

June 15, 2009

Honorable Mayor and Council  
Municipal Building  
Southfield, Michigan

**Re: Authorization to Apply for Energy Efficiency Conservation Block Grant**

Dear Sirs and Mesdames:

**Background:** In accordance with the American Recovery and Reinvestment Act of 2009 (ARRA), commonly referred to as the federal stimulus, the City of Southfield is eligible to receive an Energy Efficiency Conservation Block Grant from the U.S. Department of Energy (DOE). DOE will distribute \$2.7 billion in direct formula grants. The City of Southfield will receive \$875,700. Southfield will submit its application in two (2) stages as permitted by the DOE. The initial application is due to the DOE by June 25, 2009, with the final action plan due within 120 days following the June 25, 2009 deadline. This approach will provide procedural efficiencies and positive cash flow.

The application requires that the community measure progress by: number of jobs created; energy saved and/or renewable energy generated; GHG (Green House Gas) emission reduction; and funds leveraged.

The initial application will request the permitted 120 days to prepare the required documents and will also request up-front grant funding of up to \$250,000 to handle costs associated with preparing both the "baseline documents" and the conservation action plan (as required by DOE). The City may need to secure bids from the outside specialized service providers to help prepare these documents.

The final action plan will be presented to Council at a study session prior to submittal to the DOE.

**Fiscal Impact:** Southfield is eligible to receive \$875,700 from the DOE's Energy Efficiency Block Grant Program. Southfield will submit its application in two (2) stages as permitted by the DOE. Submitting the application in two phases we enable us to request up to \$250,000 of the grant to create the required "base-line documents". Upon completion of the final application, the City will request that the balance of the grant's funds be forwarded to the City as permitted by DOE's Energy Efficiency Block Grant Guidelines. City Council will need to authorize the procurement of necessary professional consultants.

**Goals Impacted:**



Quality Development and Redevelopment



Financially Sound and Sustainable City Government



Preferred Place to Make Home



Top Quality City Services



**Recommendation:** Council is asked to authorize the submittal of the City of Southfield's Energy Efficiency Conservation Block Grant in two (2) stages as permitted by the DOE, with the initial application due by June 25, 2009 and the final action plan to follow within the 120 days after the initial June 25, 2009 deadline date.

Respectfully submitted,



James G. Scharret  
City Administrator

**RECOMMENDED RESOLUTION:**

**RESOLVED:** That the City Council of the City of Southfield hereby authorizes the submittal of the Energy Efficiency Conservation Block Grant application in the amount of \$875,700 to the U.S. Department of Energy; and

**BE IT FURTHER RESOLVED:** That the Energy Efficiency Conservation Block Grant application be submitted in two stages as permitted by the U.S. Department of Energy, with the initial application requesting the permitted 120 days to prepare the required documents and requesting advance funding of up to \$250,000 to pay for the planning and technical costs associated with preparing both the "baseline documents" and the conservation action plan (as required by DOE); and

**BE IT FURTHER RESOLVED:** That stage two of the Energy Efficiency Conservation Block Grant application and in particular the final proposed conservation action plan have a primary focus on the following strategic categories that link economic development, sustainability and job generation for the local economy: government building upgrades; private sector auditing to determine the best upgrade opportunities; private and public sector building upgrades to reduce operating costs and increase economic competitiveness; development of a building and facilities program for internal training and community outreach; administration funds to comply with federal requirements; and transportation sector activities (non-motorized and public transit planning); and

**BE IT FURTHER RESOLVED:** That stage two of the Energy Efficiency Conservation Block Grant application and in particular the final proposed conservation action plan be submitted to the Southfield City Council for review and approval prior to the final submittal of the grant application: and

**BE IT FINALLY RESOLVED:** That the City of Southfield may secure bids for the appropriate professional services associated with preparing both the "baseline documents" and the conservation action plan, as required to submit the stage two application of the Energy Efficiency Conservation Block Grant to the U.S. Department of Energy; and that the Mayor, City Clerk, and City Administrator are hereby authorized to sign any documents necessary to effectuate the application for these funds after review of said documents by the City Attorney's Office.

Opportunity Title:	Recovery Act - Energy Efficiency and Conservation Block
Offering Agency:	National Energy Technology Laboratory
CFDA Number:	81.128
CFDA Description:	Energy Efficiency & Conservation Block Grant Program
Opportunity Number:	DE-FOA-0000013
Competition ID:	
Opportunity Open Date:	03/26/2009
Opportunity Close Date:	08/10/2009
Agency Contact:	Sue Miltenberger Contract Specialist E-mail: EECBG@net1.doe.gov

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

\* Application Filing Name:

### Mandatory Documents

Project/Performance Site Location(s)	Move Form to Complete
	Move Form to Delete

### Mandatory Documents for Submission

Application for Federal Assistance (SF-424)
Other Attachments Form

### Optional Documents

	Move Form to Submission List
	Move Form to Delete

### Optional Documents for Submission

Disclosure of Lobbying Activities (SF-LLL)
--

## Instructions

- 1** Enter a name for the application in the Application Filing Name field.

  - This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
  - You can save your application at any time by clicking the "Save" button at the top of your screen.
  - The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.
- 2** Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

  - It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.
  - The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".
  - To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.
  - All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.
- 3** Click the "Save & Submit" button to submit your application to Grants.gov.

  - Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button.
  - Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
  - The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
  - You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.

Application for Federal Assistance SF-424

Version 02

\* 1. Type of Submission:

- Preapplication
- Application
- Changed/Corrected Application

\* 2. Type of Application:

- New
- Continuation
- Revision

\* If Revision, select appropriate letter(s):

\* Other (Specify)

\* 3. Date Received:

Completed by Grants.gov upon submission.

4. Applicant Identifier:

Energy Efficiency Block Grant

5a. Federal Entity Identifier:

\* 5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

\* a. Legal Name:

City of Southfield

\* b. Employer/Taxpayer Identification Number (EIN/TIN):

386031668

\* c. Organizational DUNS:

020826509

d. Address:

\* Street1:

26000 Evergreen Road

Street2:

PO Box 2055

\* City:

Southfield

County:

Oakland

\* State:

MI: Michigan

Province:

\* Country:

USA: UNITED STATES

\* Zip / Postal Code:

48037-2055

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

Mr.

\* First Name:

Frederick

Middle Name:

Edward

\* Last Name:

Zorn

Suffix:

Jr.

Title:

Deputy City Administrator

Organizational Affiliation:

City of Southfield, MI

\* Telephone Number:

(248) 796-5110

Fax Number:

(248) 796-5115

\* Email:

fzorn@cityofsouthfield.com

Application for Federal Assistance SF-424

Version 02

9. Type of Applicant 1: Select Applicant Type:

C: City or Township Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

\* Other (specify):

\* 10. Name of Federal Agency:

National Energy Technology Laboratory

11. Catalog of Federal Domestic Assistance Number:

81.128

CFDA Title:

Energy Efficiency & Conservation Block Grant Program

\* 12. Funding Opportunity Number:

DE-FOA-0000013

\* Title:

Recovery Act - Energy Efficiency and Conservation Block Grants - Formula Grants

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

City of Southfield, Michigan

\* 15. Descriptive Title of Applicant's Project:

The City of Southfield, Michigan is seeking an additional 120 days to complete it's Energy Sustainability Action Plan (ESAP).

Attach supporting documents as specified in agency instructions.

Application for Federal Assistance SF-424

Version 02

16. Congressional Districts Of:

\* a. Applicant

\* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

\* a. Start Date:

\* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="875,500.00"/>
* b. Applicant	<input type="text" value="0.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="875,500.00"/>

\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)

Yes  No

21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

\*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:  \* First Name:   
Middle Name:   
\* Last Name:   
Suffix:

\* Title:

\* Telephone Number:  Fax Number:

\* Email:

\* Signature of Authorized Representative:  \* Date Signed:

**Application for Federal Assistance SF-424**

Version 02

**\* Applicant Federal Debt Delinquency Explanation**

The following field should contain an explanation if the Applicant organization is delinquent on any Federal Debt. Maximum number of characters that can be entered is 4,000. Try and avoid extra spaces and carriage returns to maximize the availability of space.

[Empty text input area for Applicant Federal Debt Delinquency Explanation]

## Other Attachment File(s)

---

\* Mandatory Other Attachment Filename:

Add Mandatory Other Attachment

Delete Mandatory Other Attachment

View Mandatory Other Attachment

---

To add more "Other Attachment" attachments, please use the attachment buttons below.

Add Optional Other Attachment

Delete Optional Other Attachment

View Optional Other Attachment

EECBG Activity Worksheet

Grantee: City of Southfield Date: 06/23/2009

DUNS #: \_\_\_\_\_ Program Contact Email: fzorn@cityofsouthfield.com

Program Contact First Name: Fred Last Name: Zorn

Project Title: Energy Sustainability Action Plan

Activity: 1. Energy Efficiency and Conservation Strategy If Other: \_\_\_\_\_

Sector: All Sectors If Other: \_\_\_\_\_

Proposed Number of Jobs Created: \_\_\_\_\_ Proposed Number of Jobs Retained: 1.00

Proposed Energy Saved and/or Renewable Energy Generated: n/a

Proposed GHG Emissions Reduced (CO2 Equivalents): \_\_\_\_\_

Proposed Funds Leveraged: \_\_\_\_\_

Proposed EECBG Budget: 125,000.00

Projected Costs Within Budget: Administration: \_\_\_\_\_ Revolving Loans: \_\_\_\_\_ Subgrants: \_\_\_\_\_

Project Contact First Name: Fred Last Name: Zorn Email: fzorn@cityofsouthfield.com

Metric Activity: Technical Assistance If Other: \_\_\_\_\_

Project Summary: *(limit summary to space provided)*

The City of Southfield has been working over the last several months to develop an Energy Efficiency and Conservation Strategy, which will be titled the Energy Sustainability Action Plan (ESAP), which links economic redevelopment, environmental sustainability and social benefits. Southfield's vision is to create a long-term sustainable energy program that leverages multiple funding sources, extends beyond the three year performance period of the EECBG program, institutionalizes energy efficiency in Southfield and focuses on the municipal, commercial and transportation sectors in Southfield. Southfield is a major employment center in Southeast Michigan which a large commercial office stock that would greatly benefit from these funds.

At the onset of developing the ESAP, Southfield had anticipated completing the ESAP by June 25, 2009, but during the initial planning stage several partnerships and additional funding opportunities surfaced and required further evaluation. Utilizing the additional 120 days will allow Southfield to solidify multiple partnerships, conduct additional outreach and identify additional funding resources for the projects currently being identified.

The ESAP will assist with complementing and advancing the current sustainable initiatives the City of Southfield is implementing, which include: 1) Southfield Goes Green (water conservation, green building fast track review, low impact development and a regional recycling program); 2) US Mayors Climate Protection Initiative; 3) Non-motorized transportation planning; and 4) intercity transit planning that links to the regional transit system.

The City of Southfield is very eager to begin work in the critical area of energy efficiency. Southfield wants to ensure the most effective use of the funds which increase our economic competitiveness and ensure long-term sustainability of the City and its residents.

If you are proposing more than one activity, save this file as many times as needed with successive page numbers. For example: "OH-CITY-Columbus-Project Activity page 1.pdf," "OH-CITY-Columbus-Project Activity page 2.pdf," and continue as needed.

**FINANCIAL MANGEMENT ASSESSMENT**

This assessment should be completed, signed and certified by the Applicant's Financial Officer.

- |  | YES                                 | NO                                  |
|--|-------------------------------------|-------------------------------------|
| 1. Have you previously done business with DOE?   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2. Have you previously done business with any other Federal Agency?<br>If so, please identify: <b>Dept. of Justice; Dept. of Housing and Urban<br/>Development; U.S. Environmental Protection Agency; U.S. Dept. of Labor</b>                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3. Can the Applicant's Financial Officer or Independent Auditor certify that the Applicant has a financial management system sufficient to meet the requirements of 10 CFR 600.220?<br>If yes, please skip to question #10 and sign/certify below. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 4. Does your accounting system have the ability to track costs on a reimbursable basis?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 5. Does your system allow for accurate, current and complete financial reporting, and record keeping as well as the maintaining of adequate source documentation?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 6. Does your system allow for effective internal controls and accountability?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 7. Does your system allow for effective and efficient cash management procedures?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 8. Does your system prohibit subaward at any tier to any party which is debarred, suspended or otherwise excluded from or ineligible for participation in Federal assistance programs?<br><input type="checkbox"/>                                 |                                     | <input checked="" type="checkbox"/> |
| 9. The expenditure of \$500,000 or more of Federal funds in a fiscal year requires an organization to have an audit performed in accordance with OMB Circular A-133.<br>Has your organization had such an audit performed?                         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 10. If yes, please provide the most recent report or a copy of the SF-SAC forms filed with the Federal Audit Clearinghouse. If no, proceed to the next statement and certify by checking the YES block.  |                                     |                                     |
| I understand the audit requirements and will comply with the provisions of OMB Circular A-133.   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |

James B. Pierce 6/25/09  
PRINTED NAME, TITLE AND PHONE NUMBER OF INDIVIDUAL COMPLETING FORM DATE

By signing this form, the above individual certifies that the responses provided to this survey are accurate as of the date.

If "NO" has been selected for any of the statements above, please provide further explanation on page 2.

**FINANCIAL MANAGEMENT ASSESSMENT – continuation page if further explanation is needed**

FORM **SF-SAC**  
(5-2004)U.S. DEPT. OF COMM.— Econ. and Stat. Admin.— U.S. CENSUS BUREAU  
ACTING AS COLLECTING AGENT FOR  
OFFICE OF MANAGEMENT AND BUDGET**Data Collection Form for Reporting on  
AUDITS OF STATES, LOCAL GOVERNMENTS, AND NON-PROFIT ORGANIZATIONS  
for Fiscal Year Ending Dates in 2004, 2005, or 2006**

Complete this form, as required by OMB Circular A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

**RETURN  
TO****Federal Audit Clearinghouse  
1201 E. 10th Street  
Jeffersonville, IN 47132****PART I GENERAL INFORMATION (To be completed by auditee, except for Items 4 and 7)****1. Fiscal period ending date for this submission**Month Day Year  
06 / 30 / 2007Fiscal Period End Dates Must  
Be In 2004, 2005, or 2006**2. Type of Circular A-133 audit**1  Single audit 2  Program-specific audit**3. Audit period covered**1  Annual 2  Biennial 3  Other —  Months**4. FEDERAL  
GOVERNMENT  
USE ONLY**Date received by  
Federal clearinghouse**5. Auditee Identification Numbers****a. Primary Employer Identification Number (EIN)**

3 8 - 6 0 3 1 6 6 8

b. Are multiple EINs covered in this report? 1  Yes 2  Noc. If Part I, Item 5b = "Yes," complete Part I, Item 5c  
on the continuation sheet on Page 4.**d. Data Universal Numbering System (DUNS) Number**

0 2 - 0 8 2 - 6 5 0 9

e. Are multiple DUNS covered in this report? 1  Yes 2  Nof. If Part I, Item 5e = "Yes," complete Part I, Item 5f  
on the continuation sheet on Page 4.**6. AUDITEE INFORMATION****a. Auditee name**

CITY OF SOUTHFIELD, MICHIGAN

**b. Auditee address (Number and street)**

26000 EVERGREEN ROAD

City

SOUTHFIELD

State

ZIP + 4 Code

MI

4 8 0 7 6 - 4 4 5 3

**c. Auditee contact**

Name

JAMES G. SCHARRET

Title

CITY ADMINISTRATOR

**d. Auditee contact telephone**

( 248 ) 796 - 5270

**e. Auditee contact FAX**

( ) -

**f. Auditee contact E-mail****g. AUDITEE CERTIFICATION STATEMENT** — This is to certify that, to the best of my knowledge and belief, the auditee has: (1) engaged an auditor to perform an audit in accordance with the provisions of OMB Circular A-133 for the period described in Part I, Items 1 and 3; (2) the auditor has completed such audit and presented a signed audit report which states that the audit was conducted in accordance with the provisions of the Circular; and, (3) the information included in **Parts I, II, and III** of this data collection form is accurate and complete. I declare that the foregoing is true and correct.Signature of certifying official  
*James G. Scharret* Date  
Month Day Year  
01 / 14 / 09

Printed Name of certifying official

James G. Scharret

Printed Title of certifying official

City Administrator/Fiscal Services Dir.

**7. AUDITOR INFORMATION (To be completed by auditor)****a. Auditor name**

PLANTE &amp; MORAN, PLLC

**b. Auditor address (Number and street)**

27400 NORTHWESTERN HIGHWAY

City

SOUTHFIELD

State

ZIP + 4 Code

MI

4 8 0 3 7 - 0 3 0 7

**c. Auditor contact**

Name

BETH A. BIALY

Title

PARTNER

**d. Auditor contact telephone**

( 248 ) 223 - 3377

**e. Auditor contact FAX**

( ) -

**f. Auditor contact E-mail**

BETH.BIALY@PLANTEMORAN.COM

**g. AUDITOR STATEMENT** — The data elements and information included in this form are limited to those prescribed by OMB Circular A-133. The information included in Parts II and III of the form, except for Part III, Items 7, 8, and 9a-9f, was transferred from the auditor's report(s) for the period described in Part I, Items 1 and 3, and **is not a substitute** for such reports. The auditor has not performed any auditing procedures since the date of the auditor's report(s). A copy of the reporting package required by OMB Circular A-133, which includes the complete auditor's report(s), is available in its entirety from the auditee at the address provided in Part I of this form. As required by OMB Circular A-133, the information in **Parts II and III** of this form was entered in this form by the auditor based on information included in the reporting package. The auditor has not performed any additional auditing procedures in connection with the completion of this form.Signature of auditor  
*Plante & Moran PLLC* Date  
Month Day Year  
01 / 14 / 2009

**PART II FINANCIAL STATEMENTS (To be completed by auditor)**

1. Type of audit report

Mark either: 1  Unqualified opinion **OR**  
 any combination of: 2  Qualified opinion 3  Adverse opinion 4  Disclaimer of opinion

2. Is a "going concern" explanatory paragraph included in the audit report? 1  Yes 2  No

3. Is a reportable condition disclosed? 1  Yes 2  No - SKIP to Item 5

4. Is any reportable condition reported as a material weakness? 1  Yes 2  No

5. Is a material noncompliance disclosed? 1  Yes 2  No

**PART III FEDERAL PROGRAMS (To be completed by auditor)**

1. Does the auditor's report include a statement that the auditee's financial statements include departments, agencies, or other organizational units expending \$500,000 or more in Federal awards that have separate A-133 audits which are not included in this audit? (AICPA Audit Guide, Chapter 12) 1  Yes 2  No

2. What is the dollar threshold to distinguish Type A and Type B programs? (OMB Circular A-133 § .520(b)) \$ 300,000

3. Did the auditee qualify as a low-risk auditee? (§ .530) 1  Yes 2  No

4. Is a reportable condition disclosed for any major program? (§ .510(a)(1)) 1  Yes 2  No -SKIP to Item 6

5. Is any reportable condition reported as a material weakness? (§ .510(a)(1)) 1  Yes 2  No

6. Are any known questioned costs reported? (§ .510(a)(3) or (4)) 1  Yes 2  No

7. Were Prior Audit Findings related to **direct** funding shown in the Summary Schedule of Prior Audit Findings? (§ .315(b)) 1  Yes 2  No

8. Indicate which **Federal** agency(ies) have current year audit findings related to **direct** funding or prior audit findings shown in the Summary Schedule of Prior Audit Findings related to **direct** funding. (Mark (X) all that apply or None)

- |  |  |   |   |
|--|--|---|---|
| 98 <input type="checkbox"/> U.S. Agency for International Development      | 83 <input type="checkbox"/> Federal Emergency Management Agency      | 43 <input type="checkbox"/> National Aeronautics and Space Administration | 96 <input type="checkbox"/> Social Security Administration  |
| 10 <input type="checkbox"/> Agriculture                                    | 39 <input type="checkbox"/> General Services Administration          | 89 <input type="checkbox"/> National Archives and Records Administration  | 19 <input type="checkbox"/> U.S. Department of State  |
| 23 <input type="checkbox"/> Appalachian Regional Commission                | 93 <input type="checkbox"/> Health and Human Services                | 05 <input type="checkbox"/> National Endowment for the Arts               | 20 <input type="checkbox"/> Transportation  |
| 11 <input type="checkbox"/> Commerce                                       | 97 <input type="checkbox"/> Homeland Security                        | 06 <input type="checkbox"/> National Endowment for the Humanities         | 21 <input type="checkbox"/> Treasury  |
| 94 <input type="checkbox"/> Corporation for National and Community Service | 14 <input checked="" type="checkbox"/> Housing and Urban Development | 08 <input type="checkbox"/> National Science Foundation                   | 82 <input type="checkbox"/> United States Information Agency                                      |
| 12 <input type="checkbox"/> Defense  | 03 <input type="checkbox"/> Institute of Museum and Library Services | 47 <input type="checkbox"/> National Science Foundation                   | 64 <input type="checkbox"/> Veterans Affairs  |
| 84 <input type="checkbox"/> Education                                      | 15 <input type="checkbox"/> Interior                                 | 07 <input type="checkbox"/> Office of National Drug Control Policy        | 00 <input type="checkbox"/> None  |
| 81 <input type="checkbox"/> Energy   | 16 <input type="checkbox"/> Justice                                  | 59 <input type="checkbox"/> Small Business Administration                 | <input type="checkbox"/> Other - Specify:   |
| 66 <input type="checkbox"/> Environmental Protection Agency                | 17 <input type="checkbox"/> Labor                                    |   | <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> |
|  | 09 <input type="checkbox"/> Legal Services Corporation               |   | <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span> |

Each agency identified is required to receive a copy of the reporting package.

In addition, one copy each of the reporting package is required for:

- the Federal Audit Clearinghouse archives .....
- and, if not marked above, the Federal cognizant agency .....

Count total number of boxes marked above and submit this number of reporting packages ..... 2

**PART III FEDERAL PROGRAMS - Continued**

**9. FEDERAL AWARDS EXPENDED DURING FISCAL YEAR**

Federal Agency Prefix <sup>1</sup>	CFDA Number	Extension <sup>2</sup>	Research and development <sup>3</sup>		Name of Federal program (c)	Amount expended (e)	Direct award (f)		Major program (g)		Major program if yes, type of audit report <sup>3</sup> (h)	10. AUDIT FINDINGS	
			1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No			1 <input checked="" type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		Type(s) of compliance requirement(s) <sup>4</sup> (a)	Audit finding reference number(s) <sup>5</sup> (b)
1 4	.218		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	COMMUNITY DEVELOPMENT BLOCK GRANT	\$ 879,705.00	1 <input checked="" type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		O	N/A
1 4	.871		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	SECTION 8 HOUSING	\$ 1,215,736.00	1 <input checked="" type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input checked="" type="checkbox"/> Yes	2 <input type="checkbox"/> No	U	CP	2007-10, 2007-11, 2007-2, 2007-9, 2007-11
1 7	.258		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	WORKFORCE INVESTMENT ACT - ADULT PROGRAM	\$ 523,030.00	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input checked="" type="checkbox"/> Yes	2 <input type="checkbox"/> No	U	P	2007-1, 2007-2, 2007-9, 2007-11
1 7	.259		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	WORKFORCE INVESTMENT ACT - YOUTH ACTIVITIES	\$ 168,768.00	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input checked="" type="checkbox"/> Yes	2 <input type="checkbox"/> No	U	P	2007-1, 2007-2, 2007-9, 2007-11
1 7	.260		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	WORKFORCE INVESTMENT ACT - DISLOCATED WORKERS	\$ 777,624.00	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input checked="" type="checkbox"/> Yes	2 <input type="checkbox"/> No	U	P	2007-1, 2007-2, 2007-9, 2007-11
9 7	.004		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	HOMELAND SECURITY CLUSTER	\$ 36,148.00	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		O	N/A
9 3	.558		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	TEMPORARY ASSISTANCE TO NEEDY FAMILIES	\$ 425,293.00	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		O	N/A
1 7	.207		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	EMPLOYMENT SERVICE CLUSTER	\$ 247,372.00	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		O	N/A
9 7	.044		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	ASSISTANCE TO FIREFIGHTERS GRANT PROGRAM	\$ 19,294.00	1 <input checked="" type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		O	N/A
1 6	.738		1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE GRANT	\$ 39,485.00	1 <input checked="" type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes	2 <input checked="" type="checkbox"/> No		O	N/A
<b>TOTAL FEDERAL AWARDS EXPENDED</b>						\$ 4,842,657.00							

IF ADDITIONAL LINES ARE NEEDED, PLEASE PHOTOCOPY THIS PAGE, ATTACH ADDITIONAL PAGES TO THE FORM, AND SEE INSTRUCTIONS

<sup>1</sup> See Appendix 1 of instructions for valid Federal Agency two-digit prefixes.  
<sup>2</sup> Or other identifying number when the Catalog of Federal Domestic Assistance (CFDA) number is not available. (See Instructions)  
<sup>3</sup> If major program is marked "Yes," enter only ONE letter (U = Unqualified opinion, Q = Qualified opinion, A = Adverse opinion, D = Disclaimer of opinion) corresponding to the type of audit report in the adjacent box; if major program is marked "No," leave the type of audit report box blank.  
<sup>4</sup> Enter the letter(s) of all type(s) of compliance requirement(s) that apply to audit findings (i.e., noncompliance, reportable conditions (including material weaknesses), questioned costs, fraud, and other items reported under § 510(a)) reported for each Federal program.  
<sup>5</sup> N/A for NONE

A. Activities allowed or unallowed  
 B. Allowable costs/cost principles  
 C. Cash management  
 D. Davis - Bacon Act  
 E. Eligibility  
 F. Equipment and real property management  
 G. Matching, level of effort, earmarking  
 H. Period of availability of Federal funds  
 I. Procurement and suspension and debarment  
 J. Program income  
 K. Real property acquisition and relocation assistance  
 L. Reporting  
 M. Subrecipient monitoring  
 N. Special tests and provisions  
 O. None  
 P. Other

**PART II FEDERAL PROGRAMS - Continued**

**9. FEDERAL AWARDS EXPENDED DURING FISCAL YEAR**

Federal Agency Prefix <sup>1</sup>	CFDA Number	Extension <sup>2</sup>	Research and development <sup>3</sup>	Name of Federal program	Amount expended	Direct award	Major program		Types of compliance requirement(s) <sup>4</sup>	Audit finding reference number(s) <sup>5</sup>
							Major program	if yes, type of audit report <sup>3</sup>		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	
1 6	.579	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	BYRNE FORMULA GRANT	\$ 52,731.00	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No		O	N/A	
9 7	.042	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	EMERGENCY MANAGEMENT PERFORMANCE GRANT	\$ 19,721.00	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No		O	N/A	
2 0	.205	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	HIGHWAY PLANNING AND CONSTRUCTION 2005	\$ 70,653.00	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No		O	N/A	
6 6	.606	1 <input checked="" type="checkbox"/> Yes 2 <input type="checkbox"/> No	RIVER ROUGE PROJECT GRANT	\$ 367,097.00	1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No	1 <input checked="" type="checkbox"/> Yes 2 <input type="checkbox"/> No	U	LP	2007-12, 2007-1, 2007-2, 2007-9, 2007-11	
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		\$ .00	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No				
				<b>TOTAL FEDERAL AWARDS EXPENDED</b>	\$ 4,842,657.00					

IF ADDITIONAL LINES ARE NEEDED, PLEASE PHOTOCOPIY THIS PAGE, ATTACH ADDITIONAL PAGES TO THE FORM, AND SEE INSTRUCTIONS

- <sup>1</sup> See Appendix 1 of instructions for valid Federal Agency two-digit prefixes.  
<sup>2</sup> Or other identifying number when the Catalog of Federal Domestic Assistance (CFDA) number is not available. (See Instructions)  
<sup>3</sup> If major program is marked "Yes," enter only one letter (U = Unqualified opinion, Q = Qualified opinion, A = Adverse opinion, D = Disclaimer of opinion) corresponding to the type of audit report in the adjacent box. If major program is marked "No," leave the type of audit report box blank.  
<sup>4</sup> Enter the letter(s) of all type(s) of compliance requirement(s) that apply to audit findings (i.e., noncompliance, reportable conditions (including material weaknesses), questioned costs, fraud, and other items reported under § .510(a)) reported for each Federal program.  
<sup>5</sup> N/A for NONE
- A. Activities allowed or unallowed
  - B. Allowable costs/cost principles
  - C. Cash management
  - D. Davis - Bacon Act
  - E. Eligibility
  - F. Equipment and real property management
  - G. Matching, level of effort, earmarking
  - H. Period of availability of Federal funds
  - I. Procurement and suspension and debarment
  - J. Program income
  - K. Real property acquisition and relocation assistance
  - L. Reporting
  - M. Subrecipient monitoring
  - N. Special tests and provisions
  - O. None
  - P. Other

**PART I** Item 5 Continuation Sheet

c. List the multiple Employer Identification Numbers (EINs) covered in this report.

f. List the multiple DUNS covered in the report.

1	N L A	21	41	1	N L A	21
2	-	22	42	2	-	22
3	-	23	43	3	-	23
4	-	24	44	4	-	24
5	-	25	45	5	-	25
6	-	26	46	6	-	26
7	-	27	47	7	-	27
8	-	28	48	8	-	28
9	-	29	49	9	-	29
10	-	30	50	10	-	30
11	-	31	51	11	-	31
12	-	32	52	12	-	32
13	-	33	53	13	-	33
14	-	34	54	14	-	34
15	-	35	55	15	-	35
16	-	36	56	16	-	36
17	-	37	57	17	-	37
18	-	38	58	18	-	38
19	-	39	59	19	-	39
20	-	40	60	20	-	40

IF ADDITIONAL LINES ARE NEEDED, PLEASE PHOTOCOPY THIS PAGE, ATTACH ADDITIONAL PAGES TO THE FORM, AND SEE INSTRUCTIONS.

### FINANCIAL MANGEMENT ASSESSMENT

This assessment should be completed, signed and certified by the Applicant's Financial Officer.

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 1. Have you previously done business with DOE?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you previously done business with any other Federal Agency?<br>If so, please identify:   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Can the Applicant's Financial Officer or Independent Auditor certify that the Applicant has a financial management system sufficient to meet the requirements of 10 CFR 600.220?<br>If yes, please skip to question #10 and sign/certify below. | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does your accounting system have the ability to track costs on a reimbursable basis?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Does your system allow for accurate, current and complete financial reporting, and record keeping as well as the maintaining of adequate source documentation?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Does your system allow for effective internal controls and accountability?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Does your system allow for effective and efficient cash management procedures?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Does your system prohibit subaward at any tier to any party which is debarred, suspended or otherwise excluded from or ineligible for participation in Federal assistance programs?<br><input type="checkbox"/>                                 |                          | <input type="checkbox"/> |
| 9. The expenditure of \$500,000 or more of Federal funds in a fiscal year requires an organization to have an audit performed in accordance with OMB Circular A-133.<br>Has your organization had such an audit performed?                         | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. If yes, please provide the most recent report or a copy of the SF-SAC forms filed with the Federal Audit Clearinghouse. If no, proceed to the next statement and certify by checking the YES block.  |                          |                          |
| I understand the audit requirements and will comply with the provisions of OMB Circular A-133.   | <input type="checkbox"/> | <input type="checkbox"/> |

James B. Pierce 6/25/09  
PRINTED NAME, TITLE AND PHONE NUMBER OF INDIVIDUAL COMPLETING FORM DATE  
By signing this form, the above individual certifies that the responses provided to this survey are accurate as of the date.

If "NO" has been selected for any of the statements above, please provide further explanation on page 2.

FINANCIAL MANAGEMENT ASSESSMENT – continuation page if further explanation is needed

NETL F 451.1-EECBG  
(3/2009) OPI=320  
(Previous Editions Obsolete)

U.S. DEPARTMENT OF ENERGY

ENVIRONMENTAL QUESTIONNAIRE

I. BACKGROUND

The Department of Energy (DOE) National Environmental Policy Act (NEPA) Implementing Procedures (10 CFR 1021) require careful consideration of the potential environmental consequences of all proposed actions during the early planning stages of a project or activity. DOE must determine at the earliest possible time whether such actions will require either an Environmental Assessment or an Environmental Impact Statement, or whether they qualify for a Categorical Exclusion. To comply with these requirements, an Environmental Questionnaire must be completed for each proposed action to provide DOE with the information necessary to determine the appropriate level of NEPA review.

II. INSTRUCTIONS

Separate copies of the Environmental Questionnaire should be completed by the principal proposer and appropriate proposer's subcontractor. In addition, if the proposed project includes activities at different locations, an independent questionnaire should be prepared for each location. Supporting information can be provided as attachments.

In completing this Questionnaire, the proposer is requested to provide specific information and quantities, when applicable, regarding air emissions, wastewater discharges, solid wastes, etc., to facilitate the necessary review. The proposer should identify the location of the project and specifically describe the activities that would occur at that location. In addition, the proposer will be required to submit an official copy of the project's statement of work (SOW) or statement of project objective (SOPO) that will be used in the contract/agreement between the proposer and DOE.

III. QUESTIONNAIRE

A. PROJECT SUMMARY

1. Solicitation/Project Number: DE-FOA-000013
2. Proposer: City of Southfield
3. Principal Investigator: FREDERICK E. ZORNY, JR.
- Telephone Number: 248-
4. Project Title: Energy Efficiency and Conservation Strategy
5. Duration: 120 day
6. Location(s) of Performance (City/Township, County, State): City of Southfield  
Oakland County  
State of Michigan
7. Identify and select checkbox with the predominant project work activities under Group A-7b or A-7c.

Group A-7b

- Work or project activities does NOT involve new building/facilities construction and site preparation activities. This work typically involves routine operation, modification, and retrofit of existing utility and transportation infrastructure, laboratories, commercial buildings/properties, offices and homes, test facilities, factories/power plants, vehicles test stands and components, refueling facilities, greenspace infrastructure, or other existing facilities.

## Group A-7c

- Work or project activities typically involves major building or facility construction, site preparation; the installation, replacement, or major modifications of energy system prototypes and infrastructure, access right-of-ways and roads; utility, greenspace, and transportation infrastructure, vehicle test facilities; commercial buildings/properties, fuel refinery/mixing facilities, factories/power plants; and other types of energy efficiency/conservation related systems, structures, and facilities. This work can require new or modified regulatory permits, environmental sampling and monitoring requirements, master planning, public involvement, and environmental impact review.

- Other types of work or project activities not listed. (please describe):

*Development of an Energy Efficiency and Conservation Strat.*

8. Summarize the objectives of the proposed work. List activities planned at the location as covered by this Environmental Questionnaire. *Devel plan*
9. List all other locations where proposed work or project would be performed by project's proposer and subcontractors. *N/A*
10. Identify major project operation related materials and waste that would be used, consumed, and produced by this project or activity. *N/A*
11. Provide a brief description of the project location (physical location, surrounding area, adjacent structures). *City of Southfield, MI*
12. Attach a site plan or topographic map of the project work area. *N/A*

**B. ENVIRONMENTAL IMPACTS**

This section is designed to obtain information for objectively assessing the environmental impacts of a proposed project. NEPA procedures require evaluations of possible effects (including land use, energy resource use, natural, historic and cultural resources, and pollutants) from proposed projects on the environment.

**1. Land Use**

- a. Characterize present land use where the proposed project would be located.
- |  |  |                                      |  |
|--|--|--------------------------------------|--|
| <input type="checkbox"/> Urban               | <input type="checkbox"/> Industrial        | <input type="checkbox"/> Commercial  | <input type="checkbox"/> Agricultural        |
| <input checked="" type="checkbox"/> Suburban | <input type="checkbox"/> Rural             | <input type="checkbox"/> Residential | <input type="checkbox"/> Research Facilities |
| <input type="checkbox"/> Forest              | <input type="checkbox"/> University Campus | <input type="checkbox"/> Other       |  |
- b. Describe how land use would be affected by planned construction and project activities.  
 No construction would be anticipated for this project.
- c. Describe any plans to reclaim/replant areas that would be affected by the proposed project.  
 No land areas would be affected.
- d. Would the proposed project affect any unique or unusual landforms (e.g., cliffs, waterfalls, etc.)?  
 No  Yes (describe)
- e. Would the proposed project be located in or near a national park or wilderness area?  
 No  Yes (describe)

*If project work activities falls under item A-7b; then proceed directly to question B.6 (Atmospheric Conditions/Air Quality) and continue to fill out questionnaire.*

*If project work falls under item A-7c; then proceed directly below to question B.2 (Construction Activities and/or Operations) and continue to fill out questionnaire.*

## 2. Construction Activities and/or Operations

- a. Identify any roads, trails, or utility right of ways that traverse the proposed site or will be constructed and clearly mark them on project site maps.  
 None
- b. Would the proposed project require the construction of settling ponds?  
 No       Yes (describe and identify location, and estimate surface area disturbed)
- c. Would the proposed project affect any existing body of water?  
 No       Yes (describe)
- d. Would the proposed project be located in or impact a floodplain or wetland?  
 No       Yes (describe)
- e. Would the proposed project be likely to cause runoff/sedimentation/erosion?  
 No       Yes (describe)

## 3. Vegetation and Wildlife Resources

- a. Identify any State- or Federal-listed endangered or threatened plant or animal species affected by the proposed project.  
 None
- b. Would any foreign substances/materials be introduced into ground or surface waters, or other earth/geologic resource because of project activities? Would these foreign substances/materials affect the water, soil, and geologic resources?  
 No       Yes (describe)
- c. Would any migratory animal corridors be impacted or disrupted by the proposed project?  
 No       Yes (describe)

## 4. Socioeconomic and Infrastructure Conditions.

- a. Would local socio-economic changes result from the proposed project?  
 No       Yes (describe)
- b. Would the proposed project generate increased traffic use of roads through local neighborhoods, urban or rural areas?  
 No       Yes (describe)
- c. Would the proposed project require new transportation access (roads, rail, etc.)? Describe location, impacts, costs.  
 No       Yes (describe)
- d. Would any new transmission lines and/or power line right-of-ways be required?  
 No       Yes (describe location, voltage, and length of line)

## 5. Historical/Cultural Resources

- a. Describe any historical, archeological, or cultural sites in the vicinity of the proposed project; note any sites included on the National Register of Historic Places.  
 None

- b. Would construction or operational activities planned under the proposed project disturb any historical, archeological, or cultural sites?  
 No planned construction     No historic sites     Yes (describe)
- c. Would the proposed project interfere with visual resources (e.g., eliminate scenic views) or alter the present landscape?  
 No     Yes (describe)

*For all proposed project work activities identified under item A-7b, respond to item B6 directly below and continue filling out environmental questionnaire.*

**6. Atmospheric Conditions/Air Quality**

- a. Identify air quality conditions in the immediate vicinity of the proposed project with regard to attainment of National Ambient Air Quality Standards (NAAQS). This information is available under the NAAQS tables from the U.S. EPA Air and Radiation Division.

	<u>Attainment</u>	<u>Non-Attainment</u>
O <sub>3</sub>	<input type="checkbox"/>	<input type="checkbox"/>
SO <sub>x</sub>	<input type="checkbox"/>	<input type="checkbox"/>
PM <sub>10</sub>	<input type="checkbox"/>	<input type="checkbox"/>
CO	<input type="checkbox"/>	<input type="checkbox"/>
NO <sub>2</sub>	<input type="checkbox"/>	<input type="checkbox"/>
Lead	<input type="checkbox"/>	<input type="checkbox"/>

- b. Would proposed project require issuance of new or modified major source air quality permits?  
 No     Yes (describe)
- c. Would the proposed project be in compliance with the National Emissions Standards for Hazardous Air Pollutants?  
 No (explain)     Yes
- d. Would the proposed project be classified as either a New Source or a major modification to an existing source?  
 No     Yes (describe)
- e. Would the proposed project be in compliance with the New Source Performance Standards?  
 Not Applicable     No (explain)     Yes
- f. Would the proposed project be subject to prevention of significant deterioration air quality review?  
 Not applicable     No (explain)     Yes (describe)
- g. What types of air emissions, including fugitive emissions, would be anticipated from the proposed project?  

N/A
- h. Would any types of emission control or particulate collection devices be used?  
 No     Yes (describe, including collection efficiencies)
- i. If no control devices are used, how would emissions be vented?  

N/A

**7. Hydrologic Conditions/Water Quality**

- a. What is the closest body of water to the proposed project area and what is its distance from the project site?  

N/A
- b. What sources would supply potable and process water for the proposed project?  

N/A

- c. Quantify the daily or annual amount of wastewater that would be generated by the proposed project.  
N/A
- d. Identify the local treatment facility that would receive wastewater from the proposed project.  
 No discharges to local treatment facility
- e. Describe how wastewater would be collected and treated.  
N/A
- f. Would any run-off or leachates be produced from storage piles or waste disposal sites?  
 No  Yes (describe source)
- g. Would project require issuance of new or modified water permits to perform project work or site development?  
 No  Yes (describe)
- h. Where would wastewater effluents from the proposed project be discharged?  
 No wastewater produced
- i. Would the proposed project be permitted to discharge effluents into an existing body of water?  
 No  Yes (describe water use and effluent impact)
- j. Would a new or modified National Pollutant Discharge Elimination System (NPDES) permit be required?  
 No  Yes (describe)
- k. Would the proposed project adversely affect the quality or movement of groundwater?  
 No  Yes (describe)

#### 8. Solid and Hazardous Wastes

- a. Describe and estimate major nonhazardous solid wastes that would be generated from the project. Solid wastes are defined as any solid, liquid, semi-solid, or contained gaseous material that is discarded or has served its intended purpose, or is a manufacturing or mining by-product (40 CFR 260, Appendix I).  
N/A
- b. Would project require issuance of new or modified solid waste and/or hazardous waste related permits to perform project work activities?  
 No  Yes (explain)
- c. How and where would solid waste disposal be accomplished?  
 On-site (identify and describe location)  
 Off-site (identify location and describe facility and treatment)  
N/A
- d. How would wastes for disposal be transported?  
N/A
- e. Describe and estimate the quantity of hazardous wastes (40 CFR 261.31) that would be generated, used, or stored under this project.  
 None
- f. How would hazardous or toxic waste be collected and stored?  
 None used or produced
- g. If hazardous wastes would require off-site disposal, have arrangements been made with a certified TSD (Treatment, Storage, and Disposal) facility?  
N/A

Not required     Arrangements not yet made     Arrangements made with a certified TSD facility (identify):

C. **DESCRIBE ANY ISSUES THAT WOULD GENERATE PUBLIC CONTROVERSY REGARDING THE PROPOSED PROJECT.**

None

IV. **CERTIFICATION BY PROPOSER**

I hereby certify that the information provided herein is current, accurate, and complete as of the date shown immediately below.

SIGNATURE: Frederick E. Carr, Jr.      DATE: 06 / 24 / 2009  
TYPED NAME: Frederick E. Carr, Jr.      month    day    year  
TITLE: Deputy City Administrator  
ORGANIZATION: City of Southfield

V. **REVIEW AND APPROVAL BY DOE**

I hereby certify that I have reviewed the information provided in this questionnaire, have determined that all questions have been appropriately answered, and judge the responses to be consistent with the efforts proposed.

PROJECT MANAGER:

SIGNATURE: \_\_\_\_\_      DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
TYPED NAME: \_\_\_\_\_      month    day    year

## Attachment D

### Energy Efficiency & Conservation Strategy for Units of Local Governments & Indian Tribes

As detailed in Part 1 of this announcement, all applicants must submit an Energy Efficiency and Conservation Strategy (EECS). Units of local government and Indian tribes have the option of submitting the EECS no later than 120 days after the effective date of the award or at the time of application. Units of local government and Indian tribes who chose to submit the EECS at the time of application shall use the format contained in Attachment D. This form should be saved in a file named "UIC-Strategy.pdf" and click on "Add Optional Other Attachment" to attach.

Grantee: City of Southfield, MI Date: 06/24/2009 (mm/dd/yyyy)  
DUNS #: 20826509 Program Contact Email: fzorn@cityofsouthfield.com

1. Describe your government's proposed Energy Efficiency and Conservation Strategy. Provide a concise summary of your measureable goals and objectives, which should be aligned with the defined purposes and eligible activities of the EECBG Program. These goals and objectives should be comprehensive and maximize benefits community-wide. Provide a schedule or timetable for major milestones. If your government has an existing energy, climate, or other related strategy please describe how these strategies relate to each other.

The City of Southfield has been working over the last several months to develop an Energy Efficiency and Conservation Strategy, which will be titled the Energy Sustainability Action Plan (ESAP), which links economic redevelopment, environmental sustainability and social benefits. Southfield's vision is to create a long-term sustainable energy program that leverages multiple funding sources, extends beyond the three year performance period of the EECBG program, institutionalizes energy efficiency in Southfield and focuses on the municipal, commercial and transportation sectors in Southfield. Southfield is a major employment center in Southeast Michigan which a large commercial office stock that would greatly benefit from these funds.

At the onset of developing the ESAP, Southfield had anticipated completing the ESAP by June 25, 2009, but during the initial planning stage several partnerships and additional funding opportunities surfaced and required further evaluation. Utilizing the additional 120 days will allow Southfield to solidify multiple partnerships, conduct additional outreach and identify additional funding resources for the projects currently being identified.

The ESAP will assist with complementing and advancing the current sustainable initiatives the City of Southfield is implementing, which include: 1) Southfield Goes Green (water conservation, green building fast track review, low impact development and a regional recycling program); 2) US Mayors Climate Protection Initiative; 3) Non-motorized transportation planning; and 4) intercity transit planning that links to the regional transit system.

The City of Southfield is very eager to begin work in the critical area of energy efficiency. Southfield wants to ensure the most effective use of the funds which increase our economic competitiveness and ensure long-term sustainability of the City and its residents.

2. Describe your government's proposed implementation plan for the use of EECBG Program funds to assist you in achieving the goals and objectives outlined in the strategy describe in question #1. Your description should include a summary of the activities submitted on your activity worksheets, and how each activity supports one or more of your strategy's goals/objectives.

The City of Southfield's Energy Sustainability Action Plan (ESAP) to be developed within the next 120 days will link economic redevelopment, environmental sustainability and social benefits. Southfield's vision is to create a long-term sustainable energy program that leverages multiple funding sources, extends beyond the three year performance period of the EECBG program, institutionalizes energy efficiency in Southfield and focuses on the municipal, commercial and transportation sectors in Southfield. Southfield is a major employment center in Southeast Michigan which a large commercial office stock that would greatly benefit from these funds.

3. Describe how your government is taking into account the proposed implementation plans and activities for use of funds by adjacent units of local government that are grant recipients under the Program (response not mandatory for Indian Tribes).

The City of Southfield will post all plans and quarterly reports on its web site ([www.cityofsouthfield.com](http://www.cityofsouthfield.com)). The City of Southfield is working with the newly created Energy Office of the Michigan Suburbs Alliance (MS) which will provide a coordinated information exchange between the member communities.

4. Describe how your government will coordinate and share information with the state in which you are located regarding activities carried out with grant funds to maximize energy efficiency and conservation benefits (response not mandatory for Indian Tribes).

The Michigan Suburbs Alliance will share information with the State of Michigan Energy Office.

5. Describe how this plan has been designed to ensure that it sustains benefits beyond the EECBG funding period.

The City of Southfield's Energy Sustainability Action Plan (ESAP) to be developed within the next 120 days will link economic redevelopment, environmental sustainability and social benefits. Southfield's vision is to create a long-term sustainable energy program that leverages multiple funding sources, extends beyond the three year performance period of the EECBG program, institutionalizes energy efficiency in Southfield and focuses on the municipal, commercial and transportation sectors in Southfield. Southfield is a major employment center in Southeast Michigan which a large commercial office stock that would greatly benefit from these funds.

6. The President has made it clear that every taxpayer dollar spent on our economic recovery must be subject to unprecedented levels of transparency and accountability. Describe the auditing or monitoring procedures currently in place or that will be in place (by what date), to ensure funds are used for authorized purposes and every step is taken to prevent instances of fraud, waste, error, and abuse.

The City of Southfield has an outstanding Budget and Finance Department. The City completes a annual audit in accordance with OMB Circular A-133. The City of Southfield also files a SF-SAC form annually with the Federal Audit Clearing House.

# DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

Approved by OMB  
0348-0046

<b>1. * Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. * Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. * Report Type:</b> <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
--	--	--

**4. Name and Address of Reporting Entity:**

Prime     SubAwardee

\* Name:

\* Street 1:     Street 2:

\* City:     State:     Zip:

Congressional District, if known:

**5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:**

<b>6. * Federal Department/Agency:</b> <input type="text" value="US Department of Energy"/>	<b>7. * Federal Program Name/Description:</b> <input type="text" value="Energy Efficiency &amp; Conservation Block Grant Program"/> CFDA Number, if applicable: <input type="text" value="81.128"/>
--	---

<b>8. Federal Action Number, if known:</b> <input type="text"/>	<b>9. Award Amount, if known:</b> \$ <input type="text"/>
--	--

**10. a. Name and Address of Lobbying Registrant:**

Prefix  \* First Name  Middle Name

\* Last Name  Suffix

\* Street 1:     Street 2:

\* City:     State:     Zip:

**b. Individual Performing Services** (including address if different from No. 10a)

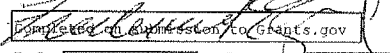
Prefix  \* First Name  Middle Name

\* Last Name  Suffix

\* Street 1:     Street 2:

\* City:     State:     Zip:

**11.** Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

\* Signature: 

\* Name: Prefix  \* First Name  Middle Name

\* Last Name  Suffix

Title:     Telephone No.:     Date: