

Proje	ect Address:		
Proje	ect Number:		
	Environmental Checklist For Project Files		
ques	federally funded HOME and CDBG Programs require an environmental review. If tions are not applicable to the proposed rehabilitation project or reflect compliad dards, then the proposed rehabilitation project is considered exempt from further	nce with fede	eral environmental
Plea	ever, if you answer yes to any of the following questions, additional environmenta se contact your MSHDA representative immediately if you have questions extra application for HOME/CDBG rehabilitation assistance, should be suspended.		
Envi	ronmental Review Questions		
	e activity (project) consists of 5 or more units, separated by more than 2,000 feet the environmental Assessment tab.		
lf	s the property in a 100 year flood plain? no, note panel #:; and	Yes —	No
;	ate of panel: (Attach copy of a flood plain map, noting site.) If yes, is flood insurance currently purchased? If yes, continue.		
	Is the property within 500 feet from one of the five Michigan Great Lakes? If no, how many feet/miles:		
C	s the property within 500 feet from a Michigan designated Wild and Scenic River? f no , how many feet/miles:		
4. Is so that the state of the	s the property historically significant? If the subject property is 50 years old or older, the State Bureau of History must be contacted in writing for their opinion. Your letter and a copy of he Bureau's response identifying no historic significance or the proposed rehabilitation will have no effect on the historic significance of the property, must be included in the project file.		
	Date of SHPO response:		
t! It	Are you excluding weatherization improvements from he proposed rehabilitation? f yes, then complete the attached Noise Determination Checklist.		_
	Oo any man-made hazards exist (e.g. underground anks, above-ground hazards, asbestos, etc.)?		
	annual review is necessary to ensure that flood insurance is maintained for the nancial interest in the property.	the life of the	e improvement
Nam	e of Person Completing Checklist		
Title	 Date		

(expcklt3) (11/97)

NOISE DETERMINATION CHECKLIST

This checklist must be in each project file if a HOME or CDBG assisted rehabilitation or new construction project will <u>not include weatherization</u>.

Ap	plicant Name:		
Pro	oject Address:		
1.	Is the unit more than 1,000 feet from a major roadway?	☐ Yes	☐ No
2.	Is the unit more than 3,000 feet from an active railway?	☐ Yes	□No
3.	Is the unit more than 15 miles from an airport that is regularly used by commercial jet planes for passenger assistance?	☐ Yes	☐ No
	he answer to the above three questions is yes, noise determination is swer to any of the above questions is Ano@, please continue with the		ry. If the
4.	Will the property meet minimum energy standards after rehabilitation (Minimum energy standards means wall and ceiling insulation, two p of glass in each window, and storm doors or insulated steel doors at exit.) IF YES, STOP HERE.	anes	□No
lf t	he answer is Ano@ to 4, please continue.		
5.	What is the maximum assistance level the applicant qualifies for?	\$	
6.	What is the project cost of the proposed improvements?	\$	
7.	What level of improvement is the property required to meet after reha		_
8.	Is there insufficient assistance available to mitigate noise?	Yes	□No
	If yes, were all proposed improvements directly code related?	☐ Yes	□No
	no, complete a Noise Assessment, as identified in the "Noise Gui PD)	de Book" (I	HUD-953-
Pro	epared By: Date:		

STATUTORY CHECKLIST

Project Name and Identification No	
-	

AREA OF STATUTORY- REGULATORY COMPLIANCE	N/A to this Project	Consultation Required*	Review Required*	Permits Required*	Determination of Consistency Approvals, Permits Obtained*	Conditions &/or Mitigation Actions Required	Provide compliance documentation Additional material may be attached
Historic Properties							
Floodplain Management							
Wetland Protection							
Noise							
Manmade Hazards Thermal/Explosive Hazards Airport Clear Zones							
Air quality							
Water Quality - Aquifers							
Coastal Areas Coastal Zone Management Coastal Barrier Resources							

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Area of Statutory- Regulatory Compliance	N/A to this Project	Consultation Required*	Review Required*	Permits Required*	Determination of Consistency Approvals, Permits Obtained	Conditions &/or Mitigation Actions Required	Provide compliance documentation Additional material may be attached
Endangered Species							
Farmlands Protection							
Wild and Scenic Rivers							
Water Quality							
Solid Waste Disposal							
Fish and Wildlife							
State/local Statutes (to be added by local community) Note: See HUD-399-CPD. "Enviro					rding the use of assessment form		

*Attach evidence that required actions have been taken.									
Prepared By:		Title:							
Date:									

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ENVIRONMENTAL ASSESSMENT CHECKLIST

Project Name and Identification No._

Impact Categories	No Impact Anticipate d	Potentially Beneficial	Potentially Adverse, Documenta- tion Only	Potentially Adverse, Requires More Study	Needs Mitigation	Requires Project Modification	Source or Documentation (Note date of contact or page references) Additional material may be attached
LAND DEVELOPMENT							
Conformance With Comprehensive Plans and Zoning							
Compatibility and Urban Impact							
Slope							
Erosion							
Soil Suitability							
Hazards and Nuisances, Including Site Safety							
Energy Consumption							

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Impact Categories	No Impact Anticipate d	Potentially Beneficial	Potentially Adverse, Documenta- tion Only	Potentially Adverse, Requires More Study	Needs Mitigation	Requires Project Modification	Source or Documentation (Note date of contact or page references) Additional material may be attached
Noise							
Effects of Ambient Noise on Project and Contribution to Community Noise Level							
Air Quality							
Effects of Ambient Air Quality on Project and Contribution to Community Pollution Levels							
Environmental Design & Historic Values							
Visual Quality- Coherence, Diversity, Compatible Use, and Scale							
Historic, Cultural, and Archeological Resources							
Socioeconomic							
Demographic/Character Changes							
Displacement							
Employment and Income Patterns							

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Impact Categories	No Impact Anticipat ed	Potentially Beneficial	Potentially Adverse, Documenta- tion Only	Potentially Adverse, Requires More Study	Needs Mitigation	Requires Project Modification	Source or Documentation (Note date of contact or page references) Additional material may be attached
Community Facilities & Services							
Educational Facilities							
Commercial Facilities							
Health Care							
Social Services							
Solid Waste							
Waste Water							
Storm Water							
Water Supply							

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Impact Categories	No Impact Anticipate d	Potentially Beneficial	Potentially Adverse, Documenta- tion Only	Potentially Adverse, Requires More Study	Needs Mitigation	Requires Project Modification	Source or Documentation (Note date of contact or page references) Additional material may be attached				
Public Safety Police											
Fire Emergency Medical											
Open Space & Recreation Open Space											
Recreation Cultural Fac.											
Transportation											
Natural Features	Natural Features										
Water Resources											
Surface Water											

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Impact Categories	No Impact Anticipate d	Potentially Beneficial	Potentially Adverse, Documenta- tion Only	Potentially Adverse, Requires More Study	Needs Mitigation	Requires Project Modification	Source or Documentation (Note date of contact or page references) Additional material may be attached
Floodplains							
Wetlands							
Coastal Zone							
Unique Natural Features & Agricultural Lands							
Vegetation & Wildlife							
Additional Studies	Performed (A	ttach Study (or Summary)				
Mitigation Measure	es Needed:						

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Projec	ct Modifications and Alternatives Considered:
1.	Is project in compliance with applicable laws and regulations?
2.	Is an EIS required?
3.	A Finding of No Significant Impact (FONSI) can be made. Project will not significantly affect the quality of the human environment. $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
<u>Prepai</u>	red by:
Title:	
110.	
	Date: