

# CDBG-DR WORKSHEET FOR DUPLICATION OF BENEFITS ANALYSIS

**APPLICANT NAME:**

**ID #**

Step 1: Total Need for Project/Activity (to be completed by Applicant)	
What is the applicant's <u>unmet recovery need</u> ? Note, unmet need is determined at a point in time.	\$ _____
Step 2: Identifying Total Assistance Available (to be completed by Applicant)	
1. Did the applicant receive insurance proceeds? If yes, answer the sub-questions below:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes   No   N/A</b>
a. How much assistance is provided?	\$ _____
b. What was the <u>purpose(s)</u> of the assistance? List the purpose(s) of the assistance to the right.	
2. Did the applicant receive <u>FEMA funds</u> ? If yes, answer the sub-questions below:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes   No   N/A</b>
a. How much assistance is provided?	\$ _____
b. What was the <u>purpose(s)</u> of the assistance? List the purpose(s) of the assistance to the right.	
3. Did the applicant receive an SBA loan or other <u>subsidized loan</u> ? If yes, answer the sub-questions below:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes   No   N/A</b>
a. How much is the loan for?	\$ _____
b. What was the <u>purpose(s)</u> of the loan? List the purpose(s) of the loan to the right.	

*Please continue to the next page.*



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4. Did the applicant receive other cash awards or major forms of assistance (e.g., funds from a state program, local program, non-profits)? If yes, answer the sub-questions below:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
a. How much assistance is provided?	\$ _____
b. What was the <u>purpose(s)</u> of the assistance? List the purpose(s) of the assistance to the right.	
<u><b>Total Assistance:</b></u> <i>This value should be the sum of all assistance provided.</i>	\$ _____
<b>Step 3: Excluding Non-Duplicative Assistance (to be completed by MEDC staff)</b>	
1. For any insurance proceeds, FEMA assistance, or other major forms of assistance:	<input type="checkbox"/> <b>N/A</b>
a. Did the applicant use all the assistance provided? Note, the grantee must verify the applicant's response and may need to apply the necessary and reasonable cost principles to reduce the CDBG-DR award if any of the assistance is unused..	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. If applicable, list the portion of <u>unused insurance proceeds</u> to the right.	\$ _____
ii. If applicable, list the portion of <u>unused FEMA</u> assistance to the right.	\$ _____
iii. If applicable, list the portion of the other <u>unused</u> assistance to the right.	\$ _____
b. Did the applicant use the assistance for its <u>intended purpose</u> ? Note, the grantee must verify the applicant's response. If the applicant did NOT use the assistance for its intended purpose this amount is a DOB.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. List the amount of the insurance proceeds used to the right.	\$ _____
ii. List the amount of the FEMA assistance used to the right	\$ _____
iii. List the amount of the other major assistance used to the right.	\$ _____

c. Was the assistance provided for a <a href="#">different purpose</a> than the CDBG-DR funds?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. If the insurance proceeds were provided for a different purpose, list the total amount that can be excluded to the right. If the answer is no, continue to the next question to determine if this amount is a DOB.	\$ _____
ii. If the FEMA assistance was provided for a different purpose, list the total amount that can be excluded to the right. If the answer is no, continue to the next question to determine if this amount is a DOB.	\$ _____
iii. If the other assistance was provided for a different purpose, list the total amount that can be excluded to the right. If the answer is no, continue to the next question to determine if this amount is a DOB.	\$ _____
d. Was the assistance provided for the <a href="#">same purpose</a> as the CDBG-DR funds but used for a different allowable use?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. If the insurance proceeds were provided for a different allowable use, list the total amount that can be excluded to the right. If the answer to this question and the question before is no, this amount is a DOB.	\$ _____
ii. If the FEMA assistance was provided for a different allowable use, list the total amount that can be excluded to the right. If the answer to this question and the question before is no, this amount is a DOB.	\$ _____
iii. If the other assistance was provided for a different allowable use, list the total amount that can be excluded to the right. If the answer to this question and the question before is no, this amount is a DOB.	\$ _____
2. For any SBA loan or other subsidized loan:	<input type="checkbox"/> <b>N/A</b>
a. Was the <a href="#">loan declined</a> ?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. If yes, list the total amount of the loan that can be excluded to the right. Note, the grantee may need to collect documentation for the applicant's file. If the answer is no, continue to the next question.	\$ _____
b. Was the <a href="#">loan cancelled</a> ?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. If yes, list the total undisbursed portion of the loan to the right because this amount can be excluded. To determine if the disbursed portion is a DOB, continue to the next question. If the answer is no, continue to the next question. Note, the grantee may need to collect documentation for the applicant's file.	\$ _____
c. Is the loan for a <a href="#">DRRA-covered disaster</a> (2016-2021 disasters)? If the answer is no, the disbursed portion of the loan is a DOB.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
d. If the loan is for a <a href="#">DRRA-covered disaster</a> , is the DOB analysis before the DRRA sunsets (October 5, 2023)?	

	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
i. If the answer is yes, did the applicant use the loan for a disaster-related purpose? If the applicant used the loan for a disaster related purpose, the disbursed portion of the loan can be excluded. If not, the disbursed loan amount is a DOB.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>Yes No N/A</b>
ii. List the disbursed loan amount to the right.	\$ _____
<b><u>Total Exclusions (non-duplicative funds):</u></b> <i>This value should be the sum of all the assistance with the answer “yes” in Step 3.</i>	\$ _____
<b>Step 4: Identifying the DOB (to be completed by MEDC staff)</b>	
List the applicant’s <u>total assistance</u> from Step 2 to the right.	\$ _____
List the applicant’s <u>total non-duplicative funds</u> from Step 3 to the right.	\$ _____
<b><u>Total DOB (Subtract the non-duplicative funds from the total assistance):</u></b>	\$ _____
<b>Step 5: Calculating the total CDBG-DR Award (to be completed by MEDC staff)</b>	
List the <u>applicant’s total need</u> from Step 1 to the right.	\$ _____
List the total <u>DOB</u> amount from Step 4 to the right.	\$ _____
Subtract the DOB from the applicant’s total need to identify the maximum CDBG-DR award.	\$ _____
<ul style="list-style-type: none"> <li>Apply the program cap, if applicable, to the maximum CDBG-DR award.</li> </ul>	\$ _____
<ul style="list-style-type: none"> <li>Reduce the maximum CDBG-DR award based on necessary and reasonable <u>cost principles</u>, if applicable.</li> </ul>	\$ _____
<b>Final CDBG-DR Award</b>	\$ _____

**APPLICANT STATEMENT AND SIGNATURE:** Under penalties of perjury, I/we certify that the information presented in this document is true and accurate to the best of my knowledge and belief. I/We further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in my ineligibility to participate in this program or any other programs that will accept this document. Additionally, if I/we receive future funding for the same purpose of the CDBG-DR funds, I/we will agree to repay the assistance that was duplicated. Warning: Any person who knowingly makes a false claim or statement to HUD may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729.

REPRESENTATIVE NAME:

DATE:

MEDC STAFF NAME:

## **INTRODUCTION:**

A duplication of benefits occurs when the total financial assistance received is greater than the total unmet recovery need. CDBG-DR funds are one of multiple federal sources of disaster recovery assistance, and because CDBG-DR funds are typically the last federal source of funding, funds are often used for the same purposes as other federal funding sources. When CDBG-DR funds are used for the same purpose as other sources of funds, a duplication of benefits may occur.

## **SOURCES OF DOB REQUIREMENTS:**

- Section 312 (42 U.S.C. 5155) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act.
- CDBG-DR Appropriations Acts and HUD Federal Register Notices.
- OMB Cost Principles (24 CFR part 570 and 2 CFR 200, subpart E).
- Grant Agreements/Subrecipient Agreements.

The basic DOB calculation framework consists of five main steps:

1. Assessing an applicant's unmet need,
2. Identifying total assistance available to the applicant,
3. Excluding non-duplicative amounts of financial assistance,
4. Identifying the DOB amount, and
5. Calculating the total CDBG-DR Award.

## **INSTRUCTIONS**

### For Step 2, Identifying Total Assistance Available:

- A "Yes" response to any question is gathering information about the types of assistance received. Any type of assistance that was received by the applicant will be further addressed in Step 3.
- A "No" response to any question indicates the applicant did not receive the type of assistance. Types of assistance that were not received by the applicant do not need to be addressed in Step 3.
- A "N/A" response to any question indicates that the type of assistance was not available. Types of assistance that were not available to the applicant do not need to be addressed in Step 3.

### For Step 3, Excluding Non-duplicative Assistance:

- A "Yes" response to any question is either gathering information or indicating the applicant used the assistance correctly. Generally, a "Yes" response in Step 3 indicates that the assistance can be excluded as "non-duplicative" assistance and subtracted from the total assistance as outlined in Step 4.
- A "No" response to any question may indicate a DOB or a need to apply the necessary and reasonable cost principles.
- A "N/A" response to any question indicates that the answer to the question does not apply.

Note, the last row in Steps 2 and 3 should be the sum of all the "Yes" responses in the section.

## CONCEPTS RELATED TO DOB CALCULATIONS

The table below highlights several key terms and concepts that are used to complete a DOB analysis. This list of terms is provided to help a grantee understand terms used in the worksheet.

Key Term	Description
<b>Funds provided for a different purpose than the CDBG-DR assistance</b>	Financial assistance that is provided for a different purpose than the CDBG-DR funds or a general, non-specific purpose (e.g., “disaster relief/recovery”), as long as the assistance is not used for the same costs as the CDBG-DR funds.
<b>Funds provided for the same purpose but a different allowable use</b>	Financial assistance that is provided for the same purpose (e.g. housing rehabilitation) as the CDBG-DR funds but used for a different allowable use than the CDBG-DR funds (e.g. interior vs. exterior rehabilitation).
<b>Purpose of the Assistance</b>	A grantee must identify the purpose of the assistance for which the funds were provided, not the purpose for which they were used.
<b>FEMA Funds</b>	Typical FEMA funds that CDBG-DR grantees should account for are FEMA Individuals and Households Program (IHP), Public Assistance Program (PA), Hazard Mitigation Grant Program (HMGP), and Building Resilient Infrastructure and Communities (BRIC).
<b>Cost Principles</b>	A cost allocated to the grant must “be necessary and reasonable for the performance of the Federal award. . .” (2 CFR 200.403(a); 2 CFR 200.404; and 2 CFR 200.405)
<b>Unmet Recovery Need</b>	Unmet recovery need is calculated at a point in time and is the applicant’s current need.
<b>Private Loan</b>	A loan that is not provided by or guaranteed by a governmental entity, and that requires the CDBG–DR applicant (the borrower) to repay the full amount of the loan (principal and interest) under typical commercial lending terms, e.g., the loan is not forgivable.
<b>Subsidized Loan</b>	Subsidized loans (including forgivable loans) are loans other than private loans. Both SBA and FEMA provide subsidized loans for disaster recovery.
<b>Declined Loan</b>	Loan amounts that were approved or offered by a lender in response to a loan application, but were turned down by the applicant, meaning the applicant never signed loan documents to receive the loan proceeds.
<b>Cancelled Loan</b>	The borrower has entered a loan agreement, but for a variety of reasons, all or a portion of the loan amount was not disbursed and is no longer available to the applicant.
<b>DRRA Exception</b>	A subsidized loan is not a DOB, provided that all Federal assistance is used toward a loss suffered as a result of a major disaster or emergency.