

CDBG CARES Act Project Schedule, Scope of Work and Performance Measures

ATTACHMENT B- Form C2 Public Services

Project Number _____

Subrecipient _____

Total CDBG Funds _____

Project Name _____
 Sub-awardee/Project Manager _____

Date _____

Prepared By _____

ACTIVITY	EXPECTED DATE OF COMPLETION/PERFORMANCE MEASURES
Application reviewed by WVDO, Subrecipient Awarded	
Grant Agreement and Evidentiary Materials Released to Subrecipient	
Implementation Meeting	
Evidentiary Materials Approved by WVDO (30 days from receipt)	
Environmentally Exempt Activity Determinations Retained in RE's ERR	
Subrecipient Program Forms and Policy and Procedures Review/Approval by WVDO	
Notice to Proceed/Approval Letter	
Advertise Availability of Program Applications	
Emergency Payments begin	
Submit reimbursement requests to WVDO monthly	
First quarterly report	
Monitoring Date-Insert a date which is "project 50%"	
Emergency Payments Complete- Final Payment Request to WVDO	
Closeout Final-Date determined by WVDO	