate limit in the amount of not less than \$2,000,000;
- b. **Additional Insured Endorsement** modifying the policy and naming "The City of Riverside and its Officers, Employees and Agents" as additionally insured;
- c. **Automobile Liability Insurance** covering both bodily injury and property damage in an amount not less than \$500,000, per occurrence and an aggregate limit of not less than \$1,000,000 for all vehicles used in connection with performing and administering the services described in the Subrecipient Agreement, including but not limited to, Subrecipient owned, leased and hired vehicles as well as a Subrecipient's employee vehicles;
- d. **Worker's Compensation Insurance** covering all employees to be used in performing and administering the services described in the Subrecipient Agreement pursuant to Section 3700 of the Labor Code of the State of California. EXCEPTION: If your organization is all volunteer, and has no employees subject to the Worker's Compensation laws of the State of California, please complete the attached form "Certification and Acknowledgement of Workers Compensation Requirement" and submit along with the rest of the required insurance documentation;

- e. Certificate language for each type of insurance stating the **City shall be given thirty (30) days written notice prior to cancellation of such coverage.**

Since the required insurance information has been the largest barrier to the processing of the CDBG Agreements, we are providing you with specific Insurance instructions including “sample” certificate and endorsement forms to assist you with this task.

_____ **6. Units of Service (Attachment 1).** Please provide on the Attachment 1, an estimate of the numbers of persons or households to be served (units of service) with the funding awarded. *Please note that your level of achievement for the year will be measured against your estimated units of service.*