



Exhibit B: REQUIRED CDBG CERTIFICATIONS

If this agency (name): _____ is awarded funding, the agency agrees that:

1. The recipient has a federal UEI # (unique entity identifier) and is or will be registered in the U.S. System for Award Management at <http://sam.gov> before contract award and will update registration as necessary.
2. The recipient will provide liability insurance coverage as required by the City of Albany, and worker's compensation and payment of payroll taxes as required by Federal and State laws.
3. All expenditures must have adequate documentation and all accounting records and supporting documentation shall be available for inspection by City of Albany upon request, and funds will not be used to provide services/assistance for the same costs/losses from other funding sources.
4. All procurement (purchase) transactions regardless of whether negotiated or advertised and without regard to dollar value shall be conducted in a manner to provide maximum open free competition.
5. Financial records, support documentation, statistical records, and all other records pertinent to funding shall be retained for a period of ten years following completion of project/activity.
6. The recipient shall establish safeguards to prohibit employees from using their positions for a purpose that has the appearance of being motivated by a desire for private gain for themselves or others.
7. All materials submitted shall become public records retained by the City of Albany, except that late applications will be returned to the applicant without further review.
8. Letter of commitment from other funding sources and/or letters of support for your project shall be furnished to the City of Albany upon request.
9. No person shall be excluded from participation in, be denied the benefit of, or be otherwise subjected to discrimination under the program or activity funded in whole or part by CDBG funds based on race, color, national origin, sex, gender identity, familial status, religion, disability, age, veteran status, or any other characteristic protected under applicable federal, state, or local laws. The funding recipient agrees to furnish copies of applicable policies and procedures upon request.
10. Employment made by or resulting from CDBG funding from the City of Albany shall not discriminate against any employee or applicant based on disability, color, national origin, sex, gender identity, familial status, religion, disability, age, veteran status, or any other characteristic protected under applicable federal, state, or local laws.
11. None of the funds, materials, property, or services provided directly or indirectly under CDBG funding from the City of Albany shall be used for any partisan political activity, or to further the election or defeat of any candidate for public office.
12. **Anti-Lobbying Certification.** The anti-lobbying provisions will apply to any person who is an employee, agent, consultant, officer, elected or appointed official of the subrecipient that is receiving CDBG or CDBG-CV funds. The Applicant certifies that:
 - a. No Federal funds have been paid or will be paid, by or on behalf of the applicant agency, to any person for influencing or attempting to influence an officer or employee of the awarding of any Federal, state or municipal contract, the making of any Federal or municipal grant, the making of any Federal or municipal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment or modification of any Federal, state or municipal contract, grant, loan or cooperative agreement.



Community Development Block Grant Activities
2024 Applications Due by 5:00 p.m. Tuesday, January 9, 2024
 333 Broadalbin Street SW, Albany, Oregon 97321-0144 | BUILDING 541-917-7553 | PLANNING 541-917-7550

- b. If any funds other than Federal funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal or municipal agency/department, Member of Congress, an officer or employee of Congress, an employee of a Member of Congress, Mayor, City Council member, or employee of the Mayor or a City Council member in connection with this application, contract, grant, loan or cooperative agreement, it will complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions; and
 - c. Applicant will require the language of paragraphs a and b of this anti-lobbying certification be included in the award documents for all subcontractor awards at all tiers.
13. **Conflict of Interest Certification.** The applicant has no conflict of interests with any City of Albany appointed or elected representatives and does not employ City appointed or elected representatives or their families. The undersigned Applicant and each person signing on behalf of the Applicant certifies, and in the case of a sole proprietorship, partnership, or corporation, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of their knowledge and belief, no member of the City Council, officer, employee, or person, whose salary is payable in whole or in part by the City, has a direct or indirect financial interest in the award of funds, or in the services to which this Application relates, or in any of the profits, real or potential, thereof, except as noted otherwise herein. Furthermore, Applicant must disclose any real or perceived conflict of interest, current or past relationships with City of Albany employees, appointed or elected officials associated with this program.

Conflict of Interest Disclosure:

14. **Authorization to request funds:** I acknowledge the statements above and certify the information contained in this application is true and correct. I further understand material omission or false information contained in this application constitutes grounds for disqualification.

SIGNATURE OF AUTHORIZED PERSON (*notarization is not required*):

The Applicant hereby certifies that the information contained in these certifications and representations is accurate, complete, and current.

Applicant's Agency Name	Phone Number
Signature	Date
Printed Name and Title	

Section 3 Business or Individual (*check applicable box*): Yes No

Disadvantaged, Minority, Emerging Small Business (DMESB) (*check applicable box*): Yes No